

# Promoting Readiness of Minors in Supplemental Security Income (PROMISE): User Guide for the 18-Month Survey Public Use File

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Karen Katz, McCayla Sica, Kara Peterik, Bernadette Peters, and Dawn Phelps

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**Submitted to:**

Social Security Administration  
Office of Research, Demonstration, and  
Employment Support  
6401 Security Blvd. 4303 Annex Bldg.  
Baltimore, MD 21235  
Project Officer: Jeffrey Hemmeter  
Contract Number: SS00-13-60044

**Submitted by:**

Mathematica  
1100 1st Street NE, 12th Floor  
Washington, DC 20002-4221  
Telephone: (202) 484-9220  
Facsimile: (202) 863-1763  
Project Director: Gina Livermore  
Reference Number: 40304.69H

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## Acronyms and Abbreviations

ASPIRE	Achieving Success by Promoting Readiness for Education and Employment
CaPROMISE	California PROMISE
ED	U.S. Department of Education
MD	Maryland
NYS	New York State
PROMISE	Promoting Readiness of Minors in Supplemental Security Income
PUF	Public use file
RA	Random assignment
RA	Restricted access file
SSA	Social Security Administration
SSI	Supplemental Security Income
SSN	Social Security number
WI	Wisconsin

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## I. Introduction

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

This user guide describes the PROMISE evaluation’s 18-month public use file (PUF), which includes a subset of the data collected and analyzed for the evaluation’s 18-month impact analysis that assessed whether each PROMISE program improved the outcomes of the youth and families who were offered PROMISE services as of 18 months after they enrolled in the program (Mamun et al. 2019). The PUF contains data from the evaluation’s 18-month follow-up surveys of youth enrollees and their parents or guardians.<sup>3</sup> It also contains select data from the PROMISE random assignment (RA) system, as well as a few variables constructed from the survey, RA system, and SSA administrative data.

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

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<sup>1</sup> Hereafter, we refer to the PROMISE model demonstration projects as “PROMISE programs.”

<sup>2</sup> Each PROMISE program also conducted its own formative evaluation.

<sup>3</sup> Hereafter, we use “parents” to refer to parents and guardians.

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## II. File Contents and Specifications

The 18-month PUF contains data from the PROMISE evaluation’s 18-month follow-up surveys of youth and parent enrollees. It also contains select data from the PROMISE RA system, as well as a few variables constructed from the survey, RA system, and SSA administrative data. Appendix A contains a list of all the variables in the PUF.

To be eligible for PROMISE, youth had to be age 14 through 16 at the time of enrollment, in SSI current pay status at some time during the PROMISE enrollment period (and not terminated from SSI before enrolling in the evaluation), living in a PROMISE program service delivery area, and not residing in an institution. In total, 13,444 youth enrolled in the PROMISE evaluation. The research sample for the five-year evaluation comprised the 12,584 youth who were randomly assigned to either the treatment or control group.<sup>4</sup> The PUF contains the full research sample and includes data about the youth, the parent who completed the PROMISE enrollment forms and provided consent to participate in the evaluation (whom we refer to as the “enrolling parent”), and the other parent if the youth had one. The parent described by a given variable depends on the data source (see text box).<sup>5</sup>

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### Parents identified in PUF data sources:

- PROMISE 18-month parent survey: the enrolling parent or another parent or legal guardian
  - RA system: the enrolling parent
  - SSA data: If the enrolling parent was the youth’s mother or father, we used the parent(s) documented on the SSI record; otherwise, or if no parent was documented on the SSI record, we used the enrolling parent ▲
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Users interested in obtaining data from the PROMISE evaluation’s five-year follow-up surveys of youth and parent enrollees may consult the separate five-year PUF, which has its own user guide and codebook. The two PUFs can be linked using PUF ID (variable `pufid`). For additional data collected and analyzed for the evaluation, users may request the 18-month and five-year restricted access files (RAFs) from SSA.

In the sections that follow, we first describe the contents of the PUF data and documentation package. We then provide greater detail about the survey, PROMISE RA system, and SSA program records that comprise the PUF; the construction of variables used in the evaluation’s 18-month impact analysis; and the masking procedures used to create the PUF.

### A. PUF data and documentation package

The 18-month PUF data and documentation package consists of the following three items:

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

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

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

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

**Table II.1. PROMISE 18-month PUF data and documentation package contents**

Item	File name
User guide	PROMISE-18-mo-puf-user-guide (this document)
PUF	PROMISE-18-mo-puf
Codebook	PROMISE-18-mo-puf-codebook

## B. Survey data

Mathematica conducted two rounds of survey data collection for the PROMISE evaluation at 18 months and five years after enrollment. Except where data presented a disclosure risk, the 18-month PUF includes all variables from the youth and parent 18-month surveys. The names of survey variables identify the question number underlying the variable. For the youth survey, each variable name is the number of the question preceded by “Y1\_” to indicate that the question was asked in the first round of youth data collection. For the parent survey, each variable name is the number of the question preceded by “P1\_” to indicate that the question was asked in the first round of parent data collection. For example, variable Y1\_a01 captures responses to question 1 in Section A of the 18-month youth questionnaire. The codebook entry for each variable also contains the question text.

### 1. Coding verbatim responses

The 18-month surveys included some questions designed to elicit open-ended responses. To facilitate analysis of these responses, we grouped them into categories and assigned them numeric codes when possible. The methodology used to code each variable depended on how the information was solicited:

- **Questions with other/specify options** had a finite number of response options that might not have captured all possible responses. For some of these questions, respondents might have volunteered a response that did not conform to an existing response option. For example, item VIII.C3 of the youth questionnaire asked youth who reported receiving training to identify the type of training. For other questions, interviewers asked respondents to specify an answer to the question “anything else?” or “anyone else?” For example, item VIII.B1 of the youth questionnaire asked if the youth had received any accommodations from a specified list and then asked if the youth had received any other accommodations.
- **Interviewer-coded questions** required interviewers to code responses into predefined categories without reading the categories aloud to respondents. If none of the categories seemed to apply, interviewers selected an “other/specify” category and typed in the verbatim response. The only interviewer-coded question is item IX.A7 of the youth questionnaire, which asked what type of work

the youth did at his or her job. The interviewer selected an occupation code based on the youth's verbatim response.

As a part of the data processing, we examined verbatim responses to uncover dominant themes for each question. We developed a list of categories and decision rules for coding verbatim responses to open-ended items. We also added supplemental response categories to some interviewer-coded and other/specify items to facilitate coding if a sufficient number of such responses could not be back-coded into existing categories. Thus, we categorized verbatim responses for quantitative analyses in two ways. First, we coded responses that clustered together for other/specify questions. For example, item II.D10a of the parent questionnaire asked what other services the parent and other family members had needed but not received. Based on the themes we identified in parents' responses, we created new categories such as "childcare" and "legal services." Second, we back-coded responses into existing response options if appropriate for interviewer-coded and other/specify questions. For example, item II.B12a of the parent questionnaire asked what other services the youth had received. We back-coded a parent's response of "learning how to tell time" into the existing category "taught life skills."

## 2. Missing data

### a. *Missing units*

The PUF is missing 18-month youth and parent survey data for youth and parents who did not complete the respective survey. Youth and parents may not have completed a survey because they were not eligible, refused to participate, or could not be located. Section III.A provides more information about survey eligibility. The variables R1SY\_survey\_eligible and R1SP\_survey\_eligible identify enrollees who were eligible for the youth and parent surveys, respectively. Variables R1SY\_complete and R1SP\_complete identify enrollees who completed the youth and parent surveys. Data missing because of ineligibility and nonresponse have values of . in the PUF.

