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The Deployment Life Study

Appendixes

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List of Constructs and Measures for the Deployment Life Study

Table A.1 lists the constructs and measures we used in the Deployment Life Study.

Table A.1
List of Constructs and Measures for the Deployment Life Study

Survey Topic	Measure Source	Service Member		Spouse		Child	
		Baseline	Follow-Up	Baseline	Follow-Up	Baseline	Follow-Up
Background characteristics							
Individual							
DOB	Created for Deployment Life Study	X	X	X	X	X	X
Gender	Created for Deployment Life Study	X		X		X	
Race/ethnicity	DMDC SOFS	X		X			
Immigration status	Created for Deployment Life Study	X		X			
Religious engagement or denomination	FPNMAD (Trail and Karney, 2012)	X	X	X	X		
Spirituality	FPNMAD (Trail and Karney, 2012)	X	X	X	X		
Education	DMDC SOFS	X		X			
Employment (military or civilian)	Three-City Study (Angel et al., 2009)	X	X	X	X		
Income	Created for Deployment Life Study	X	X	X	X		
Change in marital status	Created for Deployment Life Study		X		X		
Family							
Family of origin	Florida Family Formation Survey (Rauer et al., 2008)	X		X			
Childhood adversities	ACE (Felitti et al., 1998; Anda et al., 1999)	X		X			
Parent in military	DMDC SOFS	X		X			
Household roster	FFCWS (Reichman et al., 2001); Three-City Study (Angel et al., 2009)			X	X		
Special-needs family member	Created for Deployment Life Study			X	X		

Table A.1—Continued

Survey Topic	Measure Source	Service Member		Spouse		Child	
		Baseline	Follow-Up	Baseline	Follow-Up	Baseline	Follow-Up
Housing							
On or off post	DMDC SOFS	X	X	X	X		
Distance to post	RAND Guard and Reserve Family Study (Werber et al., 2008)	X	X	X	X		
Moves in past 5 years (or 4 months)	RAND Guard and Reserve Family Study (Werber et al., 2008)	X	X	X	X		
Plan to move					X		
Military							
Component	DMDC SOFS	X					
Pay grade	DMDC SOFS	X	X				
Term of service	Created for Deployment Life Study	X					
Change in military status	Created for Deployment Life Study		X		X		
Length of service	DMDC SOFS	X					
Former military	Created for Deployment Life Study			X			
Family functioning							
Parenting							
Parenting satisfaction	FFCWS (Reichman et al., 2001); PSID (Abidin, 1995; Hofferth et al., 1997)	X	X	X	X		
Family environment	FES (Moos and Moos, 1994)	X	X	X	X	X	X
Marital history							
Age at current marriage	RAND Guard and Reserve Family Study (Werber et al., 2008)	X		X			
Length of current marriage	DMDC SOFS	X		X			

Table A.1—Continued

Survey Topic	Measure Source	Service Member		Spouse		Child	
		Baseline	Follow-Up	Baseline	Follow-Up	Baseline	Follow-Up
Prior marital history	FPNMAD (Trail and Karney, 2012)	X		X			
Pregnancy or adoption	FPNMAD (Trail and Karney, 2012)	X	X	X	X		
Relationship satisfaction							
Communication	PANAS (Watson, Clark, and Tellegen, 1988; Thompson and Cavallaro, 2007)	X	X	X	X		
Marital satisfaction	Florida Family Formation Survey (Rauer et al., 2008)	X	X	X	X		
Violence	CTS-2 (Straus et al., 1996)	X	X	X	X		
Divorce	MSI (Weiss and Cerreto, 1980)	X	X	X	X		
Parent–child relationship							
With service member	Parent–Child Communication Scale (Loeber and Stouthamer-Loeber, 1998)					X	X
With nondeployed parent (i.e., spouse)	Parent–Child Communication Scale (Loeber and Stouthamer-Loeber, 1998)					X	X
Reintegration							
Problems during reintegration	RAND National Military Family Association Study (Chandra, Burns, et al., 2008; Chandra, Lara-Cinisomo, Jaycox, Tanielian, Han, et al., 2011)		X (post)		X (post)		X (post)
Family adjustment	PDRS (Blais, Thompson, and McCreary, 2009)		X (post)		X (post)		X (post)
Service member adjustment	RAND’s Views from the Homefront Study (Chandra, Burns, et al., 2008; Chandra, Lara-Cinisomo, Jaycox, Tanielian, Han, et al., 2011)		X (post)		X (post)		X (post)

Table A.1—Continued

Survey Topic	Measure Source	Service Member		Spouse		Child	
		Baseline	Follow-Up	Baseline	Follow-Up	Baseline	Follow-Up
Child adjustment	RAND's Views from the Homefront Study (Chandra, Burns, et al., 2008; Chandra, Lara-Cinisomo, Jaycox, Tanielian, Han, et al., 2011)				X (post)		
Health and well-being							
Physical health							
Self-rated health	SF-12 (Ware, Kosinski, and Keller, 1995); National Health Interview Survey (Lorig et al., 1996)	X	X	X	X	X	X
Activity limitation	SF-12 (Ware, Kosinski, and Keller, 1995); National Health Interview Survey (Lorig et al., 1996)	X	X	X	X	X	X
Psychological health							
TBI	BTBIS (Schwab et al., 2007)	X	X				
PTSD (only 4-item screen for spouse)	PCL-5 for service members (Weathers, Huska, and Keane, 1991); PC-PTSD for spouses (Prins et al., 2004)	X	X	X	X		
Tobacco use	2007 National Survey on Drug Use and Health (U.S. Department of Health and Human Services, 2008)	X	X	X	X		
Alcohol use	2007 National Survey on Drug Use and Health (U.S. Department of Health and Human Services, 2008); CAGE (Mayfield, McLeod, and Hall, 1974)	X	X	X	X		
Substance use	CAGE (Mayfield, McLeod, and Hall, 1974)	X	X	X	X		

Table A.1—Continued

Survey Topic	Measure Source	Service Member		Spouse		Child	
		Baseline	Follow-Up	Baseline	Follow-Up	Baseline	Follow-Up
Prescription drug use	2007 National Survey on Drug Use and Health (U.S. Department of Health and Human Services, 2008)	X	X	X	X		
Anxiety	MHI-18 (Sherbourne et al., 1992)	X	X	X	X	X	X
Depression	PHQ-8 (Kroenke, Strine, et al., 2009)	X	X	X	X	X	X
Risky	NCHRBS (Brener, Collins, et al., 1995);	X	X			X	X
Life satisfaction	Diener et al., 1985; Pavot and Diener, 1993	X	X	X	X	X	X
Child emotional problems	SCARED (Birmaher, Khetarpal, et al., 1997); PHQ-A (J. Johnson et al., 2002)			X	X	X	X
Child conduct problems	Problem Behavior Frequency Scales (Farrell, Meyer, and White, 2001); RAND's National Military Family Association Study (Chandra, Burns, et al., 2008; Chandra, Lara-Cinisomo, Jaycox, Tanielian, Han, et al., 2011)			X	X	X	X
Child hyperactivity	SDQ (Goodman, 1997)			X	X	X	X
Child peer relationships	SDQ (Goodman, 1997)			X	X	X	X
Child prosocial behavior	SDQ (Goodman, 1997)			X	X	X	X
Military experiences							
Deployment history							
Deployment history	RAND Guard and Reserve Family Study (Werber et al., 2008)	X					
Nontraumatic military stressors	Military Life Scale (Zohar et al., 2004)	X	X (during/post)				

Table A.1—Continued

Survey Topic	Measure Source	Service Member		Spouse		Child	
		Baseline	Follow-Up	Baseline	Follow-Up	Baseline	Follow-Up
Combat exposure (trauma)	Combat-experience scale (Hoge, Castro, et al., 2004; I. Jacobson et al., 2008)	X	X (during/post)				
Expectations of time away	Created for Deployment Life Study	X	X (pre)	X	X (pre)	X	X (pre)
Future deployment expectations	Created for Deployment Life Study	X	X (pre)				
Communication during deployment	RAND's Views from the Homefront Study (Chandra, Burns, et al., 2008; Chandra, Lara-Cinisomo, Jaycox, Tanielian, Han, et al., 2011)		X (during)		X (pre/during)		X (pre/during)
Length of current deployment	Created for Deployment Life Study		X (during/post)		X (during/post)		
Perceived risk during deployment	Created for Deployment Life Study		X (during)				
Challenges during deployment	RAND's Views from the Homefront Study (Chandra, Burns, et al., 2008; Chandra, Lara-Cinisomo, Jaycox, Tanielian, Han, et al., 2011)				X (during)		X (during)
Child's response to deployment	RAND's Views from the Homefront Study (Chandra, Burns, et al., 2008; Chandra, Lara-Cinisomo, Jaycox, Tanielian, Han, et al., 2011)				X (during/post)		
Readiness							
Combat	DRRI (King et al., 2006); DMDC SOFS	X	X (pre)		X (pre)		
Financial	DRRI (King et al., 2006); DMDC SOFS	X	X (pre)	X	X (pre)		
Family	DRRI (King et al., 2006); DMDC SOFS	X	X (pre)	X	X (pre)		X (pre)
Legal	DRRI (King et al., 2006); DMDC SOFS			X	X (pre)		
Career intentions							
Commitment to military	DMDC SOFS; O'Reilly and Chatman, 1996	X	X	X	X	X	X

Table A.1—Continued

Survey Topic	Measure Source	Service Member		Spouse		Child	
		Baseline	Follow-Up	Baseline	Follow-Up	Baseline	Follow-Up
Job satisfaction	DMDC SOFS	X	X	X	X		
Retention intentions	DMDC SOFS	X	X	X	X	X	X
Spouse attitude toward retention	DMDC SOFS	X	X	X	X		
Child career in military	Created for Deployment Life Study					X	X
Stress							
Economic pressure	Gutman and Eccles, 1999	X	X	X	X		
Current life stressors	List of Threatening Experiences (Brugha et al., 1985)	X	X	X	X		
Managing tasks	Sample Survey of Military Personnel (U.S. Army Research Institute)			X	X		
Social support							
Instrumental support	FPNMAD (Trail and Karney, 2012; Reichman et al., 2001); Three-City Study (Angel et al., 2009)	X	X	X	X		
Expressive support	FPNMAD (Trail and Karney, 2012; Reichman et al., 2001); Three-City Study (Angel et al., 2009)	X	X	X	X	X	X
Socialization with military families	Created for Deployment Life Study	X	X	X	X	X	X
Support during deployment	Created for Deployment Life Study				X (during)		X (during)
Service utilization							
Use of mental health services	RAND's Invisible Wounds of War Study (Tanielian and Jaycox, 2008)	X	X	X	X		
Child use of mental health services	RAND's Views from the Homefront Study (Chandra, Lara-Cinisomo, Jaycox, Tanielian, Burns, et al., 2010; Chandra, Martin, et al., 2010)			X	X	X	X

Table A.1—Continued

Survey Topic	Measure Source	Service Member		Spouse		Child	
		Baseline	Follow-Up	Baseline	Follow-Up	Baseline	Follow-Up
Use of military resources	Created for Deployment Life Study	X	X	X	X		
Child academic							
Child's grade in school	NHES (National Center for Education Statistics, undated)			X	X	X	X
Location of school	RAND's Views from the Homefront Study (Chandra, Lara-Cinisomo, Jaycox, Tanielian, Burns, et al., 2010; Chandra, Martin, et al., 2010)			X			
Educational aspirations (for child)	NHES (National Center for Education Statistics, undated)			X	X	X	X
Grades	NHES (National Center for Education Statistics, undated)			X	X	X	X
Disciplinary problems	NHES (National Center for Education Statistics, undated)			X	X	X	X
School engagement	Rosenthal and Feldman, 1991					X	X

NOTE: DOB = date of birth. CTS-2 = Conflict Tactics Scale 2. FFCWS = Fragile Families and Child Wellbeing Study. Pre = asked in predeployment module. During = asked in deployment module. Post = asked in postdeployment module.

Screening Instrument

This appendix includes the exact script used for screening potential participants. The script appears with the programming language used by Abt SRBI in conducting the enrollment process.

consent_intro consent intro

Hello, [SERVICE MEMBER name], we sent you an email recently, inviting you and your family to take part in our study of how deployment affects military families. We hope to interview service members, their spouses, and their children to find out more about their experiences throughout the deployment cycle.

consent_DP1_deploy_overseas currently deployed overseas

Are you currently deployed overseas?

1 Yes

2 No

IF consent_DP1_deploy_overseas = Yes THEN

|

| **consent_DP1a_home2wks** home in the next 2 weeks

| Will you be home within the next two weeks?

| 1 Yes

| 2 No

|

| IF consent_DP1a_home2wks = No THEN

||

|| **consent_DP1b_know_when_back** when will they be back

|| We'd like to get back in touch with you when you return. Do you know when that will be?

|| 1 Yes

|| 2 No

||

|| IF consent_DP1b_know_when_back = Yes THEN

|||

||| [Questions consent_DP1b_when_back_intro to consent_DP1b_year are displayed as a

```

table]
| |
| | consent_DP1b_when_back_intro approximate date when will they be back
| | What is the approximate date that you will return?
| |
| | consent_DP1b_day day they will be back
| | Day (optional):
| | Range: 1..31
| |
| | consent_DP1b_month month they will be back
| | Month:
| | 1 January
| | 2 February
| | 3 March
| | 4 April
| | 5 May
| | 6 June
| | 7 July
| | 8 August
| | 9 September
| | 10 October
| | 11 November
| | 12 December
| |
| | consent_DP1b_year year they will be back
| | Year:
| | Range: 2011..2035
| |
| | ENDIF
| |
| | ENDIF
| |
ENDIF

IF ( count_time > 12 OR consent_DP1b_know_when_back = No ) THEN
|
| contact_confirmNameAddress confirm name and address
| First, we would like to confirm your name and address, so if we are still enrolling when you
return, we
| can contact you at that time. Is that okay?
| 1 Yes
| 2 No
|
| IF contact_confirmNameAddress = Yes THEN
| |
| | [Questions contact_firstName to contact_otherNames are displayed as a table]

```

contact_firstName R spouse first name

We have your name as Can I record your full name here? Any other names you go by?

String

contact_middleName R middle name

String

contact_lastName R last name

String

contact_otherNames R other names or alias

String

[Questions contact_streetAddress1 to contact_zip are displayed as a table]

contact_streetAddress1 R mailing street address

What is your mailing address?

String

contact_streetAddress2 R mailing street address 2

String

contact_city R city mailing address

String

contact_state R state mailing address

String

contact_country R country mailing address

String

contact_zip R zip code mailing address

String

contact_landline home landline telephone number

What is your home landline telephone number, including area code? [PLEASE ENTER
000-000-0000 IF

NO LANDLINE PHONE] |__|__|__| (Area Code) |__|__|__| - |__|__|__|__|

String

contact_haveCellphone have cell phone

Do you have a separate cell phone number?

1 Yes

2 No


```

|| IF contact_haveCellphone = Yes THEN
|| |
|| | contact_cellphone cell phone number
|| | What is your cell number, including area code? [PLEASE ENTER 000-000-0000 IF
NO CELL PHONE]
|| | |_|_|_|_| (Area Code) |_|_|_|_| - |_|_|_|_|_|
|| | String
|| |
|| | ENDIF
|| |
|| | contact_haveEmail have email account
|| | In the future, we may want to contact you by email, to share information about the study
or to invite
|| | you to participate in future surveys. Since your survey responses are private, do you have
an e-mail
|| | account that only you have access to?
|| | 1 Yes
|| | 2 No
|| |
|| | IF contact_haveEmail = Yes THEN
|| | |
|| | | contact_email email account
|| | | What is this e-mail address? _____@_____ (END SHOULD BE .com, .
edu, .gov, .net,
|| | | .org)
|| | | String
|| | |
|| | | contact_emailAccess email account access
|| | | Does anyone else besides you have the password or access to this email account?
|| | | 1 Yes
|| | | 2 No
|| | |
|| | | IF contact_emailAccess = Yes THEN
|| | | |
|| | | | contact_emailAccessWho who has email account access
|| | | | Can you tell us who else can access the account?
|| | | | 1 Spouse
|| | | | 2 Children
|| | | | 3 Other family members
|| | | | 4 Friends
|| | | | 5 Employers
|| | | | 6 Others
|| | | |
|| | | | ENDIF
|| | |
|| | | ENDIF
|| |
|| | ENDIF

```

```

| |
| ENDIF
|
| contact_CLOSING closing screen for web version
| That's all the information we need right now. Thanks for taking the time to answer these
| questions and
| thank you very much for your service to our nation.
|
| ELSE
|
| consent_SC1 received letter or email describing study
| Do you remember if you received a letter/email from us describing the project?
| 1 Yes
| 2 No
| 3 No family members in the military
|
| IF consent_SC1 = No THEN
| |
| | consent_SC1a did not receive letter describing study
| | As you know, in recent years, military actions around the world have placed great demands
| | on service
| | members. We know that for many of these men and women the military experience affects
| | not just them
| | personally but their entire family. What we don't know is how military families are
| | reacting to
| | these experiences, and what sort of things help families do better. To answer these
| | questions, we
| | are conducting a landmark study that follows military families throughout the deployment
| | cycle, and
| | your family has been randomly selected to participate. If your family qualifies, we will
| | send you a
| | $50 Visa gift card. If there is also a qualifying child who participates, we will send that
| | child an
| | additional gift card of $25.
| |
| |
| | ENDIF
|
| IF consent_SC1 = Yes OR consent_SC1 = No THEN
| |
| | consent_SC2a currently married
| | I have a few questions to see if you and your family qualify for our study. Are you
| | currently
| | married?
| | 1 Yes
| | 2 No
| |
| |

```

```

|| IF consent_SC2a = Yes THEN
|| |
|| | consent_SC2b you and spouse currently live together
|| | Do you and your spouse currently live together, and by that I mean that the two of you
share a
|| | permanent residence and live there together?
|| | 1 Yes
|| | 2 No
|| |
|| | IF consent_SC2b = Yes THEN
|| | |
|| | | consent_separation_paperwork submitted separation or retirement paperwork
|| | | Have you submitted separation or retirement paperwork to leave the military?
|| | | 1 Yes
|| | | 2 No
|| | |
|| | | IF consent_separation_paperwork = No THEN
|| | | |
|| | | | consent_no_paperwork not submitted reenlistment or extension paperwork
|| | | | Are you within six months of the end of your enlistment period and have NOT
submitted
|| | | | re-enlistment or extension paperwork?
|| | | | 1 Yes
|| | | | 2 No
|| | | |
|| | | | IF consent_no_paperwork = No THEN
|| | | | |
|| | | | | consent_SC4 description of study
|| | | | | Good, so far you are eligible. The only other requirement is that both you and your
spouse
|| | | | | must agree to participate. You can complete the first survey now and your spouse can
complete
|| | | | | theirs at another time. When you both complete the first survey your family will be
enrolled
|| | | | | in the full study. After completing the first survey, there will be a series of surveys
|| | | | | that you can continue to complete over the Internet, one about every 4 months over
the next
|| | | | | 3 years. If your family remains in the study we will send your family a $100 gift card
|| | | | | during the second year and a $150 gift card in the third year after the final survey is
|| | | | | completed. We expect the first survey to take approximately 45 minutes depending
on your
|| | | | | answers and the later internet surveys to take about 30 minutes. Once enrolled, we
will
|| | | | | contact each participating family member every four months or so, including before,
during
|| | | | | and after the service member is deployed. The internet surveys in our study will

```

include

||||| personal questions about how your life is affected throughout a deployment cycle.

||||| Participating in this study is entirely your choice and won't affect your job. While

your

||||| spouse will know that you have participated, your family's participation is completely

||||| confidential; only a select number of people at RAND who are working on this study

will know

||||| whether you have agreed or refused to participate. The military supplied us with

contact

||||| information but no one in the service knows if your family has been randomly

selected or

||||| whether you agree or decline to participate. If you do agree to participate you can

refuse to

||||| answer any questions at any time and you can also refuse to continue with the study

for any

||||| reason. There are only two situations that we may have to report: first, if you tell us

||||| about an ongoing situation about the abuse of a child or older person, and second, if

you

||||| tell us that you intend to hurt yourself or someone else. You do not have to tell us

about

||||| either of these things, but if you do, we may take any action, including notifying the

||||| appropriate authorities in order to prevent harm to you or to others.

|||||

||||| **consent_adult_SC5** adult consent to study

||||| May I have your consent to be part of our study?

||||| 1 Yes

||||| 2 No

|||||

||||| IF consent_adult_SC5 = Yes THEN

|||||

||||| **SPNAME** spouse name

||||| Just so I can refer to your spouse during the interview may I have her/his name?

||||| String

|||||

||||| [Questions SP_email_intro to SP_email2 are displayed as a table]

|||||

||||| **SP_email_intro** spouse email intro

||||| So that we may invite your spouse to be part of this study, please provide an email

address

||||| and we will send him/her an email invite too.

|||||

||||| **SP_email1** spouse email

||||| Please enter email address:

||||| String

|||||

||||| **SP_email2** spouse email re entered

```

||||| Re-enter email address:
||||| String
|||||
||||| IF SP_email1 <> SP_email2 THEN
|||||
||||| error_email_match spouse email not match
||||| The email addresses that you entered for your spouse did not match. Please go back
and
||||| check your answer.
|||||
||||| ENDIF
|||||
||||| SC6 children under 18 in home
||||| Because this is a study of families, we are also trying to include some children to be
part
||||| of this study. Do you have any children under 18 years of age, for which you or your
spouse
||||| have legal guardianship, and who have been living with you at least half of the time
over
||||| the past 6 months?
||||| 1 Yes
||||| 2 No
|||||
||||| IF SC6 = Yes THEN
|||||
||||| SC6a1 children 3 to 10 yrs old in past 6 months
||||| Over the past 6 months, how many children 3 to 10 years of age for which you or
your
||||| spouse have legal guardianship, have been living with you at least half of the time?
||||| Integer
|||||
||||| SC6a2 children 11 to 17 yrs old in past 6 months
||||| Over the past 6 months, how many children 11 to 17 years of age for which you or
your
||||| spouse have legal guardianship, have been living with you at least half of the time?
||||| Integer
|||||
||||| IF SC6a1 > 1 AND ( SC6a2 = OR SC6a2 = NONRESPONSE) THEN
|||||
||||| [Questions consent_SC6b1 to CNAME are displayed as a table]
|||||
||||| consent_SC6b1 several children but not in age range
||||| Okay, then we will not be asking any of your children to take part in the study.
We
||||| will still be asking questions about children, though, and for some of these
questions

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```

||||||| we will want to focus on one child in particular. As a way of choosing one child
to
||||||| ask about, can I get the name of the child with the next/last birthday?
||||||| 1 Yes
||||||| 2 No
|||||||
||||||| CNAME child name
||||||| String
|||||||
||||||| ENDIF
|||||||
||||||| IF SC6a2 = 1 THEN
|||||||
||||||| [Questions consent_SC6b1 to CNAME are displayed as a table]
|||||||
||||||| consent_SC6b2 name of child 11 to 17
||||||| Later in the interview, I will be asking some questions specifically about your
child
||||||| who is between the ages of 11 and 17. Can I have the name of this child?
||||||| 1 Yes
||||||| 2 No
|||||||
||||||| CNAME child name
||||||| String
|||||||
||||||| ENDIF
|||||||
||||||| IF SC6a1 = 1 AND ( SC6a2 = OR SC6a2 = NONRESPONSE) THEN
|||||||
||||||| [Questions consent_SC6b1 to CNAME are displayed as a table]
|||||||
||||||| consent_SC6b3 one child not in age range
||||||| Okay, then we will not be asking your child to take part in the study. We will still
be
||||||| asking questions about children, though, and for some of these questions we will
want
||||||| to focus on this child. Can I have the name of this child?
||||||| 1 Yes
||||||| 2 No
|||||||
||||||| CNAME child name
||||||| String
|||||||
||||||| ENDIF
|||||||
||||||| IF SC6a2 > 1 THEN

```

```

|||||||
||||||| [Questions consent_SC6b1 to CNAME are displayed as a table]
|||||||
||||||| consent_SC6b4 more than one in 11 to 17 range
||||||| We will only be asking about one of your children between the ages of 11 and 17.
Which
||||||| of your children between ages 11-17 years has the next birthday coming up?
Please list
||||||| their name, so that we can refer that child in the rest of the survey.
||||||| 1 Yes
||||||| 2 No
|||||||
||||||| CNAME child name
||||||| String
|||||||
||||||| ENDIF
|||||||
||||||| CGENDER FOCAL CHILD gender
||||||| Is this child male or female?
||||||| 1 Male
||||||| 2 Female
|||||||
||||||| sc6c Relationship with military parent
||||||| What is your relationship to [child name]?
||||||| 1 Mom
||||||| 2 Dad
||||||| 3 Stepmom/Stepmother
||||||| 4 Stepdad/Stepfather
||||||| 5 Grandparent
||||||| 6 Sister
||||||| 7 Brother
||||||| 8 Mom's boyfriend/partner
||||||| 9 Dad's girlfriend/partner
||||||| 10 Other guardian
|||||||
||||||| IF sc6c = Other guardian THEN
|||||||
||||||| sc6c_other other Relationship with military parent
||||||| Please specify other relationship with child:
||||||| String
|||||||
||||||| ENDIF
|||||||
||||||| sc6d Relationship with spouse parent
||||||| What is your spouse's relationship to [child name]?
||||||| 1 Mom

```

```

||||||| 2 Dad
||||||| 3 Stepmom/Stepmother
||||||| 4 Stepdad/Stepfather
||||||| 5 Grandparent
||||||| 6 Sister
||||||| 7 Brother
||||||| 8 Mom's boyfriend/partner
||||||| 9 Dad's girlfriend/partner
||||||| 10 Other guardian
|||||||
||||||| IF sc6d = Other guardian THEN
|||||||
||||||| sc6d_other other Relationship with spouse parent
||||||| Please specify your spouse's other relationship with child:
||||||| String
|||||||
||||||| ENDIF
|||||||
||||||| IF SC6a2 > THEN
|||||||
||||||| consent_sc6e legal guardian of child
||||||| Just to check, are you the legal guardian of [child name]?
||||||| 1 Yes
||||||| 2 No
|||||||
||||||| IF consent_sc6e = No THEN
|||||||
||||||| sc6f is spouse legal guardian of child
||||||| Is your spouse the legal guardian of [child name]?
||||||| 1 Yes
||||||| 2 No
|||||||
||||||| ENDIF
|||||||
||||||| consent_child_description description of consent for child
||||||| We would also like to ask [child name] to take part in the first interview. The
||||||| process for children in the study is similar to that of the adults. They start with
the
||||||| baseline web survey, and then will complete web surveys about every 4 months.
The web
||||||| surveys take about 30 minutes or less. We ask questions about family life, school,
||||||| behavior and how the experience of deployment affects them. In order to allow
the
||||||| child to answer honestly about [his her child gender fill] experiences, we would
like
||||||| to ask that you allow [him or her child gender fill] to answer the questions in our

```


web

||||||| surveys, in a private place in your home where [he she child gender fill] knows others

||||||| will not be listening or watching. Our intent is to ensure that all of [his her child gender fill] answers will be private, and we won't include [his her child gender fill] name in any report we write. We would ask that you agree to keeping [his her child

gender fill] answers private, even from you or your spouse. If your child participates, [he she child gender fill] will receive a separate Visa gift card for \$25 after the first survey, a \$30 gift card during the second year and a \$35 gift card during the third year when the study is almost complete. Your child's

participation

||||||| in this study is completely [his her child gender fill] choice and it isn't required in order for your family to be in the study. Your child can leave the study at any time.

||||||| Even if you agree to allow your child to be part of the study, [he she child gender fill] can decide not to take part if [he she child gender fill] does not want to. In other words, once you agree, it is still up to your child to decide whether [he she child gender fill] wants to take part in the study. If you allow your child to participate, please know that: We will not share any information we collect from [him or her child gender fill] with anyone, including you or your spouse. If [he she

she child gender fill] reports that [he she child gender fill] intends to harm [him or her

child gender fill] self or someone else, however, we may report the information to the

appropriate authorities. We will not be asking questions about sexual or physical abuse of a child, but you should know that, if this information is disclosed during the

interview, we may report the information to the proper authorities. We will be asking several questions about how your child is doing emotionally. If [his her child

gender fill] responses indicate that [he she child gender fill] may be having a problem

with depression we will provide him/her with some phone numbers that they can call for

help. For confidentiality, each person will be assigned a number. Any contact lists linking your name with the identification numbers will be kept in separate locked cabinets. We will keep these contact lists after the project is completed for one year

so that we can use the information to conduct the follow-up interviews with each of

you. Only project staff will have access to this information. We will only share summary findings from these surveys in study reports. Our reports will not identify you

or your child in any way.

```

|||||
||||| sc6g consent for child to participate
||||| Do you give your child permission to participate in this study?
||||| 1 YES, I agree to give my child permission to participate.
||||| 2 NO, I do not want my child to participate in this study.
|||||
||||| ENDIF
|||||
||||| ENDIF
|||||
||||| ENDIF
|||||
||||| ENDIF
|||||
||||| ENDIF
|||||
||||| ENDIF
|||||
||||| ENDIF
|||||
|| IF ( consent_SC2a = No OR consent_separation_paperwork = Yes OR consent_no_
paperwork = Yes OR
|| consent_SC1 = No family members in the military OR consent_SC2b = No ) and (
consent_adult_SC5 !=
|| Yes ) THEN
|||
||| consent_SC3 not eligible
||| As we described in our invitation letter, in order for a family to be in the current study,
the
||| service member that was randomly chosen must be married, living together with his/her
spouse, and
||| expecting to deploy within the next 12 months. At this time, our study is only able to
study
||| married service members who face a deployment in the near future. We do hope that in
the future we
||| will be able to obtain funding to conduct research on single parent families and their
experiences,
||| which are equally important. We appreciate your willingness to answer our questions. I
want to
||| thank you very much for your time today and for your service to our nation.
|||
||| ENDIF
|||
|| ENDIF
||
ENDIF

```


Baseline Service Member Survey

This appendix includes the baseline instrument script for the service member instrument. The exact CATI and web programming code is included below, along with specific interviewer instructions for coding responses.

Deployment Life Study Member Baseline

Survey_Intro Intro to survey

This survey is for [service member name]. If that is not you, please click here to log out. After you log out you will be able to log back in and take your survey. Here's how this will work: This survey includes questions about you, your marriage, and your experiences as part of a military family. First, the survey asks some basic information about you and your background. Then the survey moves on to questions about your marriage. Finally the survey asks about your life – the challenges you are facing and the places you go to get support. In order for the survey results to be useful, it is very important that everyone gives us honest answers. Remember, all of your answers are completely confidential and will never be shared with the military, or with any other members of your family. It is up to you whether you want to answer these questions. If you come to any question you would rather not answer you can just skip over it. It's also okay to stop or take a break while taking the survey, you can close it down and come back to it at any time. Just open your original email and click the link again to return to where you left off. Okay, let's begin with a few questions about you and your current military status.

smgender service member GENDER

What is your gender?

1 Male

2 Female

EXPFUT_alt_patience next deployment please wait screen

After you click the “next” button below, it may take a few moments for the next screen to load.

EXPFUT_alt next deployment

If you do deploy this year, when do you expect that is most likely to happen?

String

COMP1 COMP1 year join US military

In what year did you join the United States military?

Range: 1950..2012

COMP2a COMP2a military branch

Which service and component are you affiliated with?

1 Army (active component)

2 Army Guard

3 Army Reserve

4 Navy (active component)

5 Navy Reserve

6 Air Force (active component)

7 Air National Guard

8 Air Reserve

9 Marine Corps (active component)

10 Marine Reserve

IF COMP2a = EMPTY THEN

| **Error_comp2a** error no answer hard check

| You did not answer the previous question. This answer is very important to us. Please go back and select an answer.

ENDIF

IF COMP2a = Army Guard OR COMP2a= Army Reserve OR COMP2a= Navy Reserve
OR COMP2a= Air National

Guard OR COMP2a= Air Reserve OR COMP2a= Marine Reserve THEN

|

| **COMP3** COMP3 guard or reserve

| Are you a member of the Guard or Reserve in a full-time active duty program, such as AGR [Active Guard Reserve], TAR [Training and Administration of Reserves], AR [Army Reserve]?

| 1 Yes

| 2 No

|

| IF COMP3 = Yes THEN

||

|| **COMP4** COMP4 months full time active duty program

|| How many months have you been in the full-time active duty program?

|| Range: 0..480

||

| ENDIF

|

ENDIF

PYG current paygrade

What is your current pay grade?

- 1 E-1
- 2 E-2
- 3 E-3
- 4 E-4
- 5 E-5
- 6 E-6
- 7 E-7
- 8 E-8
- 9 E-9
- 10 W-1
- 11 W-2
- 12 W-3
- 13 W-4
- 14 W-5
- 15 O-1
- 16 O-2
- 17 O-3
- 18 O-4
- 19 O-5
- 20 O-6 or above

TOS which term of service are you serving now

In which term of service are you serving now?

- 1 On indefinite status
- 2 On stop loss
- 3 An officer serving an obligation
- 4 1st enlistment or an extension of 1st enlistment
- 5 2nd or later enlistment including extensions

IF COMP2a = Army (active component) OR COMP2a= Navy (active component) OR
COMP2a= Air Force (active
component) OR COMP2a= Marine Corps (active component) THEN

|
| [Questions LOS1_years to LOS1_months are displayed as a table]

| **LOS1_years** years of active duty service you completed

| How long have you served as active duty?

| Range: 0..50

| **LOS1_months** months of active duty service you completed

| How long have you served as active duty?

| Range: 0..24

| IF LOS1_months = EMPTY AND LOS1_years = EMPTY THEN

| | **error_other** error other

| | Your answer contains an error. Please go back and check your answer.

```

| ENDIF
|
| IF LOS1_yrs_mo > 35 THEN
| |
| | IF PYG < W-1 THEN
| | |
| | | LOS2_enlisted time remaining for enlisted
| | | How much time remains on your current enlistment term, including extensions?
| | | 1 Less than 3 months
| | | 2 3 months to less than 7 months
| | | 3 7 months to less than 1 year
| | | 4 1 year to less than 2 years
| | | 5 2 years to less than 3 years
| | | 6 3 years or more
| | |
| | | ELSE
| | | |
| | | | LOS2_officer service time remaining for officer
| | | | How much time remains on your service obligation?
| | | | 1 Less than 3 months
| | | | 2 3 months to less than 7 months
| | | | 3 7 months to less than 1 year
| | | | 4 1 year to less than 2 years
| | | | 5 2 years to less than 3 years
| | | | 6 3 years or more
| | | | 7 None
| | | |
| | | ENDIF
| | ENDIF
| ENDIF
|
| ENDIF

```

```

IF COMP2a = Army Guard OR COMP2a= Army Reserve OR COMP2a= Navy Reserve
OR COMP2a= Air National
Guard OR COMP2a= Air Reserve OR COMP2a= Marine Reserve THEN

```

```

| EMP1 currently have civilian job in addition to military employment
| Do you currently have a civilian job for which you earn money from in addition to your
military employment?
| 1 Yes
| 2 No
|
| IF EMP1 = Yes THEN
| |
| | EMP2 your civilian work status last week

```

|| We'd like to ask you about your civilian employment. Last week, what was your civilian work status? Were you...

|| 1 Working full-time; that is, 35 or more hours per week in one or more jobs; including self-employment

|| 2 Working part-time (less than 35 hours per week)

|| 3 Have a job, but out due to illness, leave, furlough, or strike

|| 4 Have seasonal work, but currently not working

||

|| [Questions EMP3_years to EMP3_months are displayed as a table]

||

|| **EMP3_years** How many yrs at your current civilian job

|| How long have you been at your current civilian job?

|| Range: 0..50

||

|| **EMP3_months** How many months at your current civilian job

|| How long have you been at your current civilian job?

|| Range: 0..24

||

|| IF EMP3_months = EMPTY AND EMP3_years = EMPTY THEN

|| | **Error_answer** error no answer hard check

|| | You did not answer the previous question. Your answers are important to us. Please go back and select an answer.

|| ENDIF

||

|| **EMP4** hours you work for civilian pay per week

|| When you are working in your civilian job, how many hours do you usually work per week?

|| Range: 0..99

||

|| **EMP5** how many weeks unemployed in last 12 months

|| In the last 12 months, that is, since [The date one year ago], how many weeks, if any, were you

|| unemployed?

|| Range: 0..52

||

|| ENDIF

||

|| IF EMP1 = No THEN

||

|| [Questions EMP6 to EMP6_other are displayed as a table]

||

|| **EMP6** why you dont have civilian job currently

|| Which of the following best describes the reason why you currently do not have a civilian job? Are

|| you...

|| 1 Not looking for work in a civilian job


```

|| 2 Looking for work, but unemployed
|| 3 Full-time homemaker
|| 4 Retired
|| 5 Disabled for work (such as SSI)
|| 6 Other (SPECIFY):
||
|| EMP6_other other reason why dont have civilian job currently
|| String
||
|| IF EMP6 = Other (SPECIFY): AND EMP6_other = EMPTY THEN
|| | error_other error other
|| | Your answer contains an error. Please go back and check your answer.
|| ENDIF
||
|| EMP7 ever had a civilian job
|| Have you ever had a civilian job?
|| 1 Yes
|| 2 No
||
|| IF EMP7 = Yes THEN
|| |
|| | EMP8 months in your last civilian job
|| | In the last 12 months, how many months were you in your last civilian job?
|| | Range: 0..12
|| |
|| | IF EMP8 > 0 THEN
|| | |
|| | | EMP9 hours per week in last civilian job
|| | | In your last civilian job, how many hours did you usually work per week?
|| | | Range: 0..99
|| | |
|| | | EMP10 how many weeks unemployed last 12 months
|| | | In the last 12 months, that is, since [The date one year ago], how many weeks were you
unemployed?
|| | | Range: 0..52
|| | |
|| | ENDIF
|| ENDIF
||
|| ENDIF
||
|| ENDIF
||
|| ENDIF

```

```

IF language = CAWI (self-administered web interview) THEN
|

```

```

| IF EMP1 = Yes OR EMP7 = Yes OR EMP8 > 0 THEN
|
| [Questions INC_intro to INC3_other are displayed as a table]
|
| INC_intro income sources past year
| Now the survey will focus on a new topic and ask questions about your financial situation.
For these questions, the
| survey will ask about the past year. We will be asking your spouse about other sources of
income to your household,
| but now the survey will focus on your personal income as an individual. In the last 12
months, did you personally
| (as an individual) receive money from any of the following non-military sources?
|
| INC1 Earnings from a civilian job
| Earnings from a civilian job
| 1 Yes
| 2 No
|
| INC2 Unemployment insurance or disability or social security
| Unemployment insurance, workmen's compensation, disability, or social security benefits
| 1 Yes
| 2 No
|
| INC3 other specify
| Income from other non-military sources. Please specify:
| 1 Yes
| 2 No
|
| INC3_other please specify
| String
|
| IF INC3 = Yes AND INC3_other = EMPTY THEN
| error_INC3_other error message INC3
| You checked "Income from other non-military sources", but did not specify the type.
Please go back
| and change your answer or specify the non-military source.
| ENDIF
|
| ELSEIF EMP1 = No OR EMP7 = No OR EMP8 = 0 THEN
|
| [Questions INC_intro to INC3_other are displayed as a table]
|
| INC_intro income sources past year
| Now the survey will focus on a new topic and ask questions about your financial situation.
For these questions, the

```

|| survey will ask about the past year. We will be asking your spouse about other sources of income to your household,

|| but now the survey will focus on your personal income as an individual. In the last 12 months, did you personally

|| (as an individual) receive money from any of the following non-military sources?

|| **INC2** Unemployment insurance or disability or social security

|| Unemployment insurance, workmen’s compensation, disability, or social security benefits

|| 1 Yes

|| 2 No

|| **INC3** other specify

|| Income from other non-military sources. Please specify:

|| 1 Yes

|| 2 No

|| **INC3_other** please specify

|| String

|| IF INC3 = Yes AND INC3_other = EMPTY THEN

|| | **error_INC3_other** error message INC3

|| | You checked “Income from other non-military sources”, but did not specify the type.

|| Please go back

|| | and change your answer or specify the non-military source.

|| ENDIF

|| ENDIF

|| ENDIF

IF language = CATI (phone interview) THEN

| IF EMP1 = Yes OR EMP7 = Yes OR EMP8 > 0 THEN

|| [Questions INC_intro to INC3_other are displayed as a table]

|| **INC_intro** income sources past year

|| Now the survey will focus on a new topic and ask questions about your financial situation.

For these questions, the

|| survey will ask about the past year. We will be asking your spouse about other sources of income to your household,

|| but now the survey will focus on your personal income as an individual. In the last 12 months, did you personally

|| (as an individual) receive money from any of the following non-military sources?

|| **INC1_dk** Earnings from a civilian job

|| Earnings from a civilian job
 || 1 Yes
 || 2 No
 ||
 || **INC2_dk** Unemployment insurance or disability or social security
 || Unemployment insurance, workmen's compensation, disability, or social security benefits
 || 1 Yes
 || 2 No
 ||
 || **INC3_dk** other specify
 || Income from other non-military sources. Please specify:
 || 1 Yes
 || 2 No
 ||
 || **INC3_other** please specify
 || String
 ||
 || IF INC3_dk = Yes AND INC3_other = EMPTY THEN
 ||
 || **error_INC3_other** error message INC3
 || You checked "Income from other non-military sources", but did not specify the type.
 Please go back
 || and change your answer or specify the non-military source.
 ||
 || ENDIF
 ||
 || ELSEIF EMP1 = No OR EMP7 = No OR EMP8 = 0 THEN
 ||
 || [Questions INC_intro to INC3_other are displayed as a table]
 ||
 || **INC_intro** income sources past year
 || Now the survey will focus on a new topic and ask questions about your financial situation.
 For these questions, the
 || survey will ask about the past year. We will be asking your spouse about other sources of
 income to your household,
 || but now the survey will focus on your personal income as an individual. In the last 12
 months, did you personally
 || (as an individual) receive money from any of the following non-military sources?
 ||
 || **INC2_dk** Unemployment insurance or disability or social security
 || Unemployment insurance, workmen's compensation, disability, or social security benefits
 || 1 Yes
 || 2 No
 ||
 || **INC3_dk** other specify
 || Income from other non-military sources. Please specify:

```
|| 1 Yes
|| 2 No
||
|| INC3_other please specify
|| String
||
|| IF INC3_dk = Yes AND INC3_other = EMPTY THEN
|| |
|| | error_INC3_other error message INC3
|| | You checked “Income from other non-military sources”, but did not specify the type.
Please go back
|| | and change your answer or specify the non-military source.
|| |
|| ENDIF
||
| ENDIF
|
ENDIF

IF EMP1 = Yes OR EMP8 > 0 OR INC1 = Yes OR INC2 = Yes OR INC3 = Yes THEN
|
| INC5 range of all non-military income before deductions
| Thinking about the past 12 months, in what range was the total of your own income from
all non-military
| sources before taxes and other deductions?
| 1 Under $5,000
| 2 $5,000 to $9,999
| 3 $10,000 to $14,999
| 4 $15,000 to $19,999
| 5 $20,000 to $24,999
| 6 $25,000 to $29,999
| 7 $30,000 to $34,999
| 8 $35,000 to $39,999
| 9 $40,000 to $44,999
| 10 $45,000 to $49,999
| 11 $50,000 to $54,999
| 12 $55,000 to $59,999
| 13 $60,000 to $64,999
| 14 $65,000 to $69,999
| 15 $70,000 to $74,999
| 16 $75,000 to $79,999
| 17 $80,000 to $84,999
| 18 $85,000 to $89,999
| 19 $90,000 to $94,999
| 20 $95,000 to $99,999
| 21 Greater than $100,000
```

|
ENDIF

ECP1 financial condition of you and spouse over past 4 months

Sometimes people have trouble paying their bills or getting by month to month. Which of the following

best describes the financial condition of you and your spouse over the past 4 months?