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

In CaPROMISE, we sampled 2,000 youth of the 3,097 randomly assigned enrollees for the surveys.<sup>6</sup> We initially selected the sample for the 18-month surveys and then used the same sample for the five-year surveys. We used stratified random sampling, in which we defined strata by the local educational agency and treatment status. Because CaPROMISE's enrollment was completed over a 21-month period, the 18-month survey effort began before all enrollments were completed. As a result, we sampled in two phases: first from the group that was enrolled by the time the 18-month survey effort began and then from the remainder of the enrollees (Matulewicz et al. 2018). We calculated sampling weights as the inverse of the

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

probability of being selected for the sample. Because this was a stratified random sample in each phase, the sampling weights were simply the population size in each stratum divided by the sample size. Because the sample was proportionately allocated to each stratum, the sampling weights were approximately equal to 1.50 for all strata in the first phase and 1.89 for all strata in the second phase.<sup>7</sup>

We calculated survey nonresponse weights separately for each program. To calculate the program-specific nonresponse weights, we first developed a “location model” to estimate the probability of locating a sample member. We then developed a “response model” to estimate the probability of survey response among the located sample members. We used logistic regression models to estimate the two probabilities, with youth and parent baseline characteristics and geographic location information as covariates. The location model for CaPROMISE used the sampling weight normalized to the sample size. The response models for all programs used the normalized location-adjusted weight. The set of covariates under consideration for the models differed by program. We identified potential interactions by using Chi-square Automatic Interaction Detector.<sup>8</sup> We included all available main and interaction effects as covariates in forward and backward stepwise logistic regression models (using the STEPWISE option of the SAS LOGISTIC procedure). We excluded any covariate or interaction that was unlikely to be related to locating the respondent or to response propensity. Because the stepwise logistic regression procedures in SAS did not fully account for the sample design in the variance estimates, we developed the final weighted models by using a command that accounted for the complex sample design (the SURVEYLOGISTIC procedure in SAS).

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

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

- Parent and youth cross-sectional weights for the 18-month surveys (R1SY\_svywt and R1SP\_svywt), which are recommended when conducting analyses of 18-month survey data and restricting the

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

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

sample to youth or parents who completed a survey. Mathematica used these weights in the 18-month impact analysis.

- Youth-parent case cross-sectional weights for the 18-month surveys (R1SC\_svywt), which are recommended when conducting analyses of 18-month survey data and restricting the sample to youth and parents who both completed a survey.
- Parent, youth, and youth-parent case longitudinal weights (R2SY\_svywt\_long, R2SP\_svywt\_long, and R2SC\_svtwy\_long), which are recommended when conducting analyses of 18-month and five-year survey data and restricting the sample to youth, parents, or both youth and parents who completed both surveys.

### *b. Missing items*

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

## C. RA system data

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

## D. SSA program records

The PUF contains variables constructed from SSA program records (discussed in the next section) but no raw data. We obtained data on the SSA disability payments of youth and parents. We used the disability program benefit data from April 2013 through October 2017, which covered the 12 months before RA through the 18 months following PROMISE enrollment for all youth enrollees and their parents. Data on SSI receipt, including dates of application and monthly payment amounts, are from the Supplemental Security Record. Data on Old-Age, Survivors, and Disability Insurance program payments are from the Payment History Update System for all months from April 2013 through December 2016 and the Master Beneficiary Record for all months from January 2017 through October 2017. In addition to data on outcomes related to benefits, we obtained data on several key baseline characteristics from the Supplemental Security Record, including length of SSI payment receipt at RA, age at first SSI application, and the primary impairment that was the basis for the youth's SSI eligibility.

## E. Constructed variables

To simplify the PUF and assist users, we included select variables constructed for the PROMISE evaluation's analyses in the PUF. We constructed variables from the survey, RA system, and SSA administrative data. For most dollar-denominated measures, we inflation adjusted to 2017 dollars using

the Consumer Price Index for Urban Wage Earners and Clerical Workers. When inflation adjusting measures that spanned multiple years, we inflation adjusted based on the number of months in each year. When inflation adjusting earnings in the year before the survey for a youth who completed the survey in March 2016, for example, we assumed 3 of 12 months of earnings occurred in 2016 and 9 of 12 months of earnings occurred in 2015. We did not inflation adjust job-level measures (for example, job 1 weekly earnings).

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

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

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

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

First segment of the variable name	Definition
R0AC_	Youth-parent case baseline administrative variables
R0AP_	Parent baseline administrative variables
R0AY_	Youth baseline administrative variables
R1AC_	Youth-parent case 18-month administrative variables
R1AP_	Parent 18-month administrative variables
R1AY_	Youth 18-month administrative variables
R1SC_	Youth-parent case 18-month survey variables
R1SP_	Parent 18-month survey variables
R1SY_	Youth 18-month survey variables

## F. Disclosure avoidance

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

### 1. Variable exclusion

We first excluded all data obtained from the Achieving Success by Promoting Readiness for Education and Employment (ASPIRE) baseline survey of youth and parent enrollees, state vocational rehabilitation

agencies, and state Medicaid agencies because we did not have permission to include these data in the PUF. We next dropped all direct identifiers (for example, Social Security number [SSN]) and created a new, randomly-generated ID (PUF ID; variable pufid) to identify PROMISE enrollees. Finally, we simplified the PUF by dropping variables with little analytic value, including survey administration variables, raw variables summarized by constructed variables, and constructed variables that were duplicative of raw variables or other constructed variables.

### **2. Masking and constructing new variables**

We assessed the remaining variables for their disclosure risk. When variables identified relatively rare populations, we dropped the original variables and replaced them with constructed variables. For many variables that posed a potential risk, constructed variables summarizing the information already existed in the RAFs. When constructed variables did not exist, we used a variety of methods to construct new variables, with the goal of maximizing the analytic value of the PUF while maintaining acceptable confidentiality for enrollees. These methods included applying top and bottom coding and rounding to continuous variables, converting continuous variables into categorical variables, and combining responses for categorical variables. For example, for parent age at RA (variable R0AP\_parent\_age\_ra), we collapsed the continuous ages into three categories: 39 or younger, 40 to 4, and 50 or older. Variables constructed for the PUF have the same name as the original RAF variables followed by the suffix \_puf. The PUF codebook includes the specifications used to mask variables

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### III. Questionnaire Design and Data Collection

Mathematica conducted separate follow-up surveys of the youth and their parents 18 months and five years after they enrolled in PROMISE. This user guide describes the 18-month surveys, while the five-year user guide describes the five-year surveys. In the sections that follow, we describe the surveys' eligibility criteria, methods of administration, instruments, and response rates. Users can consult the PROMISE 18-Month Sampling and Survey Plan (CyBulski et al. 2014) for more information.

#### A. Survey instruments

We conducted follow-up surveys of youth and parents 18 months after they enrolled in PROMISE. We developed detailed plans for collecting survey data at the outset of the evaluation (CyBulski et al. 2014). We developed two survey questionnaires, one for the youth enrollees and one for the parent enrollees, in English and Spanish. The English questionnaires are provided in Appendices B and C.

The surveys collected information that could not be obtained readily from administrative records or other sources and focused on outcomes that might reasonably be expected to have been affected by the programs in the 18-month period. Specifically, in the parent survey we asked questions about services received by the youth and their family members during the 18-month follow up period, employment experience and credentials obtained by the parents, parent's individual and family well-being (covering health and health insurance, income and program participation), parent expectations for the youth, and the parent's demographic information. In the youth survey, we asked questions about youth's receipt of services, education, training, employment and work-based experiences, self-determination and expectations, and demographic information.