- 1 Very comfortable and secure
- 2 Able to make ends meet without much difficulty
- 3 Occasionally have some difficulty making ends meet
- 4 Tough to make ends meet but keeping our heads above water
- 5 In over our heads

ECP2 how much difficulty paying household bills past 4 months

During the past 4 months, how much difficulty did your household have paying bills? Would you say...

- 1 No difficulty at all
- 2 A little difficulty
- 3 Some difficulty
- 4 A great deal of difficulty

ECP3 end of the month past 4 months

Thinking about the end of each month over the past 4 months, did your household usually end up with...

- 1 More than enough money left over
- 2 Some money left over
- 3 Just enough to make ends meet
- 4 Not enough to make ends meet

ECP4 worry about finances past 4 months

Again thinking of the last 4 months, how much have you been worried about your financial situation?

Would you say you have been...

- 1 Not at all worried
- 2 A little worried
- 3 Worried
- 4 Very worried

REL2 attend religious services past 4 months

Here are a few questions about religion. In the past 4 months, how often did you attend religious services? Would you say...

- 1 Never,
- 2 A few times or less in the past 4 months,
- 3 4-8 times in the past 4 months,
- 4 About every week, or,
- 5 More than once per week

SPR1 religious or spiritual beliefs influence the way you live

How much do your religious or spiritual beliefs influence the way you live?

- 1 Not at all
- 2 A little
- 3 Somewhat, or
- 4 Extremely

SPR2 seek spiritual comfort when you have problems

When you have problems or difficulties in your work, family, or personal life, how often do you seek spiritual comfort?

- 1 Never
- 2 Rarely
- 3 Sometimes, or
- 4 Often

[Questions REL1 to REL1_other are displayed as a table]

REL1 what is your religion

What religion, if any, do you most identify with?

- 1 Protestant
- 2 Roman Catholic/Catholic
- 3 Jewish
- 4 Mormon (include Church of Jesus Christ of Latter Day Saints)
- 5 Orthodox Church (Greek/Russian Orthodox)
- 6 Islam/Muslim
- 7 Other religion, please specify:
- 8 No religious affiliation / atheist / agnostic

REL1_other other religion not listed

String

IF REL1 = Other religion, please specify: AND REL1_other = EMPTY THEN

| **error_REL1_other** error message REL1

| You checked "Other religion", but did not specify the type. Please go back and change your answer.

ENDIF

FOO1 parents married or living together when you were born

Now we would like to ask you a few questions about the family that raised you. Were your parents

married to each other or living together as a couple when you were born?

- 1 Yes, they were married and living together
- 2 Yes, they were living together as a couple, but they were not married
- 3 Yes, they were married, but not living together
- 4 No, they were neither married nor living together

IF FOO1 = Yes, they were married and living together OR FOO1= Yes, they were living together as a couple, but they were not married OR FOO1= Yes, they were married, but not living together THEN

| **FOO2** parents married or living together when you were born

| Did your parents ever permanently end their relationship?

| 1 Yes, by divorce, separation, or unspecified

| 2 Yes, because one of them died (if specified only)

| 3 No

| IF FOO2 = Yes, by divorce, separation, or unspecified OR FOO2= Yes, because one of them died (if specified only) THEN

|| **FOO3** your age when parent relationship ended

|| How old were you when that happened? (the end of your parents' relationship)

|| Range: 0..99

| ENDIF

ENDIF

PMIL1 either of your parents in military

Were either of your parents or guardians ever in the military, including the National Guard, or the Reserve?

1 Yes

2 No

IF PMIL1 = Yes THEN

| **PMIL2** parents in military while you were growing up or before born

| Was either a parent or guardian in the military while you were growing up, only before you were born,

| or both before you were born and while you were growing up?

| 1 Only while you were growing up

| 2 Only before you were born

| 3 Both before you were born AND while you were growing up

| ENDIF

ACE1 parent or other adult in household swear at you

The next set of questions asks about whether you have experienced specific challenges that some people

face when they are growing up. While you were growing up, during your first 18 years of life:

Did a

parent or other adult in the household regularly swear at you, insult you, put you down, or humiliate you?

- 1 Yes
- 2 No

ACE2 parent or other adult make you feel physically threatened
(While you were growing up, during your first 18 years of life...) Did a parent or other adult in the household often act in a way that made you afraid that you might be physically hurt?

- 1 Yes
- 2 No

ACE3 not enough food or shelter or protection
(While you were growing up, during your first 18 years of life...) Did you often or very often feel that you didn't have enough to eat, had to wear dirty clothes, or had no one to protect you?

- 1 Yes
- 2 No

ACE4 live with anyone with drug or alcohol problem
(While you were growing up, during your first 18 years of life...) Did you live with anyone who was a problem drinker or alcoholic or who used street drugs?

- 1 Yes
- 2 No

ACE5 live with someone who went to prison
(While you were growing up, during your first 18 years of life...) Did someone you lived with go to prison?

- 1 Yes
- 2 No

HOUS1 describe where you currently live

Now let's move on to a new topic. The next series of questions asks about your current housing and

living situation. Which of the following best describes where you currently live?

- 1 Military family housing, **on base**
- 2 Military family housing, **off base**
- 3 Civilian housing that you own or pay mortgage on
- 4 Civilian housing that you rent, **off base, or**
- 5 Some other living situation

IF HOUS1 = Military family housing, **off base** OR HOUS1= Civilian housing that you own or pay mortgage on OR HOUS1= Civilian housing that you rent, **off base, or** OR HOUS1= Some other living situation THEN

|

| **DIST** miles to main duty station base from residence
 | Approximately how many miles is it, one way, to your main duty station base from your residence?
 | Please answer in miles. Round to the nearest mile.
 | Range: 0..999
 |
 | ENDIF

MOVE1 times moved more than 50 miles since 2004
 How many times since 2004 have you moved your permanent residence further than 50 miles due to the military?
 1 Zero times
 2 One time
 3 Two times
 4 Three times
 5 Four or more times

IF MOVE1 != Zero times AND MOVE1=RESPONSE THEN
 |
 | [Questions MOVE2_years to MOVE2_months are displayed as a table]
 |
 | **MOVE2_years** years since last moved more than 50 miles
 | How long has it been since you last moved your permanent residence more than 50 miles due to the military?
 | Range: 0..50
 |
 | **MOVE2_months** months since last moved more than 50 miles
 | How long has it been since you last moved your permanent residence more than 50 miles due to the military?
 | Range: 0..24
 |
 | IF MOVE2_months = EMPTY AND MOVE2_years = EMPTY THEN
 | | **error_other** error other
 | | Your answer contains an error. Please go back and check your answer.
 | ENDIF
 |
 | ENDIF

MOVE3 planning on moving in the next month
 Are you planning on moving in the next month?
 1 Yes
 2 No

IF MOVE3 = Yes THEN
 |
 | [Questions MOVE5 to MOVE5_other are displayed as a table]

```

|
| MOVE5 why are you moving
| Which of the following best describes the reasons for your next move?
| 1 Permanent change of residence (for military reasons)
| 2 Temporary move to be closer to family
| 3 Temporary move to be closer to base
| 4 Or some other reason, please specify:
|
| MOVE5_other other reason why are you moving
| String
|
| IF MOVE5 = Or some other reason, please specify: AND MOVE5_other = EMPTY
THEN
| | error_other error other
| | Your answer contains an error. Please go back and check your answer.
| ENDIF
|
ENDIF

| IF SC6 = Yes THEN
|
| PAG1 Being a parent is harder than I thought
| Let's move onto questions about parenting Please tell me how much you agree or disagree
with each
| statement. Being a parent is harder than I thought it would be. Do you . . .
| 1 Strongly agree
| 2 Somewhat agree
| 3 Somewhat disagree
| 4 Strongly disagree
|
| PAG2 Being a parent is source of joy and satisfaction
| Being a parent is a source of joy and satisfaction in my life. Do you...
| 1 Strongly agree
| 2 Somewhat agree
| 3 Somewhat disagree
| 4 Strongly disagree
|
| PAG3 feel trapped by my responsibilities as a parent
| I feel trapped by my responsibilities as a parent. Do you . . .
| 1 Strongly agree
| 2 Somewhat agree
| 3 Somewhat disagree
| 4 Strongly disagree
|
| PAG4 taking care of kids more work than pleasure
| I find that taking care of my [fill for child children] is much more work than pleasure. Do

```

you...

- | 1 Strongly agree
- | 2 Somewhat agree
- | 3 Somewhat disagree
- | 4 Strongly disagree

| **PAG5** I think I am a good parent
I think I am a good parent. Do you...

- | 1 Strongly agree
- | 2 Somewhat agree
- | 3 Somewhat disagree
- | 4 Strongly disagree

| **PAG6** feel exhausted from raising a family
I often feel tired, worn out, or exhausted from raising a family. Do you . . .

- | 1 Strongly agree
- | 2 Somewhat agree
- | 3 Somewhat disagree
- | 4 Strongly disagree

| **FL_FE_sentences** FL_FE sentences

FE section randomization FL_FE array: The following 6 questions are randomized: 1. There is a feeling of togetherness in our family. 2. Family members often put each other down. 3. Family members really help and support one another. 4. We fight a lot in our family. 5. We really get along well with each other. 6. Family members sometimes get so angry they throw things.

| **FES_intro** family environment intro

| Here are a few statements about the way things are in your family, and when we say your family, we mean

| the family that lives under one roof in your home. For each statement, please indicate whether it

| describes your family well, somewhat, or not at all.

| **FES_r1** randomized FES questions 1

| (Tell us if this statement describes your family well, somewhat, or not at all.) [randomized FE sentences]

- | 1 Describes my family well
- | 2 Describes my family somewhat
- | 3 Does not describe my family at all

| **FES_r2** randomized FES questions 2

| (Tell us if this statement describes your family well, somewhat, or not at all.) [randomized FE sentences]

- | 1 Describes my family well
- | 2 Describes my family somewhat

```

| 3 Does not describe my family at all
|
| FES_r3 randomized FES questions 3
| (Tell us if this statement describes your family well, somewhat, or not at all.) [randomized
FE sentences]
| 1 Describes my family well
| 2 Describes my family somewhat
| 3 Does not describe my family at all
|
| FES_r4 randomized FES questions 4
| (Tell us if this statement describes your family well, somewhat, or not at all.) [randomized
FE sentences]
| 1 Describes my family well
| 2 Describes my family somewhat
| 3 Does not describe my family at all
|
| FES_r5 randomized FES questions 5
| (Tell us if this statement describes your family well, somewhat, or not at all.) [randomized
FE sentences]
| 1 Describes my family well
| 2 Describes my family somewhat
| 3 Does not describe my family at all
|
| FES_r6 randomized FES questions 6
| (Tell us if this statement describes your family well, somewhat, or not at all.) [randomized
FE sentences]
| 1 Describes my family well
| 2 Describes my family somewhat
| 3 Does not describe my family at all
|
ENDIF

```

AGEMAR how old were you when married current spouse

Let's move on to some questions about marriage and pregnancy. How old were you when you married your current spouse?

Range: 16..60

[Questions LMAR_years to LMAR_months are displayed as a table]

LMAR_years years married to spouse

How long have you and your spouse been married?

Range: 0..99

LMAR_months months married to spouse

How long have you and your spouse been married?

Range: 0..24

IF LMAR_years = EMPTY AND LMAR_months = EMPTY THEN

| **Error_answer** error no answer hard check

| You did not answer the previous question. Your answers are important to us. Please go back and select

| an answer.

ENDIF

ORD1 in service when married or after

Were you already in the service when you got married, or did you join after you got married?

1 Already in the service when married

2 Joined after

IF ORD1 = Joined after THEN

|

| [Questions ORD2_years to ORD2_months are displayed as a table]

|

| **ORD2_years** years married before joining military

| How long were you married before you joined the military?

| Range: 0..50

|

| **ORD2_months** how many months married before joining military

| How long were you married before you joined the military?

| Range: 0..24

|

| IF ORD2_months = EMPTY AND ORD2_years = EMPTY THEN

| | **error_other** error other

| | Your answer contains an error. Please go back and check your answer.

| ENDIF

|

ENDIF

PMH1 is this first marriage or married before

Is this your first marriage, or have you been married before?

1 First marriage

2 Been married before

IF PMH1 = Been married before THEN

|

| **PMH2** how many times married before

| How many times have you been married before your current marriage?

| Range: 1..10

|

| **PMH3** how did last marriage end

| How did your last marriage end?

| 1 An annulment

```

| 2 A divorce
| 3 The death of a spouse
|
ENDIF

```

```

PREG1 are you or is wife currently pregnant
[Is your wife/Are you fill] currently pregnant?
1 Yes
2 No

```

```

IF PREG1 = Yes THEN

```

```

|
| PREG2 was pregnancy planned
| Was this pregnancy planned?
| 1 Yes
| 2 No
| 2 Neither planned or unplanned (for example, "We just let it happen.")
|

```

```

| PREG_due due date of pregnancy
| Do you know the due date?
| 1 Yes
| 2 No
|

```

```

| IF PREG_due = Yes THEN
|
|

```

```

| [Questions PREG3_month to PREG3_day are displayed as a table]
|

```

```

| PREG3_month pregnancy month due
| When [is she/are you fill ] due?
| 1 January
| 2 February
| 3 March
| 4 April
| 5 May
| 6 June
| 7 July
| 8 August
| 9 September
| 10 October
| 11 November
| 12 December
|

```

```

| PREG3_day pregnancy day of due date
| Range: 1..31
|

```

```

| ENDIF

```

|
ENDIF

IF PREG1 = No OR PREG1=NONRESPONSE THEN

|
| **PREG4** pregnancy due date
| Are you trying to get pregnant currently?
| 1 Yes
| 2 No
| 3 We are not trying, but are not taking precautions either
|
ENDIF

PANAS_INTRO intro to panas section

Here are some questions about how you have been feeling about your relationship with [SPOUSE name] lately. Remember, all of your answers are strictly private. Your spouse will not see them. Let's start by asking about how you feel when you communicate with [SPOUSE name]. Please look at the following series of emotions, and for each one, indicate whether, after talking with [SPOUSE name], you feel that way never, rarely, sometimes, often, or all the time.

FL_PA_sentences FL_PA sentences

PANAS section randomization FL_PA - The following 8 questions are randomized. 1. After talking with [SPOUSE name], how often do you feel happy? 2. After talking with [SPOUSE name], how often do you feel supported? 3. After talking with [SPOUSE name], how often do you feel upset? 4. After talking with [SPOUSE name], how often do you feel depressed? 5. After talking with [SPOUSE name], how often do you feel comforted? 6. After talking with [SPOUSE name], how often do you feel worried? 7. After talking with [SPOUSE name], how often do you feel frustrated? 8. After talking with [SPOUSE name], how often do you feel encouraged?

PA_r1 randomized PANAS questions 1

[randomized PANAS sentences]

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 5 All the time

PA_r2 randomized PANAS questions 2

[randomized PANAS sentences]

- 1 Never
- 2 Rarely

- 3 Sometimes
- 4 Often
- 5 All the time

PA_r3 randomized PANAS questions 3
[randomized PANAS sentences]

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 5 All the time

PA_r4 randomized PANAS questions 4
[randomized PANAS sentences]

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 5 All the time

PA_r5 randomized PANAS questions 5
[randomized PANAS sentences]

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 5 All the time

PA_r6 randomize PANAS questions 6
[randomized PANAS sentences]

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 5 All the time

PA_r7 randomize PANAS questions 7
[randomized PANAS sentences]

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 5 All the time

PA_r8 randomize PANAS questions 8
[randomized PANAS sentences]

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 5 All the time

MSAT1 how satisfied with amount of time spent with spouse

The next set of questions asks about your marriage. Thinking about your relationship with your spouse

lately, how satisfied are you with the amount of time you spend together?

- 1 Very satisfied
- 2 Somewhat satisfied
- 3 Neutral
- 4 Somewhat dissatisfied
- 5 Very dissatisfied

MSAT2 how much do you trust spouse

How much do you trust [SPOUSE name]?

- 1 Completely
- 2 Somewhat
- 3 Not that much
- 4 Not at all

MSAT3 share thoughts and feelings with spouse

How much do you feel you can share your personal thoughts and feelings with [SPOUSE name]?

- 1 Completely
- 2 Somewhat
- 3 Not that much
- 4 Not at all

MSAT4 How satisfied with sexual relations in your marriage

How satisfied are you with your sexual relations in your marriage?

- 1 Very satisfied
- 2 Somewhat satisfied
- 3 Neutral
- 4 Somewhat dissatisfied
- 5 Very dissatisfied

MSAT5 How satisfied with how spouse supports you in bad times

How satisfied are you with the way [SPOUSE name] supports you in difficult times?

- 1 Very satisfied
- 2 Somewhat satisfied
- 3 Neutral
- 4 Somewhat dissatisfied
- 5 Very dissatisfied

MSAT6 How satisfied with how spouse contributes to household chores

How satisfied are you with the way [SPOUSE name] contributes to household chores?

- 1 Very satisfied
- 2 Somewhat satisfied
- 3 Neutral
- 4 Somewhat dissatisfied
- 5 Very dissatisfied

MSAT7 how well does spouse understand your hopes and dreams

How well does [SPOUSE name] understand your hopes and dreams?

- 1 Very well
- 2 Pretty well
- 3 Not that well
- 4 Not at all

MSAT8 how well do you and spouse communicate in arguments

How well do the two of you communicate when you have disagreements?

- 1 Very well
- 2 Pretty well
- 3 Not that well
- 4 Not at all

MSAT9 overall satisfaction with marriage

Taking things altogether, how satisfied are you with your marriage right now? Would you say you are very satisfied, somewhat satisfied, neutral, somewhat dissatisfied, or very dissatisfied?

- 1 Very satisfied
- 2 Somewhat satisfied
- 3 Neutral
- 4 Somewhat dissatisfied
- 5 Very dissatisfied

Conflict_tactics_intro intro to conflict tactics section

Sometimes even happy couples get into arguments, and sometimes those arguments can get pretty intense.

Here are a few questions about how you and [SPOUSE name] behave during an argument.

Please remember we

will not share your answers with your spouse or the military.

IF language = CAWI (self-administered web interview) THEN

|

| [Questions CTS1_intro to CTS1b are displayed as a table]

|

| **CTS1_intro** intro to conflict tactics section

| For each of the next few statements, please think about the last four months, that is, since [date four months ago] and
 | indicate if this is something that has happened in your marriage never, once, or two or more times.

| **CTS1** insulted or swore at partner
 | You insulted or swore at your partner.
 | 1 Never
 | 2 Once
 | 3 Two or more times

| **CTS1b** partner insulted or swore at you
 | Your partner insulted or swore at you.
 | 1 Never
 | 2 Once
 | 3 Two or more times

| [Questions CTS_general_intro to CTS2b are displayed as a table]

| **CTS_general_intro** intro to cts questions 2 thru 6b
 | In the last four months, has this happened in your marriage never, once, or two or more times?

| **CTS2** destroyed something belonging to partner
 | You destroyed something belonging to your partner.
 | 1 Never
 | 2 Once
 | 3 Two or more times

| **CTS2b** partner destroyed something belonging to you
 | Your partner destroyed something belonging to you.
 | 1 Never
 | 2 Once
 | 3 Two or more times

| [Questions CTS_general_intro to CTS3b are displayed as a table]

| **CTS_general_intro** intro to cts questions 2 thru 6b
 | In the last four months, has this happened in your marriage never, once, or two or more times?

| **CTS3** threatened to hit or throw something at partner
 | You threatened to hit or throw something at your partner.
 | 1 Never
 | 2 Once
 | 3 Two or more times

| **CTS3b** partner threatened to hit or throw something at you

| Your partner threatened to hit or throw something at you.

| 1 Never

| 2 Once

| 3 Two or more times

| [Questions CTS_general_intro to CTS4b are displayed as a table]

| **CTS_general_intro** intro to cts questions 2 thru 6b

| In the last four months, has this happened in your marriage never, once, or two or more times?

| **CTS4** pushed or shoved your partner

| You pushed or shoved your partner.

| 1 Never

| 2 Once

| 3 Two or more times

| **CTS4b** partner pushed or shoved you

| Your partner pushed or shoved you.

| 1 Never

| 2 Once

| 3 Two or more times

| [Questions CTS_general_intro to CTS5b are displayed as a table]

| **CTS_general_intro** intro to cts questions 2 thru 6b

| In the last four months, has this happened in your marriage never, once, or two or more times?

| **CTS5** You slapped your partner

| You slapped your partner.

| 1 Never

| 2 Once

| 3 Two or more times

| **CTS5b** partner slapped you

| Your partner slapped you.

| 1 Never

| 2 Once

| 3 Two or more times

| [Questions CTS_general_intro to CTS6b are displayed as a table]

| **CTS_general_intro** intro to cts questions 2 thru 6b

| In the last four months, has this happened in your marriage never, once, or two or more times?

| **CTS6** punched or hit partner with harmful object

| You punched or hit your partner with something that could hurt.

| 1 Never

| 2 Once

| 3 Two or more times

| **CTS6b** partner punched or hit you with harmful object

| Your partner punched or hit you with something that could hurt.

| 1 Never

| 2 Once

| 3 Two or more times

| [Questions DIV_intro to DIV3 are displayed as a table]

| **DIV_intro** rate your marriage at current time

| We would like to get an idea of how your marriage stands right now. Please answer the question by

| indicating whether each item is true or false with regard to how things are right now.

| **DIV1** have thought about divorce or separation

| You have thought specifically about divorce or separation. You have thought about who would get the

| kids, how things would be divided, pros and cons, etc.

| 1 True

| 2 False

| **DIV2** made specific plans to discuss separation or divorce with spouse

| You have made specific plans to discuss separation or divorce with your spouse. You have considered

| what you would say, etc.

| 1 True

| 2 False

| **DIV3** contacted lawyer for preliminary divorce plans

| You have contacted a lawyer to make preliminary plans for divorce.

| 1 True

| 2 False

| ELSE

| [Questions CTS1_intro to CTS1b_dk are displayed as a table]

| **CTS1_intro** intro to conflict tactics section

| For each of the next few statements, please think about the last four months, that is, since [date four months ago] and
| indicate if this is something that has happened in your marriage never, once, or two or more times.

| **CTS1_dk** insulted or swore at partner
| You insulted or swore at your partner.
| 1 Never
| 2 Once
| 3 Two or more times

| **CTS1b_dk** partner insulted or swore at you
| Your partner insulted or swore at you.
| 1 Never
| 2 Once
| 3 Two or more times

| [Questions CTS_general_intro to CTS2b_dk are displayed as a table]

| **CTS_general_intro** intro to cts questions 2 thru 6b
| In the last four months, has this happened in your marriage never, once, or two or more times?

| **CTS2_dk** destroyed something belonging to partner
| You destroyed something belonging to your partner.
| 1 Never
| 2 Once
| 3 Two or more times

| **CTS2b_dk** partner destroyed something belonging to you
| Your partner destroyed something belonging to you.
| 1 Never
| 2 Once
| 3 Two or more times

| [Questions CTS_general_intro to CTS3b_dk are displayed as a table]

| **CTS_general_intro** intro to cts questions 2 thru 6b
| In the last four months, has this happened in your marriage never, once, or two or more times?

| **CTS3_dk** threatened to hit or throw something at partner
| You threatened to hit or throw something at your partner.
| 1 Never
| 2 Once
| 3 Two or more times

CTS3b_dk partner threatened to hit or throw something at you

Your partner threatened to hit or throw something at you.

- 1 Never
- 2 Once
- 3 Two or more times

[Questions CTS_general_intro to CTS4b_dk are displayed as a table]

CTS_general_intro intro to cts questions 2 thru 6b

In the last four months, has this happened in your marriage never, once, or two or more times?

CTS4_dk pushed or shoved your partner

You pushed or shoved your partner.

- 1 Never
- 2 Once
- 3 Two or more times

CTS4b_dk partner pushed or shoved you

Your partner pushed or shoved you.

- 1 Never
- 2 Once
- 3 Two or more times

[Questions CTS_general_intro to CTS5b_dk are displayed as a table]

CTS_general_intro intro to cts questions 2 thru 6b

In the last four months, has this happened in your marriage never, once, or two or more times?

CTS5_dk You slapped your partner

You slapped your partner.

- 1 Never
- 2 Once
- 3 Two or more times

CTS5b_dk partner slapped you

Your partner slapped you.

- 1 Never
- 2 Once
- 3 Two or more times

[Questions CTS_general_intro to CTS6b_dk are displayed as a table]

CTS_general_intro intro to cts questions 2 thru 6b

| In the last four months, has this happened in your marriage never, once, or two or more times?

| **CTS6_dk** punched or hit partner with harmful object

| You punched or hit your partner with something that could hurt.

| 1 Never

| 2 Once

| 3 Two or more times

| **CTS6b_dk** partner punched or hit you with harmful object

| Your partner punched or hit you with something that could hurt.

| 1 Never

| 2 Once

| 3 Two or more times

| [Questions DIV_intro to DIV3_dk are displayed as a table]

| **DIV_intro** rate your marriage at current time

| We would like to get an idea of how your marriage stands right now. Please answer the question by

| indicating whether each item is true or false with regard to how things are right now.

| **DIV1_dk** have thought about divorce or separation

| You have thought specifically about divorce or separation. You have thought about who would get the

| kids, how things would be divided, pros and cons, etc.

| 1 True

| 2 False

| **DIV2_dk** made specific plans to discuss separation or divorce with spouse

| You have made specific plans to discuss separation or divorce with your spouse. You have considered

| what you would say, etc.

| 1 True

| 2 False

| **DIV3_dk** contacted lawyer for preliminary divorce plans

| You have contacted a lawyer to make preliminary plans for divorce.

| 1 True

| 2 False

| ENDIF

RISK_intro Intro for risky behavior section

Let's move on to more questions about behaviors that affect your health. Remember, all of your answers are completely confidential, and if there are any questions you do not wish to

answer, you can simply skip over them.

RISK1 how often wear a seatbelt when riding in car

How often do you wear a seat belt when riding in a car driven by someone else?

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Most of the time
- 5 Always

RISK2 how often wear a seatbelt when driving car

How often do you wear a seat belt when driving a car?

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Most of the time
- 5 Always
- 6 You do not drive a car

RISK3 times rode a motorcycle past 4 months

During the past 4 months, how many times did you ride a motorcycle?

- 1 0 times
- 2 1 – 10 times
- 3 11 – 20 times
- 4 21 – 39 times
- 5 40 or more times

IF RISK3 != 0 times AND RISK3=RESPONSE THEN

|

| **RISK4** wear helmet while riding motorcycle past 4 months

| When you rode a motorcycle during the past 4 months, how often did you wear a helmet?

- | 1 Never
- | 2 Rarely
- | 3 Sometimes
- | 4 Most of the time
- | 5 Always

|

ENDIF

RISK5 times in vehicle driven by someone who drank alc past 4 months

During the past 4 months, how many times did you ride in a car or other vehicle driven by someone who had been drinking alcohol?

- 1 0 times
- 2 1 time
- 3 2 or 3 times

- 4 4 or 5 times
- 5 6 or more times

RISK6 times drove vehicle after drank alc past 4 months

During the past 4 months, how many times did you drive a car or other vehicle when you had been drinking alcohol?

- 1 0 times
- 2 1 time
- 3 2 or 3 times
- 4 4 or 5 times
- 5 6 or more times

RISK7 times in physical fight past 4 months

During the past 4 months, how many times were you in a physical fight?

- 1 0 times
- 2 1 time
- 3 2 or 3 times
- 4 4 or 5 times
- 5 6 or 7 times
- 6 8 or 9 times
- 7 10 or more times

IF RISK7 != 0 times AND RISK7=RESPONSE THEN

|
| **RISK8** times injured in physical fight past 4 months
| During the past 4 months, how many times were you in a physical fight in which you were injured and had
| to be treated by a doctor or nurse?

- | 1 0 times
- | 2 1 time
- | 3 2 or 3 times
- | 4 4 or 5 times
- | 5 6 or more times

| IF RISK7 < RISK8 THEN

|| **error_RISK** error times injured in a fight.

|| You cannot answer a greater number of fights than stated in the previous question. Please go back and check your

|| answer.

| ENDIF

ENDIF

TBI1 injured in a way that caused these symptoms

Have you ever in your life been hit or injured in a way that caused the following symptoms?

- 1 Being dazed, confused, or “seeing stars”

- 2 Not remembering the injury
- 3 Losing consciousness (knocked out) for less than a minute
- 4 Losing consciousness for 1-20 min
- 5 Losing consciousness for longer than 20 min
- 6 Having any symptoms of concussion afterward (such as headache, dizziness, irritability, etc)
- 7 Head injury
- 8 Lost consciousness with unknown duration.
- 9 None of the above

IF None of the above IN TBI1 AND cardinal(TBI1) > Being dazed, confused, or “seeing stars” THEN

| **error_noneAndAnswer** error none and answer

| You selected an answer and also “None of the above.” Please go back and change your answer.

ENDIF

IF TBI1 != None of the above AND TBI1=RESPONSE THEN

|

| **TBI2** when did this injury last occur

| About when did this injury last occur?

| 1 Within the last year

| 2 Within the last 5 years

| 3 More than 5 years ago

|

| **TBI3** Following problems begin or get worse after this injury

| Did any of the following problems begin or get worse after this injury?

| 1 Memory problems or lapses

| 2 Balance problems or dizziness

| 3 Ringing in the ears

| 4 Sensitivity to bright light

| 5 Irritability

| 6 Headaches

| 7 Sleep problems

| 8 Learning difficulties

| 9 Concentration problems

| 10 Excessive fatigue

| 11 None of the above

|

| IF None of the above IN TBI3 AND cardinal(TBI3) > Memory problems or lapses THEN

| | **error_noneAndAnswer** error none and answer

| | You selected an answer and also “None of the above.” Please go back and change your answer.

| ENDIF

|

ENDIF

TBI4 Had following problems in past week

In the past week, have you had any of the following symptoms?

- 1 Memory problems or lapses
- 2 Balance problems or dizziness
- 3 Ringing in the ears
- 4 Sensitivity to bright light
- 5 Irritability
- 6 Headaches
- 7 Sleep problems
- 8 Learning difficulties
- 9 Concentration problems
- 10 Excessive fatigue
- 11 None of the above

```
IF None of the above IN TBI4 AND cardinal(TBI4) > Memory problems or lapses THEN
| error_noneAndAnswer error none and answer
| You selected an answer and also "None of the above." Please go back and change your
| answer.
ENDIF
```

TOB1 days you smoked part or all of cigarette past 30 days

In the past 30 days, about how many days did you smoke part or all of a cigarette?

Range: 0..30

```
IF TOB1 > 0 OR TOB1=EMPTY THEN
```

```
|
| TOB2 cigarette per day past 30 days
| On those days that you smoked in the past 30 days, how many cigarettes did you typically
| have on each
| day?
| Range: 1..99
```

```
|
| TOB3 days used chewing tobacco past 30 days
| In the past 30 days, about how many days did you use chewing tobacco?
| Range: 0..30
```

```
|
ENDIF
```

ALC1 days drank alcohol past 30 days

In the past 30 days, about how many days did you have a drink containing alcohol?

Range: 0..30

```
IF ALC1 > 0 OR ALC1=EMPTY THEN
```

```
|
| ALC2 drinks per day past 30 days
```

| On those days that you drank in the past 30 days, how many drinks did you typically have on each day?

| By drink I mean a bottle of beer, a glass of wine, or one shot or mixed drink.

| Real

| IF ALC2 > 10 THEN

||

|| **ALC2_confirm** confirm drinks per day if more than 10

|| Just to confirm, on a TYPICAL DAY you had [drinks per day past 30 days] drinks per day? If this is

|| not correct, please use the "< < Back" button on the screen below the answer choices to go back and

|| change your answer. Please do not use the browser's "back" button.

|| 1 Yes

|| 2 No

||

| ENDIF

| IF smgender = Male THEN

||

|| **ALC3_men** days you had 5 or more drinks at one time question for men

|| During the past 30 days, how many days did you have five or more drinks on one occasion?

|| Range: 0..30

||

|| IF ALC3_men > ALC1 THEN

|||

||| **error_alcohol** error alcohol more days than alc1

||| Your answer cannot be greater than the amount of days ([days drank alcohol past 30 days]) that you

||| answered in ALC1.

|||

|| ENDIF

||

| ENDIF

| IF smgender = Female THEN

||

|| **ALC4_women** days you had 4 or more drinks at one time question for women

|| During the past 30 days, how many days did you have four or more drinks on one occasion?

|| Range: 0..30

||

|| IF ALC4_women > ALC1 THEN

|||

||| **error_alcohol** error alcohol more days than alc1

||| Your answer cannot be greater than the amount of days ([days drank alcohol past 30

```

days]) that you
|| | answered in ALC1.
|| | ENDIF
|| |
| | ENDIF
| |
ENDIF

```

CAGE1 felt you should cut down drug use past 4 months

Next, I would like to ask about your experiences with drinking or drug use during the past 4 months.

In the past 4 months, have you ever felt that you ought to cut down on your drinking or drug use?

1 Yes

2 No

3 Never drank or used drugs in last 4 months

```

IF CAGE1 = Yes OR CAGE1= No OR CAGE1=NONRESPONSE THEN
|
|
|

```

```

| | CAGE2 people criticize your drug use past 4 months
|

```

```

| | In the past 4 months, have people ever annoyed you by criticizing your drinking or drug
| | use?
|

```

```

| | 1 Yes
|

```

```

| | 2 No
|

```

```

| | 3 Never drank or used drugs in last 4 months
|

```

```

| | IF CAGE2 = Yes OR CAGE2= No OR CAGE2=NONRESPONSE THEN
|
|
|

```

```

| | | CAGE3 felt guilty about drug use past 4 months
| |

```

```

| | | In the past 4 months, have you ever felt bad or guilty about your drinking or drug use?
| |

```

```

| | | 1 Yes
| |

```

```

| | | 2 No
| |

```

```

| | | 3 Never drank or used drugs in last 4 months
| |

```

```

| | | IF CAGE3 = Yes OR CAGE3= No OR CAGE3=NONRESPONSE THEN
| |
| |
| |

```

```

| | | | CAGE4 drug use interfered with daily life past 4 months
| | |

```

```

| | | | In the past 4 months, was there a time when your drinking or drug use, or being hung
| | | | over
| | |

```

```

| | | | frequently, interfered with your work at school, on a job, or at home?
| | |

```

```

| | | | 1 Yes
| | |

```

```

| | | | 2 No
| | |

```

```

| | | | 3 Never drank or used drugs in last 4 months
| | |

```

```

| | | | IF CAGE4 = Yes OR CAGE4= No OR CAGE4=NONRESPONSE THEN
| | |
| | |
| | |

```

||| | **CAGE5** gotten into physical fights while using drugs past 4 months
 ||| | In the past 4 months, have you frequently gotten into physical fights while drinking or using drugs?

- ||| | 1 Yes
- ||| | 2 No
- ||| | 3 Never drank or used drugs in last 4 months

||| | IF CAGE5 = Yes OR CAGE5= No OR CAGE5=NONRESPONSE THEN

||| | **CAGE6** drugs caused trouble with you and friend past 4 months
 ||| | In the past 4 months, has drinking or drug use frequently caused trouble between you and a family member or friend?

- ||| | 1 Yes
- ||| | 2 No
- ||| | 3 Never drank or used drugs in last 4 months

||| | IF CAGE6 = Yes OR CAGE6= No OR CAGE6=NONRESPONSE THEN

||| | **CAGE7** under influence of drugs while driving past 4 months
 ||| | In the past 4 months, have you been under the influence of alcohol or drugs in situations

||| | where you could get hurt, for example when riding a bicycle, driving, operating a machine or anything else?

- ||| | 1 Yes
- ||| | 2 No
- ||| | 3 Never drank or used drugs in last 4 months

||| | ENDIF

||| | ENDIF

||| | ENDIF

||| | ENDIF

||| | ENDIF

||| | ENDIF

RX1 ever taken not prescribed prescription drug for feeling or exoerience
 Have you ever, even once, used any type of prescription drug that was not prescribed for you or that you took only for the experience or feeling it caused?

- 1 Yes

2 No

IF RX1 = Yes THEN

|

| **RX2** days used prescription drug for feeling or experience

| In the past 30 days, about how many days did you use a prescription drug that was not prescribed for

| you or that you took only for the experience or feeling it caused?

| Range: 0..30

|

ENDIF

HLTH1 daily activities limited by your physical health

Here are a few general questions about your physical health. Are your daily activities limited in any

way by your physical health?

1 Yes, limited a lot

2 Yes, limited a little

3 No, not limited at all

HLTH2 physical health keep you from working at a job

How much does your physical health keep you from working at a job, doing work around the house, or going to school?

1 Quite a bit

2 Moderately

3 Slightly

4 Not at all

HLTH3 physical health interfere with normal social activities

How much does your physical health interfere with your normal social activities with family, friends, neighbors, or groups?

1 Quite a bit

2 Moderately

3 Slightly

4 Not at all

HLTH4 rate health

In general, how would you rate your physical health?

1 Excellent

2 Very Good

3 Good

4 Fair

5 Poor

FL_MHI_sentences FL_MHI sentences

MHI Anxiety section randomization FL_MHI - The following 4 questions are randomized.

1. How much of the time, during the past month/four weeks, have you been a very nervous person? 2. How much of the time, during the past month/four weeks, have you felt tense or high-strung? 3. How much of the time, during the past month/four weeks, have you felt restless, fidgety, or impatient? 4. How much of the time, during the past month/four weeks, have you been anxious or worried?

MH_r1 randomized MHI question 1

The next set of questions is about how you feel, and how things have been for you during the past 4 weeks. [randomized MHI sentences]

- 1 All of the time
- 2 Most of the time
- 3 A good bit of the time
- 4 Some of the time
- 5 A little bit of the time
- 6 None of the time

MH_r2 randomize MHI question 2

[randomized MHI sentences]

- 1 All of the time
- 2 Most of the time
- 3 A good bit of the time
- 4 Some of the time
- 5 A little bit of the time
- 6 None of the time

MH_r3 randomized MHI question 3

[randomized MHI sentences]

- 1 All of the time
- 2 Most of the time
- 3 A good bit of the time
- 4 Some of the time
- 5 A little bit of the time
- 6 None of the time

MH_r4 randomized MHI question 4

[randomized MHI sentences]

- 1 All of the time
- 2 Most of the time
- 3 A good bit of the time
- 4 Some of the time
- 5 A little bit of the time
- 6 None of the time

FL_PHQ_sentences FL_PHQ sentences

PHQ Depression section randomization FL_PHQ - The following 8 questions are randomized. 1. Little interest or pleasure in doing things. 2. Feeling down, depressed, or hopeless. 3. Trouble falling or staying asleep, or sleeping too much. 4. Feeling tired or having little energy. 5. Poor appetite or overeating. 6. Feeling bad about yourself--or that you are a failure or have let yourself or your family down. 7. Trouble concentrating on things, such as reading the newspaper or watching television. 8. Moving or speaking so slowly that other people could have noticed? Or the opposite--being so fidgety or restless that you have been moving around a lot more than usual.

PHQ_r1 randomizing PHQ questions 1

Over the past two weeks how often have you been bothered by any of the following problems? [randomized PHQ sentences]

- 1 Not at all
- 2 Several days
- 3 More than half the days
- 4 Nearly every day

PHQ_r2 randomizing PHQ questions 2

(Over the past two weeks how often have you been bothered by the following problem...)
[randomized PHQ sentences]

- 1 Not at all
- 2 Several days
- 3 More than half the days
- 4 Nearly every day

PHQ_r3 randomizing PHQ questions 3

(Over the past two weeks how often have you been bothered by the following problem...)
[randomized PHQ sentences]

- 1 Not at all
- 2 Several days
- 3 More than half the days
- 4 Nearly every day

PHQ_r4 randomizing PHQ questions 4

(Over the past two weeks how often have you been bothered by the following problem...)
[randomized PHQ sentences]

- 1 Not at all
- 2 Several days
- 3 More than half the days
- 4 Nearly every day

PHQ_r5 randomizing PHQ questions 5

(Over the past two weeks how often have you been bothered by the following problem...)

[randomized PHQ sentences]

- 1 Not at all
- 2 Several days
- 3 More than half the days
- 4 Nearly every day

PHQ_r6 randomizing PHQ questions 6

(Over the past two weeks how often have you been bothered by the following problem...)

[randomized PHQ sentences]

- 1 Not at all
- 2 Several days
- 3 More than half the days
- 4 Nearly every day

PHQ_r7 randomizing PHQ questions 7

(Over the past two weeks how often have you been bothered by the following problem...)

[randomized PHQ sentences]

- 1 Not at all
- 2 Several days
- 3 More than half the days
- 4 Nearly every day

PHQ_r8 randomizing PHQ questions 8

(Over the past two weeks how often have you been bothered by the following problem...)

[randomized PHQ sentences]

- 1 Not at all
- 2 Several days
- 3 More than half the days
- 4 Nearly every day

PTSD1_experience ever experienced traumatic event

Many people have experienced a traumatic or stressful event in their lifetimes. Common traumatic events

include military combat, auto accidents, physical assaults, unwanted sexual experiences, natural

disasters, and witnessing the death or injury of another person. These events often involve strong

emotions such as fear, helplessness, anger, or believing that your life is in danger. Have you ever

experienced one of these traumatic events, or something like them that I did not mention?

- 1 Yes
- 2 No

IF PTSD1_experience = Yes THEN

|

| **PTSD_intro** intro to bothered by event last 30 days

| For these next questions, I want you to think about the event that you consider to be the “worst” one

| for you. Do you have one in mind? If nothing specific comes to mind, then please think about the one

| that bothers you the most when you think about it now. Thinking of your own feelings about that

| event, I am going to read you a list of problems and complaints that people sometimes have in response

| to stressful life experiences. For each one, I would like to know how much you may have been bothered

| by this problem in the last 30 days.