In developing the 18-month questionnaires, we drew on previous surveys of youth with disabilities and their parents, including the Youth Transition Demonstration evaluation, the National Survey of SSI Children and Families, the National Health Interview Survey, and the National Longitudinal Transition Study.<sup>9</sup> When our research needs were not met by existing items from these surveys, we crafted and cognitively tested new items. Further, we were guided by research on the roles that student, family, and schools play in determining postsecondary school employment (Carter et al. 2011), which informed the selection of measures of parental expectations and youth high school completion, postsecondary education, and work experiences. In addition, structural equation models comparing different self-determination scales (Shogren et al. 2008), as well as research on the individual and ecological predictors of self-determination (Shogren et al. 2007), were critical to developing measures of how PROMISE services educated, supported, and empowered youth.

Table III.1 provides a list of domains and topics for the 18-month questionnaires, roughly in the order that the items were covered during the interviews.

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<sup>9</sup> The survey questionnaires (Appendices B and C) indicate the source of each item drawn from previous surveys.

**Table III.1. 18-month survey questionnaires: Domains and key measures**

Domains	Measures
<b>Youth questionnaire</b>	
Education	
Youth's educational status and credentials	School attendance; type of school attended; reason for not attending school; type of educational credential received; highest grade completed
Youth's accommodations	Accommodations received; unmet accommodation needs
Youth's job-related training	Training attendance; type of training attended; type of training credential received
<b>Employment</b>	
Youth's employment	Employment in paid and unpaid jobs; hours of work; earnings; employment status at the time of the survey
Service receipt in the past 18 months	
Youth's transition services	Receipt of services, by type (help with a disability, help finding a job, help managing money, and help understanding government benefits); unmet service needs
Self-determination and expectations for the future	
Youth's self-determination	Self-determination sub-indices of autonomy, psychological empowerment, and self-realization
Youth's expectations	Expectations about future education, employment, and independent living; perceived barriers to work
<b>Health and well-being</b>	
Youth's health	Self-assessment of health status; alcohol and drug use
Youth's functional limitations	Difficulties with activities of daily living; difficulties with instrumental activities of daily living
Youth's health insurance	Insurance coverage; type of insurance coverage
Family's benefits and income	Types of benefits received; total income
<b>Parent questionnaire</b>	
<b>Service receipt in the past 18 months</b>	
Youth's transition services	Receipt of transition services, by type (case management, special education, employment-promoting services, benefits counseling, financial education, self-advocacy or self-determination training, life skills or assistive technology, education or training supports, and other transition services); unmet service needs; intensity of services received; usefulness of services received
Family's support services	Receipt of family support services, by type (case management, education or training supports, employment-promoting services, benefits counseling, financial education, parent training and information about youth's disability, and parent networking support); unmet service needs; intensity of services received; usefulness of services received
<b>Employment experience and credentials</b>	
Parent's and parent spouse's employment	Employment; hours of work; earnings; employment status at the time of the survey
Parent's and parent spouse's education	School attendance; training attendance; highest grade completed; type of educational credential received

Domains	Measures
<b>Individual and family well-being</b>	
Family's health insurance	Insurance coverage; type of insurance coverage
Family's benefits and income	Types of benefits received; total income
<b>Expectations for youth</b>	
Parent's expectations	Expectations about youth's performance of household chores; expectations about youth's future education, employment, and independent living

In addition to the full-length survey questionnaires, we created abbreviated, self-administered versions that we used for a small number of youth and parents in the ASPIRE program who lived in sparsely-populated areas where we did not deploy field (in person) nonresponse follow up. The abbreviated questionnaires contain a subset of critical items found in the full-length questionnaires (Table III.2). Although the abbreviated questionnaires did not capture the same volume of data collected with the full-length questionnaires (that is, there was greater item nonresponse), they enabled us to mitigate unit nonresponse by helping to include youth and parents residing in rural or frontier areas served by ASPIRE, where it was not feasible to mount a cost-effective field follow-up effort.

**Table III.2. 18-month survey abbreviated questionnaires: Domains and key measures**

Domains	Measures
<b>Youth questionnaire</b>	
<b>Education</b>	
Youth's educational status and credentials	School attendance; type of educational credential received; highest grade completed
Youth's accommodations	Accommodations received
Youth's job-related training	Training attendance; type of training attended; type of training credential received
<b>Employment</b>	
Youth's employment	Employment in paid and unpaid jobs
<b>Service receipt in the past 18 months</b>	
Youth's transition services	Receipt of services, by type (help with a disability, help finding a job, help managing money, and help understanding government benefits)
<b>Parent questionnaire</b>	
<b>Service receipt in the past 18 months</b>	
Youth's transition services	Receipt of transition services, by type (case management, special education, employment-promoting services, benefits counseling, financial education, self-advocacy or self-determination training, life skills or assistive technology, education or training supports, and other transition services)
Family's support services	Receipt of family support services, by type (case management, education or training supports, employment-promoting services, benefits counseling, financial education, parent training and information about youth's disability, and parent networking support)
<b>Employment experience and credentials</b>	
Parent's and parent spouse's employment	Employment; employment status at the time of the survey

Domains	Measures
Parent's and parent spouse's education	Highest grade completed

## B. Survey eligibility

In five of the six PROMISE programs, all randomly-assigned evaluation enrollees who were not deceased or withdrawn from the evaluation during the 18-month after enrollment were eligible to be interviewed for the 18-month surveys. CaPROMISE was the only exception where, as noted previously, we sampled 2,000 of the 3,097 randomly-assigned enrollees for the survey. As noted above, the variables R1SY\_survey\_eligible and R1SP\_survey\_eligible identify enrollees who were eligible for the youth and parent surveys, respectively.

The target respondent for the parent survey was the parent who was “most knowledgeable about the services received by the enrolled youth.” The target respondents for the youth survey were the youth themselves, but we permitted assisted and proxy interviews. For youth whose disabilities prevented independent interviews, we preferred to conduct assisted interviews in which the assistant provided encouragement, interpreted questions, and verified answers as needed. If youth could not complete an interview on their own even with assistance, we then allowed a proxy to complete the interview on the youth’s behalf. Typically, the youth’s parent served as the assistant or proxy. Proxies completed 25 percent of youth interviews. The variable R1SY\_self\_report indicates whether a proxy completed the interview for the youth.

Although most parent and youth survey respondents completed all sections of their respective surveys, certain types of respondents completed only a subset of sections. Tables III.3 and III.4 show the survey sections completed by each type of respondent. Within each section, we asked some questions of all parents or youth who completed the section and others of only those youth or parents to whom the questions were applicable. For example, we obtained detailed information about the nature of current jobs only from respondents who reported current employment.

**Table III.3. Parent survey section completion by respondent type**

Instrument section identifier	Variable name section identifier	Section name	Completed by parents of dependent youth	Completed by parents of independent youth	Completed by adults other than parents
I	Sc	Introduction	Yes	Yes	Yes
II	A, B, C, D, E	Service receipt in the past 18 months	Yes	Yes	Partial
III	F, G	Employment experience and credentials	Yes	Yes	No
IV	H, I	Individual and family well-being	Yes	No	No
V	J	Expectations for youth	Yes	Yes	No
VI	K	Demographic and contact information	Yes	Yes	Partial

**Table III.4. Youth survey section completion by respondent type**

Instrument section identifier	Variable name section identifier	Section name	Completed by youth responding on their own or with assistance	Completed by proxy respondents for youth
VII	Sc	Introduction	Yes	Yes
VIII	A, B, C	Education	Yes	Yes
IX	D	Employment	Yes	Yes
X	E	Service receipt in the past 18 months	Yes	Yes
XI	F, G, H, I	Self-determination and expectations for the future	Yes	No
XII	J, K, L, M	Health and well-being	Yes	Yes
XIII	N	Demographic and contact information	Yes	Yes

### C. Survey administration

The survey interviews were typically conducted by telephone: 72 percent of youth survey respondents and 79 percent of parent survey respondents completed the interview by telephone. The remaining youth and parent survey respondents were located and interviewed in person by field staff. For a small number of cases in the ASPIRE program—33 youth and 30 parent survey respondents—the survey was self-administered using the abbreviated questionnaire. We mailed the abbreviated questionnaires to nonresponding ASPIRE sampling members and the respondents returned the completed questionnaires to us by mail.