FL_PTSD_sentences FL_PTSD sentences

PTSD section randomization FL_PTSD - The following 17 questions are randomized. 1. Repeated, disturbing memories, thoughts, or images of the experience? 2. Repeated, disturbing dreams of the experience? 3. Suddenly acting or feeling as if the experience were happening again as if you were reliving it? 4. Feeling very upset when something reminded you of the experience? 5. Having physical reactions, such as heart pounding, trouble breathing, or sweating, when something reminded you of the experience? 6. Avoiding thinking about or talking about the experience or avoiding having feelings related to it? 7. Avoiding activities or situations because they remind you of the experience? 8. Trouble remembering important parts of the experience? 9. Loss of interest in things that you used to enjoy? 10. Feeling distant or cut off from other people? 11. Feeling emotionally numb or being unable to have loving feelings for those close to you? 12. Feeling as if your future will somehow be cut short? 13. Trouble falling or staying asleep? 14. Feeling irritable or having angry outbursts? 15. Having difficulty concentrating? 16. Being super alert or watchful or on guard? 17. Feeling jumpy or easily startled?

| **PTSD_r1** randomized fill for PTSD questions 1

| (How much you may have been bothered by this problem in the last 30 days) [randomized PTSD sentences]

- | 1 Not at all
- | 2 A little bit
- | 3 Moderately
- | 4 Quite a bit
- | 5 Extremely

| **PTSD_r2** randomized fill for PTSD questions 2

| (How much you may have been bothered by this problem in the last 30 days) [randomized PTSD sentences]

- | 1 Not at all
- | 2 A little bit
- | 3 Moderately
- | 4 Quite a bit

| 5 Extremely

| **PTSD_r3** randomized fill for PTSD questions 3

| (How much you may have been bothered by this problem in the last 30 days) [randomized PTSD sentences]

| 1 Not at all

| 2 A little bit

| 3 Moderately

| 4 Quite a bit

| 5 Extremely

| **PTSD_r4** randomized fill for PTSD questions 4

| (How much you may have been bothered by this problem in the last 30 days) [randomized PTSD sentences]

| 1 Not at all

| 2 A little bit

| 3 Moderately

| 4 Quite a bit

| 5 Extremely

| **PTSD_r5** randomized fill for PTSD questions 5

| (How much you may have been bothered by this problem in the last 30 days) [randomized PTSD sentences]

| 1 Not at all

| 2 A little bit

| 3 Moderately

| 4 Quite a bit

| 5 Extremely

| **PTSD_r6** randomized fill for PTSD questions 6

| (How much you may have been bothered by this problem in the last 30 days) [randomized PTSD sentences]

| 1 Not at all

| 2 A little bit

| 3 Moderately

| 4 Quite a bit

| 5 Extremely

| **PTSD_r7** randomized fill for PTSD questions 7

| (How much you may have been bothered by this problem in the last 30 days) [randomized PTSD sentences]

| 1 Not at all

| 2 A little bit

| 3 Moderately

| 4 Quite a bit

| 5 Extremely

| **PTSD_r8** randomized fill for PTSD questions 8
| (How much you may have been bothered by this problem in the last 30 days) [randomized
PTSD sentences]

- | 1 Not at all
- | 2 A little bit
- | 3 Moderately
- | 4 Quite a bit
- | 5 Extremely

| **PTSD_r9** randomized fill for PTSD questions 9
| (How much you may have been bothered by this problem in the last 30 days) [randomized
PTSD sentences]

- | 1 Not at all
- | 2 A little bit
- | 3 Moderately
- | 4 Quite a bit
- | 5 Extremely

| **PTSD_r10** randomized fill for PTSD questions 10
| (How much you may have been bothered by this problem in the last 30 days) [randomized
PTSD sentences]

- | 1 Not at all
- | 2 A little bit
- | 3 Moderately
- | 4 Quite a bit
- | 5 Extremely

| **PTSD_r11** randomized fill for PTSD questions 11
| (How much you may have been bothered by this problem in the last 30 days) [randomized
PTSD sentences]

- | 1 Not at all
- | 2 A little bit
- | 3 Moderately
- | 4 Quite a bit
- | 5 Extremely

| **PTSD_r12** randomized fill for PTSD questions 12
| (How much you may have been bothered by this problem in the last 30 days) [randomized
PTSD sentences]

- | 1 Not at all
- | 2 A little bit
- | 3 Moderately
- | 4 Quite a bit
- | 5 Extremely

| **PTSD_r13** randomized fill for PTSD questions 13
| (How much you may have been bothered by this problem in the last 30 days) [randomized PTSD sentences]

- | 1 Not at all
- | 2 A little bit
- | 3 Moderately
- | 4 Quite a bit
- | 5 Extremely

| **PTSD_r14** randomized fill for PTSD questions 14
| (How much you may have been bothered by this problem in the last 30 days) [randomized PTSD sentences]

- | 1 Not at all
- | 2 A little bit
- | 3 Moderately
- | 4 Quite a bit
- | 5 Extremely

| **PTSD_r15** randomized fill for PTSD questions 15
| (How much you may have been bothered by this problem in the last 30 days) [randomized PTSD sentences]

- | 1 Not at all
- | 2 A little bit
- | 3 Moderately
- | 4 Quite a bit
- | 5 Extremely

| **PTSD_r16** randomized fill for PTSD questions 16
| (How much you may have been bothered by this problem in the last 30 days) [randomized PTSD sentences]

- | 1 Not at all
- | 2 A little bit
- | 3 Moderately
- | 4 Quite a bit
- | 5 Extremely

| **PTSD_r17** randomized fill for PTSD questions 17
| (How much you may have been bothered by this problem in the last 30 days) [randomized PTSD sentences]

- | 1 Not at all
- | 2 A little bit
- | 3 Moderately
- | 4 Quite a bit
- | 5 Extremely

ENDIF

MHS1 take any prescribed medication for mental health problem

Sometimes people need help for a personal or emotional problem. These next questions ask about help you

might have gotten for yourself. Do you regularly take any prescribed medication for a mental health problem?

1 Yes

2 No

MHS2 need therapy or counseling past 4 months

In the past four months, did you have a need for counseling or therapy for personal or emotional problems

from a mental health specialist like a psychiatrist, psychologist, social worker or family counselor in a

mental health clinic or office, whether or not you actually received any counseling?

1 Yes

2 No

IF MHS2 = Yes or mhs2 = NONRESPONSE THEN

|

| **MHS3** receive therapy or counseling past 4 months

| In the past four months, did you actually receive counseling or therapy for personal or emotional

| problems from a mental health specialist like a psychiatrist, psychologist, social worker or family

| counselor in a mental health clinic or office?

| 1 Yes

| 2 No

|

| **MHS4** receive therapy from chaplain or friend past 4 months

| In the past four months, did you receive counseling or therapy for personal or emotional problems from

| a chaplain, another adult family member, or an adult friend?

| 1 Yes

| 2 No

|

| IF MHS3 = No THEN

||

|| [Questions mhs5 to mhs5_other are displayed as a table]

||

|| **MHS5** why not receive therapy past 4 months

|| Because you said you did not receive counseling or therapy for personal or emotional problems from a psychiatrist,

|| psychologist, social worker or family counselor in the past four months, I am going to read a list of reasons why you

```

| | may not have received those services. Please tell me all that apply.
| | Was it because....
| | 1 No counselor or therapist in the area for your problem
| | 2 Counselor or therapist not accepting new patients
| | 3 Long wait times
| | 4 TriCare won't pay for the service
| | 5 Other insurance (private, Medicaid, Medicare) won't pay for the service
| | 6 You don't think the provider is qualified to address your problem. The provider wouldn't
understand what you are going through.
| | 7 Worried about what others might think if they found out
| | 8 You would not know where to get help or who to see
| | 9 It would be difficult to arrange transportation to treatment
| | 10 It would be difficult to get childcare or time off of work
| | 11 The mental health treatments available are not very good
| | 12 It would take too much time to be in treatment
| | 13 Your family or friends would be more helpful than a mental health professional
| | 14 Religious counseling would be more helpful than mental health treatment
| | 15 You do not think the counseling would be kept confidential
| | 16 Your spouse or partner would not want/allow you to get treatment
| | 17 You have received treatment before and it did not work
| | 18 It is not a priority. You have too many other things to deal with
| | 19 You think it would affect your job and career options in the military
| | 20 Any other reasons I have not mentioned?
| |
| | MHS5_other other reason why not receive therapy past 4 months
| | String
| |
| | IF Any other reasons I have not mentioned? in MHS5 AND MHS5_other = EMPTY
THEN
| | | error_otherSpecify error other specify
| | | You selected "other" but did not specify an answer. Please go back and check your
answer.
| | ENDIF
| |
| | ENDIF
|
ENDIF

```

```

IF language = CAWI (self-administered web interview) THEN

```

```

| [Questions STRS1_header to STRS10 are displayed as a table]
|

```

```

| STRS1_header header to stressors section

```

```

| Now let's focus on some specific things that might have happened to you in the past 4
months. In the past 4 months...
|

```

| **STRS1** suffer from a serious illness past 4 months

| Did you suffer from a serious illness, injury, or an assault?

| 1 Yes

| 2 No

| **STRS2** close relative suffer from a serious illness past 4 months

| Did a close relative suffer a serious illness, injury, or an assault?

| 1 Yes

| 2 No

| **STRS3_miscarriage** miscarriage

| Did [your wife/you] experience a miscarriage?

| 1 Yes

| 2 No

| **STRS3** death of a parent or a child past 4 months

| Did you experience the death of a parent or a child?

| 1 Yes

| 2 No

| **STRS4** death of close family friend past 4 months

| Did you experience the death of a close family friend or close relative?

| 1 Yes

| 2 No

| **STRS5** choose to separate from spouse past 4 months

| Did you and [SPOUSE name] ever choose to separate for any time because of a fight?

| 1 Yes

| 2 No

| **STRS6** end relationship with friend or family past 4 months

| Did you end a relationship with a close friend or family member?

| 1 Yes

| 2 No

| **STRS7** problem with friend or family past 4 months

| Did you have a serious problem with a close friend, neighbor, or relative?

| 1 Yes

| 2 No

| **STRS8** returned from deployment

| Have you returned from deployment?

| 1 Yes

| 2 No

| **STRS9** notified of an upcoming deployment

| Have you been notified of an upcoming deployment?

| 1 Yes

| 2 No

| **STRS10** your military personnel killed while deployed past 4 months

| Have personnel from your military command been killed during deployment?

| 1 Yes

| 2 No

| IF STRS8 = EMPTY THEN

| | **Error_strs8** error no answer hard check

| | You did not answer whether or not you have returned from deployment. This answer is important to us.

| | Please go back and select an answer.

| ENDIF

| [Questions STRS1_header2 to STRS16 are displayed as a table]

| **STRS1_header2** header 2 in stressors section

| Still thinking about the past 4 months...

| **STRS11** lose a job past 4 months

| Did you lose a job?

| 1 Yes

| 2 No

| **STRS12** major financial crisis past 4 months

| Did you have a major financial crisis?

| 1 Yes

| 2 No

| **STRS13** problems with the police past 4 months

| Did you have problems with the police and/or a court appearance?

| 1 Yes

| 2 No

| **STRS14** relative have problems with police past 4 months

| Have you had a relative who has had problems with the police and/or a court appearance?

| 1 Yes

| 2 No

| **STRS15** something lost or stolen past 4 months

| Was something that you valued lost or stolen?

| 1 Yes

| 2 No

| **STRS16** friend have trouble with immigration past 4 months
| Did you or someone close to you have trouble with immigration or get deported?
| 1 Yes
| 2 No

| ELSE

| [Questions STRS1_header to STRS10_dk are displayed as a table]

| **STRS1_header** header to stressors section
| Now let's focus on some specific things that might have happened to you in the past 4 months. In the past 4 months...

| **STRS1_dk** suffer from a serious illness past 4 months
| Did you suffer from a serious illness, injury, or an assault?
| 1 Yes
| 2 No

| **STRS2_dk** close relative suffer from a serious illness past 4 months
| Did a close relative suffer a serious illness, injury, or an assault?
| 1 Yes
| 2 No

| **STRS3_miscarriage_dk** Experience miscarriage
| Did [your wife/you fill] experience a miscarriage?
| 1 Yes
| 2 No

| **STRS3_dk** death of a parent or a child past 4 months
| Did you experience the death of a parent or a child?
| 1 Yes
| 2 No

| **STRS4_dk** death of close family friend past 4 months
| Did you experience the death of a close family friend or close relative?
| 1 Yes
| 2 No

| **STRS5_dk** choose to separate from spouse past 4 months
| Did you and [SPOUSE name] ever choose to separate for any time because of a fight?
| 1 Yes
| 2 No

| **STRS6_dk** end relationship with friend or family past 4 months
| Did you end a relationship with a close friend or family member?
| 1 Yes

| 2 No

| **STRS7_dk** problem with friend or family past 4 months
 | Did you have a serious problem with a close friend, neighbor, or relative?
 | 1 Yes
 | 2 No

| **STRS8_dk** returned from deployment
 | Have you returned from deployment?
 | 1 Yes
 | 2 No

| **STRS9_dk** notified of an upcoming deployment
 | Have you been notified of an upcoming deployment?
 | 1 Yes
 | 2 No

| **STRS10_dk** your military personnel killed while deployed past 4 months
 | Have personnel from your military command been killed during deployment?
 | 1 Yes
 | 2 No

| IF STRS8_dk = EMPTY THEN
 | | **Error_answer** error no answer hard check
 | | You did not answer the previous question. Your answers are important to us. Please go
 | back and select an answer.
 | ENDIF

| [Questions STRS1_header2 to STRS16_dk are displayed as a table]

| **STRS1_header2** header 2 in stressors section
 | Still thinking about the past 4 months...

| **STRS11_dk** lose a job past 4 months
 | Did you lose a job?
 | 1 Yes
 | 2 No

| **STRS12_dk** major financial crisis past 4 months
 | Did you have a major financial crisis?
 | 1 Yes
 | 2 No

| **STRS13_dk** problems with the police past 4 months
 | Did you have problems with the police and/or a court appearance?
 | 1 Yes

```

| 2 No
|
| STRS14_dk relative have problems with police past 4 months
| Have you had a relative who has had problems with the police and/or a court appearance?
| 1 Yes
| 2 No
|
| STRS15_dk something lost or stolen past 4 months
| Was something that you valued lost or stolen?
| 1 Yes
| 2 No
|
| STRS16_dk friend have trouble with immigration past 4 months
| Did you or someone close to you have trouble with immigration or get deported?
| 1 Yes
| 2 No
|
ENDIF

```

LSAT rate current life satisfaction

Taking things altogether, how satisfied are you with your life right now? Would you say you are very

satisfied, somewhat satisfied, neutral, somewhat dissatisfied, or very dissatisfied?

- 1 Very satisfied
- 2 Somewhat satisfied
- 3 Neutral
- 4 Somewhat dissatisfied
- 5 Very dissatisfied

DHIST1 how many OCONUS deployments have you had

Just to let you know, we are most of the way done with the interview, and I really appreciate your responses so far. We have just a few sets of questions to go, and the next one asks some more specific questions about your experiences in the military. Since you joined the military, how many OCONUS deployments have you had?

Range: 0..99

DHIST2 times away from home 1 month or more because of military

Since you joined the military, how many times have you been away from home for a month at a time or

longer for any reason related to your military service?

Range: 0..99

```

IF DHIST2 > 0 THEN

```

```

| DHIST3 military times away from home since married
| Since you have been married, how many times have you been away from home for a month

```

at a time or

| longer for any reason related to your military service?

| Range: 0..99

| IF DHIST1 > 0 AND DHIST1 < 98 THEN

| **DHIST4** months OCONUS for most recent deployment

| How many months were you OCONUS for your most recent deployment?

| Real

| **DHIST5** months home since most recent deployment

| How many months have you been home since the most recent deployment?

| Real

| IF language = CAWI (self-administered web interview) THEN

| [Questions CEXP_intro to CEXP8 are displayed as a table]

| **CEXP_intro** intro to hoge et als scale

| Have you ever experienced the following during a deployment?

| **CEXP1** experienced Being attacked or ambushed

| Being attacked or ambushed

| 1 Yes

| 2 No

| **CEXP2** experienced Receiving small arms fire

| Receiving small arms fire

| 1 Yes

| 2 No

| **CEXP3** experienced Seeing dead bodies

| Seeing dead bodies or human remains

| 1 Yes

| 2 No

| **CEXP4** experienced Handling or uncovering human remains

| Handling or uncovering human remains

| 1 Yes

| 2 No

| **CEXP5** experienced Knowing person seriously injured or killed

| Knowing someone who was seriously injured or killed

| 1 Yes

| 2 No

||| **CEXP6** experienced participating in demining operations

||| Participating in demining operations

||| 1 Yes

||| 2 No

||| **CEXP7** experienced shooting at the enemy

||| Shooting or directing fire at the enemy

||| 1 Yes

||| 2 No

||| **CEXP8** experienced hand to hand combat

||| Engaging in hand-to-hand combat

||| 1 Yes

||| 2 No

||| [Questions CEXP_intro to CEXP15 are displayed as a table]

||| **CEXP_intro** intro to hoge et als scale

||| Have you ever experienced the following during a deployment?

||| **CEXP9** experienced searching homes or buildings

||| Clearing/searching homes or buildings

||| 1 Yes

||| 2 No

||| **CEXP10** experienced being wounded

||| Being wounded/injured

||| 1 Yes

||| 2 No

||| **CEXP11** experienced seeing injured women or children unable to help

||| Seeing ill/injured women or children who you were unable to help

||| 1 Yes

||| 2 No

||| **CEXP12** experienced receiving incoming artillery

||| Receiving incoming artillery, rocket, or mortar fire

||| 1 Yes

||| 2 No

||| **CEXP13** experienced being responsible for death of enemy combatant

||| Being directly responsible for the death of an enemy combatant or non-combatant

||| 1 Yes

||| 2 No

||| **CEXP14** experienced getting shot or hit but saved by protective gear

Had a close call, was shot or hit but protective gear saved you

1 Yes

2 No

CEXP15 experienced had a nearby buddy shot or hit

Had a buddy shot or hit who was near you

1 Yes

2 No

ELSE

[Questions CEXP_intro to CEXP8_dk are displayed as a table]

CEXP_intro intro to hoge et als scale

Have you ever experienced the following during a deployment?

CEXP1_dk experienced Being attacked or ambushed

Being attacked or ambushed

1 Yes

2 No

CEXP2_dk experienced Receiving small arms fire

Receiving small arms fire

1 Yes

2 No

CEXP3_dk experienced Seeing dead bodies

Seeing dead bodies or human remains

1 Yes

2 No

CEXP4_dk experienced Handling or uncovering human remains

Handling or uncovering human remains

1 Yes

2 No

CEXP5_dk experienced Knowing person seriously injured or killed

Knowing someone who was seriously injured or killed

1 Yes

2 No

CEXP6_dk experienced participating in demining operations

Participating in demining operations

1 Yes

2 No

||| **CEXP7_dk** experienced shooting at the enemy

||| Shooting or directing fire at the enemy

||| 1 Yes

||| 2 No

||| **CEXP8_dk** experienced hand to hand combat

||| Engaging in hand-to-hand combat

||| 1 Yes

||| 2 No

||| [Questions CEXP_intro to CEXP15_dk are displayed as a table]

||| **CEXP_intro** intro to hoge et als scale

||| Have you ever experienced the following during a deployment?

||| **CEXP9_dk** experienced searching homes or buildings

||| Clearing/searching homes or buildings

||| 1 Yes

||| 2 No

||| **CEXP10_dk** experienced being wounded

||| Being wounded/injured

||| 1 Yes

||| 2 No

||| **CEXP11_dk** experienced seeing injured women or children unable to help

||| Seeing ill/injured women or children who you were unable to help

||| 1 Yes

||| 2 No

||| **CEXP12_dk** experienced receiving incoming artillery

||| Receiving incoming artillery, rocket, or mortar fire

||| 1 Yes

||| 2 No

||| **CEXP13_dk** experienced being responsible for death of enemy combatant

||| Being directly responsible for the death of an enemy combatant or non-combatant

||| 1 Yes

||| 2 No

||| **CEXP14_dk** experienced getting shot or hit but saved by protective gear

||| Had a close call, was shot or hit but protective gear saved you

||| 1 Yes

||| 2 No

||| **CEXP15_dk** experienced had a nearby buddy shot or hit

```

||| Had a buddy shot or hit who was near you
||| 1 Yes
||| 2 No
|||
||| ENDIF
|||
||| IF any "Yes" answers to CEXP questions THEN
|||
||| CEXP16 how many of past deployments experience one of these
||| In how many of your past deployments did you experience one of these? [fill for cexp 16
question]
||| Real
|||
||| IF CEXP16 > DHIST1 THEN
|||
||| CEXP_error cexp error message
||| Your answer cannot be greater than the total number of deployments that you answered
previously.
||| Please go back and check your answer.
|||
||| ENDIF
|||
||| ENDIF
|||
||| ENDIF
|||
||| ENDIF

```

EXPTIME spent more or less time away than expected past 12 months
In the past 12 months, have you spent more or less time away from your permanent duty station than you expected?

- 1 Much less time than you expected
- 2 Less time than you expected
- 3 About what you expected
- 4 More time than you expected
- 5 Much more time than you expected

EXPFUT1 know when next expected to deploy
Do you know when you are next expected to deploy?

- 1 Yes – I know when I am next expected to deploy
- 2 No – I do not know when I am next expected to deploy
- 3 I am not expected to deploy

IF EXPFUT1 = Yes – I know when I am next expected to deploy THEN

|
|[Questions EXPFUT2_intro to EXPFUT2_year are displayed as a table]

| **EXPFUT2_intro** date next expected to deploy
 | When do you expect your next deployment will begin? Please specify the date.

| **EXPFUT2_month** month expected to deploy

| Month:

| 1 January

| 2 February

| 3 March

| 4 April

| 5 May

| 6 June

| 7 July

| 8 August

| 9 September

| 10 October

| 11 November

| 12 December

| **EXPFUT2_day** day expected to deploy

| Day:

| Range: 1..31

| **EXPFUT2_year** year expected to deploy

| Year:

| Range: 2011..2050

| **EXPFUT3** how many months will next deployment last

| How long do you expect your next deployment will last? In other words, how long will you be away

| from home. Please answer in number of months.

| Range: 0..60

| ENDIF

MILCOM1 being Service member inspires to do best job possible

Indicate the extent to which you agree or disagree with the following statements about the [military branch] Being a member of the [military branch] inspires you to do the best job you can.

1 Strongly agree

2 Agree

3 Neither agree nor disagree

4 Disagree

5 Strongly disagree

MILCOM2 willing to make sacrifices to help Service

You are willing to make sacrifices to help the [military branch]

- 1 Strongly agree
- 2 Agree
- 3 Neither agree nor disagree
- 4 Disagree
- 5 Strongly disagree

MILCOM3 glad part of Service

You are glad that you are part of the [military branch]

- 1 Strongly agree
- 2 Agree
- 3 Neither agree nor disagree
- 4 Disagree
- 5 Strongly disagree

MILCOM4 values are similar to the community

You like being part of the [military branch] because your values and those of the [military branch] are similar.

- 1 Strongly agree
- 2 Agree
- 3 Neither agree nor disagree
- 4 Disagree
- 5 Strongly disagree

MILCOM5 What Service stands for is important to you

What the [military branch] stands for is important to you.

- 1 Strongly disagree
- 2 Disagree
- 3 Neither agree nor disagree
- 4 Agree
- 5 Strongly agree

JOBSAT rate satisfaction of military way of life

Generally, on a day-to-day basis, how satisfied are you with the military way of life?

- 1 Very satisfied
- 2 Somewhat satisfied
- 3 Neutral
- 4 Somewhat dissatisfied
- 5 Very dissatisfied

CREADY1 how prepared for Manning level

How prepared do you believe your unit is to perform its mission on your next deployment with regard to manning level?

- 1 Very poorly prepared
- 2 Poorly prepared
- 3 Neither well nor poorly prepared

- 4 Well prepared
- 5 Very well prepared

CREADY2 how prepared for training

How prepared do you believe your unit is to perform its mission on your next deployment with regard to training?

- 1 Very poorly prepared
- 2 Poorly prepared
- 3 Neither well nor poorly prepared
- 4 Well prepared
- 5 Very well prepared

CREADY3 how prepared for Parts and Equipment

How prepared do you believe your unit is to perform its mission on your next deployment with regard to parts and equipment?

- 1 Very poorly prepared
- 2 Poorly prepared
- 3 Neither well nor poorly prepared
- 4 Well prepared
- 5 Very well prepared

CREADY4 How prepared are you physically to perform wartime job

How well prepared are you physically to perform your wartime job?

- 1 Very poorly prepared
- 2 Poorly prepared
- 3 Neither well nor poorly prepared
- 4 Well prepared
- 5 Very well prepared

CREADY5 How prepared with training are you physically to perform wartime job

Taking into account your own training and experience, overall how well prepared are you to perform your wartime job?

- 1 Very poorly prepared
- 2 Poorly prepared
- 3 Neither well nor poorly prepared
- 4 Well prepared
- 5 Very well prepared

IF language = CAWI (self-administered web interview) THEN

|
| [Questions FREADY_intro to MREADY2 are displayed as a table]

|
| **FREADY_intro** prepared for deployments intro
| Have you and/or your spouse taken the following steps to prepare for upcoming deployments?
|

| **FREADY1** ensured family has money for living expenses
 | Have you ensured the family would have money for rent, food, and living expenses (for
 | example, set up
 | an allotment, joint accounts).

- | 1 Yes
- | 2 No

| **FREADY2** Developed financial plan to meet emergencies
 | Have you developed a financial plan to meet emergencies.

- | 1 Yes
- | 2 No

| **FREADY3** more life insurance for self

| Have you gotten or increased life insurance for yourself.

- | 1 Yes
- | 2 No

| **MREADY1** Talked with your spouse about the deployment

| Have you talked with your spouse about the deployment and how it might affect your
 | marriage/marital relationship?

- | 1 Yes
- | 2 No

| **MREADY2** Talked with counselor about the deployment

| Have you talked to a professional (like a counselor or educator) about your marriage and
 | how it might
 | be affected by the deployment.

- | 1 Yes
- | 2 No

| ELSE

| [Questions FREADY_intro to MREADY2_dk are displayed as a table]

| **FREADY_intro** prepared for deployments intro

| Have you and/or your spouse taken the following steps to prepare for upcoming
 | deployments?

| **FREADY1_dk** ensured family has money for living expenses

| Have you ensured the family would have money for rent, food, and living expenses (for
 | example, set up
 | an allotment, joint accounts).

- | 1 Yes
- | 2 No

| **FREADY2_dk** Developed financial plan to meet emergencies

| Have you developed a financial plan to meet emergencies.

| 1 Yes

| 2 No

| **FREADY3_dk** more life insurance for self

| Have you gotten or increased life insurance for yourself.

| 1 Yes

| 2 No

| **MREADY1_dk** Talked with your spouse about the deployment

| Have you talked with your spouse about the deployment and how it might affect your marriage/marital

| relationship?

| 1 Yes

| 2 No

| **MREADY2_dk** Talked with counselor about the deployment

| Have you talked to a professional (like a counselor or educator) about your marriage and how it might

| be affected by the deployment.

| 1 Yes

| 2 No

| ENDIF

IF SC6a1 > OR SC6a2 > THEN

| **KREADY1** talked with a professional to prepare children for deployment

| Have you talked with a professional (like someone in children and youth services) about how to help

| your [children/child] with deployment?

| 1 Yes

| 2 No

| **KREADY2** prepared your children for deployment

| Have you sat down with your [children/child], either alone or with your spouse, and talked to

| them about what deployment means, and what to expect when a parent is deployed?

| 1 Yes

| 2 No

| **KREADY3** children been connected with military deployment support activities

| [Have any of your children/Has your child] been connected with military sponsored, school sponsored, or

| non-military deployment support activities (such as Guard youth programs or Operation Purple Camp?)

| 1 Yes
 | 2 No
 |
 | **KREADY4** children in contact with other military children in community
 | [Have any of your children/Has your child] been in contact with other military children in
 the community?
 | 1 Yes
 | 2 No
 | 3 Don't know
 |
 ENDIF

IF COMP2a = Army (active component) OR COMP2a= Navy (active component) OR
 COMP2a= Air Force (active
 component) OR COMP2a= Marine Corps (active component) THEN

|
 | **RETENA1** choose to stay on active duty
 | Assuming you have a choice to stay on active duty or not, how likely is it that you would
 choose to stay on active duty?
 | 1 Very unlikely
 | 2 Unlikely
 | 3 Neither likely nor unlikely
 | 4 Likely
 | 5 Very likely
 |
 | **RETENA2** choose to stay in military at least 20 yrs
 | If you could stay on active duty as long as you want, how likely is it that you would choose
 to serve
 | in the military for at least 20 years?
 | 1 Very unlikely
 | 2 Unlikely
 | 3 Neither likely nor unlikely
 | 4 Likely
 | 5 Very likely
 | 6 DNA. Does not apply, you have 20 or more years of service
 |
 | **RETENA3** expected total years of Service
 | What is your expected total years of Service? Please include years already served.
 | 1 5 years or less
 | 2 6-9 years
 | 3 10-19 years
 | 4 20 years or more
 |
 ENDIF

IF COMP2a = Army Guard OR COMP2a= Army Reserve OR COMP2a= Navy Reserve

OR COMP2a= Air National

Guard OR COMP2a= Air Reserve OR COMP2a= Marine Reserve THEN

|
 | **RETENC** your Guard or Reserve career plans
 | At the present time, which statement best describes your Guard/Reserve career plans?
 | 1 To leave the [military branch] before completing my present obligation
 | 2 To stay in the [military branch] and leave after I complete my present obligation
 | 3 To stay in the [military branch] beyond my present obligation, but not necessarily until I
 qualify for retirement
 | 4 To stay in the [military branch] until I qualify for retirement, but leave before my
 mandatory retirement age
 | 5 To stay in the [military branch] until I reach my mandatory retirement age
 | 6 Don't know/unsure of my plans
 |
 ENDIF

RETENS spouse think you should stay or leave military

Does your spouse think you should stay on or leave the military beyond your service
 obligation?

- 1 Strongly favors staying
- 2 Somewhat favors staying
- 3 Has no opinion one way or the other
- 4 Somewhat favors leaving
- 5 Strongly favors leaving

IF language = CAWI (self-administered web interview) THEN

|
 | [Questions support_intro to support9 are displayed as a table]
 |
 | **support_intro** sources of support intro
 | The next set of items include questions about the sources of support available to you and
 your family.
 | In general, how much are you able to draw on each the following sources for support when
 you needed it?
 |
 | **support1** sources of support own family
 | Your own family
 | 1 Very much
 | 2 Somewhat
 | 3 Not at all
 |
 | **support2** sources of support spouse family
 | Your spouse's family
 | 1 Very much
 | 2 Somewhat
 | 3 Not at all

| **support3** sources of support civilian friends

| Your civilian friends

| 1 Very much

| 2 Somewhat

| 3 Not at all

| IF EMP1 = Yes THEN

| **support4** sources of support civilian employer

| Your civilian employer outside the home

| 1 Very much

| 2 Somewhat

| 3 Not at all

| ENDIF

| **support5** sources of support people you serve with

| The people you serve with

| 1 Very much

| 2 Somewhat

| 3 Not at all

| **support6** sources of support Other military families

| Other military families

| 1 Very much

| 2 Somewhat

| 3 Not at all

| **support7** sources of support FRG leader

| An FRG leader or a unit or Service point of contact

| 1 Very much

| 2 Somewhat

| 3 Not at all

| **support8** sources of support military programs

| Support programs offered by the military

| 1 Very much

| 2 Somewhat

| 3 Not at all

| **support9** sources of support non military programs

| Non-military support programs offered in the community

| 1 Very much

| 2 Somewhat

| 3 Not at all

|
| ELSE

| [Questions support_intro to support9_dkrf are displayed as a table]

| **support_intro** sources of support intro

| The next set of items include questions about the sources of support available to you and your family.

| In general, how much are you able to draw on each the following sources for support when you needed it?

| **support1_dkrf** sources of support own family

| Your own family

| 1 Very much

| 2 Somewhat

| 3 Not at all

| **support2_dkrf** sources of support spouse family

| Your spouse's family

| 1 Very much

| 2 Somewhat

| 3 Not at all

| **support3_dkrf** sources of support civilian friends

| Your civilian friends

| 1 Very much

| 2 Somewhat

| 3 Not at all

| IF EMP1 = Yes THEN

| **support4_dkrf** sources of support civilian employer

| Your civilian employer outside the home

| 1 Very much

| 2 Somewhat

| 3 Not at all

| ENDIF

| **support5_dkrf** sources of support people you serve with

| The people you serve with

| 1 Very much

| 2 Somewhat

| 3 Not at all

| **support6_dkrf** sources of support Other military families

| Other military families

| 1 Very much

| 2 Somewhat

| 3 Not at all

| **support7_dkrf** sources of support FRG leader

| An FRG leader or a unit or Service point of contact

| 1 Very much

| 2 Somewhat

| 3 Not at all

| **support8_dkrf** sources of support military programs

| Support programs offered by the military

| 1 Very much

| 2 Somewhat

| 3 Not at all

| **support9_dkrf** sources of support non military programs

| Non-military support programs offered in the community

| 1 Very much

| 2 Somewhat

| 3 Not at all

| ENDIF

ISUP1 options available if you needed place to live next 12 months

During the next 12 months, if you and your spouse needed a place to live for a few weeks, are there enough people you can count on, not enough people, or no one you can count on?

1 Enough people you can count on

2 Not enough people

3 No one you can count on

ISUP2 options available if needed care next 12 months

During the next 12 months, if you and your spouse needed someone to take care of either of you if you got

sick, are there enough people you can count on, not enough people, or no one you can count on?

1 Enough people you can count on

2 Not enough people

3 No one you can count on

IF SC6 = Yes THEN

| **ISUP3** options available if needed child care next 12 months

| During the next 12 months, if you needed help with child care, are there enough people you can count

| on, not enough people, or no one you can count on?

| 1 Enough people you can count on

| 2 Not enough people

| 3 No one you can count on

|

ENDIF

ISUP4 options available if needed emergency loan next 12 months

During the next 12 months, if you needed someone to loan you money in an emergency, are there enough

people you can count on, not enough people, or no one you can count on?

1 Enough people you can count on

2 Not enough people

3 No one you can count on

ESUP have someone to listen to your problems

If you needed someone to listen to your problems if you were feeling low, are there enough people you can

count on, not enough people, no one you can count on?

1 Enough people you can count on

2 Not enough people

3 No one you can count on

FSOC family socialize with other military families

Do members of your immediate family socialize or communicate regularly with other military families in your unit?

1 Yes

2 No

USEM1 USEM1 aware of military sponsored programs

Military-sponsored family support programs offer services to military personnel and their families,

particularly during deployment. Such services include, for example, Military OneSource, and [fill for

USEM1 question based on service type] Are you aware of any of these military-sponsored programs?

1 Yes

2 No

IF USEM1 = Yes THEN

|

| **USEM2** participated in military sponsored programs

| Have you or members of your immediate family ever participated in or used such a program?

| 1 Yes

| 2 No

| IF USEM2 = Yes THEN

| | [Questions USEM3 to USEM3_other are displayed as a table]

| | **USEM3** participated in which military sponsored programs

| | Which ones?

| | 1 Military OneSource

| | 2 Support from unit members or chain of command

| | 3 Support from Rear detachment/unit members that did not deploy with the rest of the unit

| | 4 Legal counseling provided by the military

| | 5 Financial counseling provided by the military

| | 6 Financial emergency assistance provided by the military

| | 7 Complementary child care provided by the military

| | 8 Children and Youth Services

| | 9 Relief/aid society

| | 10 Military chaplain

| | 11 Other, specify:

| | **USEM3_other** other military sponsored programs

| | String

| | IF 12 IN USEM3 AND USEM3_other = EMPTY THEN

| | | **error_otherSpecify** error other specify

| | | You selected "other" but did not specify an answer. Please go back and check your answer.

| | ENDIF

| | **USEM4** last time you used one of these services

| | How recently was the last time you used one of these services?

| | 1 Today

| | 2 This week

| | 3 This month

| | 4 Within the past 4 months

| | 5 Within the past year

| ENDIF

| **USEM5** received support from nonmilitary sources

| Have you or members of your immediate family ever received support from any of the following non-military sources?

| 1 Child care offered in the community

| 2 Child or youth programs (for example, after-school programs, recreation programs, etc)

| 3 Family services provided by faith-based organization, church, etc

| 4 Financial counseling provided in community


```

| 5 Legal counseling provided in the community
| 6 Support group for spouses, not provided by the military
| 7 None
|
| IF None IN USEM5 AND CARDINAL(USEM5)> Child care offered in the community
THEN
|| error_none error none and answer
|| You selected an answer and also "None." Please go back and change your answer.
| ENDIF
|
ENDIF

```

[Questions AGE_intro to birthyear are displayed as a table]

AGE_intro AGE intro

For this last set of questions, we would like to get some basic information about you. What is your date of birth?

birthmonth month of birth

Month:

- 1 January
- 2 February
- 3 March
- 4 April
- 5 May
- 6 June
- 7 July
- 8 August
- 9 September
- 10 October
- 11 November
- 12 December

birthday day of birth

Day:

Range: 1..31

birthyear year of birth

Year:

Range: 1900..1993

```

IF birthmonth = RESPONSE AND birthday = RESPONSE AND birthyear = RESPONSE
THEN

```

```

|
| AGE2 confirm calculated age
| So just to confirm, on your last birthday, you turned [calculated age ] years old? If this is

```

not

| correct, please use the “< < Back” button on the screen below the answer choices to go back and

| change your answer. Please do not use the browser’s “back” button.

| 1 Age Correct

| 2 Age Incorrect (Please go back and re-enter correct DOB)

|

ENDIF

RACE1 what is your race

Are you Spanish, Hispanic, or Latino/Latina?

1 No, not Spanish/Hispanic/Latino(a)

2 Yes, Mexican, Mexican-American, Chicano

3 Yes, Puerto Rican

4 Yes, Cuban

5 Yes, other Spanish/Hispanic/Latino(a)

[Questions RACE2 to RACE2_other are displayed as a table]

RACE2 what is your race not hispanic

What is your race?

1 White

2 Black or African American

3 American Indian or Alaska Native

4 Asian (for example, Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese)

5 Native Hawaiian or other Pacific Islander (for example, Samoan, Guamanian, or Chamorro), or

6 Some OTHER race

RACE2_other what is your other race not listed

String

IF Some OTHER race in RACE2 AND RACE2_other = EMPTY THEN

| **error_otherSpecify** error other specify

| You selected “other” but did not specify an answer. Please go back and check your answer.

ENDIF

IMM born a citizen of the United States

Were you born a citizen of the United States?

1 Yes

2 No

EDU1 highest level of school you completed

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

1 12 years or less of school (no diploma)

2 High school graduate—high school diploma or equivalent (GED)

- 3 Some college credit, but less than 1 year
- 4 1 or more years of college, no degree
- 5 Associate's degree (includes AA, AS)
- 6 Vocational/technical diploma (for example, trade school, certification)
- 7 Bachelor's degree (includes BA, AB, BS)
- 8 Master's, doctoral, or professional school degree (includes MA, MS, MEng, MBA, MEd, EdD, MDE, PhD, MD, JD, DVM)

EDU2 currently enrolled in school
Are you currently enrolled in school?

- 1 Yes
- 2 No

IF EDU2 = Yes THEN

```

|
| [Questions EDU3 to EDU3_other are displayed as a table]
|
| EDU3 type of school enrolled in
| What type of school are you enrolled in? It does not matter if it is traditional or online. Is it
| a....
| 1 High school
| 2 Vocational school
| 3 2-year college
| 4 Undergraduate program at 4-year college or university
| 5 Post-bachelor's degree program leading to a master's, doctoral, or professional degree, or
| 6 Some other type of school:
|
| EDU3_other other type of school enrolled in
| String
|
| IF EDU3 = Some other type of school: AND EDU3_other = EMPTY THEN
| | error_otherSpecify error other specify
| | You selected "other" but did not specify an answer. Please go back and check your answer.
| ENDIF
|
ENDIF

```

exit_END_SCRIPT exit question

That's the end of the main part of our interview. In about 4 months, we would like to have you complete a much shorter web survey, so we are asking all couples for some information to help us stay in contact

contact_confirmNameAddress confirm name and address

First we would like to confirm your name and address so that we can mail you a gift card for your

family's participation in the baseline survey. Is that okay?

1 Yes

2 No

IF contact_confirmNameAddress = Yes THEN

| [Questions contact_firstName to contact_otherNames are displayed as a table]

| **contact_firstName** R spouse first name

| We have your name as [smname] Can I record your full name here? Any other names you go by?

| **contact_middleName** R middle name

| **contact_lastName** R last name

| **contact_otherNames** R other names or alias

| String

| [Questions contact_streetAddress1 to contact_zip are displayed as a table]

| What is your mailing address?

| **contact_streetAddress1** R mailing street address

| **contact_streetAddress2** R mailing street address 2

| **contact_city** R city mailing address

| **contact_state** R state mailing address

| **contact_country** R country mailing address

| **contact_zip** R zip code mailing address

| String

| IF contact_streetAddress1_4mo = EMPTY OR contact_streetAddress2_4mo = EMPTY

| OR contact_city_4mo =

| EMPTY OR contact_state_4mo = EMPTY OR contact_country_4mo = EMPTY OR

| contact_zip_4mo = EMPTY THEN

|| **contact_mail4months** mailing address same in 4 months

|| Do you expect your mailing address in four months to be the same as your current mailing address?

|| 1 Yes

|| 2 No

|| IF contact_mail4months = No THEN

||| [Questions contact_streetAddress1_4mo to contact_zip_4mo are displayed as a table]

||| What will your new mailing address be in 4 months?

||| **contact_streetAddress1_4mo** R mailing address 1 in 4 months

||| **contact_streetAddress2_4mo** R mailing address 2 in 4 months

||| **contact_city_4mo** R city in 4 months

```

| | contact_state_4mo R state in 4 months
| | contact_country_4mo R country in 4 months
| | contact_zip_4mo R zip code in 4 months
| | String
| |
| | ENDIF
| |
| | ENDIF
| |
| contact_landline home landline telephone number
| What is your correct home landline telephone number, including area code? [PLEASE
| ENTER
| 000-000-0000 IF NO LANDLINE PHONE] |__|__|__| (Area Code) |__|__|__| -
| |__|__|__|__|
| String
|
| contact_haveCellphone have cell phone
| Do you have a separate cell phone number?
| 1 Yes
| 2 No
|
| IF contact_haveCellphone = Yes THEN
| |
| | contact_cellphone cell phone number
| | What is your correct cell number, including area code? [PLEASE ENTER 000-000-0000
| IF NO CELL
| | PHONE] |__|__|__| (Area Code) |__|__|__| - |__|__|__|__|
| | String
| |
| | ENDIF
| |
| contact_haveEmail have email account
| In the future, we plan to contact you by e-mail to share information about the study and to
| invite you
| to participate in future surveys over a secure web server. Since your survey responses are
| private, we
| would like to send these messages to an account that only you have access to. You also will
| have the
| option to participate in the follow up surveys by phone if you choose or if you believe that
| would
| offer you more privacy. Do you have a preferred e-mail account?
| 1 Yes
| 2 No
| 3 Do not contact me by email. Prefer to do surveys on the phone.
|
| IF contact_haveEmail = Yes THEN

```

```

| |
| | contact_email email account
| | What is this e-mail address? _____@_____ (END SHOULD BE .com,
| | .edu, .gov, .net .org)
| | String
| |
| | contact_emailAccess email account access
| | Does anyone else besides you have the password or access to this email account?
| | 1 Yes
| | 2 No
| |
| | IF contact_emailAccess = Yes THEN
| | |
| | | contact_emailAccessWho who has email account access
| | | Can you tell us who else can access the account?
| | | 1 Spouse
| | | 2 Children
| | | 3 Other family members
| | | 4 Friends
| | | 5 Employers
| | | 6 Others
| | |
| | | ENDIF
| | |
| | | ENDIF
| |
| | IF ( contact_haveCellphone = Yes ) AND ( contact_landline = RESPONSE AND contact_
| | landline !=
| | "000-000-0000") THEN
| | |
| | | contact_prefer preferred contact phone
| | | Do you prefer that we contact you by landline phone or cell phone?
| | | 1 Landline
| | | 2 Cell Phone
| | | 3 Do not contact me by phone.
| | |
| | | ENDIF
| | |
| | | ENDIF
| |
| | ENDIF

```

exit_MILITARY_ONE_SOURCE MILITARY ONE SOURCE EXIT

MILITARY ONE SOURCE We would like to offer you the phone number for Military OneSource. Military OneSource is a free 24 hour service that is available 7 days a week to provide a full range of services, across the deployment cycle, to military personnel and their families, at no cost. Military OneSource Phone Numbers: Stateside: CONUS: 1-800-342-9647 Overseas: *OCONUS Universal Free Phone: 800-3429-6477 Collect from Overseas:

OCONUS Collect: 484-530-5908 En Español llame al: 1-877-888-0727 TTY/TDD: 1-800-346-9188 Korea DSN: 550-ARMY (2769)szq Military OneSource Website: <http://www.militaryonesource.com> As a precaution, we also give out the national suicide hotline number to all the people we interview. It is 1-800-273-TALK (8255). Thank you for the time that you took and your willingness to share your experiences. You have been very helpful. In about 4 months you will hear from us again to arrange the next web survey. There will be a lot fewer questions and the whole thing should take less time.

contact_INPUT anything else to add

Do you have anything else you want to add or share about your experience participating?

Open

IF language = CATI (phone interview) THEN

| **OBS_preparation** preparation before obs

| Thank you for completing your version of the survey. Please allow me a moment to see if another

| member of your household qualifies for the survey.

| [Questions OBS_intro to OBS6 are displayed as a table]

| **OBS_intro** intro obs

| [IWER: DO NOT READ THIS QUESTION OUT LOUD - ANSWER IT YOURSELF.]

| **OBS1** rate respondent understanding

| HOW WOULD YOU RATE THE RESPONDENT'S UNDERSTANDING OF THE INTERVIEW?

| 1 POOR

| 2 FAIR

| 3 GOOD

| 4 EXCELLENT

| **OBS2** rate respondent understanding

| FROM YOUR VIEWPOINT, DID THE RESPONDENT HAVE TO MODIFY ANY ANSWERS BECAUSE

| SOMEONE ELSE WAS NEARBY OR WITHIN EARSHOT?

| 1 YES

| 2 NO

| **OBS3** rate respondent cooperation

| HOW COOPERATIVE WAS THE RESPONDENT?

| 1 VERY

| 2 MODERATELY

| 3 SLIGHTLY

| 4 NOT AT ALL

|
| **OBS4** respondent not truthful
| WERE THERE TIMES DURING THE INTERVIEW WHEN IT SEEMED TO YOU
| THAT THE RESPONDENT
| WAS NOT ANSWERING TRUTHFULLY?

| 1 YES

| 2 NO

|
| **OBS6** rate overall quality
| HOW WOULD YOU RATE THE OVERALL QUALITY OF THE INTERVIEW?

| 1 POOR

| 2 FAIR

| 3 GOOD

| 4 EXCELLENT

|
| ENDIF

Baseline Spouse Survey

This appendix includes the baseline script for the spouse instrument. The exact CATI and web programming code is included below, along with specific interviewer instructions for coding responses.

Deployment Life Study Spouse Baseline

IF language = CAWI (self-administered web interview) THEN *ask screener and consent first.*
If CATI, this section is skipped.

| **consent_intro** consent intro

| Hello, [SPOUSE name], we sent your spouse an email recently, inviting your family to take part in our study of how deployment affects military families. We hope to interview service members, their spouses, and their children to find out more about their experiences throughout the deployment cycle.

| **consent_Q1** received letter or email describing study

| Did you receive a letter/email from us describing the project?

| 1 Yes

| 2 No

| IF consent_Q1 = No THEN

|| **consent_Q1a** did not receive letter describing study

|| We recognize that the tempo of deployments can place great demands on service members. For many, the military

|| experience affects not just them personally but their entire family. To understand these experiences, we are conducting a

|| landmark study that follows military families throughout the deployment cycle, and your family has been randomly

|| selected to participate. If you complete this baseline interview, we will send you a \$50 Visa gift card. If there is also a

| | qualifying child who participates, we will send that child an additional gift card of \$25.

| |

| ENDIF

| **consent_Q2** service member already participating

| Your spouse has already agreed to participate and completed the first internet survey, and now we are asking you if you

| will agree to participate also. As a military service member, the Department of Defense restricts us from offering your

| spouse compensation for participation, however, we can provide your family a \$50 gift card if you complete the survey

| too. I will now provide you with a description of the study. After completing the initial Internet survey, there will be a

| series of surveys, one about every 4 months over the next 3 years. If your family remains in the study we will send your

| family a \$100 gift card during the second year and a \$150 gift card in the third year after the final survey is completed.

| We expect this first survey to take between 45 and 90 minutes and the later surveys to be much shorter and only take

| about 20 to 30 minutes.

| **consent_Q2b** more information about study

| Here is more information about the study: Your family's participation is completely confidential; only a select number of

| people at RAND will know whether you have agreed or refused to participate. The military supplied us with contact

| information but no one in the service knows if your family has been randomly selected or whether you agree or decline

| to participate. If you do agree to participate you can refuse to answer any questions at any time and you can also refuse to

| continue with the study without penalty. The Internet surveys in our study will include personal questions about how

| your life is affected throughout a deployment cycle. Again, we want to emphasize that you are free to refuse any question

| or stop your participation at any time and all of your answers remain confidential. There are only two situations when we

| may report something you have told us to the appropriate authorities: first, if you tell us about an ongoing situation about

| the abuse of a child or older person, and second, if you tell us that you intend to hurt yourself or someone else. You

| do not have to tell us about either of these things, but if you do, we may take any action, including notifying the

| appropriate authorities in order to prevent harm to you or to others.

| **consent_Q4_spouse** spouse consent

| May I have your consent to be part of our study?

| 1 Yes, I consent to be part of this study

| 2 No, I do not consent

| IF consent_Q4_spouse = No, I do not consent THEN

| | **NotEnrolledMessage** family not enrolled spouse refused

| | Thank you for your time. Your family will not be enrolled in the study.

| ENDIF

ENDIF

IF (consent_Q4_spouse = Yes, I consent to be part of this study) OR (language = CATI
(phone interview)) THEN

| **Survey_Intro** Intro to survey

| This survey is for [spouse name] If that is not you, please click here to log out. After you log
out you will be able to

| log back in and take your survey. Here's how this will work: This survey includes questions
about you, your marriage,

| and your experiences as part of a military family. First, the survey asks some basic
information about you and your

| background. Then the survey moves on to questions about your marriage. Finally, the
survey asks about your life -

| the challenges you are facing and the places you go to get support. In order for the survey
results to be useful, it is

| very important that everyone gives us honest answers. Remember, all of your answers are
completely confidential

| and will never be shared with the military, or with any other members of your family. If you
come to any question you

| would rather not answer, you can just skip over it. It's also okay to stop or take a break while
taking the survey, you can

| close it down and come back to it at any time. Just open the original email (that was sent to
your spouse) and click the

| link again to return to where you left off. Okay, let's begin by asking a few questions about
you.

| **spgender** spouse GENDER

| What is your gender?

| 1 Male

| 2 Female

| **CMIL** currently serving in the military

| Are you currently serving in the military, including the National Guard or the Reserve?

| 1 Yes

| 2 No

```

|
| IF CMIL = No OR CMIL = NONRESPONSE THEN
|
| | FMIL EVER served in the military
| | Have you ever served in the military, including the National Guard, or the Reserve?
| | 1 Yes
| | 2 No
|
| ENDIF
|
| IF FMIL = Yes OR CMIL = Yes THEN
|
| | SCOMP1 which military branch served in
| | Which service and component [are/ were] you affiliated with?
| | 1 Army (active component)
| | 2 Army Guard
| | 3 Army Reserve
| | 4 Navy (active component)
| | 5 Navy Reserve
| | 6 Air Force (active component)
| | 7 Air National Guard
| | 8 Air Reserve
| | 9 Marine Corps (active component)
| | 10 Marine Reserve
| | 11 Coast Guard
|
| | IF SCOMP1 = EMPTY THEN
| | | Error_scomp1 error message scomp1
| | | You did not answer the previous question. This answer is very important to us. Please go
| | | back and select an answer.
| | ENDIF
|
| | IF CMIL = Yes AND SCOMP1 = Army Guard OR SCOMP1 = Army Reserve OR
| | SCOMP1 = Navy Reserve OR
| | SCOMP1 = Air National Guard OR SCOMP1 = Air Reserve OR SCOMP1 = Marine
| | Reserve THEN
| |
| | | SCOMP3 member of guard or reserve in full time active duty program
| | | Are you a member of the Guard or Reserve in a full-time active duty program, such as
| | | AGR, TAR, AR?
| | | 1 Yes
| | | 2 No
| |
| | ENDIF
|
| IF CMIL = Yes THEN

```

```

|||
||| SPYG What is current paygrade
||| What is your current paygrade?
||| 1 E-1
||| 2 E-2
||| 3 E-3
||| 4 E-4
||| 5 E-5
||| 6 E-6
||| 7 E-7
||| 8 E-8
||| 9 E-9
||| 10 W-1
||| 11 W-2
||| 12 W-3
||| 13 W-4
||| 14 W-5
||| 15 O-1
||| 16 O-2
||| 17 O-3
||| 18 O-4
||| 19 O-5
||| 20 O-6 or above
|||
||| ENDIF
|||
||| ENDIF
|||
||| IF CMIL = No OR ( FMIL = No and CMIL = No ) OR SCOMP1 = Army Guard OR
||| SCOMP1 = Army Reserve
||| OR SCOMP1 = Navy Reserve OR SCOMP1 = Air National Guard OR SCOMP1 = Air
||| Reserve OR SCOMP1 = Marine
||| Reserve THEN
|||
||| [Questions EMP1 to EMP1_other are displayed as a table]
|||
||| EMP1 your civilian work status last week
||| We'd like to ask you a few questions about work. Last week, which of the following
||| describes your work status? Were
||| you...
||| 1 Working full-time; that is, 35 or more hours per week in one or more jobs; including
||| self-employment
||| 2 Working part-time (less than 35 hours per week)
||| 3 Have a job, but OUT due to illness, leave, furlough, or strike
||| 4 Have seasonal work, but currently not working
||| 5 Unemployed and looking for work

```

```

|| 6 Unemployed but not looking for work
|| 7 Full-time homemaker
|| 8 Full-time student
|| 9 Part-time student
|| 10 Retired
|| 11 Disabled for work (such as SSI), or
|| 12 Something else (SPECIFY)
||
|| EMP1_other other work status last week
|| String
||
|| IF EMP1 = Working full-time; that is, 35 or more hours per week in one or more jobs;
including self-employment OR
|| EMP1 = Working part-time (less than 35 hours per week) OR EMP1 = Have a job, but
OUT due to illness, leave,
|| furlough, or strike OR EMP1 = Have seasonal work, but currently not working THEN
||
|| [Questions EMP2_years to EMP2_months are displayed as a table]
||
|| EMP2_years How many years at your current civilian job
|| How long have you been at your current civilian job?
|| Range: 0..50
||
|| EMP2_months How many months at your current civilian job
|| How long have you been at your current civilian job?
|| Range: 0..24
||
|| IF EMP2_months = EMPTY AND EMP2_years = EMPTY THEN
|| Error_answer error no answer hard check
|| You did not answer the previous question. Your answers are important to us. Please go
back and select an answer.
|| ENDIF
||
|| EMP3 hours work outside the home per week
|| On average, how many hours do you work outside the home per week?
|| Range: 0..99
||
|| EMP4 hours work fpay at home per week
|| On average, how many hours do you work for pay inside the home per week?
|| Range: 0..99
||
|| EMP5 how many weeks unemployed in last 12 months
|| Of the last 12 months, that is, since [The date one year ago], how many weeks, if any,
were you unemployed?
|| Range: 0..52
||

```

```

|| ENDIF
||
|| IF EMP1 > Have a job, but OUT due to illness, leave, furlough, or strike THEN
||
|| [Questions EMP6_years to EMP6_never are displayed as a table]
||
|| EMP6_years years in last job
|| How long were you in your last job?
|| Range: 0..50
||
|| EMP6_months months in last job
|| How long were you in your last job?
|| Range: 0..24
||
|| EMP6_never months in last job
|| How long were you in your last job?
|| 1 Have never worked
||
|| IF EMP6_months = EMPTY AND EMP6_years = EMPTY AND EMP6_never =
EMPTY THEN
|| | Error_answer error no answer hard check
|| | You did not answer the previous question. Your answers are important to us. Please go
back and select an answer.
|| | ENDIF
||
|| IF EMP6_never = EMPTY THEN
||
|| | EMP7 hours per week in last job
|| | In your last job, on average how many hours did you usually work per week?
|| | Range: 0..99
||
|| | EMP8 how many weeks unemployed last 12 months
|| | Of the last 12 months, that is, since [The date one year ago], how many weeks were you
unemployed?
|| | Range: 0..52
||
|| | ENDIF
||
|| ENDIF
||
|| ENDIF
||
|| IF language = CAWI (self-administered web interview) THEN
||
|| IF EMP1 = Working full-time; that is, 35 or more hours per week in one or more jobs;
including self-employment

```


|| OR EMP1 = Working part-time (less than 35 hours per week) AND EMP6_never =
EMPTY THEN

|||
|||

||| [Questions INC1_intro to INC3_other are displayed as a table]

||| **INC1_intro** financial situation in the past year

||| Now for some questions about your financial situation. For these questions, I would like to ask you about the past year.

||| In the last 12 months, did you personally as an individual receive money from any of the following sources?

|||
|||

||| **INC1** Earnings from a job

||| Earnings from a job

||| 1 Yes

||| 2 No

|||
|||

||| **INC2** Unemployment insurance or disability or social security

||| Unemployment insurance, workmen's compensation, disability, or social security benefits

||| 1 Yes

||| 2 No

|||
|||

||| **INC3** other sources please specify

||| Income from other sources that you personally as an individual received. Please Specify:

||| 1 Yes

||| 2 No

|||
|||

||| **INC3_other** please specify

||| If "yes" to other sources, please specify:

||| String

|||
|||

|| ELSE

|||
|||

||| [Questions INC1_intro to INC3_other are displayed as a table]

|||
|||

||| **INC1_intro** financial situation in the past year

||| Now for some questions about your financial situation. For these questions, I would like to ask you about the past year.

||| In the last 12 months, did you personally as an individual receive money from any of the following sources?

|||
|||

||| **INC2** Unemployment insurance or disability or social security

||| Unemployment insurance, workmen's compensation, disability, or social security benefits

||| 1 Yes

||| 2 No

|||
|||

||| **INC3** other sources please specify

Income from other sources that you personally as an individual received. Please Specify:

1 Yes

2 No

INC3_other please specify

If “yes” to other sources, please specify:

String

ENDIF

IF INC3 = Yes AND INC3_other = EMPTY THEN

error_INCOME_other error message INCOME

You checked “other income”, but did not specify the type. Please go back and change your answer.

ENDIF

IF INC3 = No AND INC3_other = RESPONSE THEN

error_other error other

Your answer contains an error. Please go back and check your answer.

ENDIF

IF INC1 = Yes OR INC2 = Yes OR INC3 = Yes THEN

INC5 range of all non-military income before deductions

Thinking about the past 12 months, in what range was the total of your own individual income from

all sources before taxes and other deductions?

1 Under \$5,000

2 \$5,000 to \$9,999

3 \$10,000 to \$14,999

4 \$15,000 to \$19,999

5 \$20,000 to \$24,999

6 \$25,000 to \$29,999

7 \$30,000 to \$34,999

8 \$35,000 to \$39,999

9 \$40,000 to \$44,999

10 \$45,000 to \$49,999

11 \$50,000 to \$54,999

12 \$55,000 to \$59,999

13 \$60,000 to \$64,999

14 \$65,000 to \$69,999

15 \$70,000 to \$74,999

16 \$75,000 to \$79,999

17 \$80,000 to \$84,999

18 \$85,000 to \$89,999

19 \$90,000 to \$94,999

```

|| | 20 $95,000 to $99,999
|| | 21 Greater than $100,000
|| |
|| | ENDIF
|| |
|| | [Questions INC6_intro to INC9_other are displayed as a table]
|| |
|| | INC6_intro income last 12 months
|| | Consider some other sources of income your entire household may have received in the
|| | past 12 months.
|| | In the last 12 months, did your household receive money from any of the following
|| | sources?
|| |
|| | INC6 Public assistance
|| | Public assistance, welfare, or food stamps
|| | 1 Yes
|| | 2 No
|| |
|| | INC7 Child support
|| | Child support
|| | 1 Yes
|| | 2 No
|| |
|| | INC8 Family and friends
|| | Family and friends who do not live with you (for example, cash gifts greater than $5000)
|| | 1 Yes
|| | 2 No
|| |
|| | INC9 other source of income
|| | Some other source of income your household may have received.
|| | 1 Yes
|| | 2 No
|| |
|| | INC9_other specify other source of income
|| | Some other source of income
|| | String
|| |
|| | IF INC9 = Yes AND INC9_other = EMPTY THEN
|| | | error_INCOME_other error message INCOME
|| | | You checked "other income", but did not specify the type. Please go back and change
|| | | your answer.
|| | | ENDIF
|| |
|| | IF INC9 = No AND INC9_other = RESPONSE THEN
|| | | Error_answer error no answer hard check
|| | | You did not answer the previous question. Your answers are important to us. Please go

```

back and select an answer.

|| ENDIF

||

| ELSE

||

|| IF EMP1 = Working full-time; that is, 35 or more hours per week in one or more jobs;
including self-employment

|| OR EMP1 = Working part-time (less than 35 hours per week) AND EMP6_never =
EMPTY THEN

|||

||| [Questions INC1_intro to INC3_other are displayed as a table]

|||

||| **INC1_intro** financial situation in the past year

||| Now for some questions about your financial situation. For these questions, I would like
to ask you

||| about the past year. In the last 12 months, did you personally as an individual receive
money from

||| any of the following sources?

|||

||| **INC1_dk** Earnings from a job

||| Earnings from a job

||| 1 Yes

||| 2 No

|||

||| **INC2_dk** Unemployment insurance or disability or social security

||| Unemployment insurance, workmen's compensation, disability, or social security benefits

||| 1 Yes

||| 2 No

|||

||| **INC3_dk** other sources please specify

||| Income from other sources that you personally as an individual received. Please specify:

||| 1 Yes

||| 2 No

|||

||| **INC3_other** please specify

||| If "yes" to other sources, please specify:

||| String

|||

| ELSE

||

|| [Questions INC1_intro to INC3_other are displayed as a table]

||

|| **INC1_intro** financial situation in the past year

|| Now for some questions about your financial situation. For these questions, I would like
to ask you

|| about the past year. In the last 12 months, did you personally as an individual receive

money from

any of the following sources?

INC2_dk Unemployment insurance or disability or social security
Unemployment insurance, workmen's compensation, disability, or social security benefits

1 Yes

2 No

INC3_dk other sources please specify

Income from other sources that you personally as an individual received. Please specify:

1 Yes

2 No

INC3_other please specify

If "yes" to other sources, please specify:

String

ENDIF

IF INC3_dk = Yes AND INC3_other = EMPTY THEN

error_INCOME_other error message INCOME

You checked "other income", but did not specify the type. Please go back and change your answer.

ENDIF

IF INC3_dk = No AND INC3_other = response THEN

error_other error other

Your answer contains an error. Please go back and check your answer.

ENDIF

IF INC1_dk = Yes OR INC2_dk = Yes OR INC3_dk = Yes THEN

INC5 range of all non-military income before deductions

Thinking about the past 12 months, in what range was the total of your own individual income from

all sources before taxes and other deductions?

1 Under \$5,000

2 \$5,000 to \$9,999

3 \$10,000 to \$14,999

4 \$15,000 to \$19,999

5 \$20,000 to \$24,999

6 \$25,000 to \$29,999

7 \$30,000 to \$34,999

8 \$35,000 to \$39,999

9 \$40,000 to \$44,999

10 \$45,000 to \$49,999

- || | 11 \$50,000 to \$54,999
- || | 12 \$55,000 to \$59,999
- || | 13 \$60,000 to \$64,999
- || | 14 \$65,000 to \$69,999
- || | 15 \$70,000 to \$74,999
- || | 16 \$75,000 to \$79,999
- || | 17 \$80,000 to \$84,999
- || | 18 \$85,000 to \$89,999
- || | 19 \$90,000 to \$94,999
- || | 20 \$95,000 to \$99,999
- || | 21 Greater than \$100,000

|| |
|| | ENDIF

|| | [Questions INC6_intro to INC9_other are displayed as a table]

|| | **INC6_intro** income last 12 months

|| | Consider some other sources of income your entire household may have received in the past 12 months.

|| | In the last 12 months, did your household receive money from any of the following sources?

|| | **INC6_dk** Public assistance

|| | Public assistance, welfare, or food stamps

|| | 1 Yes

|| | 2 No

|| | **INC7_dk** Child support

|| | Child support

|| | 1 Yes

|| | 2 No

|| | **INC8_dk** Family and friends

|| | Family and friends who do not live with you (for example, cash gifts greater than \$5000)

|| | 1 Yes

|| | 2 No

|| | **INC9_dk** other source of income

|| | Some other source of income your household may have received.

|| | 1 Yes

|| | 2 No

|| | **INC9_other** specify other source of income

|| | Some other source of income

|| | String

```

|| IF INC9_dk = Yes AND INC9_other = EMPTY THEN
|| | error_INCOME_other error message INCOME
|| | You checked “other income”, but did not specify the type. Please go back and change
your answer.
|| ENDIF
||
|| IF INC9_dk = No AND INC9_other = RESPONSE THEN
|| | Error_answer error no answer hard check
|| | You did not answer the previous question. Your answers are important to us. Please go
back and select an answer.
|| ENDIF
||
| ENDIF
|
| IF INC6 = Yes OR INC6_dk = Yes OR INC7 = Yes OR INC7_dk = Yes OR INC8 = Yes
OR INC8_dk = Yes OR
| INC9 = Yes OR INC9_dk = Yes THEN
| |
| | INC11 range of other income before deductions
| | Thinking about these other sources of income in your household, what was your total
household income from all
| | OTHER sources, excluding your personal income and your spouse’s personal income,
before taxes in the past
| | 12 months? This should be the total not including your individual income that we
discussed just now.
| | 1 Under $5,000
| | 2 $5,000 to $9,999
| | 3 $10,000 to $14,999
| | 4 $15,000 to $19,999
| | 5 $20,000 to $24,999
| | 6 $25,000 to $29,999
| | 7 $30,000 to $34,999
| | 8 $35,000 to $39,999
| | 9 $40,000 to $44,999
| | 10 $45,000 to $49,999
| | 11 $50,000 to $54,999
| | 12 $55,000 to $59,999
| | 13 $60,000 to $64,999
| | 14 $65,000 to $69,999
| | 15 $70,000 to $74,999
| | 16 $75,000 to $79,999
| | 17 $80,000 to $84,999
| | 18 $85,000 to $89,999
| | 19 $90,000 to $94,999
| | 20 $95,000 to $99,999
| | 21 Greater than $100,000

```

- ||
| ENDIF
|
- | **ECP1** financial condition past 4 months
| Sometimes people have trouble paying their bills or getting by month to month. Which of the following best describes
| the financial condition of you and your spouse over the past 4 months? Would you say you were...
- | 1 Very comfortable and secure
 - | 2 Able to make ends meet without much difficulty
 - | 3 Occasionally have some difficulty making ends meet
 - | 4 Tough to make ends meet but keeping our heads above water
 - | 5 In over our heads
- |
- | **ECP2** how much difficulty paying household bills past 4 months
| During the past 4 months, how much difficulty did your household have paying bills? Would you say...
- | 1 No difficulty at all
 - | 2 A little difficulty
 - | 3 Some difficulty
 - | 4 A great deal of difficulty
- |
- | **ECP3** end of the month past 4 months
| Thinking about the end of each month over the past 4 months, did your household usually end up with...
- | 1 More than enough money left over
 - | 2 Some money left over
 - | 3 Just enough to make ends meet
 - | 4 Not enough to make ends meet
- |
- | **ECP4** worry about finances past 4 months
| Again thinking of the last 4 months, how much have you been worried about your financial situation?
| Would you say you have been...
- | 1 Not at all worried
 - | 2 A little worried
 - | 3 Worried
 - | 4 Very worried
- |
- | **REL2** attend religious services past 4 months
| Here are a few questions about religion. In the past 4 months, how often did you attend religious
| services? Would you say...
- | 1 Never,
 - | 2 A few times or less in the past 4 months,
 - | 3 4-8 times **in the past 4 months,**


```

| 4 About every week, or,
| 5 More than once per week
|
| SPR1 religious or spiritual beliefs influence the way you live
| How much do your religious or spiritual beliefs influence the way you live?
| 1 Not at all
| 2 A little
| 3 Somewhat, or
| 4 Extremely
|
| SPR2 seek spiritual comfort when you have problems
| When you have problems or difficulties in your work, family, or personal life, how often do
you seek
| spiritual comfort?
| 1 Never
| 2 Rarely
| 3 Sometimes, or
| 4 Often
|
| [Questions REL1 to REL1_other are displayed as a table]
|
| REL1 what is your religion
| What religion, if any, do you most identify with?
| 1 Protestant
| 2 Roman Catholic/Catholic
| 3 Jewish
| 4 Mormon (include Church of Jesus Christ of Latter Day Saints)
| 5 Orthodox Church (Greek/Russian Orthodox)
| 6 Islam/Muslim
| 7 Other religion, please specify:
| 8 No religious affiliation / atheist / agnostic
|
| REL1_other other religion not listed
|
| String
|
| IF REL1 = Other religion, please specify: AND REL1_other = EMPTY THEN
| | error_REL1_other error message REL1
| | You checked "other religion", but did not specify. Please go back and check your answer.
| | ENDIF
|
| FOO1 parents married or living together when you were born
| Now we would like to ask you a few questions about the family that raised you. Were your
parents
| married to each other or living together as a couple when you were born?
| 1 Yes, they were married

```

```

| 2 Yes, they were living together as a couple, but they were not married
| 3 Yes, they were married, but not living together
| 4 No, they were neither married nor living together
|
| IF FOO1 = Yes, they were married OR FOO1= Yes, they were living together as a couple,
but they were
| not married OR FOO1= Yes, they were married, but not living together THEN
|
| | FOO2 parents married or living together when you were born
| | Did your parents ever permanently end their relationship?
| | 1 Yes, (by divorce, separation, or unspecified)
| | 2 Yes, because one of them died
| | 3 No
| |
| | IF FOO2 = Yes, (by divorce, separation, or unspecified) OR FOO2= Yes, because one of
them died THEN
| |
| | | FOO3 your age when parent relationship ended
| | | How old were you when that happened? (the end of your parents' relationship)
| | | Range: 0..99
| | |
| | | ENDIF
| |
| | ENDIF
|
| PMIL1 either of your parents in military
| Were either of your parents or guardians ever in the military, including the National Guard,
or the Reserve?
| 1 Yes
| 2 No
|
| IF PMIL1 = Yes THEN
|
| | PMIL2 parents in military while you were growing up or before born
| | Was either a parent or guardian in the military while you were growing up, only before
you were
| | born, or both before you were born and while you were growing up?
| | 1 Only while you were growing up
| | 2 Only before you were born
| | 3 Both before you were born AND while you were growing up
| |
| | ENDIF
|
| ACE1 parent or other adult in household swear at you
| The next set of questions asks about whether you have experienced specific challenges that
some people

```

| face when they are growing up. While you were growing up, during your first 18 years of life: Did a

| parent or other adult in the household regularly swear at you, insult you, put you down, or humiliate you?

| 1 Yes

| 2 No

| **ACE2** parent or other adult make you feel physically threatened

| (While you were growing up, during your first 18 years of life...) Did a parent or other adult in the

| household often act in a way that made you afraid that you might be physically hurt?

| 1 Yes

| 2 No

| **ACE3** not have enough food or shelter or protection

| (While you were growing up, during your first 18 years of life...) Did you often or very often feel that

| you didn't have enough to eat, had to wear dirty clothes, or had no one to protect you?

| 1 Yes

| 2 No

| **ACE4** live with anyone with drug or alcohol problem

| (While you were growing up, during your first 18 years of life...) Did you live with anyone who was a

| problem drinker or alcoholic or who used street drugs?

| 1 Yes

| 2 No

| **ACE5** live with someone who went to prison

| (While you were growing up, during your first 18 years of life...) Did someone you lived with go to prison?

| 1 Yes

| 2 No

| **DIST** miles to main duty station base from residence

| Now let's move on to a new topic. The next series of questions asks about your current housing and living situation.

| Approximately how many miles is it, one way, to your spouse's main duty base from your residence?

| Range: 0..999

| **MOVE1** times moved more than 50 miles since 2004

| How many times since 2004 have you moved your permanent residence further than 50 miles due to the military?

| 1 Zero times

| 2 One time
 | 3 Two times
 | 4 Three times
 | 5 Four or more times
 |
 | IF MOVE1 != Zero times AND MOVE1=RESPONSE THEN
 |
 | | [Questions MOVE2_years to MOVE2_months are displayed as a table]
 | |
 | | **MOVE2_years** years since last moved more than 50 miles
 | | How long has it been since you last moved your permanent residence more than 50 miles
 | | due to the military?
 | | Range: 0..50
 | |
 | | **MOVE2_months** months since last moved more than 50 miles
 | | How long has it been since you last moved your permanent residence more than 50 miles
 | | due to the military?
 | | Range: 0..24
 | |
 | | IF MOVE2_months = EMPTY AND MOVE2_years = EMPTY THEN
 | | | **error_other** error other
 | | | Your answer contains an error. Please go back and check your answer.
 | | ENDIF
 | |
 | ENDIF
 |
 | **MOVE3** planning on moving in the next month
 | Are you planning on moving in the next month?
 | 1 Yes
 | 2 No
 |
 | IF MOVE3 = Yes THEN
 |
 | | [Questions MOVE5 to MOVE5_other are displayed as a table]
 | |
 | | **MOVE5** why are you moving
 | | Which of the following best describes the reasons for your next move?
 | | 1 Permanent change of residence
 | | 2 Temporary move to be closer to family
 | | 3 Temporary move to be closer to base
 | | 4 Or some other reason, please specify:
 | |
 | | **MOVE5_other** other reason why are you moving
 | | String
 | |
 | | IF MOVE5 = Or some other reason, please specify: AND MOVE5_other = EMPTY

```

THEN
|| | error_other error other
|| | Your answer contains an error. Please go back and check your answer.
|| | ENDIF
|| |
|| | ENDIF
|| |
|| | HHR_intro Household intro
|| | Please answer a few questions about the people living in your household with you. This may
|| | take a few
|| | minutes, depending on the number of people in your household, but, like many of the
|| | questions in this
|| | survey, you will not be asked these questions again in the rest of this study.
|| |
|| | HHR1 how many people live with you
|| | Not including yourself or your spouse, how many other people are currently living with
|| | you? Please
|| | include people who sleep in this home at least half the time, for example 4 or more nights
|| | per week or
|| | two or more weeks per month. Also, please include adults and children.
|| | Range: 0..10
|| |
|| | LOOP FROM 1 TO [how many people live with you] DO
|| |
|| | IF cnt = 1 THEN
|| |
|| | IF ( SC6a1 > OR SC6a2 > ) THEN
|| |
|| | | HHR2_first_child start with focal child
|| | | Lets start with [cname]
|| | |
|| | | ELSE
|| | |
|| | | HHR2 hh member name
|| | | [fill for HHR2 wording]
|| | | String
|| | |
|| | | HHR3 gender
|| | | Is [hh member name] male or female?
|| | | 1 Male
|| | | 2 Female
|| | |
|| | | ENDIF
|| | |
|| | | ENDIF
|| | |
|| | | ENDIF
|| | |
|| | |

```

```

| | IF cnt > 1 AND HHR1 > 1 THEN
| | |
| | | IF ( cnt = 2 and ( SC6a1 > OR SC6a2 > )) THEN
| | | |
| | | | HHR2 hh member name
| | | | [fill for HHR2 wording]
| | | | String
| | | |
| | | ELSE
| | | |
| | | | HHR2 hh member name
| | | | [fill for HHR2 wording]
| | | | String
| | | |
| | | ENDIF
| | |
| | | HHR3 gender
| | | Is [hh member name] male or female?
| | | 1 Male
| | | 2 Female
| | |
| | | ENDIF
| | |
| | | HHR4 hh member age
| | | How old is [hh member name]?
| | | Range: 0..99
| | |
| | | HHR5 relationship to hh member
| | | What is [his her gender fill ] relationship to you?
| | | 1 Spouse
| | | 2 Parent OR Step-parent
| | | 3 Parent-in-law
| | | 4 Child (INCLUDING BIOLOGICAL, STEP, ADOPTED, AND FOSTER
CHILDREN)
| | | 5 Grandparent (OF EITHER SPOUSE)
| | | 6 Aunt/Uncle (OF EITHER SPOUSE)
| | | 7 Cousin (OF EITHER SPOUSE)
| | | 8 Niece/nephew (OF EITHER SPOUSE)
| | | 9 Grandchild (OF EITHER SPOUSE)
| | | 10 Other related adult (OF EITHER SPOUSE) (18+ years old)
| | | 11 Other related child (OF EITHER SPOUSE) (17 years old or younger)
| | | 12 Not-related adult (18+ years old)
| | | 13 Not-related child (17 years old or younger)
| | |
| | | ENDIF
| |

```

```

|| IF HHR5 = Child (INCLUDING BIOLOGICAL, STEP, ADOPTED, AND FOSTER
CHILDREN) OR ( cnt = 1 AND (
|| SC6a1 > OR SC6a2 > )) THEN

```

```

|| | [Questions HHR6[cnt] to HHR6_other[cnt] are displayed as a table]

```

```

|| | HHR6 how related to child

```

```

|| | How is this child related to you? Is this child...

```

```

|| | 1 Your biological child

```

```

|| | 2 Your adopted child

```

```

|| | 3 Your step-child

```

```

|| | 4 Your foster child, or

```

```

|| | 5 Related to you in some other way (specify: )

```

```

|| | HHR6_other other relation to child

```

```

|| | String

```

```

|| | IF HHR6 = Related to you in some other way (specify: ) AND HHR6_other =EMPTY
THEN

```

```

|| | | error_other error other

```

```

|| | | Your answer contains an error. Please go back and check your answer.

```

```

|| | ENDIF

```

```

|| | [Questions HHR7[cnt] to HHR7_other[cnt] are displayed as a table]

```

```

|| | HHR7 spouse relation to child

```

```

|| | How is this child related to your spouse? Is this child..

```

```

|| | 1 [His/Her] biological child

```

```

|| | 2 [His/Her] adopted child

```

```

|| | 3 [His/Her] step-child

```

```

|| | 4 [His/Her] foster child, or

```

```

|| | 5 Related to [him/her fill] in some other way (specify: )

```

```

|| | HHR7_other other child relation to spouse

```

```

|| | String

```

```

|| | IF HHR7 = Related to [him/her] in some other way (specify: ) AND
HHR7_other =EMPTY THEN

```

```

|| | | error_other error other

```

```

|| | | Your answer contains an error. Please go back and check your answer.

```

```

|| | ENDIF

```

```

||| IF HHR4 > 4 AND HHR4 < 19 THEN
|||
||| HHR8 grade child is in
||| What grade is [he/she] currently in?
||| 1 Nursery school/preschool
||| 2 Kindergarten
||| 3 1st grade
||| 4 2nd grade
||| 5 3rd grade
||| 6 4th grade
||| 7 5th grade
||| 8 6th grade
||| 9 7th grade
||| 10 8th grade
||| 11 9th grade
||| 12 10th grade
||| 13 11th grade
||| 14 12th grade
||| 15 Dropped out of high school and currently not enrolled
||| 16 High school grad/GED but not currently enrolled
||| 17 College or beyond
|||
||| IF HHR8 = RESPONSE AND ( HHR8 != Dropped out of high school and currently
not enrolled AND
||| HHR8 != High school grad/GED but not currently enrolled ) THEN
|||
||| HHR9 where does child attend school
||| Where does [hh member name] attend school?
||| 1 Public school off base
||| 2 Public school or DoD school on base
||| 3 A private day school that's religion-affiliated
||| 4 A private day school that's not religion-affiliated
||| 5 A private boarding school
||| 6 Home school, or
||| 7 Some other type of school?
|||
||| ENDIF
|||
||| ENDIF
|||
||| ENDIF
|||
||| HHR10 child have special needs
||| Does [hh member name] have special needs, like a chronic or long term health problem, a
handicap, a
||| learning disability, etc.?