Most respondents (88 percent of parents and 94 percent of youth) completed the survey in English. Variables Y1\_currentlanguage and P1\_currentlanguage indicate the language used to conduct the survey. The median interview length was 66 minutes for the parent survey and 32 minutes for the youth survey. Table III.5 shows the median length by the mode and language of administration. Parent interviews took longer than youth interviews because they had a broader focus. Whereas the youth survey asked questions only about the youth, the parent survey asked questions about the parent, the youth, and other family members (see the domains in Table III.1).

**Table III.5. Median interview length, by mode and language**

Interview	Parent median length in minutes	Youth median length in minutes
Overall	66.0	32.0
English telephone interview	63.1	31.9
English field interview	66.0	20.7
Spanish telephone interview	69.5	24.2
Spanish field interview	68.7	18.5

To simplify the survey management process, we aggregated the youth into cohorts that corresponded to their month of enrollment. In each month from November 2015 to November 2017, we released one more cohort to be surveyed. Over five and a half months (a 24-week period), we attempted to conduct interviews with all members of each cohort.<sup>10</sup> Table III.6 shows the survey fielding start and end dates for each cohort and the PROMISE programs represented in each cohort. Variables Y1\_date\_puf and P1\_date\_puf, respectively, indicate the month and year when the youth and parent completed the interview.

**Table III.6. Schedule for the 18-month survey**

Cohort	Enrollment month	Survey fielding start month	Survey fielding end month	PROMISE programs included in cohort					
				Arkansas PROMISE	ASPIRE	Ca PROMISE	MD PROMISE	NYS PROMISE	WI PROMISE
1	4/14	11/15	4/16				X		X
2	5/14	12/15	4/16				X		X
3	6/14	1/16	6/16				X		X
4	7/14	2/16	7/16				X		X
5	8/14	3/16	8/16			X	X		X
6	9/14	4/16	9/16	X		X	X		X
7	10/14	5/16	10/16	X	X	X	X	X	X
8	11/14	6/16	11/16	X	X	X	X	X	X
9	12/14	7/16	11/16	X	X	X	X	X	X
10	1/15	8/16	1/17	X	X	X	X	X	X
11	2/15	9/16	2/17	X	X	X	X	X	X
12	3/15	10/16	3/17	X	X	X	X	X	X
13	4/15	11/16	4/17	X	X	X	X	X	X
14	5/15	12/16	5/17	X	X	X	X	X	X
15	6/15	1/17	6/17	X	X	X	X	X	X
16	7/15	2/17	7/17	X	X	X	X	X	X
17	8/15	3/17	8/17	X	X	X	X	X	X

<sup>10</sup> For enrollees in five of the six programs, we limited the survey field period to 24 weeks. For ASPIRE enrollees, we stopped outreach (mailings, field effort, calls) at week 20 to avoid overlap with the program’s own formative evaluation survey efforts.

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

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

#### D. Survey response rates

The PROMISE 18-month parent and youth survey response rates were high. They averaged over 80 percent for all programs except Wisconsin PROMISE, which had a 78 percent response rate for the youth survey (Table III.7).<sup>11</sup> Response rates for the parent survey were typically higher than those for the youth survey. The difference in response rates between treatment and control group sample members was small, never exceeding 3.5 percentage points in any program.

We categorized a small number of partially completed interviews (115 parents and 26 youth) as completed. We considered parent interviews as completed if responses were provided through item II.D10a of the parent questionnaire (variables P1\_d10a01 through P1\_d10a26 and P1\_d10a99). This cutoff point enabled us to obtain data on the services received by the parent, the youth, and other family members to estimate impacts on services. We considered youth interviews as completed if responses were provided through item IX.A1 of the youth questionnaire (variable Y1\_d01). This cutoff point enabled us to obtain data on the youth’s education and employment to estimate impacts on these outcomes.

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<sup>11</sup> We calculated the response rates as a proportion of the cases eligible for a given survey (response rate = number of completed interviews / number of eligible cases). In five of the PROMISE programs, all parents of randomly assigned youth were eligible for the parent 18-month survey unless they had died or withdrawn within 18 months of enrollment, were the parent of a youth who had died within 18 months of enrollment, or were a legal guardian employed by an agency. Likewise, all randomly assigned youth were eligible for the youth 18-month survey unless they had died or withdrawn within 18 months of enrollment. For CaPROMISE, we sampled 2,000 of the 3,097 randomly assigned youth. All sampled youth and their parents were eligible for the 18-month surveys unless they met one of the conditions described above.

**Table III.7. PROMISE 18-month survey respondent sample sizes and response rates**

Analysis sample	Arkansas PROMISE	ASPIRE	Ca PROMISE	MD PROMISE	NYS PROMISE	WI PROMISE
<b>Youth survey (Response rate)</b>						
Treatment	750 (83%)	784 (81%)	834 (84%)	759 (81%)	853 (87%)	746 (79%)
Control	719 (80%)	776 (80%)	800 (80%)	742 (80%)	838 (86%)	729 (77%)
Total	1,469 (82%)	1,560 (80%)	1,634 (82%)	1,501 (81%)	1,691 (86%)	1,475 (78%)
<b>Parent survey (Response rate)</b>						
Treatment	786 (87%)	817 (84%)	855 (86%)	795 (85%)	887 (90%)	803 (85%)
Control	758 (84%)	797 (82%)	827 (83%)	781 (84%)	876 (89%)	767 (81%)
Total	1,544 (86%)	1,614 (83%)	1,682 (84%)	1,576 (85%)	1,763 (90%)	1,570 (83%)

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

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



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**Appendix A.**  
**Lists of Variables in the 18-Month Survey Public Use File**

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

<b>Variable</b>	<b>Label</b>	<b>Number</b>
P1_a02	Youth had 504 plan since RA	3
P1_a03	Parent met with youth's teacher to discuss goals after high school	4
P1_a04	Youth received other school supports since RA	5
P1_a01_puf	Youth received special education or had IEP since RA (PUF)	2
P1_b01	Youth services received since RA_determine needs and connect to services	6
P1_b02	Youth services received since RA_life skills	7
P1_b03	Youth services received since RA_leadership or self-advocacy training	8
P1_b04	Youth services received since RA_help learning about jobs	9
P1_b05	Youth services received since RA_help applying to education or training program	10
P1_b06	Youth services received since RA_job skills training	11
P1_b07	Youth services received since RA_help finding or applying to jobs	12
P1_b08	Youth services received since RA_job coaching	13
P1_b09	Youth services received since RA_assistive technology	14
P1_b10	Youth services received since RA_understanding benefits	15
P1_b11	Youth services received since RA_learning to save and manage money	16
P1_b12	Youth services received since RA_other	17
P1_b13	Youth unmet needs since RA	18
P1_b13a01	Youth unmet needs since RA_discovering job interests or skills	19
P1_b13a02	Youth unmet needs since RA_independent living training	20
P1_b13a03	Youth unmet needs since RA_career counseling	21
P1_b13a04	Youth unmet needs since RA_learning how to look for a job	22
P1_b13a05	Youth unmet needs since RA_job shadowing	23
P1_b13a06	Youth unmet needs since RA_apprenticeship or internship	24
P1_b13a07	Youth unmet needs since RA_help finding a job	25
P1_b13a08	Youth unmet needs since RA_job coaching	26
P1_b13a09	Youth unmet needs since RA_help applying to school or training	27
P1_b13a10	Youth unmet needs since RA_understanding benefits	28
P1_b13a11	Youth unmet needs since RA_computer literacy classes	29
P1_b13a12	Youth unmet needs since RA_problem solving	30
P1_b13a13	Youth unmet needs since RA_social skills training	31
P1_b13a14	Youth unmet needs since RA_financial literacy or money management training	32
P1_b13a15	Youth unmet needs since RA_self-advocacy or self-determination training	33
P1_b13a16	Youth unmet needs since RA_referrals	34
P1_b13a17	Youth unmet needs since RA_transportation	35