```



```

|| 1 Yes
|| 2 No
||
|| IF HHR10 = Yes THEN
|| |
|| | IF HHR5 = Child (INCLUDING BIOLOGICAL, STEP, ADOPTED, AND FOSTER
CHILDREN) OR ( cnt = 1 AND (SC6a1 > OR SC6a2 > )) THEN
|| | |
|| | | SNC1 child eligible for special needs services
|| | | Has [hh member name] been found eligible for special needs services?
|| | | 1 Yes
|| | | 2 No
|| | |
|| | | SNC2 Individual Educ or Family Service Plan for child
|| | | Is there an Individual Education Plan or Individual Family Service Plan for this child?
|| | | 1 Yes
|| | | 2 No
|| | |
|| | | SNC3 child get help from special ed programs
|| | | Is [hh member name] getting help from any special education programs, or other
agencies that help children
|| | | with special needs? For example, is [he/ she] getting special help with using [his /her]
feet or legs, with talking
|| | | or communicating, or with behavior or emotions?
|| | | 1 Yes
|| | | 2 No
|| | |
|| | | ENDIF
|| | |
|| | | ENDIF
|| | |
|| | | ENDDO
|| |
|| | IF SC6 = Yes OR SC6a1 > OR SC6a2 > THEN
|| | |
|| | | PAG1 parenting is harder than I thought
|| | | Let's move onto some more specific questions about parenting. First I'm going to read
some
|| | | statements about being responsible for the care of a child in your home. Please tell me how
much
|| | | you agree or disagree with each statement. Being a parent is harder than I thought it
would be.
|| | | Do you . . .
|| | | 1 Strongly agree
|| | | 2 Somewhat agree
|| | | 3 Somewhat disagree

```

|| 4 Strongly disagree

||

|| **PAG2** parenting bring joy and satisfaction

|| (Please tell me how much you agree or disagree with this statement...) Being a parent is a source

|| of joy and satisfaction in my life. Do you...

|| 1 Strongly agree

|| 2 Somewhat agree

|| 3 Somewhat disagree

|| 4 Strongly disagree

||

|| **PAG3** feel trapped by parent responsibility

|| (Please tell me how much you agree or disagree with this statement...) I feel trapped by my responsibilities as a parent. Do you . . .

|| 1 Strongly agree

|| 2 Somewhat agree

|| 3 Somewhat disagree

|| 4 Strongly disagree

||

|| **PAG4** taking care of kids more work than pleasure

|| (Please tell me how much you agree or disagree with this statement...) I find that taking care of

|| my [fill for pag4] is much more work than pleasure. Do you...

|| 1 Strongly agree

|| 2 Somewhat agree

|| 3 Somewhat disagree

|| 4 Strongly disagree

||

|| **PAG5** rate parenting

|| (Please tell me how much you agree or disagree with this statement...) I think I am a good parent. Do you...

|| 1 Strongly agree

|| 2 Somewhat agree

|| 3 Somewhat disagree

|| 4 Strongly disagree

||

|| **PAG6** exhausted from raising a family

|| (Please tell me how much you agree or disagree with this statement...) I often feel tired, worn

|| out, or exhausted from raising a family. Do you . . .

|| 1 Strongly agree

|| 2 Somewhat agree

|| 3 Somewhat disagree

|| 4 Strongly disagree

FL_FE_sentences FL_FE sentences

FE section randomization FL_FE array: The following 6 questions are randomized:

1. There is a feeling of togetherness in our family. 2. Family members often put each other down. 3. Family members really help and support one another. 4. We fight a lot in our family. 5. We really get along well with each other. 6. Family members sometimes get so angry they throw things.

|| **FES_intro** family environment intro

|| Here are a few statements about the way things are in your family, and when we say your family, we

|| mean the family that lives under one roof in your home. For each statement, please indicate whether

|| it describes your family well, somewhat, or not at all.

||

|| **FES_r1** randomized FES questions 1

|| (Tell me if this statement describes your family well, somewhat, or not at all.) [randomized FES sentences]

|| 1 Describes my family well

|| 2 Describes my family somewhat

|| 3 Does not describe my family at all

||

|| **FES_r2** randomized FES questions 2

|| (Tell me if this statement describes your family well, somewhat, or not at all.) [randomized FES sentences]

|| 1 Describes my family well

|| 2 Describes my family somewhat

|| 3 Does not describe my family at all

||

|| **FES_r3** randomized FES questions 3

|| (Tell me if this statement describes your family well, somewhat, or not at all.) [randomized FES sentences]

|| 1 Describes my family well

|| 2 Describes my family somewhat

|| 3 Does not describe my family at all

||

|| **FES_r4** randomized FES questions 4

|| (Tell me if this statement describes your family well, somewhat, or not at all.) [randomized FES sentences]

|| 1 Describes my family well

|| 2 Describes my family somewhat

|| 3 Does not describe my family at all

||

|| **FES_r5** randomized FES questions 5

|| (Tell me if this statement describes your family well, somewhat, or not at all.) [randomized FES sentences]

|| 1 Describes my family well

|| 2 Describes my family somewhat
 || 3 Does not describe my family at all
 ||
 || **FES_r6** randomized FES questions 6
 || (Tell me if this statement describes your family well, somewhat, or not at all.) [randomized
 FES sentences]
 || 1 Describes my family well
 || 2 Describes my family somewhat
 || 3 Does not describe my family at all
 ||
 || IF language = CAWI (self-administered web interview) THEN
 ||
 || [Questions PQOL_intro to PQOL4 are displayed as a table]
 ||
 || **PQOL_intro** behavior problems in the past 4 weeks
 || Here are a few questions about [child name] . In the past four weeks, how often has
 [child name]
 || had a problem with the following behaviors. Please say if it's been none of the time, a
 little
 || of the time, some of the time, most of the time or all of the time.
 ||
 || **PQOL1** problems with family activities
 || Had problems participating in family activities
 || 1 None of the time
 || 2 A little of the time
 || 3 Some of the time
 || 4 Most of the time
 || 5 All of the time
 ||
 || **PQOL2** problems with home responsibilities
 || Had problems keeping up with responsibilities at home
 || 1 None of the time
 || 2 A little of the time
 || 3 Some of the time
 || 4 Most of the time
 || 5 All of the time
 ||
 || **PQOL3** problems with family members
 || Had problems getting along with family members
 || 1 None of the time
 || 2 A little of the time
 || 3 Some of the time
 || 4 Most of the time
 || 5 All of the time
 ||
 || **PQOL4** problems talking about feelings

```

|| | Had problems talking about feelings or personal problems with a parent
|| | 1 None of the time
|| | 2 A little of the time
|| | 3 Some of the time
|| | 4 Most of the time
|| | 5 All of the time
|| |
|| | ELSE
|| |
|| | IF children_over_2 > AND children_under_18 > THEN
|| |
|| | [Questions PQOL_intro to PQOL4_dk are displayed as a table]
|| |
|| | PQOL_intro behavior problems in the past 4 weeks
|| | Here are a few questions about [child name] . In the past four weeks, how often has
|| | [child name]
|| | had a problem with the following behaviors. Please say if it's been none of the time, a
|| | little of the time, some of the time, most of the time or all of the time.
|| |
|| | PQOL1_dk problems with family activities
|| | Had problems participating in family activities
|| | 1 None of the time
|| | 2 A little of the time
|| | 3 Some of the time
|| | 4 Most of the time
|| | 5 All of the time
|| |
|| | PQOL2_dk problems with home responsibilities
|| | Had problems keeping up with responsibilities at home
|| | 1 None of the time
|| | 2 A little of the time
|| | 3 Some of the time
|| | 4 Most of the time
|| | 5 All of the time
|| |
|| | PQOL3_dk problems with family members
|| | Had problems getting along with family members
|| | 1 None of the time
|| | 2 A little of the time
|| | 3 Some of the time
|| | 4 Most of the time
|| | 5 All of the time
|| |
|| | PQOL4_dk problems talking about feelings
|| | Had problems talking about feelings or personal problems with a parent
|| | 1 None of the time

```

```

||| 2 A little of the time
||| 3 Some of the time
||| 4 Most of the time
||| 5 All of the time
|||
||| ENDIF
|||
||| ENDIF
|||
||| IF children_over_2 > AND children_under_18 > THEN
|||
||| EASP child education aspirations
||| How far do you expect [child name] to go in [his/her] education? What is the
||| highest level of school you think [he/she] will complete?
||| 1 8th grade or less
||| 2 some high school (grades 9 – 12)
||| 3 graduate from high school
||| 4 some college
||| 5 graduate from a two year college (with an associate's degree, AA)
||| 6 receive a vocational degree or certificate
||| 7 graduate from a four year college (with a bachelor's degree, BA)
||| 8 get a master's degree (MA; teaching, social work, business)
||| 9 get an advanced graduate degree (like a PhD, MD, or a law degree)
|||
||| ENDIF
|||
||| IF children_over_4 > AND children_under_18 > THEN
|||
||| FALL1 types of grades student usually receives
||| Overall across all subjects that [child name] takes in school, does [he/she] get: Mostly A's,
||| Mostly B's, Mostly Cs, Mostly Ds, or does the School not give grades?
||| 1 Mostly A's
||| 2 Mostly B's
||| 3 Mostly C's
||| 4 Mostly D's, or
||| 5 School does not give grades
|||
||| FALL2 rate student school work in past yr
||| In general, would you describe [child name] 's work at school in the last year as: excellent,
above
||| average, average, below average, or failing?
||| 1 Excellent
||| 2 Above average
||| 3 Average
||| 4 Below average, or
||| 5 Failing

```

```

|||
||| FALL3 repeated any grades since kindergarten
||| Since starting kindergarten, has [child name] repeated any grades?
||| 1 Yes
||| 2 No
|||
||| IF FALL3 = Yes THEN
|||
||| FALL4 grades repeated since kindergarten
||| Which grades did [child name] repeat?
||| 1 Kindergarten
||| 2 1st grade
||| 3 2nd grade
||| 4 3rd grade
||| 5 4th grade
||| 6 5th grade
||| 7 6th grade
||| 8 7th grade
||| 9 8th grade
||| 10 9th grade
||| 11 10th grade
||| 12 11th grade
||| 13 12th grade
|||
||| ENDIF
|||
||| CALL1 times teacher contacted about behavior problems
||| In the last four months, how many times have any of [child name]'s teachers or [his/she]
school contacted you or any
||| adult in your household about: Any behavior problems [child name] is having in school?
||| Range: 0..99
|||
||| CALL2 problems with school work
||| (In the last four months, how many times have any of [child name]'s teachers or [his/her ]
school contacted you or any
||| adult in your household about...) Any problems [child name] is having with school work?
||| Range: 0..99
|||
||| CALL3 problems showing improvement in school
||| (In the last four months, how many times have any of [child name]'s teachers or [his/her]
school contacted you or any
||| adult in your household about...) [child name] doing particularly well or showing
improvement in school or some
||| activity in school?
||| Range: 0..99
|||

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```

| | DISC1 Had an out of school suspension
| | Has [child name] ever... Had an out-of-school suspension?
| | 1 Yes
| | 2 No
| |
| | DISC2 Had an in school suspension
| | Has [child name] ever... Had an in-school suspension, not counting detentions?
| | 1 Yes
| | 2 No
| |
| | DISC3 ever been expelled
| | Has [child name] ever... Been expelled?
| | 1 Yes
| | 2 No
| |
| | DISC4 ever required to change schools
| | Has [child name] ever... Been required to change schools because of behavior problems?
| | 1 Yes
| | 2 No
| |
| | ENDIF
| |
| | IF children_over_2 > AND children_under_18 > THEN
| |
| | IF language = CAWI (self-administered web interview) THEN
| |
| | [Questions SCARED_intro to SCARED5 are displayed as a table]
| |
| | SCARED_intro header for child mental health section
| | Thinking about the last 4 months, how often do you see the following behaviors in
| | [child name]?
| | Please tell me if [he/she] does these things most of the time, sometimes, or not at all.
| |
| | SCARED1 child gets frightened for no reason
| | [child name] gets really frightened for no reason at all.
| | 1 Most of the time
| | 2 Sometimes, or
| | 3 Not at all
| |
| | SCARED2 Child afraid to be alone in house
| | [child name] is afraid to be alone in the house.
| | 1 Most of the time
| | 2 Sometimes, or
| | 3 Not at all
| |
| | SCARED3 people say child worries too much

```


||| People tell [child name] that [he/she] worries too much.
 ||| 1 Most of the time
 ||| 2 Sometimes, or
 ||| 3 Not at all
 |||
 ||| **SCARED4** child is scared to go to school
 ||| [child name] is scared to go to school or other places.
 ||| 1 Most of the time
 ||| 2 Sometimes, or
 ||| 3 Not at all
 |||
 ||| **SCARED5** child is shy
 ||| [child name] is shy.
 ||| 1 Most of the time
 ||| 2 Sometimes, or
 ||| 3 Not at all
 |||
 ||| ELSE
 |||
 ||| [Questions SCARED_intro to SCARED5_dk are displayed as a table]
 |||
 ||| **SCARED_intro** header for child mental health section
 ||| Thinking about the last 4 months, how often do you see the following behaviors in
 [child name]?
 ||| Please tell me if [he/she] does these things most of the time, sometimes, or
 ||| not at all.
 |||
 ||| **SCARED1_dk** child gets frightened for no reason
 ||| [child name] gets really frightened for no reason at all.
 ||| 1 Most of the time
 ||| 2 Sometimes, or
 ||| 3 Not at all
 |||
 ||| **SCARED2_dk** Child afraid to be alone in house
 ||| [child name] is afraid to be alone in the house.
 ||| 1 Most of the time
 ||| 2 Sometimes, or
 ||| 3 Not at all
 |||
 ||| **SCARED3_dk** people say child worries too much
 ||| People tell [child name] that [he/she] worries too much.
 ||| 1 Most of the time
 ||| 2 Sometimes, or
 ||| 3 Not at all
 |||
 ||| **SCARED4_dk** child is scared to go to school

```

| | | [child name] is scared to go to school or other places.
| | | 1 Most of the time
| | | 2 Sometimes, or
| | | 3 Not at all
| | |
| | | SCARED5_dk child is shy
| | | [child name] is shy.
| | | 1 Most of the time
| | | 2 Sometimes, or
| | | 3 Not at all
| | |
| | | ENDIF
| | |
| | | PHQA1 child felt sad in past 4 months
| | | The next questions are about your child's mood. We are still thinking about how things
| | | have been in the past 4
| | | months...Has [he/she] felt sad, upset, irritable, or depressed on more than half of the days
| | | in the past 4 months?
| | | 1 Yes
| | | 2 No
| | |
| | | PHQA2 child felt too depressed to do normal activities
| | | In the past 4 months, has [he/she] felt so sad, upset, irritable, or depressed that it has
| | | often been hard
| | | for [him/her] to do [his/ her] work, take care of things at home or get along with other
| | | people?
| | | 1 Yes
| | | 2 No
| | |
| | | IF PHQA1 = Yes OR PHQA2 = Yes THEN
| | |
| | | PHQA3 child felt happy past 4 months
| | | In the past 4 months, has there been a time when [he/she] did not feel sad, upset,
| | | irritable, or depressed for two
| | | months in a row or longer? That is, has there been a time in the past 4 months when
| | | [he/she] felt happy most of
| | | the time for at least two months in a row?
| | | 1 Yes
| | | 2 No
| | |
| | | ENDIF

```

FL_SDQ_sentences FL_SDQ sentences

SDQ section randomization. FL_SDQ - The following 25 questions are randomized.

1. Is considerate of other people's feelings
2. is restless, overactive, cannot stay still for long
3. often complains of headaches, stomach-aches, or sickness
4. shares readily with others, for

example...[toys, treats, pencils/CDs, games, food] 5. often loses [his her child gender fill] temper 6. would rather be solitary, prefers to be alone 7. is generally well behaved, usually does what adults request 8. has many worries or often seems worried 9. is helpful if someone is hurt, upset, or feeling ill 10. is constantly fidgeting or squirming 11. has at least one good friend 12. often fights with others or bullies them 13. is often unhappy, depressed or tearful 14. is generally liked by [his/her] peers 15. is easily distracted, concentration wanders 16. is nervous (or clingy) in new situations, easily loses confidence 17. has been kind to younger children 18. often lies or cheats 19. has been picked on or bullied by peers 20. often offers to help others, such as parents, teachers, peers 21. thinks things through before acting 22. steals from home, school or elsewhere 23. gets along better with adults than with peers 24. has many fears, easily scared 25. has good attention span: sees chores or homework through to the end

```

||| IF language = CAWI (self-administered web interview) THEN
|||
||| [Questions SDQ_intro to SDQ_r9 are displayed as a table]
|||
||| SDQ_intro intro to emotional problems
||| Still thinking about [child name], please indicate whether the following statements are
not true,
||| somewhat true, or definitely true for [child name] in the last 4 months. [child name]...
|||
||| SDQ_r1 randomized SDQ questions
||| [randomized SDQ sentences]
||| 1 Not true
||| 2 Somewhat true
||| 3 Definitely true
|||
||| SDQ_r2 randomized SDQ questions
||| [randomized SDQ sentences]
||| 1 Not true
||| 2 Somewhat true
||| 3 Definitely true
|||
||| SDQ_r3 randomized SDQ questions
||| [randomized SDQ sentences]
||| 1 Not true
||| 2 Somewhat true
||| 3 Definitely true
|||
||| SDQ_r4 randomized SDQ questions
||| [randomized SDQ sentences]
||| 1 Not true
||| 2 Somewhat true
||| 3 Definitely true
|||

```

||| **SDQ_r5** randomized SDQ questions

||| [randomized SDQ sentences]

||| 1 Not true

||| 2 Somewhat true

||| 3 Definitely true

||| **SDQ_r6** randomized SDQ questions

||| [randomized SDQ sentences]

||| 1 Not true

||| 2 Somewhat true

||| 3 Definitely true

||| **SDQ_r7** randomized SDQ questions

||| [randomized SDQ sentences]

||| 1 Not true

||| 2 Somewhat true

||| 3 Definitely true

||| **SDQ_r8** randomized SDQ questions

||| [randomized SDQ sentences]

||| 1 Not true

||| 2 Somewhat true

||| 3 Definitely true

||| **SDQ_r9** randomized SDQ questions

||| [randomized SDQ sentences]

||| 1 Not true

||| 2 Somewhat true

||| 3 Definitely true

||| [Questions SDQ_intro to SDQ_r17 are displayed as a table]

||| **SDQ_intro** intro to emotional problems

||| Still thinking about [child name], please indicate whether the following statements are not true,

||| somewhat true, or definitely true for [child name] in the last 4 months. [child name]...

||| **SDQ_r10** randomized SDQ questions

||| [randomized SDQ sentences]

||| 1 Not true

||| 2 Somewhat true

||| 3 Definitely true

||| **SDQ_r11** randomized SDQ questions

||| [randomized SDQ sentences]

||| 1 Not true

||| 2 Somewhat true
 ||| 3 Definitely true
 ||| **SDQ_r12** randomized SDQ questions
 ||| [randomized SDQ sentences]
 ||| 1 Not true
 ||| 2 Somewhat true
 ||| 3 Definitely true
 ||| **SDQ_r13** randomized SDQ questions
 ||| [randomized SDQ sentences]
 ||| 1 Not true
 ||| 2 Somewhat true
 ||| 3 Definitely true
 ||| **SDQ_r14** randomized SDQ questions
 ||| [randomized SDQ sentences]
 ||| 1 Not true
 ||| 2 Somewhat true
 ||| 3 Definitely true
 ||| **SDQ_r15** randomized SDQ questions
 ||| [randomized SDQ sentences]
 ||| 1 Not true
 ||| 2 Somewhat true
 ||| 3 Definitely true
 ||| **SDQ_r16** randomized SDQ questions
 ||| [randomized SDQ sentences]
 ||| 1 Not true
 ||| 2 Somewhat true
 ||| 3 Definitely true
 ||| **SDQ_r17** randomized SDQ questions
 ||| [randomized SDQ sentences]
 ||| 1 Not true
 ||| 2 Somewhat true
 ||| 3 Definitely true
 ||| [Questions SDQ_intro to SDQ_r25 are displayed as a table]
 ||| **SDQ_intro** intro to emotional problems
 ||| Still thinking about [child name], please indicate whether the following statements are
 not true,
 ||| somewhat true, or definitely true for [child name] in the last 4 months. [child name]...

- ||| **SDQ_r18** randomized SDQ questions
||| [randomized SDQ sentences]
||| 1 Not true
||| 2 Somewhat true
||| 3 Definitely true
- ||| **SDQ_r19** randomized SDQ questions
||| [randomized SDQ sentences]
||| 1 Not true
||| 2 Somewhat true
||| 3 Definitely true
- ||| **SDQ_r20** randomized SDQ questions
||| [randomized SDQ sentences]
||| 1 Not true
||| 2 Somewhat true
||| 3 Definitely true
- ||| **SDQ_r21** randomized SDQ questions
||| [randomized SDQ sentences]
||| 1 Not true
||| 2 Somewhat true
||| 3 Definitely true
- ||| **SDQ_r22** randomized SDQ questions
||| [randomized SDQ sentences]
||| 1 Not true
||| 2 Somewhat true
||| 3 Definitely true
- ||| **SDQ_r23** randomized SDQ questions
||| [randomized SDQ sentences]
||| 1 Not true
||| 2 Somewhat true
||| 3 Definitely true
- ||| **SDQ_r24** randomized SDQ questions
||| [randomized SDQ sentences]
||| 1 Not true
||| 2 Somewhat true
||| 3 Definitely true
- ||| **SDQ_r25** randomized SDQ questions
||| [randomized SDQ sentences]
||| 1 Not true
||| 2 Somewhat true

```

||| 3 Definitely true
|||
||| ELSE
|||
||| [Questions SDQ_intro to SDQ_r9_dk are displayed as a table]
|||
||| SDQ_intro intro to emotional problems
||| Still thinking about [child name], please indicate whether the following statements are
not true,
||| somewhat true, or definitely true for [child name] in the last 4 months. [child name]....
|||
||| SDQ_r1_dk randomized SDQ questions
||| [randomized SDQ sentences]
||| 1 Not true
||| 2 Somewhat true
||| 3 Definitely true
|||
||| SDQ_r2_dk randomized SDQ questions
||| [randomized SDQ sentences]
||| 1 Not true
||| 2 Somewhat true
||| 3 Definitely true
|||
||| SDQ_r3_dk randomized SDQ questions
||| [randomized SDQ sentences]
||| 1 Not true
||| 2 Somewhat true
||| 3 Definitely true
|||
||| SDQ_r4_dk randomized SDQ questions
||| [randomized SDQ sentences]
||| 1 Not true
||| 2 Somewhat true
||| 3 Definitely true
|||
||| SDQ_r5_dk randomized SDQ questions
||| [randomized SDQ sentences]
||| 1 Not true
||| 2 Somewhat true
||| 3 Definitely true
|||
||| SDQ_r6_dk randomized SDQ questions
||| [randomized SDQ sentences]
||| 1 Not true
||| 2 Somewhat true
||| 3 Definitely true

```

|||
 ||| **SDQ_r7_dk** randomized SDQ questions
 ||| [randomized SDQ sentences]
 ||| 1 Not true
 ||| 2 Somewhat true
 ||| 3 Definitely true
 |||
 ||| **SDQ_r8_dk** randomized SDQ questions
 ||| [randomized SDQ sentences]
 ||| 1 Not true
 ||| 2 Somewhat true
 ||| 3 Definitely true
 |||
 ||| **SDQ_r9_dk** randomized SDQ questions
 ||| [randomized SDQ sentences]
 ||| 1 Not true
 ||| 2 Somewhat true
 ||| 3 Definitely true
 |||
 ||| [Questions SDQ_intro to SDQ_r17_dk are displayed as a table]
 |||
 ||| **SDQ_intro** intro to emotional problems
 ||| Still thinking about [child name], please indicate whether the following statements are
 not true,
 ||| somewhat true, or definitely true for [child name] in the last 4 months. [child name]...
 |||
 ||| **SDQ_r10_dk** randomized SDQ questions
 ||| [randomized SDQ sentences]
 ||| 1 Not true
 ||| 2 Somewhat true
 ||| 3 Definitely true
 |||
 ||| **SDQ_r11_dk** randomized SDQ questions
 ||| [randomized SDQ sentences]
 ||| 1 Not true
 ||| 2 Somewhat true
 ||| 3 Definitely true
 |||
 ||| **SDQ_r12_dk** randomized SDQ questions
 ||| [randomized SDQ sentences]
 ||| 1 Not true
 ||| 2 Somewhat true
 ||| 3 Definitely true
 |||
 ||| **SDQ_r13_dk** randomized SDQ questions
 ||| [randomized SDQ sentences]

||| 1 Not true
 ||| 2 Somewhat true
 ||| 3 Definitely true
 |||
 ||| **SDQ_r14_dk** randomized SDQ questions
 ||| [randomized SDQ sentences]
 ||| 1 Not true
 ||| 2 Somewhat true
 ||| 3 Definitely true
 |||
 ||| **SDQ_r15_dk** randomized SDQ questions
 ||| [randomized SDQ sentences]
 ||| 1 Not true
 ||| 2 Somewhat true
 ||| 3 Definitely true
 |||
 ||| **SDQ_r16_dk** randomized SDQ questions
 ||| [randomized SDQ sentences]
 ||| 1 Not true
 ||| 2 Somewhat true
 ||| 3 Definitely true
 |||
 ||| **SDQ_r17_dk** randomized SDQ questions
 ||| [randomized SDQ sentences]
 ||| 1 Not true
 ||| 2 Somewhat true
 ||| 3 Definitely true
 |||
 ||| [Questions SDQ_intro to SDQ_r25_dk are displayed as a table]
 |||
 ||| **SDQ_intro** intro to emotional problems
 ||| Still thinking about [child name], please indicate whether the following statements are
 not true,
 ||| somewhat true, or definitely true for [child name] in the last 4 months. [child name]...
 |||
 ||| **SDQ_r18_dk** randomized SDQ questions
 ||| [randomized SDQ sentences]
 ||| 1 Not true
 ||| 2 Somewhat true
 ||| 3 Definitely true
 |||
 ||| **SDQ_r19_dk** randomized SDQ questions
 ||| [randomized SDQ sentences]
 ||| 1 Not true
 ||| 2 Somewhat true
 ||| 3 Definitely true

```

|||
||| SDQ_r20_dk randomized SDQ questions
||| [randomized SDQ sentences]
||| 1 Not true
||| 2 Somewhat true
||| 3 Definitely true
|||
||| SDQ_r21_dk randomized SDQ questions
||| [randomized SDQ sentences]
||| 1 Not true
||| 2 Somewhat true
||| 3 Definitely true
|||
||| SDQ_r22_dk randomized SDQ questions
||| [randomized SDQ sentences]
||| 1 Not true
||| 2 Somewhat true
||| 3 Definitely true
|||
||| SDQ_r23_dk randomized SDQ questions
||| [randomized SDQ sentences]
||| 1 Not true
||| 2 Somewhat true
||| 3 Definitely true
|||
||| SDQ_r24_dk randomized SDQ questions
||| [randomized SDQ sentences]
||| 1 Not true
||| 2 Somewhat true
||| 3 Definitely true
|||
||| SDQ_r25_dk randomized SDQ questions
||| [randomized SDQ sentences]
||| 1 Not true
||| 2 Somewhat true
||| 3 Definitely true
|||
||| ENDIF
|||
||| CMHS1 child take meds for mental health
||| Does [child name] regularly take any prescribed medication for a mental health problem?
||| 1 Yes
||| 2 No
|||
||| CMHS2 need counseling past 4 months
||| In the past four months, did [child name] have a need for counseling or therapy for

```

personal or emotional
 ||| problems from a mental health specialist like a psychiatrist, psychologist, social worker or family counselor
 ||| in a mental health clinic or office or at school? (Regardless of whether child received any)
 ||| 1 Yes
 ||| 2 No
 |||
 ||| IF CMHS2 = Yes OR CMHS2 = NONRESPONSE THEN
 |||
 ||| **CMHS3** receive professional counseling past 4 months
 ||| In the past four months, did [child name] actually receive counseling or therapy for personal or
 ||| emotional problems from a mental health specialist like a psychiatrist, psychologist, social
 ||| worker or family counselor in a mental health clinic or office?
 ||| 1 Yes
 ||| 2 No
 |||
 ||| **CMHS4** receive non professional counseling past 4 months
 ||| In past four months, did [child name] receive counseling or therapy for personal or
 ||| emotional
 ||| problems from a chaplain, another adult family member, or an adult friend?
 ||| 1 Yes
 ||| 2 No
 |||
 ||| ENDIF
 |||
 ||| **PHQA4** little interest in things past 2 wks
 ||| Now please shift to thinking just about the last two weeks. Has [he/she] had any of the
 ||| following
 ||| problems during the past two weeks? Little interest or pleasure in doing things?
 ||| 1 Yes
 ||| 2 No
 |||
 ||| IF PHQA4 = Yes THEN
 |||
 ||| **PHQA4a** frequency of problem past 2 wks
 ||| Did [he/she] have that problem only a few days, or nearly every day in the past two
 ||| weeks?
 ||| 1 Few days
 ||| 2 Nearly every day
 |||
 ||| ENDIF
 |||
 ||| **PHQA5** feeling depressed past 2 wks
 ||| (Has [child name] had the following problem during the past two weeks?) Feeling down,

depressed,

||| irritable or hopeless?

||| 1 Yes

||| 2 No

|||

||| IF PHQA5 = Yes THEN

|||

||| **PHQA5a** frequency of problem past 2 wks

||| Did [he/she] have that problem only a few days, or nearly every day in the past two weeks?

||| 1 Few days

||| 2 Nearly every day

|||

||| ENDIF

|||

||| **PHQA6** trouble sleeping past 2 wks

||| (Has [child name] had the following problem during the past two weeks?) Trouble falling asleep,

||| staying asleep, or sleeping too much?

||| 1 Yes

||| 2 No

|||

||| IF PHQA6 = Yes THEN

|||

||| **PHQA6a** frequency of problem past 2 wks

||| Did [he/she] have that problem only a few days, or nearly every day in the past two weeks?

||| 1 Few days

||| 2 Nearly every day

|||

||| ENDIF

|||

||| **PHQA7** feel tired past 2 wks

||| (Has [child name] had the following problem during the past two weeks?) Feeling tired or having little energy?

||| 1 Yes

||| 2 No

|||

||| IF PHQA7 = Yes THEN

|||

||| **PHQA7a** frequency of problem past 2 wks

||| Did [he/she] have that problem only a few days, or nearly every day in the past two weeks?

||| 1 Few days

||| 2 Nearly every day

|||

```

||| ENDIF
|||
||| PHQA8 poor appetite past 2 wks
||| (Has [child name] had the following problem during the past two weeks?) Poor appetite,
weight loss, or overeating?
||| 1 Yes
||| 2 No
|||
||| IF PHQA8 = Yes THEN
|||
||| PHQA8a frequency of problem past 2 wks
||| Did [he/she] have that problem only a few days, or nearly every day in the past two
weeks?
||| 1 Few days
||| 2 Nearly every day
|||
||| ENDIF
|||
||| PHQA9 feel bad about self past 2 wks
||| (Has [child name] had the following problem during the past two weeks?) Feeling bad
about [himself/herself]
||| – or that [hes/he] has let [himself/herself] or your family down?
||| 1 Yes
||| 2 No
|||
||| IF PHQA9 = Yes THEN
|||
||| PHQA9a frequency of problem past 2 wks
||| Did [he/she] have that problem only a few days, or nearly every day in the past two
weeks?
||| 1 Few days
||| 2 Nearly every day
|||
||| ENDIF
|||
||| PHQA10 trouble concentrating past 2 wks
||| (Has [child name] had the following problem during the past two weeks?) Trouble
concentrating on
||| things like school, work, reading, or watching TV?
||| 1 Yes
||| 2 No
|||
||| IF PHQA10 = Yes THEN
|||
||| PHQA10a frequency of problem past 2 wks
||| Did [he/she] have that problem only a few days, or nearly every day in the past two

```

weeks?

||| 1 Few days

||| 2 Nearly every day

|||

||| ENDIF

|||

||| **PHQA11** behavior changes past 2 wks

||| (Has [child name] had the following problem during the past two weeks?) Moving or speaking so

||| slowly that other people could have noticed? Or the opposite – being so fidgety or restless that

||| [he/she] was moving around a lot more than usual?

||| 1 Yes

||| 2 No

|||

||| IF PHQA11 = Yes THEN

|||

||| **PHQA11a** frequency of problem past 2 wks

||| Did [he/she] have that problem only a few days, or nearly every day in the past two weeks?

||| 1 Few days

||| 2 Nearly every day

|||

||| ENDIF

|||

||| **PHQA12** problems with depression past 2 wks

||| In the past two weeks, did [child name] have problems with feeling sad, upset, irritable, or depressed that made

||| it difficult or hard for [him/her] to do [his /her] work, take care of things at home, or get along with other people?

||| Would you say...

||| 1 Not at all

||| 2 A little bit

||| 3 Somewhat

||| 4 Very much

||| 5 Extremely

|||

||| ENDIF

|||

| ENDIF

|

| **AGEMAR** how old were you when married current spouse

| Let's move on to some questions about marriage and pregnancy. How old were you when you married your

| current spouse?

| Range: 16..60

| [Questions LMAR_years to LMAR_months are displayed as a table]

| **LMAR_years** years married to spouse

| How long have you and your spouse been married?

| Range: 0..99

| **LMAR_months** months married to spouse

| How long have you and your spouse been married?

| Range: 0..24

| IF LMAR_years = EMPTY AND LMAR_months = EMPTY THEN

| | **Error_answer** error no answer hard check

| | You did not answer the previous question. Your answers are important to us. Please go back and select an answer.

| ENDIF

| IF CMIL = Yes THEN

| | **ORD3** in service when married or after

| | Were you already in the service when you got married, or did you join after you got married?

| | 1 Already in the service when married

| | 2 Joined after

| IF ORD3 = Joined after THEN

| | [Questions ord4_years to ord4_months are displayed as a table]

| | **ORD4_years** years married before joining military

| | How long were you married before you joined the military?

| | Range: 0..50

| | **ORD4_months** how many months married before joining military

| | How long were you married before you joined the military?

| | Range: 0..24

| | IF ORD4_months = EMPTY AND ORD4_years = EMPTY THEN

| | | **error_other** error other

| | | Your answer contains an error. Please go back and check your answer.

| | ENDIF

| | IF ORD4_count > LMAR_count THEN

| | | **error_TIME_MARRIED** error answered greater time married than in LMAR

| | | You cannot answer a longer time married before joining the military than the total time you said

```

||| you have been married. Please go back and check your answer.
||| ENDIF
|||
||| ENDIF
|||
||| ENDIF
|||
| PMH1 is this first marriage or married before
| Is this your first marriage, or have you been married before?
| 1 First marriage
| 2 Been married before
|
| IF PMH1 = Been married before THEN
|
| | PMH2 how many times married before
| | How many times have you been married before your current marriage?
| | Range: 1..10
|
| | PMH3 how did last marriage end
| | How did your last marriage end? For example, was it due to an annulment, divorce, or
| | death?
| | 1 Annulment
| | 2 Divorce
| | 3 Death of spouse
|
| ENDIF
|
| PREG1 are you or is wife currently pregnant
| [Is your wife/Are you] currently pregnant?
| 1 Yes
| 2 No
|
| IF PREG1 = Yes THEN
|
| | PREG2 was pregnancy planned
| | Was this pregnancy planned?
| | 1 Yes
| | 2 No
| | 3 Neither planned or unplanned (for example, "We just let it happen.")
|
| | [Questions PREG3_month to PREG3_day are displayed as a table]
|
| | PREG3_month pregnancy month due
| | When [fill for preg ] due?
| | 1 January
| | 2 February

```


| | 3 March

| | 4 April

| | 5 May

| | 6 June

| | 7 July

| | 8 August

| | 9 September

| | 10 October

| | 11 November

| | 12 December

| |

| | **PREG3_day** pregnancy day of due date

| | Range: 1..31

| |

| | ENDIF

| |

| | IF PREG1 = No OR PREG1=NONRESPONSE THEN

| |

| | **PREG4** trying to get pregnant

| | Are you trying to get pregnant currently?

| | 1 Yes

| | 2 No

| | 3 We are not trying, but are not taking precautions either

| |

| | ENDIF

| |

| | **PANAS_INTRO** intro to panas section

| | Here are some questions about how you have been feeling about your relationship with

| | [SERVICE MEMBER

| | name] lately. Remember, all of your answers are strictly private. Your spouse will not see them.

| | Let's start by asking about how you feel when you communicate with [SERVICE MEMBER name]. Please look

| | at the following series of emotions, and for each one, indicate whether, after talking with [SERVICE

| | MEMBER name], you feel that way never, rarely, sometimes, often, or all the time.

FL_PA_sentences FL_PA sentences

PANAS section randomization FL_PA - The following 8 questions are randomized. 1. After talking with [SERVICE MEMBER name], how often do you feel happy? 2. After talking with [SERVICE MEMBER name], how often do you feel supported? 3. After talking with [SERVICE MEMBER name], how often do you feel upset? 4. After talking with [SERVICE MEMBER name], how often do you feel depressed? 5. After talking with [SERVICE MEMBER name], how often do you feel comforted? 6. After talking with [SERVICE MEMBER name], how often do you feel worried? 7. After talking with [SERVICE MEMBER name], how often do you feel frustrated? 8. After talking with [SERVICE

MEMBER name], how often do you feel encouraged?

| **PA_r1** randomized PANAS questions 1

| [randomized PANAS sentences]

- | 1 Never
- | 2 Rarely
- | 3 Sometimes
- | 4 Often
- | 5 All the time

| **PA_r2** randomized PANAS questions 2

| [randomized PANAS sentences]

- | 1 Never
- | 2 Rarely
- | 3 Sometimes
- | 4 Often
- | 5 All the time

| **PA_r3** randomized PANAS questions 3

| [randomized PANAS sentences]

- | 1 Never
- | 2 Rarely
- | 3 Sometimes
- | 4 Often
- | 5 All the time

| **PA_r4** randomized PANAS questions 4

| [randomized PANAS sentences]

- | 1 Never
- | 2 Rarely
- | 3 Sometimes
- | 4 Often
- | 5 All the time

| **PA_r5** randomized PANAS questions 5

| [randomized PANAS sentences]

- | 1 Never
- | 2 Rarely
- | 3 Sometimes
- | 4 Often
- | 5 All the time

| **PA_r6** randomize PANAS questions 6

| [randomized PANAS sentences]

- | 1 Never
- | 2 Rarely

- | 3 Sometimes
- | 4 Often
- | 5 All the time

| **PA_r7** randomize PANAS questions 7
| [randomized PANAS sentences]

- | 1 Never
- | 2 Rarely
- | 3 Sometimes
- | 4 Often
- | 5 All the time

| **PA_r8** randomize PANAS questions 8
| [randomized PANAS sentences]

- | 1 Never
- | 2 Rarely
- | 3 Sometimes
- | 4 Often
- | 5 All the time

| **MSAT1** how satisfied with amount of time spent with spouse
| Thinking about the relationship lately, how satisfied are you with the amount of time you spend

- | together?
- | 1 Very satisfied
- | 2 Somewhat satisfied
- | 3 Neutral
- | 4 Somewhat dissatisfied
- | 5 Very dissatisfied

| **MSAT2** trust servicemember spouse
| How much do you trust [SERVICE MEMBER name]?

- | 1 Completely
- | 2 Somewhat
- | 3 Not that much
- | 4 Not at all

| **MSAT3** share thoughts and feelings with spouse
| How much do you feel you can share your personal thoughts and feelings with [SERVICE MEMBER name]?

- | 1 Completely
- | 2 Somewhat
- | 3 Not that much
- | 4 Not at all

| **MSAT4** How satisfied with sexual relations in your marriage

| How satisfied are you with your sexual relations in your marriage?

- | 1 Very satisfied
- | 2 Somewhat satisfied
- | 3 Neutral
- | 4 Somewhat dissatisfied
- | 5 Very dissatisfied

| **MSAT5** servicemember spouse supports you in bad times

| How satisfied are you with the way [SERVICE MEMBER name] supports you in difficult times?

- | 1 Very satisfied
- | 2 Somewhat satisfied
- | 3 Neutral
- | 4 Somewhat dissatisfied
- | 5 Very dissatisfied

| **MSAT6** How satisfied with how spouse contributes to household chores

| How satisfied are you with the way [SERVICE MEMBER name] contributes to household chores when [he/she fill for smgender] is not away for military reasons?

- | 1 Very satisfied
- | 2 Somewhat satisfied
- | 3 Neutral
- | 4 Somewhat dissatisfied
- | 5 Very dissatisfied

| **MSAT7** servicemember spouse understands hopes and dreams

| How well does [SERVICE MEMBER name] understand your hopes and dreams?

- | 1 Very well
- | 2 Pretty well
- | 3 Not that well
- | 4 Not at all

| **MSAT8** how well do you and spouse communicate in arguments

| How well do the two of you communicate when you have disagreements?

- | 1 Very well
- | 2 Pretty well
- | 3 Not that well
- | 4 Not at all

| **MSAT9** overall satisfaction with marriage

| Taking things altogether, how satisfied are you with your marriage right now? Would you say you are

| very satisfied, somewhat satisfied, neutral, somewhat dissatisfied, or very dissatisfied?

- | 1 Very satisfied
- | 2 Somewhat satisfied

| 3 Neutral
 | 4 Somewhat dissatisfied
 | 5 Very dissatisfied
 |
 | IF language = CAWI (self-administered web interview) THEN
 |
 | [Questions Conflict_tactics_intro to CTS1b are displayed as a table]
 |
 | **Conflict_tactics_intro** intro to conflict tactics section
 | Sometimes even happy couples get into arguments, and sometimes those arguments can
 | get pretty intense. Here are
 | a few questions about how you and [SERVICE MEMBER name] behave during an
 | argument. Please remember we
 | will not share your answers with your spouse. For each of the following behaviors, please
 | think of the past four
 | months, that is, since ([fill for the date four months ago]) and indicate if this behavior has
 | happened zero
 | times in the last four months, has happened once, or has happened two or more times in
 | the last four months.
 |
 | **CTS1** insulted or swore at partner
 | You insulted or swore at your partner.
 | 1 Zero times
 | 2 Once
 | 3 Two or more times
 |
 | **CTS1b** partner insulted or swore at you
 | Your partner insulted or swore at you.
 | 1 Zero times
 | 2 Once
 | 3 Two or more times
 |
 | [Questions CTS_general_intro to CTS2b are displayed as a table]
 |
 | **CTS_general_intro** intro to cts questions 2 thru 6b
 | In the last four months, has this happened in your marriage never, once, or two or more
 | times?
 |
 | **CTS2** destroyed something belonging to partner
 | You destroyed something belonging to your partner.
 | 1 Zero times
 | 2 Once
 | 3 Two or more times
 |
 | **CTS2b** partner destroyed something belonging to you
 | Your partner destroyed something belonging to you.

- || 1 Zero times
- || 2 Once
- || 3 Two or more times

|| [Questions CTS_general_intro to CTS3b are displayed as a table]

|| **CTS_general_intro** intro to cts questions 2 thru 6b

|| In the last four months, has this happened in your marriage never, once, or two or more times?

|| **CTS3** threatened to hit or throw something at partner

|| You threatened to hit or throw something at your partner.

- || 1 Zero times
- || 2 Once
- || 3 Two or more times

|| **CTS3b** partner threatened to hit or throw something at you

|| Your partner threatened to hit or throw something at you.

- || 1 Zero times
- || 2 Once
- || 3 Two or more times

|| [Questions CTS_general_intro to CTS4b are displayed as a table]

|| **CTS_general_intro** intro to cts questions 2 thru 6b

|| In the last four months, has this happened in your marriage never, once, or two or more times?

|| **CTS4** pushed or shoved your partner

|| You pushed or shoved your partner.

- || 1 Zero times
- || 2 Once
- || 3 Two or more times

|| **CTS4b** partner pushed or shoved you

|| Your partner pushed or shoved you.

- || 1 Zero times
- || 2 Once
- || 3 Two or more times

|| [Questions CTS_general_intro to CTS5b are displayed as a table]

|| **CTS_general_intro** intro to cts questions 2 thru 6b

|| In the last four months, has this happened in your marriage never, once, or two or more times?

||

|| **CTS5** You slapped your partner

|| You slapped your partner.

|| 1 Zero times

|| 2 Once

|| 3 Two or more times

|| **CTS5b** partner slapped you

|| Your partner slapped you.

|| 1 Zero times

|| 2 Once

|| 3 Two or more times

|| [Questions CTS_general_intro to CTS6b are displayed as a table]

|| **CTS_general_intro** intro to cts questions 2 thru 6b

|| In the last four months, has this happened in your marriage never, once, or two or more times?

|| **CTS6** punched or hit partner with harmful object

|| You punched or hit your partner with something that could hurt.

|| 1 Zero times

|| 2 Once

|| 3 Two or more times

|| **CTS6b** partner punched or hit you with harmful object

|| Your partner punched or hit you with something that could hurt.

|| 1 Zero times

|| 2 Once

|| 3 Two or more times

|| [Questions DIV_intro to DIV3 are displayed as a table]

|| **DIV_intro** rate your marriage at current time

|| We would like to get an idea of how your marriage stands right now. Please answer the question by

|| indicating whether each item is true or false with regard to how things are right now.

|| **DIV1** have thought about divorce or separation

|| I have thought specifically about divorce or separation. I have thought about who would get the kids,

|| how things would be divided, pros and cons, etc.

|| 1 True

|| 2 False

|| **DIV2** made plans to discuss divorce with spouse

|| I have made specific plans to discuss separation or divorce with my spouse. I have

considered what I

|| would say, etc.

|| 1 True

|| 2 False

|| **DIV3** contacted lawyer for divorce plans

|| I have contacted a lawyer to make preliminary plans for divorce.

|| 1 True

|| 2 False

|| ELSE

|| [Questions Conflict_tactics_intro to CTS1b_dk are displayed as a table]

|| **Conflict_tactics_intro** intro to conflict tactics section

|| Sometimes even happy couples get into arguments, and sometimes those arguments can get pretty intense. Here are

|| a few questions about how you and [SERVICE MEMBER name] behave during an argument. Please remember we

|| will not share your answers with your spouse. For each of the following behaviors, please think of the past four

|| months, that is, since ([date four months ago]) and indicate if this behavior has happened zero

|| times in the last four months, has happened once, or has happened two or more times in the last four months.

|| **CTS1_dk** insulted or swore at partner

|| You insulted or swore at your partner.

|| 1 Zero times

|| 2 Once

|| 3 Two or more times

|| **CTS1b_dk** partner insulted or swore at you

|| Your partner insulted or swore at you.

|| 1 Zero times

|| 2 Once

|| 3 Two or more times

|| [Questions CTS_general_intro to CTS2b_dk are displayed as a table]

|| **CTS_general_intro** intro to cts questions 2 thru 6b

|| In the last four months, has this happened in your marriage never, once, or two or more times?

|| **CTS2_dk** destroyed something belonging to partner

|| You destroyed something belonging to your partner.

- 1 Zero times
- 2 Once
- 3 Two or more times

CTS2b_dk partner destroyed something belonging to you
Your partner destroyed something belonging to you.

- 1 Zero times
- 2 Once
- 3 Two or more times

[Questions CTS_general_intro to CTS3b_dk are displayed as a table]

CTS_general_intro intro to cts questions 2 thru 6b

In the last four months, has this happened in your marriage never, once, or two or more times?

CTS3_dk threatened to hit or throw something at partner
You threatened to hit or throw something at your partner.

- 1 Zero times
- 2 Once
- 3 Two or more times

CTS3b_dk partner threatened to hit or throw something at you
Your partner threatened to hit or throw something at you.

- 1 Zero times
- 2 Once
- 3 Two or more times

[Questions CTS_general_intro to CTS4b_dk are displayed as a table]

CTS_general_intro intro to cts questions 2 thru 6b

In the last four months, has this happened in your marriage never, once, or two or more times?

CTS4_dk pushed or shoved your partner
You pushed or shoved your partner.

- 1 Zero times
- 2 Once
- 3 Two or more times

CTS4b_dk partner pushed or shoved you
Your partner pushed or shoved you.