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Variable	Label	Number
P1_b13a18	Youth unmet needs since RA_health services	36
P1_b13a19	Youth unmet needs since RA_case management	37
P1_b13a20	Youth unmet needs since RA_accommodations	38
P1_b13a21	Youth unmet needs since RA_education	39
P1_b13a22	Youth unmet needs since RA_financial support and basic needs	40
P1_b13a23	Youth unmet needs since RA_respite care	41
P1_b13a99	Youth unmet needs since RA_other	42
P1_c02_01	Youth provider 1_type of place	43
P1_c02_02	Youth provider 2_type of place	44
P1_c02_03	Youth provider 3_type of place	45
P1_c02_04	Youth provider 4_type of place	46
P1_c06_01	Youth provider 1_usefulness of services	47
P1_c06_02	Youth provider 2_usefulness of services	48
P1_c06_03	Youth provider 3_usefulness of services	49
P1_c06_04	Youth provider 4_usefulness of services	50
P1_currentlanguage	Parent 18-month survey language	51
P1_d01	Household services received since RA_determine needs and connect to services	52
P1_d02	Household services received since RA_help applying to school or training program	53
P1_d03	Household services received since RA_job skills training	54
P1_d04	Household services received since RA_help finding or applying to a job	55
P1_d05	Household services received since RA_help learning about youth's disability	56
P1_d06	Household services received since RA_understanding benefits	57
P1_d07	Household services received since RA_learning to save and manage money	58
P1_d08	Household services received since RA_help getting to know other parents	59
P1_d09	Household services received since RA_other	60
P1_d10	Household unmet needs since RA	61
P1_d10a01	Household unmet needs since RA_discovering job interests or skills	62
P1_d10a02	Household unmet needs since RA_career counseling	63
P1_d10a03	Household unmet needs since RA_learning how to look for a job	64
P1_d10a04	Household unmet needs since RA_job shadowing	65
P1_d10a05	Household unmet needs since RA_apprenticeship or internship	66
P1_d10a06	Household unmet needs since RA_help finding a job	67
P1_d10a07	Household unmet needs since RA_job coaching	68
P1_d10a08	Household unmet needs since RA_help applying to school or training	69
P1_d10a09	Household unmet needs since RA_understanding benefits	70
P1_d10a10	Household unmet needs since RA_computer literacy classes	71

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Variable	Label	Number
P1_d10a11	Household unmet needs since RA_problem solving	72
P1_d10a12	Household unmet needs since RA_financial literacy or money management training	73
P1_d10a13	Household unmet needs since RA_referrals	74
P1_d10a14	Household unmet needs since RA_transportation	75
P1_d10a15	Household unmet needs since RA_health services	76
P1_d10a16	Household unmet needs since RA_case management	77
P1_d10a17	Household unmet needs since RA_child care	78
P1_d10a18	Household unmet needs since RA_education	79
P1_d10a19	Household unmet needs since RA_financial support for basic needs	80
P1_d10a20	Household unmet needs since RA_financial support for school or training program	81
P1_d10a21	Household unmet needs since RA_housing	82
P1_d10a22	Household unmet needs since RA_independent living skills	83
P1_d10a23	Household unmet needs since RA_legal services	84
P1_d10a24	Household unmet needs since RA_parent training	85
P1_d10a25	Household unmet needs since RA_respite care	86
P1_d10a26	Household unmet needs since RA_vocational training	87
P1_d10a99	Household unmet needs since RA_other	88
P1_date_puf	Date parent completed the 18-month survey (PUF)	89
P1_e02_01	Household provider 1_type of place	90
P1_e02_02	Household provider 2_type of place	91
P1_e02_03	Household provider 3_type of place	92
P1_e08_01	Household provider 1_usefulness of services	93
P1_e08_02	Household provider 2_usefulness of services	94
P1_e08_03	Household provider 3_usefulness of services	95
P1_eligrel_puf	Parent survey respondent's relationship to youth (PUF)	96
P1_f01	Parent or spouse had job since RA	97
P1_f02	Parent or spouse had paid job since RA	98
P1_f04	Parent or spouse currently wants a job	103
P1_f03_puf	Parent or spouse had paid job in prior month (PUF)	99
P1_f03a_amt_puf	Parent or spouse earnings in prior month (PUF)	100
P1_f03a_type	Parent or spouse gross or net earnings in prior month	101
P1_f03b	Parent or spouse offered health insurance through job in prior month	102
P1_g02	Parent or spouse earned educational credential since RA	106
P1_g03	Parent or spouse attended school since RA	112
P1_g04	Parent or spouse attended training program since RA	114
P1_g01a_puf	Highest degree parent has earned (PUF)	104
P1_g01b_puf	Highest degree parent's spouse has earned (PUF)	105
P1_g02a1	Parent or spouse earned educational credential since RA_GED	107

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Variable	Label	Number
P1_g02a2	Parent or spouse earned educational credential since RA_vocational diploma	108
P1_g02a5	Parent or spouse earned educational credential since RA_job training certificate	110
P1_g02a6	Parent or spouse earned educational credential since RA_other	111
P1_g02a3_puf	Parent or spouse earned educational credential since RA_2-year college diploma (PUF)	109
P1_g03a	Parent or spouse currently attends school	113
P1_g04a	Parent or spouse currently attends training program	115
P1_g05_01	Parent or spouse type of training program_vocational school	116
P1_g05_02	Parent or spouse type of training program_2-year college	117
P1_g05_03	Parent or spouse type of training program_4-year college	118
P1_g05_04	Parent or spouse type of training program_job skills training	119
P1_g05_05	Parent or spouse type of training program_PROMISE training program	120
P1_g05_06	Parent or spouse type of training program_adult education program	121
P1_g05_99	Parent or spouse type of training program_other	122
P1_h02	Other household members do not have health insurance coverage	125
P1_h01a	Health insurance coverage_parent	123
P1_h01b	Health insurance coverage_parent's spouse	124
P1_h02a	Number of other household members who do not have health insurance coverage	126
P1_h02b01	Other household member w/o health insurance relationship to youth_sister	127
P1_h02b02	Other household member w/o health insurance relationship to youth_brother	128
P1_h02b10_puf	Other household member w/o health insurance relationship to youth_other (PUF)	129
P1_h03_01	Private health insurance_parent	130
P1_h03_03	Private health insurance_parent's spouse	131
P1_h04_01	Medicaid_parent	132
P1_h04_03	Medicaid_parent's spouse	133
P1_h05_01	Medicare_parent	134
P1_h05_03	Medicare_parent's spouse	135
P1_h06_01	Other health insurance_parent	136
P1_h06_03	Other health insurance_parent's spouse	137
P1_h08a	Source of private health insurance_parent	138
P1_h08c	Source of private health insurance_parent's spouse	139
P1_h09_1	Private health insurance purchased through ACA/health insurance exchange_parent	140
P1_h09_3	Private health insurance purchased through ACA/health insurance exchange_parent'	141
P1_h10_1	Receive private health insurance tax credit_parent	142
P1_h10_2	Receive private health insurance tax credit_parent's spouse	143



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Variable	Label	Number
P1_j04	Parent's expectations for youth education	155
P1_j05	Parent's expectations for youth independent living	156
P1_j06	Parent's expectations for youth employment	157
P1_j07	Parent's expectations for youth financial independence	158
P1_j01a	Parent expects youth to make own breakfast or lunch	144
P1_j01b	Parent expects youth to do own laundry	145
P1_j01c	Parent expects youth to clean own room	146
P1_j01d	Parent expects youth to buy items at the store	147
P1_j02a	Youth makes own breakfast or lunch	148
P1_j02b	Youth does own laundry	149
P1_j02c	Youth cleans own room	150
P1_j02d	Youth buys items at the store	151
P1_j03a	Importance to parent that youth has paid job in the future	152
P1_j03b	Importance to parent that youth lives independently in the future	153
P1_j03c	Importance to parent that youth is financially independent in the future	154
P1_k04	Parent or spouse has a health problem that prevents work	159
P1_sc_q03	Parent cohabiting spouse	161
P1_sc_q05	Other youth in household	162
P1_sc_q02_puf	Parent living situation (PUF)	160
P1_youthlivarr_puf	Youth living arrangement (PUF)	163
R0AC_radate_puf	RA date (PUF)	164
R0AP_parent_age_ra_puf	Parent age at RA (PUF)	165
R0AY_age_cat_ra	Youth age at RA_categorical	166
R0AY_has_di_pmt_ra_month	Youth received OASDI benefit_month of RA	167
R0AY_has_ssi_pmt_ra_month	Youth received SSI payment_month of RA	168
R0AY_impairment_detailed_puf	Youth detailed primary impairment at RA (PUF)	169
R0AY_mult_elig_child	Youth household had multiple SSI-eligible children at RA	170
R0AY_oasdi_12m_pre_ra_i_puf	Youth OASDI benefits_12 months before RA inflation adjusted (PUF)	171
R0AY_oasdi_12m_pre_ra_puf	Youth OASDI benefits_12 months before RA (PUF)	172
R0AY_ssi_12m_pre_ra_puf	Youth SSI payments_12 months before RA (PUF)	173
R0AY_ssi_12m_pre_ra_i_puf	Youth SSI payments_12 months before RA inflation adjusted (PUF)	184
R0AY_ssi_duration_at_ra_puf	Youth duration of SSI receipt at RA (PUF)	175
R0AY_totben_12m_pre_ra_i_puf	Youth SSI payments and OASDI benefits_12 months before RA inflation adjusted (PUF)	176
R0AY_totben_12m_pre_ra_puf	Youth SSI payments and OASDI benefits_12 months before RA (PUF)	177
R0AY_youthlivarr_ra_puf	Youth living arrangements at RA (PUF)	178
R1AY_anyben_post_ra	Youth received either SSI payments or OASDI benefits_18 months after RA	179
R1AY_oasdi_18m_post_ra_i_puf	Youth OASDI benefits_18 months after RA inflation adjusted (PUF)	180

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Variable	Label	Number
R1AY_oasdi_18m_post_ra_puf	Youth OASDI benefits_18 months after RA (PUF)	181
R1AY_oasdi_1y_post_ra_i_puf	Youth OASDI benefits_calendar year after RA inflation adjusted (PUF)	182
R1AY_oasdi_1y_post_ra_puf	Youth OASDI benefits_calendar year after RA (PUF)	183
R1AY_ssi_18m_post_ra_i_puf	Youth SSI payments_18 months after RA inflation adjusted (PUF)	185
R1AY_ssi_18m_post_ra_puf	Youth SSI payments_18 months after RA (PUF)	186
R1AY_ssi_1y_post_ra_puf	Youth SSI payments_calendar year after RA (PUF)	187
R1AY_ssi_1y_post_ra_i_puf	Youth SSI payments_calendar year after RA inflation adjusted (PUF)	174
R1AY_totben_18m_post_ra_i_puf	Youth SSI payments and OASDI benefits_18 months after RA inflation adjusted (PUF)	188
R1AY_totben_18m_post_ra_puf	Youth SSI payments and OASDI benefits_18 months after RA (PUF)	189
R1AY_totben_1y_post_ra_i_puf	Youth SSI payments and OASDI benefits_calendar year after RA inflation adjusted (PUF)	190
R1AY_totben_1y_post_ra_puf	Youth SSI payments and OASDI benefits_calendar year after RA (PUF)	191
R1AY_youth_ssaben_cat	Youth type of SSA benefit receipt_18 months after RA	192
R1SC_sampwt	Youth and parent sampling weight for five-year survey respondents	193
R1SC_svywt	18-month survey cross-sectional weight for youth-parent pairs	194
R1SP_anykeysvc_youth	Youth received any key transition services since RA	195
R1SP_anyusefulsvc_household	Usefulness of key support services received by family since RA	196
R1SP_anyusefulsvc_youth	Usefulness of key transition services received by youth since RA	197
R1SP_complete	Parent completed PROMISE 18-month survey	198
R1SP_hours_household_prov_1_puf	Household provider 1_hours (PUF)	199
R1SP_hours_household_prov_2_puf	Household provider 2_hours (PUF)	200
R1SP_hours_household_prov_3_puf	Household provider 3_hours (PUF)	201
R1SP_hours_youth_prov_1_puf	Youth provider 1_hours (PUF)	202
R1SP_hours_youth_prov_2_puf	Youth provider 2_hours (PUF)	203
R1SP_hours_youth_prov_3_puf	Youth provider 3_hours (PUF)	204
R1SP_hours_youth_prov_4_puf	Youth provider 4_hours (PUF)	205
R1SP_hourskeysvc_household_puf	Hours of key support services family received since RA (PUF)	206
R1SP_hourskeysvc_youth_puf	Hours of key transition services youth received since RA (PUF)	207
R1SP_hourskeysvnoschl_house_puf	Hours of key support services family received since RA_non-school (PUF)	208
R1SP_hourskeysvnoschl_youth_puf	Hours of key transition services youth received since RA_non-school (PUF)	209
R1SP_mths_household_prov_1_puf	Household provider 1_duration in months (PUF)	210
R1SP_mths_household_prov_2_puf	Household provider 2_duration in months (PUF)	211
R1SP_mths_household_prov_3_puf	Household provider 3_duration in months (PUF)	212
R1SP_mths_youth_provider_1_puf	Youth provider 1_duration in months (PUF)	213
R1SP_mths_youth_provider_2_puf	Youth provider 2_duration in months (PUF)	214
R1SP_mths_youth_provider_3_puf	Youth provider 3_duration in months (PUF)	215