- 1 Zero times
- 2 Once
- 3 Two or more times

|| [Questions CTS_general_intro to CTS5b_dk are displayed as a table]

|| **CTS_general_intro** intro to cts questions 2 thru 6b

|| In the last four months, has this happened in your marriage never, once, or two or more times?

|| **CTS5_dk** You slapped your partner

|| You slapped your partner.

|| 1 Zero times

|| 2 Once

|| 3 Two or more times

|| **CTS5b_dk** partner slapped you

|| Your partner slapped you.

|| 1 Zero times

|| 2 Once

|| 3 Two or more times

|| [Questions CTS_general_intro to CTS6b_dk are displayed as a table]

|| **CTS_general_intro** intro to cts questions 2 thru 6b

|| In the last four months, has this happened in your marriage never, once, or two or more times?

|| **CTS6_dk** punched or hit partner with harmful object

|| You punched or hit your partner with something that could hurt.

|| 1 Zero times

|| 2 Once

|| 3 Two or more times

|| **CTS6b_dk** partner punched or hit you with harmful object

|| Your partner punched or hit you with something that could hurt.

|| 1 Zero times

|| 2 Once

|| 3 Two or more times

|| [Questions DIV_intro to DIV3_dk are displayed as a table]

|| **DIV_intro** rate your marriage at current time

|| We would like to get an idea of how your marriage stands right now. Please answer the question by

|| indicating whether each item is true or false with regard to how things are right now.

|| **DIV1_dk** have thought about divorce or separation

|| I have thought specifically about divorce or separation. I have thought about who would get the kids,

```

| | how things would be divided, pros and cons, etc.
| | 1 True
| | 2 False
| |
| | DIV2_dk made plans to discuss divorce with spouse
| | I have made specific plans to discuss separation or divorce with my spouse. I have
| | considered what I would say, etc.
| | 1 True
| | 2 False
| |
| | DIV3_dk contacted lawyer for divorce plans
| | I have contacted a lawyer to make preliminary plans for divorce.
| | 1 True
| | 2 False
| |
| | ENDIF
| |
| | TOB1 days you smoked part or all of cigarette past 30 days
| | Let's move on to more questions about behaviors that affect your health. Remember, all of
| | your answers
| | are completely confidential, and if there are any questions you do not wish to answer, you
| | can simply
| | skip over them. In the past 30 days, about how many days did you smoke part or all of a
| | cigarette?
| | Range: 0..30
| |
| | IF TOB1 > 0 OR TOB1=EMPTY THEN
| |
| | TOB2 cigarette per day past 30 days
| | On those days that you smoked in the past 30 days, how many cigarettes did you typically
| | have on each day?
| | Range: 1..99
| |
| | TOB3 days used chewing tobacco past 30 days
| | In the past 30 days, about how many days did you use chewing tobacco?
| | Range: 0..30
| |
| | ENDIF
| |
| | ALC1 days drank past 30 days
| | In the past 30 days, about how many days did you have a drink containing alcohol?
| | Range: 0..30
| |
| | IF ALC1 > 0 OR ALC1=EMPTY THEN
| |
| | ALC2 drinks per day past 30 days

```

|| On those days that you drank in the past 30 days, how many drinks did you typically have on each day?
 || By drink I mean a bottle of beer, a glass of wine, or one shot or mixed drink.
 || Real
 ||
 || IF ALC2 > 10 THEN
 ||
 || | **ALC2_confirm** confirm drinks per day if more than 10
 || | Just to confirm on a TYPICAL DAY you had [drinks per day past 30 days] drinks per day? If this is
 || | not correct, please use the "< < Back" button on the screen below the answer choices to go back
 || | and change your answer. Please do not use the browser's "back" button.
 || | 1 Yes
 || | 2 No
 || |
 || ENDIF
 ||
 || IF spgender = Male THEN
 ||
 || | **ALC3_men** days you had 5 or more drinks at one time question for men
 || | During the past 30 days, how many days did you have five or more drinks on one occasion?
 || | Range: 0..30
 || |
 || | IF ALC3_men > ALC1 THEN
 || |
 || | | **error_alcohol** error more days than alc1
 || | | Your answer cannot be greater than the amount of days ([days drank past 30 days]) that you
 || | | answered in ALC1.
 || | |
 || | ENDIF
 || |
 || ENDIF
 ||
 || IF spgender = Female THEN
 ||
 || | **ALC4_women** days you had 4 or more drinks at one time question for women
 || | During the past 30 days, how many days did you have four or more drinks on one occasion?
 || | Range: 0..30
 || |
 || | IF ALC4_women > ALC1 THEN
 || | | **error_alcohol** error more days than alc1
 || | | Your answer cannot be greater than the amount of days ([days drank past 30 days]) that

you

||| answered in ALC1.

||| ENDIF

|||

|| ENDIF

||

| ENDIF

|

| IF ALC1 > 0 OR TOB1 >0 THEN

| |

| | **CAGE1** felt you should cut down drug use past 4 months

| | Next, I would like to ask about your experiences with drinking or drug use during the past 4 months.

| | In the past 4 months, have you ever felt that you ought to cut down on your drinking or drug use?

| | 1 Yes

| | 2 No

| | 3 Never drank or used drugs in last 4 months

| |

| | IF CAGE1 = Yes OR CAGE1= No OR CAGE1=NONRESPONSE THEN

| | |

| | | **CAGE2** people criticize your drug use past 4 months

| | | In the past 4 months, have people ever annoyed you by criticizing your drinking or drug use?

| | | 1 Yes

| | | 2 No

| | | 3 Never drank or used drugs in last 4 months

| | |

| | | IF CAGE2 = Yes OR CAGE2= No OR CAGE2=NONRESPONSE THEN

| | | |

| | | | **CAGE3** felt guilty about drug use past 4 months

| | | | In the past 4 months, have you ever felt bad or guilty about your drinking or drug use?

| | | | 1 Yes

| | | | 2 No

| | | | 3 Never drank or used drugs in last 4 months

| | | |

| | | | IF CAGE3 = Yes OR CAGE3= No OR CAGE3=NONRESPONSE THEN

| | | | |

| | | | | **CAGE4** drug use interfered with daily life past 4 months

| | | | | In the past 4 months, was there a time when your drinking or drug use, or being hung over

| | | | | frequently, interfered with your work at school, on a job, or at home?

| | | | | 1 Yes

| | | | | 2 No

| | | | | 3 Never drank or used drugs in last 4 months

| | | | |

| | | | |

```

||||| IF CAGE4 = Yes OR CAGE4= No OR CAGE4=NONRESPONSE THEN
|||||
||||| CAGE5 gotten into physical fights while using drugs past 4 months
||||| In the past 4 months, have you frequently gotten into physical fights while drinking
or using drugs?
||||| 1 Yes
||||| 2 No
||||| 3 Never drank or used drugs in last 4 months
|||||
||||| IF CAGE5 = Yes OR CAGE5= No OR CAGE5=NONRESPONSE THEN
|||||
||||| CAGE6 drugs caused trouble with you and friend past 4 months
||||| In the past 4 months, has drinking or drug use frequently caused trouble between
you and a
||||| family member or friend?
||||| 1 Yes
||||| 2 No
||||| 3 Never drank or used drugs in last 4 months
|||||
||||| IF CAGE6 = Yes OR CAGE6= No OR CAGE6=NONRESPONSE THEN
|||||
||||| CAGE7 under influence of drugs while driving past 4 months
||||| In the past 4 months, have you been under the influence of alcohol or drugs in
situations
||||| where you could get hurt, for example when riding a bicycle, driving, operating a
machine
||||| or anything else?
||||| 1 Yes
||||| 2 No
||||| 3 Never drank or used drugs in last 4 months
|||||
||||| ENDIF
|||||
||||| ENDIF
|||||
||||| ENDIF
|||||
||||| ENDIF
|||||
||||| ENDIF
|||||
||||| ENDIF
|||||
| RX1 ever taken unprescribed prescription drug for experience

```

| Have you ever, even once, used any type of prescription drug that was not prescribed for you or that

| you took only for the experience or feeling it caused?

| 1 Yes

| 2 No

| IF RX1 = Yes THEN

||

|| **RX2** days used prescription drug for feeling or experience

|| In the past 30 days, about how many days did you use a prescription drug that was not prescribed for

|| you or that you took only for the experience or feeling it caused?

|| Range: 0..30

||

| ENDIF

| **HLTH1** daily activities limited by your physical health

| Here are a few general questions about your physical health. Are your daily activities limited in

| any way by your physical health?

| 1 Yes, limited a lot

| 2 Yes limited a little

| 3 No, not limited at all

| **HLTH2** physical health keep you from working at a job

| How much does your physical health keep you from working at a job, doing work around the house, or

| going to school?

| 1 Quite a bit

| 2 Moderately

| 3 Slightly

| 4 Not at all

| **HLTH3** physical health interfere with normal social activities

| How much does your physical health interfere with your normal social activities with family, friends,

| neighbors, or groups?

| 1 Quite a bit

| 2 Moderately

| 3 Slightly

| 4 Not at all

| **HLTH4** rate physical health

| In general, how would you rate your physical health?

| 1 Excellent

| 2 Very Good

- | 3 Good
- | 4 Fair
- | 5 Poor

FL_MHI_sentences FL_MHI Sentences MHI Anxiety section randomization FL_MHI

- The following 4 questions are randomized. 1. How much of the time, during the past month/four weeks, have you been a very nervous person? 2. How much of the time, during the past month/four weeks, have you felt tense or high-strung? 3. How much of the time, during the past month/four weeks, have you felt restless, fidgety, or impatient? 4. How much of the time, during the past month/four weeks, have you been anxious or worried?

| **MH_r1** randomized MHI question 1

| The next set of questions is about how you feel, and how things have been for you during the past 4

| weeks. How much of the time, during the past four weeks, [randomized MHI sentences]

- | 1 All of the time
- | 2 Most of the time
- | 3 A good bit of the time
- | 4 Some of the time
- | 5 A little bit of the time
- | 6 None of the time

| **MH_r2** randomize MHI question 2

| How much of the time, during the past four weeks, [randomized MHI sentences]

- | 1 All of the time
- | 2 Most of the time
- | 3 A good bit of the time
- | 4 Some of the time
- | 5 A little bit of the time
- | 6 None of the time

| **MH_r3** randomized MHI question 3

| How much of the time, during the past four weeks, [randomized MHI sentences]

- | 1 All of the time
- | 2 Most of the time
- | 3 A good bit of the time
- | 4 Some of the time
- | 5 A little bit of the time
- | 6 None of the time

| **MH_r4** randomized MHI question 4

| How much of the time, during the past four weeks, [randomized MHI sentences]

- | 1 All of the time
- | 2 Most of the time
- | 3 A good bit of the time
- | 4 Some of the time

| 5 A little bit of the time

| 6 None of the time

FL_PHQ_sentences FL_PHQ sentences

PHQ Depression section randomization FL_PHQ - The following 8 questions are randomized. (Over the past two weeks how often have you been bothered by...) 1. Little interest or pleasure in doing things. 2. Feeling down, depressed, or hopeless. 3. Trouble falling or staying asleep, or sleeping too much. 4. Feeling tired or having little energy. 5. Poor appetite or overeating. 6. Feeling bad about yourself--or that you are a failure or have let yourself or your family down. 7. Trouble concentrating on things, such as reading the newspaper or watching television. 8. Moving or speaking so slowly that other people could have noticed? Or the opposite--being so fidgety or restless that you have been moving around a lot more than usual.

| **PHQ_r1** randomizing PHQ questions 1

| Over the past two weeks how often have you been bothered by any of the following problems? [randomized

| PHQ sentences]

| 1 Not at all

| 2 Several days

| 3 More than half the days

| 4 Nearly every day

|

| **PHQ_r2** randomizing PHQ questions 2

| (Over the past two weeks how often have you been bothered by...) [randomized PHQ sentences]

| 1 Not at all

| 2 Several days

| 3 More than half the days

| 4 Nearly every day

|

| **PHQ_r3** randomizing PHQ questions 3

| (Over the past two weeks how often have you been bothered by...) [randomized PHQ sentences]

| 1 Not at all

| 2 Several days

| 3 More than half the days

| 4 Nearly every day

|

| **PHQ_r4** randomizing PHQ questions 4

| (Over the past two weeks how often have you been bothered by...) [randomized PHQ sentences]

| 1 Not at all

| 2 Several days

| 3 More than half the days

| 4 Nearly every day

| **PHQ_r5** randomizing PHQ questions 5

| (Over the past two weeks how often have you been bothered by...) [randomized PHQ sentences]

| 1 Not at all

| 2 Several days

| 3 More than half the days

| 4 Nearly every day

| **PHQ_r6** randomizing PHQ questions 6

| (Over the past two weeks how often have you been bothered by...) [randomized PHQ sentences]

| 1 Not at all

| 2 Several days

| 3 More than half the days

| 4 Nearly every day

| **PHQ_r7** randomizing PHQ questions 7

| (Over the past two weeks how often have you been bothered by...) [randomized PHQ sentences]

| 1 Not at all

| 2 Several days

| 3 More than half the days

| 4 Nearly every day

| **PHQ_r8** randomizing PHQ questions 8

| (Over the past two weeks how often have you been bothered by...) [randomized PHQ sentences]

| 1 Not at all

| 2 Several days

| 3 More than half the days

| 4 Nearly every day

| **PCPTSD1** nightmares about experience in past month

| In your life, have you ever had any experience that was so frightening, horrible, or upsetting that, in

| the past month, you... Have had nightmares about it or thought about it when you did not want to?

| 1 Yes

| 2 No

| **PCPTSD2** avoid situations in past month

| In your life, have you ever had any experience that was so frightening, horrible, or upsetting that, in the past month,

| you... Tried hard not to think about it or went out of your way to avoid situations that reminded you of it?

| 1 Yes

| 2 No

| **PCPTSD3** constantly on guard past month

| In your life, have you ever had any experience that was so frightening, horrible, or upsetting that, in

| the past month, you... Were constantly on guard, watchful, or easily startled?

| 1 Yes

| 2 No

| **PCPTSD4** felt detached past month

| In your life, have you ever had any experience that was so frightening, horrible, or upsetting that, in

| the past month, you... Felt numb or detached from others, activities, or your surroundings?

| 1 Yes

| 2 No

| **MHS1** take any prescribed medication for mental health problem

| Sometimes people need help for a personal or emotional problem. In this next set of questions I'm going

| to ask you some questions about help you might have gotten for yourself. Do you regularly take any

| prescribed medication for a mental health problem?

| 1 Yes

| 2 No

| **MHS2** need therapy or counseling past 4 months

| In the past four months, did you have a need for counseling or therapy for personal or emotional

| problems from a mental health specialist like a psychiatrist, psychologist, social worker or family

| counselor in a mental health clinic or office, whether or not you actually received any counseling?

| 1 Yes

| 2 No

| IF MHS2 = Yes OR MHS2=NONRESPONSE THEN

| **MHS3** receive therapy or counseling past 4 months

| In the past four months, did you actually receive counseling or therapy for personal or emotional

| problems from a mental health specialist like a psychiatrist, psychologist, social worker or family

| counselor in a mental health clinic or office?

| 1 Yes

| 2 No

||
 || **MHS4** receive therapy from chaplain or friend past 4 months
 || In the past four months, did you receive counseling or therapy for personal or emotional problems

|| from a chaplain, another adult family member, or an adult friend?

|| 1 Yes

|| 2 No

|| IF MHS3 = No THEN

|| IF CMIL = Yes THEN

|| [Questions MHS5_military to MHS5_other are displayed as a table]

|| **MHS5_military** why not receive therapy past 4 months

|| Because you said you did not receive counseling or therapy for personal or emotional problems

|| from a psychiatrist, psychologist, social worker or family counselor in the past four months, I

|| am going to read a list of reasons why you may not have received those services. Please tell me

|| all that apply. Was it because...

|| 1 No counselor or therapist in the area for your problem

|| 2 Counselor or therapist not accepting new patients

|| 3 Long wait times

|| 4 TriCare won't pay for the service

|| 5 Other insurance (private, Medicaid, Medicare) won't pay for the service

|| 6 You don't think the provider is qualified to address your problem. The provider wouldn't understand what you are going through.

|| 7 Worried about what others might think if they found out

|| 8 You would not know where to get help or who to see

|| 9 It would be difficult to arrange transportation to treatment

|| 10 It would be difficult to get childcare or time off of work

|| 11 The mental health treatments available are not very good

|| 12 It would take too much time to be in treatment

|| 13 Your family or friends would be more helpful than a mental health professional

|| 14 Religious counseling would be more helpful than mental health treatment

|| 15 You do not think the counseling would be kept confidential

|| 16 Your spouse or partner would not want/allow you to get treatment

|| 17 You have received treatment before and it did not work

|| 18 It is not a priority. You have too many other things to deal with

|| 19 You think it would affect your spouse's job and career options in the military

|| 20 You think it would affect your job and career options in the military

|| 21 Any other reasons I have not mentioned?

|| **MHS5_other** other reason why not receive therapy past 4 months

```

|||| String
||||
|||| IF Any other reasons I have not mentioned? in MHS5_military AND MHS5_other =
EMPTY THEN
|||| | error_otherSpecify error specify other
|||| | You selected "other", but did not specify an answer. Please go back and check your
answer.
|||| ENDIF
||||
|||| ENDIF
||||
|||| IF MHS3 = No AND CMIL <> Yes THEN
||||
|||| [Questions MHS5 to MHS5_other are displayed as a table]
||||
|||| MHS5 why not receive therapy past 4 months
|||| Because you said you did not receive counseling or therapy for personal or emotional
problems
|||| from a psychiatrist, psychologist, social worker or family counselor in the past four
months, I
|||| am going to read a list of reasons why you may not have received those services. Please
tell me
|||| all that apply. Was it because...
|||| 1 No counselor or therapist in the area for your problem
|||| 2 Counselor or therapist not accepting new patients
|||| 3 Long wait times
|||| 4 TriCare won't pay for the service
|||| 5 Other insurance (private, Medicaid, Medicare) won't pay for the service
|||| 6 You don't think the provider is qualified to address your problem. The provider
wouldn't understand what you are going through.
|||| 7 Worried about what others might think if they found out
|||| 8 You would not know where to get help or who to see
|||| 9 It would be difficult to arrange transportation to treatment
|||| 10 It would be difficult to get childcare or time off of work
|||| 11 The mental health treatments available are not very good
|||| 12 It would take too much time to be in treatment
|||| 13 Your family or friends would be more helpful than a mental health professional
|||| 14 Religious counseling would be more helpful than mental health treatment
|||| 15 You do not think the counseling would be kept confidential
|||| 16 Your spouse or partner would not want/allow you to get treatment
|||| 17 You have received treatment before and it did not work
|||| 18 It is not a priority. You have too many other things to deal with
|||| 19 You think it would affect your spouse's job and career options in the military
|||| 20 Any other reasons I have not mentioned?
||||
|||| MHS5_other other reason why not receive therapy past 4 months

```

```

|||| String
||||
|||| IF Any other reasons I have not mentioned? in MHS5 AND MHS5_other = EMPTY
THEN
|||| error_otherSpecify error specify other
|||| You selected "other", but did not specify an answer. Please go back and check your
answer.
|||| ENDIF
||||
||| ENDIF
|||
||| ENDIF
|||
||| ENDIF
|||
| ENDIF
|
| IF language = CAWI (self-administered web interview) THEN
|
| [The following questions are displayed as a table]
|
| STRS1_header header to stressors section
| Now I want to move on to ask you about some specific things that might have happened
to you in the
| past 4 months. In the past 4 months...
|
| STRS1 suffer from a serious illness past 4 months
| Did you suffer from a serious illness, injury, or an assault?
| 1 Yes
| 2 No
|
| STRS2 close relative suffer from a serious illness past 4 months
| Did a close relative suffer a serious illness, injury, or an assault?
| 1 Yes
| 2 No
|
| STRS3_miscarriage miscarriage
| Did [your wife/you fill ] experience a miscarriage?
| 1 Yes
| 2 No
|
| STRS3 death of a parent or a child past 4 months
| Did you experience the death of a parent or a child?
| 1 Yes
| 2 No
|
| STRS4 death of close family friend past 4 months
| Did you experience the death of a close family friend or close relative? (other than parent

```

or child?)

|| 1 Yes

|| 2 No

|| **STRS5** choose to separate past 4 months

|| Did you and [SERVICE MEMBER name] ever choose to separate for any time because of a fight?

|| 1 Yes

|| 2 No

|| **STRS6** end relationship with friend or family past 4 months

|| Did you end a relationship with a close friend or family member?

|| 1 Yes

|| 2 No

|| **STRS7** problem with friend or family past 4 months

|| Did you have a serious problem with a close friend, neighbor, or relative?

|| 1 Yes

|| 2 No

|| **STRS8** notified about deployment

|| Have you been notified of an upcoming deployment?

|| 1 Yes

|| 2 No

|| IF CMIL = Yes THEN

|| | **STRS8_return** returned from deployment

|| | Have you returned from deployment?

|| | 1 Yes

|| | 2 No

|| ENDIF

|| [End of table display]

|| IF STRS8 = EMPTY THEN

|| | **Error_answer** error no answer hard check

|| | You did not answer the previous question. Your answers are important to us. Please go back and select an answer.

|| ENDIF

|| [Questions STRS1_header2 to STRS14 are displayed as a table]

|| **STRS1_header2** header 2 in stressors section

|| Still thinking about the past 4 months...

|| **STRS9** lose a job past 4 months

|| Did you lose a job?

|| 1 Yes

|| 2 No

|| **STRS10** major financial crisis past 4 months

|| Did you have a major financial crisis?

|| 1 Yes

|| 2 No

|| **STRS11** problems with the police past 4 months

|| Did you have problems with the police and/or a court appearance?

|| 1 Yes

|| 2 No

|| **STRS12** relative have problems with police past 4 months

|| Have you had a relative who has had problems with the police and/or a court appearance?

|| 1 Yes

|| 2 No

|| **STRS13** something lost or stolen past 4 months

|| Was something that you valued lost or stolen?

|| 1 Yes

|| 2 No

|| **STRS14** friend have trouble with immigration past 4 months

|| Did you or someone close to you have trouble with immigration or get deported?

|| 1 Yes

|| 2 No

|| ELSE

|| [The following questions are displayed as a table]

|| **STRS1_header** header to stressors section

|| Now I want to move on to ask you about some specific things that might have happened to you in the

|| past 4 months. In the past 4 months...

|| **STRS1_dk** suffer from a serious illness past 4 months

|| Did you suffer from a serious illness, injury, or an assault?

|| 1 Yes

|| 2 No

|| **STRS2_dk** close relative suffer from a serious illness past 4 months

|| Did a close relative suffer a serious illness, injury, or an assault?

1 Yes

2 No

STRS3_miscarriage_dk miscarriage

Did [your wife/you fill] experience a miscarriage?

1 Yes

2 No

STRS3_dk death of a parent or a child past 4 months

Did you experience the death of a parent or a child?

1 Yes

2 No

STRS4_dk death of close family friend past 4 months

Did you experience the death of a close family friend or close relative? (other than parent or child?)

1 Yes

2 No

STRS5_dk choose to separate past 4 months

Did you and [SERVICE MEMBER name] ever choose to separate for any time because of a fight?

1 Yes

2 No

STRS6_dk end relationship with friend or family past 4 months

Did you end a relationship with a close friend or family member?

1 Yes

2 No

STRS7_dk problem with friend or family past 4 months

Did you have a serious problem with a close friend, neighbor, or relative?

1 Yes

2 No

STRS8_dk notified about deployment

Have you been notified of an upcoming deployment?

1 Yes

2 No

IF CMIL = Yes THEN

STRS8_return_dk returned from deployment

Have you returned from deployment?

1 Yes

2 No

```
||  
||  
|| ENDIF  
||  
|| [End of table display]  
|| IF STRS8_dk = EMPTY THEN  
|| | Error_answer error no answer hard check  
|| | You did not answer the previous question. Your answers are important to us. Please go  
back and select an answer.  
|| ENDIF  
||  
|| [Questions STRS1_header2 to STRS14_dk are displayed as a table]  
||  
|| STRS1_header2 header 2 in stressors section  
|| Still thinking about the past 4 months...  
||  
|| STRS9_dk lose a job past 4 months  
|| Did you lose a job?  
|| 1 Yes  
|| 2 No  
||  
|| STRS10_dk major financial crisis past 4 months  
|| Did you have a major financial crisis?  
|| 1 Yes  
|| 2 No  
||  
|| STRS11_dk problems with the police past 4 months  
|| Did you have problems with the police and/or a court appearance?  
|| 1 Yes  
|| 2 No  
||  
|| STRS12_dk relative have problems with police past 4 months  
|| Have you had a relative who has had problems with the police and/or a court appearance?  
|| 1 Yes  
|| 2 No  
||  
|| STRS13_dk something lost or stolen past 4 months  
|| Was something that you valued lost or stolen?  
|| 1 Yes  
|| 2 No  
||  
|| STRS14_dk friend have trouble with immigration past 4 months  
|| Did you or someone close to you have trouble with immigration or get deported?  
|| 1 Yes  
|| 2 No  
||  
|| ENDIF
```

| IF language = CAWI (self-administered web interview) THEN

| [Questions MNG_intro to MNG10 are displayed as a table]

| **MNG_intro** intro to managing tasks section

| Thinking of the past week, how well are you managing each of the following?

| **MNG1** getting daily household tasks done

| Getting daily household tasks done

| 1 Very poorly

| 2 Poorly

| 3 About average

| 4 Well

| 5 Very well

| **MNG2** working at paid job

| Working at your paid job

| 1 Very poorly

| 2 Poorly

| 3 About average

| 4 Well

| 5 Very well

| **MNG3** cleaning house

| Cleaning the house

| 1 Very poorly

| 2 Poorly

| 3 About average

| 4 Well

| 5 Very well

| **MNG4** shopping for necessities

| Shopping for necessities

| 1 Very poorly

| 2 Poorly

| 3 About average

| 4 Well

| 5 Very well

| **MNG5** handling finances

| Handling financial matters

| 1 Very poorly

| 2 Poorly

| 3 About average

| 4 Well

```
|| 5 Very well
||
|| IF children_under_13 > THEN
||
|| MNG6 arranging child care
|| Arranging for child care
|| 1 Very poorly
|| 2 Poorly
|| 3 About average
|| 4 Well
|| 5 Very well
||
|| ENDIF
||
|| IF children_over_4 > THEN
||
|| MNG7 ensuring child or children do schoolwork
|| Ensuring [fill for children mng7] finish schoolwork
|| 1 Very poorly
|| 2 Poorly
|| 3 About average
|| 4 Well
|| 5 Very well
||
|| ENDIF
||
|| IF children_under_18 > THEN
||
|| MNG8 disciplining children
|| Disciplining/handling [fill for children]
|| 1 Very poorly
|| 2 Poorly
|| 3 About average
|| 4 Well
|| 5 Very well
||
|| MNG9 taking care of child health
|| Taking care of [fill for children ]'s health
|| 1 Very poorly
|| 2 Poorly
|| 3 About average
|| 4 Well
|| 5 Very well
||
|| ENDIF
||
```

|| **MNG10** taking care own health

|| Taking care of your own health

|| 1 Very poorly

|| 2 Poorly

|| 3 About average

|| 4 Well

|| 5 Very well

|| ELSE

|| [Questions MNG_intro to MNG10_dk are displayed as a table]

|| **MNG_intro** intro to managing tasks section

|| Thinking of the past week, how well are you managing each of the following?

|| **MNG1_dk** getting daily household tasks done

|| Getting daily household tasks done

|| 1 Very poorly

|| 2 Poorly

|| 3 About average

|| 4 Well

|| 5 Very well

|| **MNG2_dk** working at paid job

|| Working at your paid job

|| 1 Very poorly

|| 2 Poorly

|| 3 About average

|| 4 Well

|| 5 Very well

|| **MNG3_dk** cleaning house

|| Cleaning the house

|| 1 Very poorly

|| 2 Poorly

|| 3 About average

|| 4 Well

|| 5 Very well

|| **MNG4_dk** shopping for necessities

|| Shopping for necessities

|| 1 Very poorly

|| 2 Poorly

|| 3 About average

|| 4 Well

|| 5 Very well

```

| |
| | MNG5_dk handling finances
| | Handling financial matters
| | 1 Very poorly
| | 2 Poorly
| | 3 About average
| | 4 Well
| | 5 Very well
| |
| | IF children_under_13 > THEN
| |
| | MNG6_dk arranging child care
| | Arranging for child care
| | 1 Very poorly
| | 2 Poorly
| | 3 About average
| | 4 Well
| | 5 Very well
| |
| | ENDIF
| |
| | IF children_over_4 > THEN
| |
| | MNG7_dk ensuring children do schoolwork
| | Ensuring [fill for children mng7] schoolwork
| | 1 Very poorly
| | 2 Poorly
| | 3 About average
| | 4 Well
| | 5 Very well
| |
| | ENDIF
| |
| | IF children_under_18 > THEN
| |
| | MNG8_dk disciplining children
| | Disciplining/handling [fill for children]
| | 1 Very poorly
| | 2 Poorly
| | 3 About average
| | 4 Well
| | 5 Very well
| |
| | MNG9_dk taking care of child health
| | Taking care of [fill for children ]'s health
| | 1 Very poorly

```

```

|| | 2 Poorly
|| | 3 About average
|| | 4 Well
|| | 5 Very well
|| |
|| | ENDIF
|| |
|| | MNG10_dk taking care own health
|| | Taking care of your own health
|| | 1 Very poorly
|| | 2 Poorly
|| | 3 About average
|| | 4 Well
|| | 5 Very well
|| |
|| | ENDIF
|| |
|| | LSAT rate current life satisfaction
|| | Taking things altogether, how satisfied are you with your life right now? Would you say you
are very
|| | satisfied, somewhat satisfied, neutral, somewhat dissatisfied, or very dissatisfied?
|| | 1 Very satisfied
|| | 2 Somewhat satisfied
|| | 3 Neutral
|| | 4 Somewhat dissatisfied
|| | 5 Very dissatisfied
|| |
|| | IF CMIL = Yes THEN
|| |
|| | DHIST1 how many OCONUS deployments have you had
|| | The next section asks some more specific questions about your experiences with the
military. Since
|| | you joined the military, how many OCONUS deployments have you had?
|| | Range: 0..99
|| |
|| | DHIST2 times away from home 1 month or more because of military
|| | Since you joined the military, how many times have you been away from home for a
month at a time or
|| | longer for any reason related to your military service?
|| | Range: 0..99
|| |
|| | IF DHIST2 > 0 THEN
|| |
|| | DHIST3 military times away from home since married
|| | Since you have been married, how many times have you been away from home for a
month at a time or

```

longer for any reason related to your military service?
Range: 0..99

IF DHIST1 > 0 AND DHIST1 < 98 THEN

DHIST4 months OCONUS for most recent deployment
How many months were you OCONUS for your most recent deployment?
Real

DHIST5 months home since most recent deployment
How many months have you been home since the most recent deployment?
Real

IF language = CAWI (self-administered web interview) THEN

[Questions CEXP_intro to CEXP8 are displayed as a table]

CEXP_intro intro to hoge et als scale
Have you personally ever experienced the following during a deployment?

CEXP1 experienced Being attacked or ambushed
Being attacked or ambushed
1 Yes
2 No

CEXP2 experienced Receiving small arms fire
Receiving small arms fire
1 Yes
2 No

CEXP3 experienced Seeing dead bodies
Seeing dead bodies or human remains
1 Yes
2 No

CEXP4 experienced Handling or uncovering human remains
Handling or uncovering human remains
1 Yes
2 No

CEXP5 experienced Knowing person seriously injured or killed
Knowing someone who was seriously injured or killed
1 Yes
2 No

CEXP6 experienced participating in demining operations

Participating in demining operations
1 Yes
2 No
CEXP7 experienced shooting at the enemy
Shooting or directing fire at the enemy
1 Yes
2 No
CEXP8 experienced hand to hand combat
Engaging in hand-to-hand combat
1 Yes
2 No
[Questions CEXP_intro to CEXP15 are displayed as a table]
CEXP_intro intro to hoge et als scale
Have you personally ever experienced the following during a deployment?
CEXP9 experienced searching homes or buildings
Clearing/searching homes or buildings
1 Yes
2 No
CEXP10 experienced being wounded
Being wounded/injured
1 Yes
2 No
CEXP11 experienced seeing injured women or children unable to help
Seeing ill/injured women or children who you were unable to help
1 Yes
2 No
CEXP12 experienced receiving incoming artillery
Receiving incoming artillery, rocket, or mortar fire
1 Yes
2 No
CEXP13 experienced being responsible for death of enemy combatant
Being directly responsible for the death of an enemy combatant or non-combatant
1 Yes
2 No
CEXP14 experienced getting shot or hit but saved by protective gear
Had a close call, was shot or hit but protective gear saved you

1 Yes

2 No

CEXP15 experienced had a nearby buddy shot or hit

Had a buddy shot or hit who was near you

1 Yes

2 No

ELSE

[Questions CEXP_intro to CEXP8_dk are displayed as a table]

CEXP_intro intro to hoge et als scale

Have you personally ever experienced the following during a deployment?

CEXP1_dk experienced Being attacked or ambushed

Being attacked or ambushed

1 Yes

2 No

CEXP2_dk experienced Receiving small arms fire

Receiving small arms fire

1 Yes

2 No

CEXP3_dk experienced Seeing dead bodies

Seeing dead bodies or human remains

1 Yes

2 No

CEXP4_dk experienced Handling or uncovering human remains

Handling or uncovering human remains

1 Yes

2 No

CEXP5_dk experienced Knowing person seriously injured or killed

Knowing someone who was seriously injured or killed

1 Yes

2 No

CEXP6_dk experienced participating in demining operations

Participating in demining operations

1 Yes

2 No

CEXP7_dk experienced shooting at the enemy

	Shooting or directing fire at the enemy
	1 Yes
	2 No
	CEXP8_dk experienced hand to hand combat
	Engaging in hand-to-hand combat
	1 Yes
	2 No
	[Questions CEXP_intro to CEXP15_dk are displayed as a table]
	CEXP_intro intro to hoge et als scale
	Have you personally ever experienced the following during a deployment?
	CEXP9_dk experienced searching homes or buildings
	Clearing/searching homes or buildings
	1 Yes
	2 No
	CEXP10_dk experienced being wounded
	Being wounded/injured
	1 Yes
	2 No
	CEXP11_dk experienced seeing injured women or children unable to help
	Seeing ill/injured women or children who you were unable to help
	1 Yes
	2 No
	CEXP12_dk experienced receiving incoming artillery
	Receiving incoming artillery, rocket, or mortar fire
	1 Yes
	2 No
	CEXP13_dk experienced being responsible for death of enemy combatant
	Being directly responsible for the death of an enemy combatant or non-combatant
	1 Yes
	2 No
	CEXP14_dk experienced getting shot or hit but saved by protective gear
	Had a close call, was shot or hit but protective gear saved you
	1 Yes
	2 No
	CEXP15_dk experienced had a nearby buddy shot or hit
	Had a buddy shot or hit who was near you

```

||||| 1 Yes
||||| 2 No
|||||
||||| ENDIF
|||||
||||| IF "Yes" to any CEXP question THEN
|||||
||||| CEXP16 how many of past deployments experience one of these
||||| In how many of your past deployments did you experience one of these? [fill for
CEXP16]
||||| Real
|||||
||||| IF CEXP16 > DHIST1 THEN
|||||
||||| CEXP_error CEXP error
||||| Your answer cannot be greater than the total number of deployments that you
answered
||||| previously. You previously answered [number] Please go back and check your answer.
|||||
||||| ENDIF
|||||
||||| ENDIF
|||||
||||| ENDIF
|||||
||||| ENDIF
|||||
||||| EXPTIME spent more or less time away than expected past 12 months
||||| In the past 12 months, have you spent more or less time away from your permanent duty
station than you expected?
||||| 1 Much less time than you expected
||||| 2 Less time than you expected
||||| 3 About what you expected
||||| 4 More time than you expected
||||| 5 Much more time than you expected
|||||
||||| EXPFUT1 know when next expected to deploy
||||| Do you know when you are next expected to deploy?
||||| 1 Yes – I know when I am next expected to deploy
||||| 2 No – I do not know when I am next expected to deploy
||||| 3 I am not expected to deploy
|||||
||||| IF EXPFUT1 = Yes – I know when I am next expected to deploy THEN
|||||
||||| [Questions EXPFUT2_intro to EXPFUT2_year are displayed as a table]
|||||

```

```

| | EXPFUT2_intro date next expected to deploy
| | When do you expect your next deployment will begin? Please specify a date.
| |
| | EXPFUT2_month month expected to deploy
| | Month:
| | 1 January
| | 2 February
| | 3 March
| | 4 April
| | 5 May
| | 6 June
| | 7 July
| | 8 August
| | 9 September
| | 10 October
| | 11 November
| | 12 December
| |
| | EXPFUT2_day day expected to deploy
| | Day:
| | Range: 1..31
| |
| | EXPFUT2_year year expected to deploy
| | Year:
| | Range: 2011..2050
| |
| | EXPFUT3 how many months will next deployment last
| | How many months do you expect your next deployment will last? In other words, how
| | long will you be
| | away from home.
| | Range: 0..60
| |
| | ENDIF
| |
| | ENDIF
| |
| | EXPTIMS attitude about spouse time away
| | Just to let you know, you are almost finished with the survey. There are only a few sets of
| | questions to go, and the
| | next one asks some more specific questions about being married to a service member. In the
| | past 12 months,
| | has your spouse spent more or less time away from home for military reasons than you
| | expected?
| | 1 Much less time away than you expected
| | 2 Less time away than you expected
| | 3 About what you expected

```

```

| 4 More time away than you expected
| 5 Much more time away than you expected
|
| EXPFUTS1 when spouse will deploy
| Do you know when your spouse is next expected to deploy?
| 1 Yes – I know when my spouse is next expected to deploy
| 2 No – I do not know when my spouse is next expected to deploy
| 3 My spouse is not expected to deploy
|
| IF EXPFUTS1 = Yes – I know when my spouse is next expected to deploy THEN
|
| [Questions EXPFUTS2_intro to EXPFUTS2_year are displayed as a table]
|
| EXPFUTS2_intro date next expected to deploy
| When do you expect your spouse's next deployment will begin? Please specify the date.
|
| EXPFUTS2_month month spouse expected to deploy
| Month:
| 1 January
| 2 February
| 3 March
| 4 April
| 5 May
| 6 June
| 7 July
| 8 August
| 9 September
| 10 October
| 11 November
| 12 December
|
| EXPFUTS2_day day spouse expected to deploy
| Day:
| Range: 1..31
|
| EXPFUTS2_year year spouse expected to deploy
| Year:
| Range: 2011..2050
|
| EXPFUTS3 how many months will next deployment last
| How many months do you expect your spouse's next deployment will last? In other words,
| how long do
| you expect your spouse will be away from home. Please answer in number of months.
| Range: 0..60
|
| ENDIF

```

| **JOBSAT** rate satisfaction

| Generally, on a day-to-day basis, how satisfied are you with the quality of your life as the spouse of a service member?

| 1 Very satisfied

| 2 Somewhat satisfied

| 3 Neutral

| 4 Somewhat dissatisfied

| 5 Very dissatisfied

| IF language = CAWI (self-administered web interview) THEN

| [Questions FREADY_intro to FREADY3 are displayed as a table]

| **FREADY_intro** prepared for deployments intro

| Have you and/or your spouse taken the following steps to prepare for upcoming deployments?

| **FREADY1** ensured family has money for living expenses

| Have you ensured the family would have money for rent, food, and living expenses (for example, set up

| an allotment, joint accounts).

| 1 Yes

| 2 No

| **FREADY2** Developed financial plan to meet emergencies

| Have you developed a financial plan to meet emergencies.

| 1 Yes

| 2 No

| **FREADY3** more life insurance for self

| Have you gotten or increased life insurance for yourself.

| 1 Yes

| 2 No

| [Questions FREADY_intro to LREADY4 are displayed as a table]

| **FREADY_intro** prepared for deployments intro

| Have you and/or your spouse taken the following steps to prepare for upcoming deployments?

| **LREADY1** Established a Power of Attorney

| Established a Power of Attorney for you to act on your spouse's behalf.

| 1 Yes

| 2 No

| |
 | | **LREADY2** Established a Power of Attorney for someone else
 | | Established a Power of Attorney for someone else to act on your spouse's behalf.
 | | 1 Yes
 | | 2 No

| | **LREADY3** signed a will for your spouse
 | | Signed an up-to-date Will for your spouse.
 | | 1 Yes
 | | 2 No

| | **LREADY4** signed a will for yourself
 | | Signed an up-to-date Will for you.
 | | 1 Yes
 | | 2 No

| | [Questions FREADY_intro to MREADY2 are displayed as a table]

| | **FREADY_intro** prepared for deployments intro
 | | Have you and/or your spouse taken the following steps to prepare for upcoming
 | | deployments?

| | **MREADY1** Talked with your spouse about the deployment
 | | Have you talked with your spouse about the deployment and how it might affect your
 | | marriage/marital relationship?
 | | 1 Yes
 | | 2 No

| | **MREADY2** Talked with counselor about the deployment
 | | Have you talked to a professional, like a counselor or educator, about your marriage and
 | | how it might
 | | be affected by the deployment.
 | | 1 Yes
 | | 2 No

| | IF SC6a1 > OR SC6 = Yes THEN

| | [Questions FREADY_intro to KREADY3 are displayed as a table]

| | **FREADY_intro** prepared for deployments intro
 | | Have you and/or your spouse taken the following steps to prepare for upcoming
 | | deployments?

| | **KREADY1** talked with a professional to prepare children for deployment
 | | Have you talked with a professional, like someone in children and youth services, about
 | | how to help

|| | your [children/child] with deployment.

|| | 1 Yes

|| | 2 No

|| |

|| | **KREADY2** prepared your children for deployment

|| | Have you sat down with your [children/child], either alone or with your spouse, and talked to

|| | them about what deployment means, and what to expect when a parent is deployed?

|| | 1 Yes

|| | 2 No

|| |

|| | **KREADY3** children connected with support activities

|| | [Has your child/Have any of your children] been connected with military sponsored, school sponsored,

|| | or non-military deployment support activities, such as Guard youth programs or Operation Purple Camp?

|| | 1 Yes

|| | 2 No

|| |

|| | **KREADY4** children in contact with other military children in community

|| | [Has your child/Have any of your children] been in contact with other military children in the community?

|| | 1 Yes

|| | 2 No

|| | 3 Don't know

|| |

|| | ENDIF

|| |

|| | ELSE

|| |

|| | [Questions FREADY_intro to FREADY3_dk are displayed as a table]

|| |

|| | **FREADY_intro** prepared for deployments intro

|| | Have you and/or your spouse taken the following steps to prepare for upcoming deployments?

|| |

|| | **FREADY1_dk** ensured family has money for living expenses

|| | Have you ensured the family would have money for rent, food, and living expenses (for example, set up

|| | an allotment, joint accounts).

|| | 1 Yes

|| | 2 No

|| |

|| | **FREADY2_dk** Developed financial plan to meet emergencies

|| | Have you developed a financial plan to meet emergencies.

|| | 1 Yes

2 No

FREADY3_dk more life insurance for self

Have you gotten or increased life insurance for yourself.

1 Yes

2 No

[Questions FREADY_intro to LREADY4_dk are displayed as a table]

FREADY_intro prepared for deployments intro

Have you and/or your spouse taken the following steps to prepare for upcoming deployments?