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Variable	Label	Number
R1SP_mths_youth_provider_4_puf	Youth provider 4_duration in months (PUF)	216
R1SP_num_keyprov_household_puf	Number of family's key support service providers since RA (PUF)	217
R1SP_num_keyprov_youth_puf	Number of youth's key transition service providers since RA (PUF)	218
R1SP_survey_eligible	Parent was eligible for PROMISE 18-month survey	219
R1SP_svywt	Parent survey weight	220
R1SY_acains	Youth had private health insurance bought through ACA at the 18-mo survey	221
R1SY_anyins	Youth had health insurance at the 18-mo survey	222
R1SY_complete	Youth completed the PROMISE 18-month survey	223
R1SY_currearn_puf	Youth weekly earnings at the 18-mo survey (PUF)	224
R1SY_currhrs_puf	Youth weekly hours worked in paid jobs at the 18-mo survey (PUF)	225
R1SY_currpaidemp	Youth had paid employment at the 18-mo survey	226
R1SY_duration_job_1_puf	Youth job 1_duration in weeks (PUF)	227
R1SY_duration_job_2_puf	Youth job 2_duration in weeks (PUF)	228
R1SY_duration_job_3_puf	Youth job 3_duration in weeks (PUF)	229
R1SY_hhbenefits	Any household member received non-SSA benefits at the 18-mo survey	230
R1SY_hhinc	Household income in the year before the 18-mo survey	231
R1SY_jobsbeninc_i_puf	Youth total income in the year before the 18-mo survey inflation adjusted (PUF)	232
R1SY_jobsbeninc_puf	Youth total income in the year before the 18-mo survey (PUF)	233
R1SY_numpaidjobs_puf	Number of paid jobs youth had since RA (PUF)	234
R1SY_paid_job_1_puf	Youth job 1_paid	235
R1SY_paid_job_2_puf	Youth job 2_paid	236
R1SY_paid_job_3_puf	Youth job 3_paid	237
R1SY_paidempyr	Youth had paid employment in the year before the 18-mo survey	238
R1SY_pastyrdur_puf	Youth total duration in weeks of all jobs in the year before the 18-mo survey (PUF)	239
R1SY_pastyrearn_i_puf	Youth total earnings from all jobs in the year before the 18-mo survey inflation adjusted (PUF)	240
R1SY_pastyrearn_puf	Youth total earnings from all jobs in the year before the 18-mo survey (PUF)	241
R1SY_pastyrwhrs_puf	Youth weekly hours worked in paid jobs in the year before the 18-mo survey (PUF)	242
R1SY_pubins	Youth had public health insurance at the 18-mo survey	243
R1SY_pvtins	Youth had private health insurance at the 18-mo survey	244
R1SY_race_cat_puf	Youth race and ethnicity (PUF)	245
R1SY_ssibenefits	Any household member other than youth received SSA benefits at the 18-mo survey	246
R1SY_survey_eligible	Youth was eligible for the PROMISE 18-month survey	247
R1SY_svyage18	Youth was age 18 or older at the 18-month survey	248
R1SY_svyproxy	Youth survey completed by proxy	249
R1SY_svywt	Youth survey weight	250

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Variable	Label	Number
R1SY_weekly_earnings_job_1_puf	Youth job 1_weekly earnings (PUF)	251
R1SY_weekly_earnings_job_2_puf	Youth job 2_weekly earnings (PUF)	252
R1SY_weekly_earnings_job_3_puf	Youth job 3_weekly earnings (PUF)	253
R1SY_weekly_hours_job_1_puf	Youth job 1_weekly hours (PUF)	254
R1SY_weekly_hours_job_2_puf	Youth job 2_weekly hours (PUF)	255
R1SY_weekly_hours_job_3_puf	Youth job 3_weekly hours (PUF)	256
R2SC_svywt_long	18-month and five-year survey longitudinal weight for youth-parent pairs	257
R2SP_svywt_long	18-month and five-year survey longitudinal weight for parents	258
R2SY_svywt_long	18-month and five-year survey longitudinal weight for youth	259
RAS_program	Program	260
RAS_random_assignment	Study group assignment	261
RAS_youth_sex	Youth sex	262
Y1_a01	Youth currently attends school	263
Y1_a02	Youth school type	265
Y1_a04	Youth moved to higher grade since RA	296
Y1_a05	Youth repeated grade since RA	297
Y1_a06	Youth repeated failed class since RA	298
Y1_a07	Youth suspended or expelled since RA	300
Y1_a01a	Youth attended school since RA	264
Y1_a03_01	Reason youth stopped school_graduated	266
Y1_a03_02	Reason youth stopped school_finished classes wanted to take	267
Y1_a03_03	Reason youth stopped school_transportation problems	268
Y1_a03_04	Reason youth stopped school_didn't get services needed	269
Y1_a03_05	Reason youth stopped school_too expensive or couldn't afford it	270
Y1_a03_06	Reason youth stopped school_schedule conflicts	271
Y1_a03_07	Reason youth stopped school_poor grades or not doing well	272
Y1_a03_08	Reason youth stopped school_didn't like school	273
Y1_a03_09	Reason youth stopped school_wanted or needed to find a job	274
Y1_a03_10	Reason youth stopped school_offered a job or chose to work	275
Y1_a03_11	Reason youth stopped school_wanted to enter military	276
Y1_a03_12	Reason youth stopped school_didn't get into program youth wanted	277
Y1_a03_13	Reason youth stopped school_illness or disability	278
Y1_a03_14	Reason youth stopped school_got married	279
Y1_a03_15	Reason youth stopped school_got pregnant or had a child	280
Y1_a03_16	Reason youth stopped school_moved	281
Y1_a03_17	Reason youth stopped school_school too dangerous	282
Y1_a03_18	Reason youth stopped school_wanted to travel	283
Y1_a03_19	Reason youth stopped school_friends weren't in school	284
Y1_a03_20	Reason youth stopped school_couldn't get along with teachers	285

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Variable	Label	Number
Y1_a03_21	Reason youth stopped school_couldn't get along with students	286
Y1_a03_22	Reason youth stopped school_couldn't get child care	287
Y1_a03_23	Reason youth stopped school_family did not want youth to go	288
Y1_a03_24	Reason youth stopped school_ineligible due to age	289
Y1_a03_25	Reason youth stopped school_classes or program ended	290
Y1_a03_26	Reason youth stopped school_expelled	291
Y1_a03_27	Reason youth stopped school_general disciplinary problems	292
Y1_a03_28	Reason youth stopped school_changed school or program	293
Y1_a03_29	Reason youth stopped school_got arrested	294
Y1_a03_30	Reason youth stopped school_other	295
Y1_a06a_puf	Number of failed classes youth repeated since RA (PUF)	299
Y1_a08a_a	Youth has high school diploma	301
Y1_a08a_b	Youth has certificate of completion	302
Y1_a08a_c	Youth has GED	303
Y1_a08b_a	Youth earned high school diploma since RA	304
Y1_a08b_b	Youth earned certification of completion since RA	305
Y1_a08b_c	Youth earned GED since RA	306
Y1_a09_puf	Highest grade youth has finished (PUF)	307
Y1_b01a	Youth school accommodations received since RA_testing accommodations	308
Y1_b01b	Youth school accommodations received since RA_class assignment accommodations	309
Y1_b01c	Youth school accommodations received since RA_person to help youth in class	310
Y1_b01d	Youth school accommodations received since RA_classroom adaptations	311
Y1_b01e	Youth school accommodations received since RA_book or material adaptations	312
Y1_b01f	Youth school accommodations received since RA_other	313
Y1_b02a	Youth school accommodations unmet need since RA_testing accommodations	314
Y1_b02b	Youth school accommodations unmet need since RA_class assignment accommodations	315
Y1_b02c	Youth school accommodations unmet need since RA_person to help youth in class	316
Y1_b02d	Youth school accommodations unmet need since RA_classroom adaptations	317
Y1_b03_01	Youth school accommodations other unmet need since RA_testing accommodations	318
Y1_b03_02	Youth school accommodations other unmet need since RA_assignment accommodations	319
Y1_b03_03	Youth school accommodations other unmet need since RA_person to help in class	320
Y1_b03_04	Youth school accommodations other unmet need since RA_classroom adaptations	321
Y1_b03_05	Youth school accommodations other unmet need since RA_book/material adaptations	322