LREADY1_dk Established a Power of Attorney

Established a Power of Attorney for you to act on your spouse's behalf.

1 Yes

2 No

LREADY2_dk Power of Attorney for someone else

Established a Power of Attorney for someone else to act on your spouse's behalf.

1 Yes

2 No

LREADY3_dk signed will for spouse

Signed an up-to-date Will for your spouse.

1 Yes

2 No

LREADY4_dk signed own will

Signed an up-to-date Will for you.

1 Yes

2 No

[Questions FREADY_intro to MREADY2_dk are displayed as a table]

FREADY_intro prepared for deployments intro

Have you and/or your spouse taken the following steps to prepare for upcoming deployments?

MREADY1_dk Talked with your spouse about the deployment

Have you talked with your spouse about the deployment and how it might affect your marriage/marital relationship?

1 Yes

2 No

MREADY2_dk Talked with counselor about deployment

```

|| Have you talked to a professional, like a counselor or educator, about your marriage and
|| how it might
|| be affected by the deployment.
|| 1 Yes
|| 2 No
||
|| IF SC6a1 > OR SC6 = Yes THEN
||
|| [Questions FREADY_intro to KREADY3_dk are displayed as a table]
||
|| FREADY_intro prepared for deployments intro
|| Have you and/or your spouse taken the following steps to prepare for upcoming
|| deployments?
||
|| KREADY1_dk talked with professional to prepare children
|| Have you talked with a professional, like someone in children and youth services, about
|| how to help
|| your [children/child] with deployment.
|| 1 Yes
|| 2 No
||
|| KREADY2_dk prepared children for deployment
|| Have you sat down with your [children/child], either alone or with your spouse, and
|| talked to
|| them about what deployment means, and what to expect when a parent is deployed?
|| 1 Yes
|| 2 No
||
|| KREADY3_dk children connected with support activities
|| [Has your child/Have any of your children] been connected with military sponsored,
|| school sponsored,
|| or non-military deployment support activities, such as Guard youth programs or
|| Operation Purple Camp?
|| 1 Yes
|| 2 No
||
|| KREADY4 children in contact with other military children in community
|| [Has your child/Have any of your children] been in contact with other military children
|| in the community?
|| 1 Yes
|| 2 No
|| 3 Don't know
||
|| ENDIF
||
| ENDIF

```

| **MILCOM1** inspires to do best job possible

| Indicate the extent to which you agree or disagree with the following statements about being a military spouse.

| Being the spouse of a service member inspires me to do the best job I can as a spouse and or parent.

| 1 Strongly agree

| 2 Agree

| 3 Neither agree nor disagree

| 4 Disagree

| 5 Strongly disagree

| **MILCOM2** willing to make sacrifices

| (Indicate the extent to which you agree or disagree with the following statements about being a

| military spouse.) I am willing to make sacrifices to help [SERVICE MEMBER] serve in the military.

| 1 Strongly agree

| 2 Agree

| 3 Neither agree nor disagree

| 4 Disagree

| 5 Strongly disagree

| **MILCOM3** glad spouse is part of Service

| (Indicate the extent to which you agree or disagree with the following statements about being a

| military spouse.) I am glad that my spouse is part of the Service.

| 1 Strongly agree

| 2 Agree

| 3 Neither agree nor disagree

| 4 Disagree

| 5 Strongly disagree

| **COMP2a** for fill in RETENC spouse military branch

| Which service and component is your spouse affiliated with?

| 1 Army (active component)

| 2 Army Guard

| 3 Army Reserve

| 4 Navy (active component)

| 5 Navy Reserve

| 6 Air Force (active component)

| 7 Air National Guard

| 8 Air Reserve

| 9 Marine Corps (active component)

| 10 Marine Reserve

| **RETENA3** expected total years of Service
 | How many years total do you expect your spouse will remain a part of the service, including
 the time
 | that [SERVICE MEMBER] has already served?
 | 1 5 years or less
 | 2 6-9 years
 | 3 10-19 years
 | 4 20 years or more
 |
 | IF COMP2a = Army Guard OR COMP2a = Army Reserve OR COMP2a = Navy Reserve
 OR COMP2a = Air
 National Guard OR COMP2a = Air Reserve OR COMP2a = Marine Reserve THEN
 ||
 || **RETENC** servicemember Guard or Reserve plans
 || At the present time, which statement best describes your spouse's career plans?
 || 1 To leave the [military branch] before completing [his/her] present obligation
 || 2 To stay in the [military branch] and leave after [he/she] completes [his/her] present
 obligation
 || 3 To stay in the [military branch] beyond [his/her] present obligation, but not necessarily
 until [he/she] qualifies for retirement
 || 4 To stay in the [military branch] until [he/she] qualifies for retirement, but leave before
 [his/her] mandatory retirement age
 || 5 To stay in the [military branch] until [he/she] reaches [his/her] mandatory retirement age
 || 6 Don't know/unsure of [his/her] plans
 ||
 | ENDIF
 |
 | **RETENS** Servicemember stay or leave military
 | Do you think [SERVICE MEMBER] should stay on or leave the military? Please choose
 one of the
 | following five options. You can stop me when you hear the appropriate option.
 | 1 you strongly favor [his/her] staying,
 | 2 you somewhat favor [his/her] staying,
 | 3 you have no opinion one way or the other,
 | 4 you somewhat favor [his/her] leaving,
 | 5 you strongly favor [his/her] leaving,
 |
 | IF language = CAWI (self-administered web interview) THEN
 ||
 || [Questions support_intro to support9 are displayed as a table]
 ||
 || **support_intro** sources of support intro
 || For the next set of questions, we would like to ask you some questions about the sources of
 support
 || available to you and your family. In general, how much are you able to draw on each the
 following

sources for support when you needed it?

support1 sources of support own family
Your own family
1 Very much
2 Somewhat
3 Not at all

support2 sources of support spouse family
Your spouse's family
1 Very much
2 Somewhat
3 Not at all

support3 sources of support civilian friends
Your civilian friends
1 Very much
2 Somewhat
3 Not at all

IF EMP1 = Working full-time; that is, 35 or more hours per week in one or more jobs;
including
self-employment or EMP1= Working part-time (less than 35 hours per week) THEN

support4 sources of support employer
Your employer outside the home
1 Very much
2 Somewhat
3 Not at all

support5 sources of support Your coworkers
Your coworkers
1 Very much
2 Somewhat
3 Not at all

ENDIF

support6 sources of support Other military families
Other military families
1 Very much
2 Somewhat
3 Not at all

support7 sources of support FRG leader
An FRG leader or a unit or Service point of contact

1 Very much

2 Somewhat

3 Not at all

support8 sources of support military programs

Support programs offered by the military

1 Very much

2 Somewhat

3 Not at all

support9 sources of support non military programs

Non-military support programs offered in the community

1 Very much

2 Somewhat

3 Not at all

ELSE

[Questions support_intro to support9_dkrf are displayed as a table]

support_intro sources of support intro

For the next set of questions, we would like to ask you some questions about the sources of support

available to you and your family. In general, how much are you able to draw on each the following

sources for support when you needed it?

support1_dkrf sources of support own family

Your own family

1 Very much

2 Somewhat

3 Not at all

support2_dkrf sources of support spouse family

Your spouse's family

1 Very much

2 Somewhat

3 Not at all

support3_dkrf sources of support civilian friends

Your civilian friends

1 Very much

2 Somewhat

3 Not at all

IF EMP1 = Working full-time; that is, 35 or more hours per week in one or more jobs;

including

| self-employment or EMP1= Working part-time (less than 35 hours per week) THEN

| |

| | **support4_dkrf** sources of support employer

| | Your employer outside the home

| | 1 Very much

| | 2 Somewhat

| | 3 Not at all

| |

| | **support5_dkrf** sources of support Your coworkers

| | Your coworkers

| | 1 Very much

| | 2 Somewhat

| | 3 Not at all

| |

| ENDIF

| |

| | **support6_dkrf** sources of support Other military families

| | Other military families

| | 1 Very much

| | 2 Somewhat

| | 3 Not at all

| |

| | **support7_dkrf** sources of support FRG leader

| | An FRG leader or a unit or Service point of contact

| | 1 Very much

| | 2 Somewhat

| | 3 Not at all

| |

| | **support8_dkrf** sources of support military programs

| | Support programs offered by the military

| | 1 Very much

| | 2 Somewhat

| | 3 Not at all

| |

| | **support9_dkrf** sources of support non military programs

| | Non-military support programs offered in the community

| | 1 Very much

| | 2 Somewhat

| | 3 Not at all

| |

| ENDIF

| |

| **ISUP1** options available if you needed place to live next 12 months

| During the next 12 months, if you and your spouse needed a place to live for a few weeks,

are there

| enough people you can count on, not enough people, or no one you can count on?

| 1 Enough people you can count on

| 2 Not enough people

| 3 No one you can count on

| **ISUP2** options available if needed care next 12 months

| During the next 12 months, if you and your spouse needed someone to take care of either of you if you

| got sick, are there enough people you can count on, not enough people, or no one you can count on?

| 1 Enough people you can count on

| 2 Not enough people

| 3 No one you can count on

| IF SC6 = Yes THEN

|| **ISUP3** options available if needed child care next 12 months

|| During the next 12 months, if you needed help with child care, are there enough people you can count

|| on, not enough people, or no one you can count on?

|| 1 Enough people you can count on

|| 2 Not enough people

|| 3 No one you can count on

| ENDIF

| **ISUP4** options available if needed emergency loan next 12 months

| During the next 12 months, if you needed someone to loan you money in an emergency, are there enough

| people you can count on, not enough people, or no one you can count on?

| 1 Enough people you can count on

| 2 Not enough people

| 3 No one you can count on

| **ESUP** have someone to listen to your problems

| If you needed someone to listen to your problems if you were feeling low, are there enough people you

| can count on, not enough people, no one you can count on?

| 1 Enough people you can count on

| 2 Not enough people

| 3 No one you can count on

| **FSOC** family socialize with other military families

| Do you and/or other members of your immediate family socialize or communicate regularly with other military families?

| 1 Yes

```

| 2 No
|
| USEM1 aware of these military sponsored programs
| Military-sponsored family support programs offer services to military personnel and their
families,
| particularly during deployment. Such services include, for example, Military OneSource,
and [specific military program
| fill]. Are you aware of any of these military-sponsored programs?
| 1 Yes
| 2 No
|
| IF USEM1 = Yes THEN
|
| | USEM2 participated in military sponsored programs
| | Have you or members of your immediate family ever participated in or used such a
program?
| | 1 Yes
| | 2 No
|
| | IF USEM2 = Yes THEN
| |
| | | [Questions USEM3 to USEM3_other are displayed as a table]
| |
| | | USEM3 participated in which military sponsored programs
| | | Which ones?
| | | 1 Military OneSource
| | | 2 Support from unit members or chain of command
| | | 3 Support from Rear detachment/unit members that did not deploy with the rest of the
unit
| | | 4 Legal counseling provided by the military
| | | 5 Financial counseling provided by the military
| | | 6 Financial emergency assistance provided by the military
| | | 7 Complementary child care provided by the military
| | | 8 Children and Youth Services
| | | 9 Relief/aid society
| | | 10 Military chaplain
| | | 11 Other, specify:
| |
| | | USEM3_other specify other military sponsored programs
| | | String
| |
| | | IF Other, specify: IN USEM3 AND USEM3_other = EMPTY THEN
| | | | error_otherSpecify error specify other
| | | | You selected "other", but did not specify an answer. Please go back and check your
answer.
| | | ENDIF

```

```

| |
| | USEM4 last time you used one of these services
| | How recently was the last time you used one of these services?
| | 1 Today
| | 2 This week
| | 3 This month
| | 4 Within the past 4 months
| | 5 Within the past year
| |
| | ENDIF
| |
| | ENDIF
|
| USEM5 received support from any of these nonmilitary sources
| Have you or members of your immediate family ever received support from any of the
| following non-military sources?
| 1 Child care offered in the community
| 2 Child or youth programs (for example, after-school programs, recreation programs, etc)
| 3 Family services provided by faith-based organization, church, etc
| 4 Financial counseling provided in community
| 5 Legal counseling provided in the community
| 6 Support group for spouses, not provided by the military
| 7 None
|
| IF None IN USEM5 AND CARDINAL(USEM5)> Child care offered in the community
| THEN
| | error_NONE error specify other
| | You selected an answer, and also selected "None." Please go back and check your answer.
| | ENDIF
|
| [Questions AGE_intro to birthyear are displayed as a table]
|
| AGE_intro AGE intro
| For this last set of questions, we would like to get some basic information about you. What
| is your date of birth?
|
| birthmonth month of birth
| Month:
| 1 January
| 2 February
| 3 March
| 4 April
| 5 May
| 6 June
| 7 July
| 8 August

```

| 9 September
 | 10 October
 | 11 November
 | 12 December
 |
 | **birthday** day of birth
 | Day:
 | Range: 1..31
 |
 | **birthyear** year of birth
 | Year:
 | Range: 1900..1993
 |
 | IF birthmonth = RESPONSE AND birthday = RESPONSE AND birthyear =
 | RESPONSE THEN
 | |
 | | **AGE2** confirm calculated age
 | | So just to confirm, on your last birthday, you turned [calculated age] years old? If this is
 | not
 | | correct, please use the “ < Back” button on the screen below the answer choices to go
 | back and
 | | change your answer. Please do not use the browser’s “back” button.
 | | 1 Age Correct
 | | 2 Age Incorrect (Please go back and re-enter correct DOB)
 | |
 | ENDIF
 |
 | **RACE1** what is your race
 | Are you Spanish, Hispanic, or Latino/Latina?
 | 1 No, not Spanish/Hispanic/Latino(a)
 | 2 Yes, Mexican, Mexican-American, Chicano
 | 3 Yes, Puerto Rican
 | 4 Yes, Cuban
 | 5 Yes, other Spanish/Hispanic/Latino(a)
 |
 | [Questions RACE2 to RACE2_other are displayed as a table]
 |
 | **RACE2** what is your race not hispanic
 | What is your race?
 | 1 White
 | 2 Black or African American
 | 3 American Indian or Alaska Native
 | 4 Asian (for example, Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese)
 | 5 Native Hawaiian or other Pacific Islander (for example, Samoan, Guamanian, or
 | Chamorro), or
 | 6 Some OTHER race

```

| RACE2_other what is your other race not listed
| String
|
| IF Some OTHER race in RACE2 AND RACE2_other = EMPTY THEN
| | error_other error other
| | Your answer contains an error. Please go back and check your answer.
| ENDIF
|
| IMM born a citizen of the United States
| Were you born a citizen of the United States?
| 1 Yes
| 2 No
|
| EDU1 highest level of school you completed
| What is the highest degree or level of school that you have completed?
| 1 12 years or less of school (no diploma)
| 2 High school graduate—high school diploma or equivalent (GED)
| 3 Some college credit, but less than 1 year
| 4 1 or more years of college, no degree
| 5 Associate’s degree (includes AA, AS)
| 6 Vocational/technical diploma (for example, trade school, certification)
| 7 Bachelor’s degree (includes BA, AB, BS)
| 8 Master’s, doctoral, or professional school degree (includes MA, MS, MEng, MBA, MEd,
| EdD, MDE, PhD, MD, JD, DVM)
|
| EDU2 currently enrolled in school
| Are you currently enrolled in school?
| 1 Yes
| 2 No
|
| IF EDU2 = Yes THEN
| |
| | [Questions EDU3 to EDU3_other are displayed as a table]
| |
| | EDU3 type of school enrolled in
| | What type of school are you enrolled in? It does not matter if it is traditional or online. Is
| | it a....
| | 1 High school
| | 2 Vocational school
| | 3 2-year college
| | 4 Undergraduate program at 4-year college or university
| | 5 Post-bachelor’s degree program leading to a master’s, doctoral, or professional degree, or
| | 6 Some other type of school:
| |
| | EDU3_other other type of school enrolled in

```

```

|| String
||
|| IF EDU3 = Some other type of school: AND EDU3_other = EMPTY THEN
|| | error_otherSpecify error specify other
|| | You selected "other", but did not specify an answer. Please go back and check your
|| | answer.
|| | ENDIF
||
| ENDIF
|
| exit_END_SCRIPT exit question
| That's the end of the main part of our interview. In about 4 months we would like to have
| you complete
| a much shorter web survey, so we are asking all couples for some information to help us stay
| in contact.
|
| contact_confirmNameAddress confirm name and address
| First I would like to confirm your name and address so that we can mail you a gift card for
| your
| family's participation in the baseline survey. Is that okay?
| 1 Yes
| 2 No
|
| IF contact_confirmNameAddress = Yes THEN
|
| | [Questions contact_firstName to contact_otherNames are displayed as a table]
|
| | We have your name as [spname] Can I record your full name here? Any other names you
| | go by?
| | contact_firstName R spouse first name
| | contact_middleName R middle name
| | contact_lastName R last name
| | contact_otherNames R other names or alias
| | String
|
| IF ( SC6a1 > or SC6a2 > ) THEN
|
| | confirm_childLastName confirm child last name
| | We have your last name recorded as: [spouse last name] Is that the same or different for
| | [child name]?
| | 1 Child has same last name
| | 2 Child has different last name
|
| | IF confirm_childLastName = Child has different last name THEN
| |
| | | child_lastName child last name if different

```

```

||| Please enter [child name]'s last name:
||| String
|||
||| ENDIF
|||
||| ENDIF
|||
||| [Questions contact_streetAddress1 to contact_zip are displayed as a table]
|||
||| What is your mailing address?
||| contact_streetAddress1 R mailing street address 1
||| contact_streetAddress2 R mailing street address 2
||| contact_city R city mailing address
||| contact_state R state mailing address
||| contact_country R country mailing address
||| contact_zip R zip code mailing address
||| String
|||
||| IF contact_streetAddress1_4mo = EMPTY OR contact_streetAddress2_4mo = EMPTY
OR contact_city_4mo =
||| EMPTY OR contact_state_4mo = EMPTY OR contact_country_4mo = EMPTY OR
contact_zip_4mo = EMPTY THEN
|||
||| contact_mail4months mailing address same in 4 months
||| Do you expect your mailing address in four months to be the same as your current
mailing address?
||| 1 Yes
||| 2 No
|||
||| IF contact_mail4months = No THEN
|||
||| [Questions contact_streetAddress1_4mo to contact_zip_4mo are displayed as a table]
|||
||| What will your new mailing address be in 4 months?
||| contact_streetAddress1_4mo R mailing address 1 in 4 months
||| contact_streetAddress2_4mo R mailing address 2 in 4 months
||| contact_city_4mo R city in 4 months
||| contact_state_4mo R state in 4 months
||| contact_country_4mo R country in 4 months
||| contact_zip_4mo R zip code in 4 months
||| String
|||
||| ENDIF
|||
||| ENDIF
|||

```

```

| | contact_mailingSameAsHome mailing address same as home
| | Is your mailing address the same as your home address?
| | 1 Yes
| | 2 No
| |
| | IF contact_mailingSameAsHome = No THEN
| | |
| | | [Questions contact_streetAddress1_home to contact_zip_home are displayed as a table]
| | |
| | | What is your home address?
| | | contact_streetAddress1_home R home street address 1
| | | contact_streetAddress2_home R home street address 2
| | | contact_city_home R city home address
| | | contact_state_home R state home address
| | | contact_country_home R country home address
| | | contact_zip_home R zip code home address
| | | String
| | |
| | | contact_streetAddress_home4mo R home address same in 4 months
| | | Do you expect your home address to be the same in four months?
| | | 1 Yes
| | | 2 No
| | |
| | | ENDIF
| | |
| | | contact_landline home landline telephone number
| | | What is your correct home landline telephone number, including area code? [PLEASE
| | | ENTER
| | | 000-000-0000 IF NO LANDLINE PHONE] |__|__|__| (Area Code) |__|__|__| -
| | | |__|__|__|__|
| | | String
| | |
| | | contact_haveCellphone have cell phone
| | | Do you have a separate cell phone number?
| | | 1 Yes
| | | 2 No
| | |
| | | IF contact_haveCellphone = Yes THEN
| | | |
| | | | contact_cellphone cell phone number
| | | | What is your correct cell number, including area code? [PLEASE ENTER 000-000-
| | | | 0000 IF NO CELL
| | | | PHONE] |__|__|__| (Area Code) |__|__|__| - |__|__|__|__|
| | | | String
| | | |
| | | | ENDIF

```



```

||
|| contact_haveEmail have email account
|| In the future, we plan to contact you by e-mail to share information about the study and
to invite
|| you to participate in future surveys over a secure web server. Since your survey responses
are
|| private, we would like to send these messages to an account that only you have access to.
You also
|| will have the option to participate in the follow up surveys by phone if you choose or if
you believe
|| that would offer you more privacy. Do you have an e-mail account?
|| 1 Yes
|| 2 No
|| 3 Do not contact me by email. Prefer to do surveys on the phone.
||
|| IF contact_haveEmail = Yes THEN
||
|| contact_email email account
|| What is this e-mail address? _____@_____ (END SHOULD BE .com,
.edu, .gov, .net, .org, .mil)
|| String
||
|| contact_emailAccess email account access
|| Does anyone else besides you have the password or access to this email account?
|| 1 Yes
|| 2 No
||
|| IF contact_emailAccess = Yes THEN
||
|| contact_emailAccessWho who has email account access
|| Can you tell us who else can access the account?
|| 1 Spouse
|| 2 Children
|| 3 Other family members
|| 4 Friends
|| 5 Employers
|| 6 Others
||
|| ENDIF
||
|| ENDIF
||
|| IF ( contact_haveCellphone = Yes ) AND ( contact_landline = response AND contact_
landline !=
|| "000-000-0000" ) THEN
||

```

```

|| | contact_prefer preferred contact phone
|| | Do you prefer that we contact you by landline phone or cell phone?
|| | 1 Landline
|| | 2 Cell Phone
|| | 3 Do not contact me by phone.
|| |
|| | ENDIF
|| |
|| | contact1_name alternate contact person1
|| | In case we have difficulty getting in touch with you in the future, could you give me the
name,
|| | address, and phone number of two people not currently living with you who will always
know your
|| | whereabouts? Let's start with the first one.... What is this person's name?
|| | String
|| |
|| | IF contact1_name = RESPONSE THEN
|| |
|| | [Questions contact1_related to contact1_related_other are displayed as a table]
|| |
|| | contact1_related alternate contact person1
|| | How is this person related to you?
|| | 1 MOTHER
|| | 2 FATHER
|| | 3 STEPMOTHER
|| | 4 STEPFATHER
|| | 5 GRANDMOTHER
|| | 6 GRANDFATHER
|| | 7 DAUGHTER
|| | 8 SON
|| | 9 AUNT
|| | 10 UNCLE
|| | 11 SISTER (including half sister, step sister)
|| | 12 BROTHER (including half brother, step brother)
|| | 13 OTHER RELATIVES
|| | 14 FRIEND
|| | 15 COWORKER
|| | 16 OTHER, SPECIFY-LIMITED:
|| | 99 Prefer not to answer
|| |
|| | contact1_related_other other relation for alternate contact
|| | How is this person related to you?
|| | String
|| |
|| | IF contact1_related = OTHER, SPECIFY-LIMITED: AND contact1_related_other
=EMPTY THEN

```

```

||| error_otherSpecify error specify other
||| You selected "other", but did not specify an answer. Please go back and check your
answer.
||| ENDFIF
|||
||| [Questions contact1_streetAddress1 to contact1_zip are displayed as a table]
|||
||| What is his/her mailing address?
||| contact1_streetAddress1 contact1 mailing street address 1
||| contact1_streetAddress2 contact1 mailing street address 2
||| contact1_city contact1 city mailing address
||| contact1_state contact1 state mailing address
||| contact1_country contact1 country mailing address
||| contact1_zip contact1 zip code mailing address
||| String
|||
||| contact1_landline home landline telephone number
||| What is his/her home landline phone number? [PLEASE ENTER 000-000-0000 IF NO
LANDLINE PHONE]
||| |__|__|__| (Area Code) |__|__|__| - |__|__|__|__|
||| String
|||
||| contact1_cellphone cell phone number
||| How about a cell number? [PLEASE ENTER 000-000-0000 IF NO CELL PHONE]
||| |__|__|__| (Area
||| Code) |__|__|__| - |__|__|__|__|
||| String
|||
||| contact2_name alternate contact person2
||| OK. Now how about a second person who would know your whereabouts in case we
can't reach you in
||| 4 months? What is this person's name?
||| String
|||
||| IF contact2_name = RESPONSE THEN
|||
||| [Questions contact2_related to contact2_related_other are displayed as a table]
|||
||| contact2_related alternate contact person2
||| How is this person related to you?
||| 1 Mother
||| 2 Father
||| 3 Stepmother
||| 4 Stepfather
||| 5 Grandmother
||| 6 Grandfather

```

```

|||| 7 Daughter
|||| 8 Son
|||| 9 Aunt
|||| 10 Uncle
|||| 11 Sister (including half sister, step sister)
|||| 12 Brother (including half brother, step brother)
|||| 13 Other Relatives
|||| 14 Friend
|||| 15 Coworker
|||| 16 Other, Specify-Limited:
|||| 99 Prefer Not To Answer
||||
|||| contact2_related_other other relation for alternate contact
|||| How is this person related to you?
|||| String
||||
|||| IF contact2_related = OTHER, SPECIFY-LIMITED: AND contact2_related_
other=EMPTY THEN
|||| | error_otherSpecify error specify other
|||| | You selected "other", but did not specify an answer. Please go back and check your
answer.
|||| | ENDFIF
||||
|||| [Questions contact2_streetAddress1 to contact2_zip are displayed as a table]
||||
|||| What is his/her mailing address?
|||| contact2_streetAddress1 contact1 mailing street address 1
|||| contact2_streetAddress2 contact1 mailing street address 2
|||| contact2_city contact1 city mailing address
|||| contact2_state contact1 state mailing address
|||| contact2_country contact1 country mailing address
|||| contact2_zip contact1 zip code mailing address
|||| String
||||
|||| contact2_landline home landline telephone number
|||| What is his/her home landline phone number? [PLEASE ENTER 000-000-0000 IF
NO LANDLINE PHONE]
|||| |__|__|__| (Area Code) |__|__|__| - |__|__|__|__|
|||| String
||||
|||| contact2_cellphone cell phone number
|||| How about a cell number? [PLEASE ENTER 000-000-0000 IF NO CELL PHONE]
|__|__|__| (Area
|||| Code) |__|__|__| - |__|__|__|__|
|||| String
||||

```

```

||| ENDIF
|||
||| ENDIF
|||
| ENDIF
|
| exit_MILITARY_ONE_SOURCE exit MILITARY ONE SOURCE
| MILITARY ONE SOURCE We would like to offer you the phone number for Military
OneSource. Military
| OneSource is a free 24 hour service that is available 7 days a week to provide a full range of
| services, across the deployment cycle, to military personnel and their families, at no cost.
| Military OneSource Phone Numbers: Stateside: CONUS: 1-800-342-9647 Overseas:
*OCONUS Universal Free
| Phone: 800-3429-6477 Collect from Overseas: OCONUS Collect: 484-530-5908 En
Español llame al:
| 1-877-888-0727 TTY/TDD: 1-800-346-9188 Korea DSN: 550-ARMY (2769)szq Military
OneSource Website:
| http://www.militaryonesource.com As a precaution, we also give out the national suicide
hotline
| number to all the people we interview. It is 1-800-273-TALK (8255). Thank you for the
time that
| you took and your willingness to share your experiences. You have been very helpful. In
about 4 months
| you will hear from us again to arrange the next web survey. There will be a lot fewer
questions and the
| whole thing should take less time.
|
| contact_INPUT anything else to add
| Do you have anything else you want to add or share about your experience participating?
| Open
|
| IF language = CATI (phone interview) THEN
|
| | OBS_preparation preparation for obs
| | Thank you for completing your version of the survey. Please allow me a moment to see if
another
| | member of your household qualifies for the survey.
| |
| | [Questions OBS_intro to OBS6 are displayed as a table]
| |
| | OBS_intro intro obs
| | [IWER: DO NOT READ THIS QUESTION OUT LOUD - ANSWER IT
YOURSELF.]
| |
| | OBS1 rate respondent understanding
| | How would you rate the respondent's understanding of the interview?

```

- 1 Poor
- 2 Fair
- 3 Good
- 4 Excellent

OBS2 rate respondent understanding

From your viewpoint, did the respondent have to modify any answers because someone else was nearby or within earshot?

- 1 Yes
- 2 No

OBS3 rate respondent cooperation

How cooperative was the respondent?

- 1 Very
- 2 Moderately
- 3 Slightly
- 4 Not at all

OBS4 respondent not truthful

Were there times during the interview when it seemed to you that the respondent was not answering truthfully?

- 1 Yes
- 2 No

OBS6 rate overall quality

How would you rate the overall quality of the interview?

- 1 Poor
- 2 Fair
- 3 Good
- 4 Excellent

ENDIF

ENDIF

Baseline Study Child Survey

This appendix includes the baseline instrument script for the child instrument. The exact CATI and web programming code is included below, along with specific interviewer instructions for coding responses.

Deployment Life Study Child Baseline

survey_intro survey intro

Here's how this will work: In this survey, you will be asked questions about you, your parents, and your experiences as part of a military family. First, the survey will get some basic information about you. Then the survey will ask about your parents. Finally the survey will ask you about your life – things that are going well, any difficulties you have, and the places you go to get support. In order for the survey results to be useful, it is very important that everyone gives us honest answers. Your answers will not be shared with anyone else, and it is up to you whether you want to answer these questions. If you come to any question you would rather not answer, just skip over it.

sc6c Relationship with military parent

What is your relationship to your military parent ([SERVICE MEMBER name])? He/she is your...

- 1 Mom
- 2 Dad
- 3 Stepmom/Stepmother
- 4 Stepdad/Stepfather
- 5 Grandparent
- 6 Sister
- 7 Brother
- 8 Mom's boyfriend/partner
- 9 Dad's girlfriend/partner
- 10 Other military parent/guardian

IF sc6c = nonresponse THEN

| **sc6c_sc6d_error** error no answer sc6c sc6d

| You did not answer the previous question. Your answer to this question is very important to us, please

| click the back button to go back and select an answer.
ENDIF

sc6d Relationship with spouse parent

What is your relationship to your other parent ([SPOUSE name])? He/she is your...

- 1 Mom
- 2 Dad
- 3 Stepmom/Stepmother
- 4 Stepdad/Stepfather
- 5 Grandparent
- 6 Sister
- 7 Brother
- 8 Mom's boyfriend/partner
- 9 Dad's girlfriend/partner
- 10 Other non-military parent/guardian

IF sc6d = nonresponse THEN

| **sc6c_sc6d_error** error no answer sc6c sc6d

| You did not answer the previous question. Your answer to this question is very important to us, please

| click the back button to go back and select an answer.

ENDIF

CHILD_AGE Age of child

What is your age?

Range: 10..22

grade_intro current student

Are you in school right now?

- 1 Yes
- 2 No

IF grade_intro = Yes THEN

| **GRADE1** what grade currently in

| What grade are you in?

- | 1 Less than 4th grade
- | 2 4th grade
- | 3 5th grade
- | 4 6th grade
- | 5 7th grade
- | 6 8th grade
- | 7 9th grade
- | 8 10th grade
- | 9 11th grade
- | 10 12th grade

```

| 13 College / vocational / tech school
|
| ELSE
|
| GRADE2 what grade if not in school
| What grade did you most recently complete?
| 1 Less than 4th grade
| 2 4th grade
| 3 5th grade
| 4 6th grade
| 5 7th grade
| 6 8th grade
| 7 9th grade
| 8 10th grade
| 9 11th grade
| 10 12th grade
| 11 Dropped out of high school and currently not enrolled
| 12 High school grad/GED but not currently enrolled
| 13 College / vocational / tech school
|
| ENDIF

```

```

IF CGENDER =empty THEN
|
| CGENDER FOCAL CHILD gender
| What is your gender?
| 1 Male
| 2 Female
|
| ENDIF

```

RELQ_INTRO intro to military parent CHILD RELQ section

Thanks for that. In the next part of our the survey, there will be questions about how you get along with your [military parent] For each question, check if this is true about you almost always, often, sometimes, once in a while, or not at all.

FL_RELQ_sentences FL_RELQ sentences

RELQ section randomization FL_RELQ array: The following 10 questions are randomized:

1. Is your [military parent] a good listener? 2. Can your[military parent] tell how you are feeling without asking you? [IWER: YOU CAN REPHRASE IF NEEDED TO: Does your [military parent] seem to notice when something is bothering you?] 3. Does your [military parent] try to understand what you think? 4. Do you talk about your problems with your [military parent]? 5. Are there things that you do not talk about with your [military parent]? 6. Does your [military parent] insult you when [he/she] is angry with you? [IWER: IF NEEDED MAY DEFINE INSULT AS PUT YOU DOWN] 7. Do you think that you can tell your [military parent] how you really feel about some things? 8. Can you let your [military parent] know what is bothering you? 9. Are there certain things which your

[military parent] does not allow you to talk about with [her/him]? 10. Can you speak your mind even if your [military parent] disagrees with you?Bottom of Form

RELQ_r1 randomized RELQ questions 1

(Is this true about you almost always, often, sometimes, once in a while, or not at all...)

[randomized RELQ questions]

- 1 Almost always
- 2 Often
- 3 Sometimes
- 4 Once in a while
- 5 Not at all

RELQ_r2 randomized RELQ questions 2

(Is this true about you almost always, often, sometimes, once in a while, or not at all...)

[randomized RELQ questions]

- 1 Almost always
- 2 Often
- 3 Sometimes
- 4 Once in a while
- 5 Not at all

RELQ_r3 randomized RELQ questions 3

(Is this true about you almost always, often, sometimes, once in a while, or not at all...)

[randomized RELQ questions]

- 1 Almost always
- 2 Often
- 3 Sometimes
- 4 Once in a while
- 5 Not at all

RELQ_r4 randomized RELQ questions 4

(Is this true about you almost always, often, sometimes, once in a while, or not at all...)

[randomized RELQ questions]

- 1 Almost always
- 2 Often
- 3 Sometimes
- 4 Once in a while
- 5 Not at all

RELQ_r5 randomized RELQ questions 5

(Is this true about you almost always, often, sometimes, once in a while, or not at all...)

[randomized RELQ questions]

- 1 Almost always
- 2 Often
- 3 Sometimes
- 4 Once in a while

5 Not at all

RELQ_r6 randomized RELQ questions 6

(Is this true about you almost always, often, sometimes, once in a while, or not at all...)

[randomized RELQ questions]

1 Almost always

2 Often

3 Sometimes

4 Once in a while

5 Not at all

RELQ_r7 randomized RELQ questions 7

(Is this true about you almost always, often, sometimes, once in a while, or not at all...)

[randomized RELQ questions]

1 Almost always

2 Often

3 Sometimes

4 Once in a while

5 Not at all

RELQ_r8 randomized RELQ questions 8

(Is this true about you almost always, often, sometimes, once in a while, or not at all...)

[randomized RELQ questions]

1 Almost always

2 Often

3 Sometimes

4 Once in a while

5 Not at all

RELQ_r9 randomized RELQ questions 9

(Is this true about you almost always, often, sometimes, once in a while, or not at all...)

[randomized RELQ questions]

1 Almost always

2 Often

3 Sometimes

4 Once in a while

5 Not at all

RELQ_r10 randomized RELQ questions 10

(Is this true about you almost always, often, sometimes, once in a while, or not at all...)

[randomized RELQ questions]

1 Almost always

2 Often

3 Sometimes

4 Once in a while

5 Not at all

PANAS_INTRO intro to panas section

The next questions are about how you communicate with your [military parent] For each one, check whether, after talking with your [military parent] you feel that way never, rarely, sometimes, often, or all the time.

FL_PA_sentences FL_PA array of 8 string for randomizing PANAS questions 1 thru 8
PANAS section randomization FL_PA array: The following 8 questions are randomized:
After talking with your [military parent], how often do you feel happy? After talking with your [military parent], how often do you feel supported? After talking with your [military parent], how often do you feel upset? After talking with your [military parent], how often do you feel depressed? After talking with your [military parent], how often do you feel comforted? After talking with your [military parent], how often do you feel worried? After talking with your [military parent], how often do you feel frustrated? After talking with your [military parent], how often do you feel encouraged?

PA_r1 randomized PANAS questions 1

[randomized PANAS questions]

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 5 All the time

PA_r2 randomized PANAS questions 2

[randomized PANAS questions]

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 5 All the time

PA_r3 randomized PANAS questions 3

[randomized PANAS questions]

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 5 All the time

PA_r4 randomized PANAS questions 4

[randomized PANAS questions]

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often

5 All the time

PA_r5 randomized PANAS questions 5

[randomized PANAS questions]

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 5 All the time

PA_r6 randomize PANAS questions 6

[randomized PANAS questions]

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 5 All the time

PA_r7 randomize PANAS questions 7

[randomized PANAS questions]

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 5 All the time

PA_r8 randomize PANAS questions 8

[randomized PANAS questions]

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 5 All the time

RELQB_INTRO intro to spouse parent CHILD RELQB

In the next part of the survey, we ask questions about how you get along with your [spouse parent] For each question, check if this is true about you almost always, often, sometimes, once in a while, or not at all.

| **FL_RELQB_sentences** FL_RELQB sentences

RELQB section randomization FL_RELQB array: The following 10 questions are randomized: 1. Is your [spouse parent] a good listener? 2. Can your [spouse parent] tell how you are feeling without asking you? [IWER: YOU CAN REPHRASE IF NEEDED TO: Does your [spouse parent] seem to notice when something is bothering you?] 3. Does your [spouse parent] try to understand what you think? 4. Do you talk about your problems with your [spouse parent]? 5. Are there things that you do not talk about with your [spouse parent]

relationship]? 6. Does your [spouse parent] insult you when [he/she] is angry with you? [IWER: IF NEEDED MAY DEFINE INSULT AS PUT YOU DOWN] 7. Do you think that you can tell your [spouse parent] how you really feel about some things? 8. Can you let your [spouse parent] know what is bothering you? 9. Are there certain things which your [spouse parent] does not allow you to talk about with [her/him]? 10. Can you speak your mind even if your [spouse parent] disagrees with you?

RELQB_r1 randomized RELQB questions 1

(Is this true about you almost always, often, sometimes, once in a while, or not at all...)

[randomized RELQB questions]

- 1 Almost always
- 2 Often
- 3 Sometimes
- 4 Once in a while
- 5 Not at all

RELQB_r2 randomized RELQB questions 2

(Is this true about you almost always, often, sometimes, once in a while, or not at all...)

[randomized RELQB questions]

- 1 Almost always
- 2 Often
- 3 Sometimes
- 4 Once in a while
- 5 Not at all

RELQB_r3 randomized RELQB questions 3

(Is this true about you almost always, often, sometimes, once in a while, or not at all...)

[randomized RELQB questions]

- 1 Almost always
- 2 Often
- 3 Sometimes
- 4 Once in a while
- 5 Not at all

RELQB_r4 randomized RELQB questions 4

(Is this true about you almost always, often, sometimes, once in a while, or not at all...)

[randomized RELQB questions]

- 1 Almost always
- 2 Often
- 3 Sometimes
- 4 Once in a while
- 5 Not at all

RELQB_r5 randomized RELQB questions 5

(Is this true about you almost always, often, sometimes, once in a while, or not at all...)

[randomized RELQB questions]

- 1 Almost always
- 2 Often
- 3 Sometimes
- 4 Once in a while
- 5 Not at all

RELQB_r6 randomized RELQB questions 6

(Is this true about you almost always, often, sometimes, once in a while, or not at all...)

[randomized RELQB questions]

- 1 Almost always
- 2 Often
- 3 Sometimes
- 4 Once in a while
- 5 Not at all

RELQB_r7 randomized RELQB questions 7

(Is this true about you almost always, often, sometimes, once in a while, or not at all...)

[randomized RELQB questions]

- 1 Almost always
- 2 Often
- 3 Sometimes
- 4 Once in a while
- 5 Not at all

RELQB_r8 randomized RELQB questions 8

(Is this true about you almost always, often, sometimes, once in a while, or not at all...)

[randomized RELQB questions]

- 1 Almost always
- 2 Often
- 3 Sometimes
- 4 Once in a while
- 5 Not at all

RELQB_r9 randomized RELQB questions 9

(Is this true about you almost always, often, sometimes, once in a while, or not at all...)

[randomized RELQB questions]

- 1 Almost always
- 2 Often
- 3 Sometimes
- 4 Once in a while
- 5 Not at all

RELQB_r10 randomized RELQB questions 10

(Is this true about you almost always, often, sometimes, once in a while, or not at all...)

[randomized RELQB questions]

- 1 Almost always

- 2 Often
- 3 Sometimes
- 4 Once in a while
- 5 Not at all

PANASB_INTRO intro to PANASB section

The next questions are about how you communicate with your [spouse parent] For each one, check whether, after talking with your [spouse parent] you feel that way never, rarely, sometimes, often, or all the time.

FL_PAB_sentences FL_PAB sentences

PANASB section randomization FL_PAB array: The following 8 questions are randomized: After talking with your [spouse parent], how often do you feel happy? After talking with your [spouse parent], how often do you feel supported? After talking with your [spouse parent], how often do you feel upset? After talking with your [spouse parent], how often do you feel depressed? After talking with your [spouse parent], how often do you feel comforted? After talking with your [spouse parent], how often do you feel worried? After talking with your [spouse parent], how often do you feel frustrated? After talking with your [spouse parent], how often do you feel encouraged?

PAB_r1 randomized PANASB questions 1

[randomized PANASB questions]

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 5 All the time

PAB_r2 randomized PANASB questions 2

[randomized PANASB questions]

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 5 All the time

PAB_r3 randomized PANASB questions 3

[randomized PANASB questions]

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 5 All the time

PAB_r4 randomized PANASB questions 4

[randomized PANASB questions]

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 5 All the time

PAB_r5 randomized PANASB questions 5
[randomized PANASB questions]

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 5 All the time

PAB_r6 randomize PANASB questions 6
[randomized PANASB questions]

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 5 All the time

PAB_r7 randomize PANASB questions 7
[randomized PANASB questions]

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 5 All the time

PAB_r8 randomize PANASB questions 8
[randomized PANASB questions]

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 5 All the time

FES_intro family environment intro

Now the survey asks about what it is like in your family, and for each statement check if it describes

your family well, somewhat, or not at all.

FL_FE_sentences FL_FE sentences

FE section randomization FL_FE array: The following 6 questions are randomized: There is a feeling of togetherness in our family. Family members often put each other down. Family members really help and support one another. We fight a lot in our family. We really get

along well with each other. Family members sometimes get so angry they throw things.

FES_r1 randomized FES questions 1

(Tell me if this statement describes your family well, somewhat, or not at all.) [randomized FES questions]

- 1 Describes my family well
- 2 Describes my family somewhat
- 3 Does not describe my family at all

FES_r2 randomized FES questions 2

(Tell me if this statement describes your family well, somewhat, or not at all.) [randomized FES questions]

- 1 Describes my family well
- 2 Describes my family somewhat
- 3 Does not describe my family at all

FES_r3 randomized FES questions 3

(Tell me if this statement describes your family well, somewhat, or not at all.) [randomized FES questions]

- 1 Describes my family well
- 2 Describes my family somewhat
- 3 Does not describe my family at all

FES_r4 randomized FES questions 4

(Tell me if this statement describes your family well, somewhat, or not at all.) [randomized FES questions]

- 1 Describes my family well
- 2 Describes my family somewhat
- 3 Does not describe my family at all

FES_r5 randomized FES questions 5

(Tell me if this statement describes your family well, somewhat, or not at all.) [randomized FES questions]

- 1 Describes my family well
- 2 Describes my family somewhat
- 3 Does not describe my family at all

FES_r6 randomized FES questions 6

(Tell me if this statement describes your family well, somewhat, or not at all.) [randomized FES questions]

- 1 Describes my family well
- 2 Describes my family somewhat
- 3 Does not describe my family at all

IF grade_intro = Yes THEN

|

| **ENG_intro** Intro to academic items section

| The next questions are about school. Please think about the last four months that you spent in school. That's since [date 4

| months ago] If you are on break now, think about the last 4 months you spent in school. So when you answer these next

| questions, please think about the time between that date and today. For each item, check if this is true for you all of the

| time, most of the time, some of the time, a little bit of the time, or none of the time.

| **FL_ENG_sentences** FL_ENG sentences

ENG section randomization FL_ENG array: The following 7 questions are randomized:

Come prepared for class or school?[IWER: WHATEVER PREPARED MEANS TO YOU, LIKE BRINGING BOOKS, DOING HOMEWORK, ETC]. Been late for class or school?

Copied your homework off a friend? Done the homework assigned? Turned homework in late? Been absent from class or school without an excuse, skipped, ditched, or cut a class?

Forgotten to do your homework?

| **ENG_r1** randomized ENG questions 1

| (In the last four months, how often have you...) [randomized ENG questions]

| 1 All of the time

| 2 Most of the time

| 3 Some of the time

| 4 A little bit of the time

| 5 None of the time

| **ENG_r2** randomized ENG questions 2

| (In the last four months, how often have you...) [randomized ENG questions]

| 1 All of the time

| 2 Most of the time

| 3 Some of the time

| 4 A little bit of the time

| 5 None of the time

| **ENG_r3** randomized ENG questions 3

| (In the last four months, how often have you...) [randomized ENG questions]

| 1 All of the time

| 2 Most of the time

| 3 Some of the time

| 4 A little bit of the time

| 5 None of the time

| **ENG_r4** randomized ENG questions 4

| (In the last four months, how often have you...) [randomized ENG questions]

| 1 All of the time

| 2 Most of the time

| 3 Some of the time

| 4 A little bit of the time

| 5 None of the time

| **ENG_r5** randomized ENG questions 5

| (In the last four months, how often have you...) [randomized ENG questions]

| 1 All of the time

| 2 Most of the time

| 3 Some of the time

| 4 A little bit of the time

| 5 None of the time

| **ENG_r6** randomized ENG questions 7

| (In the last four months, how often have you...) [randomized ENG questions]

| 1 All of the time

| 2 Most of the time

| 3 Some of the time

| 4 A little bit of the time

| 5 None of the time

| **ENG_r7** randomized ENG questions 6

| (In the last four months, how often have you...) [randomized ENG questions]

| 1 All of the time

| 2 Most of the time

| 3 Some of the time

| 4 A little bit of the time

| 5 None of the time

| **EASP** how far expect to go in school

| How far do you think you will go in school?

| 1 8th grade or less

| 2 some high school (grades 9 – 12)

| 3 graduate from high school

| 4 some college

| 5 graduate from a **two** year college (with an associate's degree, AA)

| 6 receive a vocational degree or certificate

| 7 graduate from a **four** year college (with a bachelor's degree, BA)

| 8 get a master's degree (MA; teaching, social work, business)

| 9 get an advanced graduate degree (like a PhD, MD, or a law degree)

| **FALL1** average grades

| Overall across all subjects you take in school, do you get: Mostly A's, Mostly B's, Mostly C's, Mostly

| D's, or does your school not give grades.

| 1 Mostly A's

| 2 Mostly B's

| 3 Mostly C's

- | 4 Mostly D's
- | 5 School doesn't give grades

| **FALL2** describe schoolwork

| Would you describe your work at school as: excellent, above average, average, below average, or failing?

- | 1 Excellent
- | 2 Above average
- | 3 Average
- | 4 Below average
- | 5 Failing

| **SCH1** times gotten into trouble at school

| The next set of questions will also ask you about the last four months. How many times over the past four months

| have you gotten into trouble at school? Would you say 0 times over the past four months, 1-2 times, 3-5 times, or more than 5 times?

- | 1 Zero times
- | 2 1-2 times
- | 3 3-5 times
- | 4 More than 5 times

| **SCH2** times sent to the office

| How many times over the past four months have you been sent to the office for getting into trouble?

- | 1 Zero times
- | 2 1-2 times
- | 3 3-5 times
- | 4 More than 5 times

| **SCH3** times suspended from school

| How many times over the past four months have you been suspended from school?

- | 1 Zero times
- | 2 1-2 times
- | 3 3-5 times
- | 4 More than 5 times

| **SCH4** times parents contacted

| How many times over the past four months have your parents been contacted because you got into trouble?

- | 1 Zero times
- | 2 1-2 times
- | 3 3-5 times
- | 4 More than 5 times

ENDIF

CMIL plan to have a career in military

Do you plan to have a career in the military?

- 1 Yes
- 2 No

HLTH1 limited daily activities

The next set of questions ask you about your physical health. Are your daily activities limited in

any way by your physical health?

- 1 Yes, limited a lot
- 2 Yes, limited a little
- 3 No, not limited at all

HLTH2 limited housework activities

How much does your physical health keep you from helping around the house, or going to school?

- 1 Quite a bit
- 2 Moderately
- 3 Slightly
- 4 Not at all

HLTH3 limited social activities

How much does your physical health interfere with your normal social activities with friends?

- 1 Quite a bit
- 2 Moderately
- 3 Slightly
- 4 Not at all

HLTH4 rate physical health

In general, how would you rate your physical health?

- 1 Excellent
- 2 Very Good
- 3 Good
- 4 Fair
- 5 Poor

IF language = CAWI (self-administered web interview) THEN

|
| [Questions SCARED_intro to SCARED5 are displayed as a table]

|
| **SCARED_INTRO** intro to scared section

| Now the next questions ask you about how you have been feeling in the last 4 months.

Thinking about

| the last four months to now, how much do these next questions describe you? Please check

if they

| describe you most of the time, sometimes, or not at all. In the last four months,

| **SCARED1** frightened

| Do you get really frightened for no reason at all?

| 1 Most of the time

| 2 Sometimes

| 3 Not at all

| **SCARED2** afraid to be alone in house

| Are you afraid to be at home alone?

| 1 Most of the time

| 2 Sometimes

| 3 Not at all

| **SCARED3** worry too much

| Do people tell you that you worry too much?

| 1 Most of the time

| 2 Sometimes

| 3 Not at all

| **SCARED4** scared to go to school

| Are you scared to go to school or other places?

| 1 Most of the time

| 2 Sometimes

| 3 Not at all

| **SCARED5** are you shy

| Are you shy?

| 1 Most of the time

| 2 Sometimes

| 3 Not at all

ELSE

| [Questions SCARED_intro to SCARED5_dk are displayed as a table]

| **SCARED_INTRO** intro to scared section

| Now the next questions ask you about how you have been feeling in the last 4 months.

Thinking about

| the last four months to now, how much do these next questions describe you? Please check

if they

| describe you most of the time, sometimes, or not at all. In the last four months,

| **SCARED1_dk** frightened

| Do you get really frightened for no reason at all?

| 1 Most of the time

| 2 Sometimes

| 3 Not at all

| **SCARED2_dk** afraid to be alone in house

| Are you afraid to be at home alone?

| 1 Most of the time

| 2 Sometimes

| 3 Not at all

| **SCARED3_dk** worry too much

| Do people tell you that you worry too much?

| 1 Most of the time

| 2 Sometimes

| 3 Not at all

| **SCARED4_dk** scared to go to school

| Are you scared to go to school or other places?

| 1 Most of the time

| 2 Sometimes

| 3 Not at all

| **SCARED5_dk** are you shy

| Are you shy?

| 1 Most of the time

| 2 Sometimes

| 3 Not at all

ENDIF

PHQA1 felt sad most days

Have you felt sad, upset, grouchy or depressed on more than half of the days in the past 4 months?

1 Yes

2 No

PHQA2 felt too sad to work

In the past 4 months, have you felt so sad, upset, irritable, or depressed that it has often been hard

for you to do your work, take care of things at home or get along with other people?

1 Yes

2 No

IF PHQA1 = Yes OR PHQA2 = Yes THEN

| **PHQA3** time when felt better

| In the past 4 months, has there been a time when you didn't feel sad, upset, irritable, or depressed
 | for two months in a row or longer? That is, has there been a time in the past 4 months when you felt
 | happy most of the time for at least two months in a row?
 | 1 Yes
 | 2 No
 |
 ENDIF

IF language = CAWI (self-administered web interview) THEN

| [Questions SDQ_intro to SDQ_r9 are displayed as a table]
 |
 | **SDQ_intro** intro to emotional problems
 | For each item, check if the statement is not true, somewhat true, or definitely true for you in the last 4 months.
 |
 | **FL_SDQ_sentences** FL_SDQ sentences
 | SDQ Randomization section - part 1 FL_SDQ array: Following questions 9 are randomized.
 | You try to be nice to other people. You care about their feelings. It is hard for you to sit still for long. You get a lot of headaches, stomach-aches, or sickness. You usually share with others, for example CDs, games, or food. You get very angry and often lose your temper. You would rather be alone than with people your age. You usually do what you are told. You worry a lot. You are helpful if someone is hurt, upset, or feeling ill.

| **SDQ_r1** randomized SDQ questions
 | [randomized SDQ questions part 1]
 | 1 Not True
 | 2 Somewhat True
 | 3 Definitely True

| **SDQ_r2** randomized SDQ questions
 | [randomized SDQ questions part 1]
 | 1 Not True
 | 2 Somewhat True
 | 3 Definitely True

| **SDQ_r3** randomized SDQ questions
 | [randomized SDQ questions part 1]
 | 1 Not True
 | 2 Somewhat True
 | 3 Definitely True

| **SDQ_r4** randomized SDQ questions
 | [randomized SDQ questions part 1]

- | 1 Not True
- | 2 Somewhat True
- | 3 Definitely True

| **SDQ_r5** randomized SDQ questions
|[randomized SDQ questions part 1]

- | 1 Not True
- | 2 Somewhat True
- | 3 Definitely True

| **SDQ_r6** randomized SDQ questions
|[randomized SDQ questions part 1]

- | 1 Not True
- | 2 Somewhat True
- | 3 Definitely True

| **SDQ_r7** randomized SDQ questions
|[randomized SDQ questions part 1]

- | 1 Not True
- | 2 Somewhat True
- | 3 Definitely True

| **SDQ_r8** randomized SDQ questions
|[randomized SDQ questions part 1]

- | 1 Not True
- | 2 Somewhat True
- | 3 Definitely True

| **SDQ_r9** randomized SDQ questions
|[randomized SDQ questions part 1]

- | 1 Not True
- | 2 Somewhat True
- | 3 Definitely True

| [Questions SDQ_intro to SDQ_r17 are displayed as a table]

| **SDQ_intro** intro to emotional problems

| For each item, check if the statement is not true, somewhat true, or definitely true for you in the last 4 months.

| **SDQ_r10** randomized SDQ questions
|[randomized SDQ questions part 2]

- | 1 Not True
- | 2 Somewhat True
- | 3 Definitely True

| **SDQ_r11** randomized SDQ questions

| [randomized SDQ questions part 2]

| 1 Not True

| 2 Somewhat True

| 3 Definitely True

| **SDQ_r12** randomized SDQ questions

| [randomized SDQ questions part 2]

| 1 Not True

| 2 Somewhat True

| 3 Definitely True

| **SDQ_r13** randomized SDQ questions

| [randomized SDQ questions part 2]

| 1 Not True

| 2 Somewhat True

| 3 Definitely True

| **SDQ_r14** randomized SDQ questions

| [randomized SDQ questions part 2]

| 1 Not True

| 2 Somewhat True

| 3 Definitely True

| **SDQ_r15** randomized SDQ questions

| [randomized SDQ questions part 2]

| 1 Not True

| 2 Somewhat True

| 3 Definitely True

| **SDQ_r16** randomized SDQ questions

| [randomized SDQ questions part 2]

| 1 Not True

| 2 Somewhat True

| 3 Definitely True

| **SDQ_r17** randomized SDQ questions

| [randomized SDQ questions part 2]

| 1 Not True

| 2 Somewhat True

| 3 Definitely True

| [Questions SDQ_intro to SDQ_r25 are displayed as a table]

| **SDQ_intro** intro to emotional problems

| For each item, check if the statement is not true, somewhat true, or definitely true for you in

the last 4 months.

| **SDQ_r18** randomized SDQ questions

| [randomized SDQ questions part 2]

| 1 Not True

| 2 Somewhat True

| 3 Definitely True

| **SDQ_r19** randomized SDQ questions

| [randomized SDQ questions part 2]

| 1 Not True

| 2 Somewhat True

| 3 Definitely True

| **SDQ_r20** randomized SDQ questions

| [randomized SDQ questions part 2]

| 1 Not True

| 2 Somewhat True

| 3 Definitely True

| **SDQ_r21** randomized SDQ questions

| [randomized SDQ questions part 2]

| 1 Not True

| 2 Somewhat True

| 3 Definitely True

| **SDQ_r22** randomized SDQ questions

| [randomized SDQ questions part 2]

| 1 Not True

| 2 Somewhat True

| 3 Definitely True

| **SDQ_r23** randomized SDQ questions

| [randomized SDQ questions part 2]

| 1 Not True

| 2 Somewhat True

| 3 Definitely True

| **SDQ_r24** randomized SDQ questions

| [randomized SDQ questions part 2]

| 1 Not True

| 2 Somewhat True

| 3 Definitely True

| **SDQ_r25** randomized SDQ questions

| [randomized SDQ questions part 2]

- | 1 Not True
- | 2 Somewhat True
- | 3 Definitely True

ELSE

| [Questions SDQ_intro to SDQ_r9_dk are displayed as a table]

| **SDQ_intro** intro to emotional problems

| For each item, check if the statement is not true, somewhat true, or definitely true for you in the last 4 months.

| **SDQ_r1_dk** randomized SDQ questions

| [randomized SDQ questions part 1]

- | 1 Not True
- | 2 Somewhat True
- | 3 Definitely True

| **SDQ_r2_dk** randomized SDQ questions

| [randomized SDQ questions part 1]

- | 1 Not True
- | 2 Somewhat True
- | 3 Definitely True

| **SDQ_r3_dk** randomized SDQ questions

| [randomized SDQ questions part 1]

- | 1 Not True
- | 2 Somewhat True
- | 3 Definitely True

| **SDQ_r4_dk** randomized SDQ questions

| [randomized SDQ questions part 1]

- | 1 Not True
- | 2 Somewhat True
- | 3 Definitely True

| **SDQ_r5_dk** randomized SDQ questions

| [randomized SDQ questions part 1]

- | 1 Not True
- | 2 Somewhat True
- | 3 Definitely True

| **SDQ_r6_dk** randomized SDQ questions

| [randomized SDQ questions part 1]

- | 1 Not True
- | 2 Somewhat True

| 3 Definitely True

| **SDQ_r7_dk** randomized SDQ questions

| [randomized SDQ questions part 1]

| 1 Not True

| 2 Somewhat True

| 3 Definitely True

| **SDQ_r8_dk** randomized SDQ questions

| [randomized SDQ questions part 1]

| 1 Not True

| 2 Somewhat True

| 3 Definitely True

| **SDQ_r9_dk** randomized SDQ questions

| [randomized SDQ questions part 1]

| 1 Not True

| 2 Somewhat True

| 3 Definitely True

| [Questions SDQ_intro to SDQ_r17_dk are displayed as a table]

| **SDQ_intro** intro to emotional problems

| For each item, check if the statement is not true, somewhat true, or definitely true for you in the last 4 months.

| **SDQ_r10_dk** randomized SDQ questions

| [randomized SDQ questions part 2]

| 1 Not True

| 2 Somewhat True

| 3 Definitely True

| **SDQ_r11_dk** randomized SDQ questions

| [randomized SDQ questions part 2]

| 1 Not True

| 2 Somewhat True

| 3 Definitely True

| **SDQ_r12_dk** randomized SDQ questions

| [randomized SDQ questions part 2]

| 1 Not True

| 2 Somewhat True

| 3 Definitely True

| **SDQ_r13_dk** randomized SDQ questions

| [randomized SDQ questions part 2]

- | 1 Not True
- | 2 Somewhat True
- | 3 Definitely True

| **SDQ_r14_dk** randomized SDQ questions
|[randomized SDQ questions part 2]

- | 1 Not True
- | 2 Somewhat True
- | 3 Definitely True

| **SDQ_r15_dk** randomized SDQ questions
|[randomized SDQ questions part 2]

- | 1 Not True
- | 2 Somewhat True
- | 3 Definitely True

| **SDQ_r16_dk** randomized SDQ questions
|[randomized SDQ questions part 2]

- | 1 Not True
- | 2 Somewhat True
- | 3 Definitely True

| **SDQ_r17_dk** randomized SDQ questions
|[randomized SDQ questions part 2]

- | 1 Not True
- | 2 Somewhat True
- | 3 Definitely True

| [Questions SDQ_intro to SDQ_r25_dk are displayed as a table]

| **SDQ_intro** intro to emotional problems

| For each item, check if the statement is not true, somewhat true, or definitely true for you in the last 4 months.

| **SDQ_r18_dk** randomized SDQ questions
|[randomized SDQ questions part 2]

- | 1 Not True
- | 2 Somewhat True
- | 3 Definitely True

| **SDQ_r19_dk** randomized SDQ questions
|[randomized SDQ questions part 2]

- | 1 Not True
- | 2 Somewhat True
- | 3 Definitely True

| **SDQ_r20_dk** randomized SDQ questions

| [randomized SDQ questions part 2]

| 1 Not True

| 2 Somewhat True

| 3 Definitely True

| **SDQ_r21_dk** randomized SDQ questions

| [randomized SDQ questions part 2]

| 1 Not True

| 2 Somewhat True

| 3 Definitely True

| **SDQ_r22_dk** randomized SDQ questions

| [randomized SDQ questions part 2]

| 1 Not True

| 2 Somewhat True

| 3 Definitely True

| **SDQ_r23_dk** randomized SDQ questions

| [randomized SDQ questions part 2]

| 1 Not True

| 2 Somewhat True

| 3 Definitely True

| **SDQ_r24_dk** randomized SDQ questions

| [randomized SDQ questions part 2]

| 1 Not True

| 2 Somewhat True

| 3 Definitely True

| **SDQ_r25_dk** randomized SDQ questions

| [randomized SDQ questions part 2]

| 1 Not True

| 2 Somewhat True

| 3 Definitely True

ENDIF

IF CHILD_AGE < 12 THEN

| **BEH_intro** risky behavior intro

| Please check how often you have done each of these things in the past four months, that is since [DATE

| 4 MONTHS AGO] . NONE OF THIS INFORMATION WILL BE REPORTED TO ANYONE INCLUDING YOUR

| PARENTS, BUT YOUR HONESTY WILL HELP US KNOW WHAT LIFE IS REALLY LIKE FOR YOU.

| **FL_BEH_sentences** FL_BEH sentences

| BEH Randomization section FL_BEH array: The following questions are randomized. 1. Thrown something at someone to hurt them? 2. Been in a fight in which someone was hit? 3. Teased someone to make them angry? 4. Threatened to hit or physically harm another kid? 5. Shoved or pushed another kid? 6. Tried to keep others from liking another kid by saying mean things about him/her? 7. Hit or slapped another kid?

| IF language = CAWI (self-administered web interview) THEN

| [Questions BEH_header to BEH_r7 are displayed as a table]

| **BEH_header** risky behavior header

| In the past four months, how many times have you:

| **BEH_r1** randomized BEH questions 1

| [FL_BEH ARRAY OF 7 string for filling randomizations of BEH1 thru BEH7]

- | 1 Never
- | 2 1-2 times
- | 3 3-5 times
- | 4 6-9 times
- | 5 10-19 times
- | 6 20 or more times

| **BEH_r2** randomized BEH questions 2

| [FL_BEH ARRAY OF 7 string for filling randomizations of BEH1 thru BEH7]

- | 1 Never
- | 2 1-2 times
- | 3 3-5 times
- | 4 6-9 times
- | 5 10-19 times
- | 6 20 or more times

| **BEH_r3** randomized BEH questions 3

| [FL_BEH ARRAY OF 7 string for filling randomizations of BEH1 thru BEH7]

- | 1 Never
- | 2 1-2 times
- | 3 3-5 times
- | 4 6-9 times
- | 5 10-19 times
- | 6 20 or more times

| **BEH_r4** randomized BEH questions 4

| [FL_BEH ARRAY OF 7 string for filling randomizations of BEH1 thru BEH7]

- | 1 Never

| 2 1-2 times
 | 3 3-5 times
 | 4 6-9 times
 | 5 10-19 times
 | 6 20 or more times
 |
 | **BEH_r5** randomized BEH questions 5
 | [FL_BEH ARRAY OF 7 string for filling randomizations of BEH1 thru BEH7]
 | 1 Never
 | 2 1-2 times
 | 3 3-5 times
 | 4 6-9 times
 | 5 10-19 times
 | 6 20 or more times
 |
 | **BEH_r6** randomized BEH questions 6
 | [FL_BEH ARRAY OF 7 string for filling randomizations of BEH1 thru BEH7]
 | 1 Never
 | 2 1-2 times
 | 3 3-5 times
 | 4 6-9 times
 | 5 10-19 times
 | 6 20 or more times
 |
 | **BEH_r7** randomized BEH questions 7
 | [FL_BEH ARRAY OF 7 string for filling randomizations of BEH1 thru BEH7]
 | 1 Never
 | 2 1-2 times
 | 3 3-5 times
 | 4 6-9 times
 | 5 10-19 times
 | 6 20 or more times
 |
 | ELSE
 |
 | [Questions BEH_header to BEH_r7_dk are displayed as a table]
 |
 | **BEH_header** risky behavior header
 | In the past four months, how many times have you:
 |
 | **BEH_r1_dk** randomized BEH questions 1
 | [FL_BEH ARRAY OF 7 string for filling randomizations of BEH1 thru BEH7]
 | 1 Never
 | 2 1-2 times
 | 3 3-5 times
 | 4 6-9 times

5 10-19 times

6 20 or more times

BEH_r2_dk randomized BEH questions 2

[FL_BEH ARRAY OF 7 string for filling randomizations of BEH1 thru BEH7]

1 Never

2 1-2 times

3 3-5 times

4 6-9 times

5 10-19 times

6 20 or more times

BEH_r3_dk randomized BEH questions 3

[FL_BEH ARRAY OF 7 string for filling randomizations of BEH1 thru BEH7]

1 Never

2 1-2 times

3 3-5 times

4 6-9 times

5 10-19 times

6 20 or more times

BEH_r4_dk randomized BEH questions 4

[FL_BEH ARRAY OF 7 string for filling randomizations of BEH1 thru BEH7]

1 Never

2 1-2 times

3 3-5 times

4 6-9 times

5 10-19 times

6 20 or more times

BEH_r5_dk randomized BEH questions 5

[FL_BEH ARRAY OF 7 string for filling randomizations of BEH1 thru BEH7]

1 Never

2 1-2 times

3 3-5 times

4 6-9 times

5 10-19 times

6 20 or more times

BEH_r6_dk randomized BEH questions 6

[FL_BEH ARRAY OF 7 string for filling randomizations of BEH1 thru BEH7]

1 Never

2 1-2 times

3 3-5 times

4 6-9 times

5 10-19 times

```

| | 6 20 or more times
| |
| | BEH_r7_dk randomized BEH questions 7
| | [FL_BEH ARRAY OF 7 string for filling randomizations of BEH1 thru BEH7]
| | 1 Never
| | 2 1-2 times
| | 3 3-5 times
| | 4 6-9 times
| | 5 10-19 times
| | 6 20 or more times
| |
| | ENDIF
|
ENDIF

```

```

IF CHILD_AGE > 11 THEN
|

```

```

| BEH_intro risky behavior intro
| Please check how often you have done each of these things in the past four months, that is
| since [DATE
| 4 MONTHS AGO] . NONE OF THIS INFORMATION WILL BE REPORTED TO
| ANYONE INCLUDING YOUR
| PARENTS, BUT YOUR HONESTY WILL HELP US KNOW WHAT LIFE IS
| REALLY LIKE FOR YOU.

```

```

FL_BEH12_sentences FL_BEH12 sentences

```

BEH Randomization section - part2 FL_BEH12 array: The following questions are randomized. 1. Thrown something at someone to hurt them? 2. Been in a fight in which someone was hit? 3. Teased someone to make them angry? 4. Threatened to hit or physically harm another kid? 5. Shoved or pushed another kid? 6. Tried to keep others from liking another kid by saying mean things about him/her? 7. Hit or slapped another kid? 8. Drunk beer, more than a sip or taste? 9. Drunk wine or wine coolers, more than a sip or taste? 10. Threatened someone with a weapon, gun, knife, etc.? 11. Smoked cigarettes? 12. Threatened to hurt a teacher? 13. Been drunk? 14. Drunk liquor like tequila, vodka? 15. Used marijuana, pot, weed?

```

| IF language = CAWI (self-administered web interview) THEN
| |
| | [Questions BEH_header to BEH12_r6 are displayed as a table]
| |
| | BEH_header risky behavior header
| | In the past four months, how many times have you:
| |
| | BEH12_r1 randomized BEH12 questions 1
| | [randomized BEH questions]
| | 1 Never

```

- | 2 1-2 times
- | 3 3-5 times
- | 4 6-9 times
- | 5 10-19 times
- | 6 20 or more times

| **BEH12_r2** randomized BEH12 questions 2

| [randomized BEH questions]

- | 1 Never
- | 2 1-2 times
- | 3 3-5 times
- | 4 6-9 times
- | 5 10-19 times
- | 6 20 or more times

| **BEH12_r3** randomized BEH12 questions 3

| [randomized BEH questions]

- | 1 Never
- | 2 1-2 times
- | 3 3-5 times
- | 4 6-9 times
- | 5 10-19 times
- | 6 20 or more times

| **BEH12_r4** randomized BEH12 questions 4

| [randomized BEH questions]

- | 1 Never
- | 2 1-2 times
- | 3 3-5 times
- | 4 6-9 times
- | 5 10-19 times
- | 6 20 or more times

| **BEH12_r5** randomized BEH12 questions 5

| [randomized BEH questions]

- | 1 Never
- | 2 1-2 times
- | 3 3-5 times
- | 4 6-9 times
- | 5 10-19 times
- | 6 20 or more times

| **BEH12_r6** randomized BEH12 questions 6

| [randomized BEH questions]

- | 1 Never
- | 2 1-2 times

- | 3 3-5 times
- | 4 6-9 times
- | 5 10-19 times
- | 6 20 or more times

| [Questions BEH_header to BEH12_r11 are displayed as a table]

| **BEH_header** risky behavior header
| In the past four months, how many times have you:

- | **BEH12_r7** randomized BEH12 questions 7
| [randomized BEH questions]
- | 1 Never
 - | 2 1-2 times
 - | 3 3-5 times
 - | 4 6-9 times
 - | 5 10-19 times
 - | 6 20 or more times

- | **BEH12_r8** randomized BEH12 questions 8
| [randomized BEH questions]
- | 1 Never
 - | 2 1-2 times
 - | 3 3-5 times
 - | 4 6-9 times
 - | 5 10-19 times
 - | 6 20 or more times

- | **BEH12_r9** randomized BEH12 questions 9
| [randomized BEH questions]
- | 1 Never
 - | 2 1-2 times
 - | 3 3-5 times
 - | 4 6-9 times
 - | 5 10-19 times
 - | 6 20 or more times

- | **BEH12_r10** randomized BEH12 questions 10
| [randomized BEH questions]
- | 1 Never
 - | 2 1-2 times
 - | 3 3-5 times
 - | 4 6-9 times
 - | 5 10-19 times
 - | 6 20 or more times

BEH12_r11 randomized BEH12 questions 11

[randomized BEH questions]

- 1 Never
- 2 1-2 times
- 3 3-5 times
- 4 6-9 times
- 5 10-19 times
- 6 20 or more times

[Questions BEH_header to BEH12_r15 are displayed as a table]

BEH_header risky behavior header

In the past four months, how many times have you:

BEH12_r12 randomized BEH12 questions 12

[randomized BEH questions]

- 1 Never
- 2 1-2 times
- 3 3-5 times
- 4 6-9 times
- 5 10-19 times
- 6 20 or more times

BEH12_r13 randomized BEH12 questions 13

[randomized BEH questions]

- 1 Never
- 2 1-2 times
- 3 3-5 times
- 4 6-9 times
- 5 10-19 times
- 6 20 or more times

BEH12_r14 randomized BEH12 questions 14

[randomized BEH questions]

- 1 Never
- 2 1-2 times
- 3 3-5 times
- 4 6-9 times
- 5 10-19 times
- 6 20 or more times

BEH12_r15 randomized BEH12 questions 15

[randomized BEH questions]

- 1 Never
- 2 1-2 times
- 3 3-5 times

| 4 6-9 times
 | 5 10-19 times
 | 6 20 or more times
 |
 | ELSE
 |
 | [Questions BEH_header to BEH12_r6_dk are displayed as a table]
 |
 | **BEH_header** risky behavior header
 | In the past four months, how many times have you:
 |
 | **BEH12_r1_dk** randomized BEH12 questions 1
 | [randomized BEH questions]
 | 1 Never
 | 2 1-2 times
 | 3 3-5 times
 | 4 6-9 times
 | 5 10-19 times
 | 6 20 or more times
 |
 | **BEH12_r2_dk** randomized BEH12 questions 2
 | [randomized BEH questions]
 | 1 Never
 | 2 1-2 times
 | 3 3-5 times
 | 4 6-9 times
 | 5 10-19 times
 | 6 20 or more times
 |
 | **BEH12_r3_dk** randomized BEH12 questions 3
 | [randomized BEH questions]
 | 1 Never
 | 2 1-2 times
 | 3 3-5 times
 | 4 6-9 times
 | 5 10-19 times
 | 6 20 or more times
 |
 | **BEH12_r4_dk** randomized BEH12 questions 4
 | [randomized BEH questions]
 | 1 Never
 | 2 1-2 times
 | 3 3-5 times
 | 4 6-9 times
 | 5 10-19 times
 | 6 20 or more times

BEH12_r5_dk randomized BEH12 questions 5

[randomized BEH questions]

1 Never

2 1-2 times

3 3-5 times

4 6-9 times

5 10-19 times

6 20 or more times

BEH12_r6_dk randomized BEH12 questions 6

[randomized BEH questions]

1 Never

2 1-2 times

3 3-5 times

4 6-9 times

5 10-19 times

6 20 or more times

[Questions BEH_header to BEH12_r11_dk are displayed as a table]

BEH_header risky behavior header

In the past four months, how many times have you:

BEH12_r7_dk randomized BEH12 questions 7

[randomized BEH questions]

1 Never

2 1-2 times

3 3-5 times

4 6-9 times

5 10-19 times

6 20 or more times

BEH12_r8_dk randomized BEH12 questions 8

[randomized BEH questions]

1 Never

2 1-2 times

3 3-5 times

4 6-9 times

5 10-19 times

6 20 or more times

BEH12_r9_dk randomized BEH12 questions 9

[randomized BEH questions]

1 Never

2 1-2 times

- | 3 3-5 times
- | 4 6-9 times
- | 5 10-19 times
- | 6 20 or more times

| **BEH12_r10_dk** randomized BEH12 questions 10
| [randomized BEH questions]

- | 1 Never
- | 2 1-2 times
- | 3 3-5 times
- | 4 6-9 times
- | 5 10-19 times
- | 6 20 or more times

| **BEH12_r11_dk** randomized BEH12 questions 11
| [randomized BEH questions]

- | 1 Never
- | 2 1-2 times
- | 3 3-5 times
- | 4 6-9 times
- | 5 10-19 times
- | 6 20 or more times

| [Questions BEH_header to BEH12_r15_dk are displayed as a table]

| **BEH_header** risky behavior header
| In the past four months, how many times have you:

| **BEH12_r12_dk** randomized BEH12 questions 12
| [randomized BEH questions]

- | 1 Never
- | 2 1-2 times
- | 3 3-5 times
- | 4 6-9 times
- | 5 10-19 times
- | 6 20 or more times

| **BEH12_r13_dk** randomized BEH12 questions 13
| [randomized BEH questions]

- | 1 Never
- | 2 1-2 times
- | 3 3-5 times
- | 4 6-9 times
- | 5 10-19 times
- | 6 20 or more times

|| **BEH12_r14_dk** randomized BEH12 questions 14

|| [randomized BEH questions]

|| 1 Never

|| 2 1-2 times

|| 3 3-5 times

|| 4 6-9 times

|| 5 10-19 times

|| 6 20 or more times

||

|| **BEH12_r15_dk** randomized BEH12 questions 15

|| [randomized BEH questions]

|| 1 Never

|| 2 1-2 times

|| 3 3-5 times

|| 4 6-9 times

|| 5 10-19 times

|| 6 20 or more times

||

| ENDIF

|

ENDIF

PHQA4 little interest in things past 2 wks

The next questions are specifically about your feelings in the last two weeks. Have you had any of the

following problems during the past two weeks? Little interest or pleasure in doing things?

1 Yes

2 No

IF PHQA4 = Yes THEN

|

| **PHQA4a** frequency of problem past 2 wks

| Did you have that problem only a few days, or nearly every day in the past two weeks?

| 1 Few days

| 2 Nearly every day

|

ENDIF

PHQA5 feeling depressed past 2 wks

(During the past two weeks, did you have any problems with...) Feeling down, depressed, irritable or hopeless?

1 Yes

2 No

IF PHQA5 = Yes THEN

|

| **PHQA5a** frequency of problem past 2 wks
| Did you have that problem only a few days, or nearly every day in the past two weeks?
| 1 Few days
| 2 Nearly every day
|
ENDIF

PHQA6 trouble sleeping past 2 wks
(During the past two weeks, did you have any problems with...) Trouble falling asleep, staying asleep, or sleeping too much?
1 Yes
2 No

IF PHQA6 = Yes THEN

|
| **PHQA6a** frequency of problem past 2 wks
| Did you have that problem only a few days, or nearly every day in the past two weeks?
| 1 Few days
| 2 Nearly every day
|
ENDIF

PHQA7 feel tired past 2 wks
(During the past two weeks, did you have any problems with...) Feeling tired or having little energy?
1 Yes
2 No

IF PHQA7 = Yes THEN

|
| **PHQA7a** frequency of problem past 2 wks
| Did you have that problem only a few days, or nearly every day in the past two weeks?
| 1 Few days
| 2 Nearly every day
|
ENDIF

PHQA8 poor appetite past 2 wks
(During the past two weeks, did you have any problems with...) Poor appetite, weight loss, or overeating?
1 Yes
2 No

IF PHQA8 = Yes THEN

|
| **PHQA8a** frequency of problem past 2 wks

| Did you have that problem only a few days, or nearly every day in the past two weeks?

| 1 Few days

| 2 Nearly every day

|

ENDIF

PHQA9 feel bad about self past 2 wks

(During the past two weeks, did you have any problems with...) Feeling bad about yourself

– or

that you have let yourself or your family down?

1 Yes

2 No

IF PHQA9 = Yes THEN

|

| **PHQA9a** frequency of problem past 2 wks

| Did you have that problem only a few days, or nearly every day in the past two weeks?

| 1 Few days

| 2 Nearly every day

|

ENDIF

PHQA10 trouble concentrating past 2 wks

(During the past two weeks, did you have any problems with...) Trouble concentrating on things like

school, work, reading, or watching TV?

1 Yes

2 No

IF PHQA10 = Yes THEN

|

| **PHQA10a** frequency of problem past 2 wks

| Did you have that problem only a few days, or nearly every day in the past two weeks?

| 1 Few days

| 2 Nearly every day

|

ENDIF

PHQA11 moving slowly or cannot sit still

(During the past two weeks, did you have any problems with...) Moving or speaking so slowly that

other people could have noticed? Or the opposite – having more trouble sitting still than usual?

1 Yes

2 No

IF PHQA11 = Yes THEN

|

| **PHQA11a** frequency of problem past 2 wks

| Did you have that problem only a few days, or nearly every day in the past two weeks?

| 1 Few days

| 2 Nearly every day

|

ENDIF

PHQA12 problems with depression past 2 wks

Please check if in the past two weeks, you have had problems with feeling sad, irritable, or depressed

that made it not at all difficult, a little bit difficult, somewhat difficult, very much difficult, or extremely difficult for you to do your work, take care of things at home, or get along with other people?

1 Not at all

2 A little bit

3 Somewhat

4 Very much

5 Extremely

CMHS1 take prescribed meds

Sometimes people need help for a personal or emotional problem. In this next set of questions the survey

will ask you about help you might have gotten for yourself. Do you regularly take any prescribed

medication for a mental health problem?

1 Yes

2 No

CMHS2 need counseling past 4 months

In the past four months, did you have a need for counseling or therapy for personal or emotional problems

from a mental health specialist like a psychiatrist, psychologist, social worker or family counselor in a

mental health clinic or office even if you never got the counseling?

1 Yes

2 No

IF CMHS2 = Yes OR CMHS2 = NONRESPONSE THEN

|

| **CMHS3** receive counseling past 4 months

| In the past four months, did you actually receive counseling or therapy for personal or emotional

| problems from a mental health specialist like a psychiatrist, psychologist, social worker or family

| counselor in a mental health clinic or office?

| 1 Yes

| 2 No

|

| **CMHS4** counseling from chaplain or friend last 4 months

| In the past four months, did you receive counseling or therapy for personal or emotional problems from

| a chaplain, another adult family member, or an adult friend?

| 1 Yes

| 2 No

|

ENDIF

ESUP have someone to listen to your problems

If you needed someone to listen to your problems if you were feeling low, are there enough people you can

count on, not enough people, or no one you can count on?

1 Enough people you can count on

2 Not enough people

3 No one you can count on

FSOC socialize with other military kids

Do you know, socialize or communicate regularly with other kids from military families?

1 Yes

2 No

LSAT rate current life satisfaction

Taking things altogether, how satisfied are you with your life right now? Would you say you are very

satisfied, somewhat satisfied, neutral, somewhat dissatisfied, or very dissatisfied?

1 Very satisfied

2 Somewhat satisfied

3 Neutral

4 Somewhat dissatisfied

5 Very dissatisfied

military_intro military intro

We are almost done! For the last set of questions, the survey will ask you about your feelings about

being raised by someone serving in the military.

MILCOM1 parent in military inspires you

Please tell me how much you agree or disagree with the following statements about you being the child of

a service member. Being a child in a military family inspires you to do the best job you can. Do you...

- 1 Strongly disagree
- 2 Disagree
- 3 Neither agree nor disagree
- 4 Agree
- 5 Strongly agree

MILCOM2 willing to make sacrifices for family

(Please tell me how much you agree or disagree with the following statement...) You are willing to make sacrifices so that your family can continue to contribute to the military.

- 1 Strongly disagree
- 2 Disagree
- 3 Neither agree nor disagree
- 4 Agree
- 5 Strongly agree

MILCOM3 glad to be in military family

(Please tell me how much you agree or disagree with the following statement...) You are glad to be part of a military family.

- 1 Strongly disagree
- 2 Disagree
- 3 Neither agree nor disagree
- 4 Agree
- 5 Strongly agree

EXPTIME time parent has spent in military

In the past 12 months, has your [military parent] spent....

- 1 Much less time away from home than you expected
- 2 Less time away from home than you expected
- 3 About what you expected
- 4 More time away from home than you expected
- 5 Much more time away from home than you expected

RETENC parent should stay or leave

Do you think your [military parent] should stay on or leave the military beyond [his/her] service obligation?

Please choose one of the following five options.

- 1 you strongly favor [her/him] staying
- 2 you somewhat favor [his/her] staying
- 3 you have no opinion one way or the other
- 4 you somewhat favor [his/her] leaving
- 5 you strongly favor [his/her] leaving

EXIT_child_interview exit paragraph

Those are all of the questions we have for you, and we'd like to thank you so much for doing this interview. Before we end, here is some information for you: You probably noticed that

some of our questions were about how you are feeling emotionally. If you think you are having trouble or have been feeling down, there are places you can go for help. We want to remind you that it is important to talk with a health care provider about feeling sad or down, and to keep yourself safe. You can also talk with your parent about these feelings and for their help in finding support for you. Here are some telephone numbers that you could call if you need help:

- You can call the Suicide Hotline and Mental Health Referral Services at 1-800-273-TALK (8255) for free and confidential information about counseling services in your area, for immediate suicidal crisis support.
- You can call Military OneSource at 1-800-342-9647, they offer confidential, free phone, online and face to face help in your local community.
- You can also call the Boys Town National Hotline at 1-800-448-3000. The Boys Town National Hotline is a 24-hour crisis, resource and referral line for boys and girls. Trained counselors can respond to your questions every day of the week, 365 days a year. They can help teens and parents with suicide prevention, depression, school issues, parenting troubles, runaways, relationship problems, physical abuse, sexual abuse, emotional abuse, chemical dependency, anger and much more. The next time we will be contacting you will be in about 4 months, and at that time we will be asking you to complete the survey online again. We'll remind you with an email. The survey will be much shorter. Thanks!

IF language = CATI (phone interview) THEN

| [Questions OBS_intro to OBS6 are displayed as a table]

| **OBS_intro** intro to obs

| [IWER: DO NOT READ THESE QUESTIONS OUT LOUD - ANSWER THEM YOURSELF.]

| **OBS1** rate respondent understanding

| HOW WOULD YOU RATE THE RESPONDENT'S UNDERSTANDING OF THE INTERVIEW?

| 1 Poor

| 2 Fair

| 3 Good

| 4 Excellent

| **OBS2** rate respondent understanding

| FROM YOUR VIEWPOINT, DID THE RESPONDENT HAVE TO MODIFY ANY ANSWERS BECAUSE

| SOMEONE ELSE WAS NEARBY OR WITHIN EARSHOT?

| 1 Yes

| 2 No

| **OBS3** rate respondent cooperation

| HOW COOPERATIVE WAS THE RESPONDENT?

| 1 Very

| 2 Moderately

| 3 Slightly

| 4 Not at all

|

| **OBS4** respondent not truthful

| WERE THERE TIMES DURING THE INTERVIEW WHEN IT SEEMED TO YOU
| THAT THE RESPONDENT

| WAS NOT ANSWERING TRUTHFULLY?

| 1 Yes

| 2 No

|

| **OBS6** rate overall quality

| HOW WOULD YOU RATE THE OVERALL QUALITY OF THE INTERVIEW?

| 1 Poor

| 2 Fair

| 3 Good

| 4 Excellent

|

ENDIF