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Variable	Label	Number
Y1_b03_06	Youth school accommodations other unmet need since RA_assistive technology	323
Y1_b03_99	Youth school accommodations other unmet need since RA_other	324
Y1_c01	Youth attended training program since RA	325
Y1_c02	Youth currently attends training program	326
Y1_c04	Youth earned training credential since RA	333
Y1_c03_01	Youth type of training program_vocational school	327
Y1_c03_02	Youth type of training program_life skills training	328
Y1_c03_03	Youth type of training program_job skills training	329
Y1_c03_04	Youth type of training program_leadership or self-determination training	330
Y1_c03_05	Youth type of training program_PROMISE training program	331
Y1_c03_06	Youth type of training program_other	332
Y1_currentlanguage	Youth 18-month survey language	334
Y1_d01	Youth had job since RA	335
Y1_d02	Youth had paid job since RA	336
Y1_d03	Youth had job in past year	337
Y1_d04_puf	Number of jobs youth had in past year (PUF)	338
Y1_d05selfemp_01	Youth job 1_self-employed	339
Y1_d05selfemp_02	Youth job 2_self-employed	340
Y1_d05selfemp_03	Youth job 3_self-employed	341
Y1_d06_01	Youth job 1_current	342
Y1_d06_02	Youth job 2_current	343
Y1_d06_03	Youth job 3_current	344
Y1_d09_01	Youth job 1_how youth found job	345
Y1_d09_02	Youth job 2_how youth found job	346
Y1_d09_03	Youth job 3_how youth found job	347
Y1_d13a_01	Youth job 1_health insurance	348
Y1_d13a_02	Youth job 2_health insurance	349
Y1_d13a_03	Youth job 3_health insurance	350
Y1_d13b_01	Youth job 1_paid vacation or sick leave	351
Y1_d13b_02	Youth job 2_paid vacation or sick leave	352
Y1_d13b_03	Youth job 3_paid vacation or sick leave	353
Y1_d13c_01	Youth job 1_pension or retirement plan	354
Y1_d13c_02	Youth job 2_pension or retirement plan	355
Y1_d13c_03	Youth job 3_pension or retirement plan	356
Y1_d14_01	Youth job 1_other workers have disabilities	357
Y1_d14_02	Youth job 2_other workers have disabilities	358
Y1_d14_03	Youth job 3_other workers have disabilities	359
Y1_d15_01	Youth job 1_school-sponsored	360
Y1_d15_02	Youth job 2_school-sponsored	361

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Variable	Label	Number
Y1_d15_03	Youth job 3_school-sponsored	362
Y1_d17_01	Youth job 1_reason job ended	363
Y1_d17_02	Youth job 2_reason job ended	364
Y1_d17_03	Youth job 3_reason job ended	365
Y1_d18_01	Youth job 1_enjoyment	366
Y1_d18_02	Youth job 2_enjoyment	367
Y1_d18_03	Youth job 3_enjoyment	368
Y1_date_puf	Date youth completed the 18-month survey (PUF)	369
Y1_e03	Youth unmet need for help since RA	378
Y1_e02a_a	Help youth received since RA_help with disability or health issue	370
Y1_e02a_b	Help youth received since RA_help finding or learning about jobs	371
Y1_e02a_c	Help youth received since RA_help learning to manage money	372
Y1_e02a_d	Help youth received since RA_help understanding benefits	373
Y1_e02b_a	Usefulness of help youth received since RA_help with disability or health issue	374
Y1_e02b_b	Usefulness of help youth received since RA_help finding or learning about jobs	375
Y1_e02b_c	Usefulness of help youth received since RA_help learning to manage money	376
Y1_e02b_d	Usefulness of help youth received since RA_help understanding benefits	377
Y1_e04_01	Youth unmet need for help since RA_discovering job interests or skills	379
Y1_e04_02	Youth unmet need for help since RA_independent living training	380
Y1_e04_03	Youth unmet need for help since RA_career counseling	381
Y1_e04_04	Youth unmet need for help since RA_learning how to look for a job	382
Y1_e04_05	Youth unmet need for help since RA_job shadowing	383
Y1_e04_06	Youth unmet need for help since RA_apprenticeship or internship	384
Y1_e04_07	Youth unmet need for help since RA_help finding a job	385
Y1_e04_08	Youth unmet need for help since RA_job coaching	386
Y1_e04_09	Youth unmet need for help since RA_help applying for school or training	387
Y1_e04_10	Youth unmet need for help since RA_understanding benefits	388
Y1_e04_11	Youth unmet need for help since RA_computer literacy classes	389
Y1_e04_12	Youth unmet need for help since RA_problem solving	390
Y1_e04_13	Youth unmet need for help since RA_social skills training	391
Y1_e04_14	Youth unmet need for help since RA_financial literacy training	392
Y1_e04_15	Youth unmet need for help since RA_self-advocacy or self-determination training	393
Y1_e04_16	Youth unmet need for help since RA_referrals	394
Y1_e04_17	Youth unmet need for help since RA_transportation	395
Y1_e04_18	Youth unmet need for help since RA_health services	396
Y1_e04_19	Youth unmet need for help since RA_case management	397

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Variable	Label	Number
Y1_e04_20	Youth unmet need for help since RA_accommodations	398
Y1_e04_21	Youth unmet need for help since RA_education supports or services	399
Y1_e04_22	Youth unmet need for help since RA_other	400
Y1_f01a	Youth autonomy_chooses activities	401
Y1_f01b	Youth autonomy_talks to friends or family	402
Y1_f01c	Youth autonomy_goes to restaurants	403
Y1_f01d	Youth autonomy_chooses gifts for friends or family	404
Y1_f01e	Youth autonomy_goes to movies, concerts, or dances	405
Y1_f01f	Youth autonomy_plans weekend activities	406
Y1_f01g	Youth autonomy_decorates room	407
Y1_g01	Youth psychological empowerment_trying hard at school	408
Y1_g02	Youth psychological empowerment_keep trying	409
Y1_g03	Youth psychological empowerment_making friends	410
Y1_g04	Youth psychological empowerment_making good choices	411
Y1_g05	Youth psychological empowerment_choices are honored	412
Y1_g06	Youth psychological empowerment_making friends in new situations	413
Y1_h01a	Youth self-realization_I know what I do best	414
Y1_h01b	Youth self-realization_I like myself	415
Y1_h01c	Youth self-realization_I am confident in my abilities	416
Y1_h01d	Youth self-realization_other people like me	417
Y1_h01e	Youth self-realization_it is better to be yourself than to be popular	418
Y1_h01f	Youth self-realization_I know how to make up for my limitations	419
Y1_h01g	Youth self-realization_I am loved because I give love	420
Y1_i01	Youth expectations_education	421
Y1_i02	Youth expectations_independent living	422
Y1_i03	Youth expectations_financial independence	423
Y1_i04	Youth expectations_paid employment	424
Y1_i05a	Youth expectations_barriers to employment_disability or health	425
Y1_i05b	Youth expectations_barriers to employment_transportation	426
Y1_i05c	Youth expectations_barriers to employment_won't be able to find job	427
Y1_i05d	Youth expectations_barriers to employment_attending school or training program	428
Y1_i05e	Youth expectations_barriers to employment_inaccessible workplaces	429
Y1_i05f	Youth expectations_barriers to employment_risk of losing benefits	430
Y1_i05g	Youth expectations_barriers to employment_won't want to work	431
Y1_i05h	Youth expectations_barriers to employment_others won't think able to work	432
Y1_i05i	Youth expectations_barriers to employment_other	433



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Variable	Label	Number
Y1_j01	Youth health status	434
Y1_j02a	Youth used tobacco in past 30 days	435
Y1_j02b	Youth drank alcohol in past 30 days	436
Y1_j02c	Youth used marijuana in past 30 days	437
Y1_j02e	Youth used other illicit drug in past 30 days	438
Y1_k01_puf	Youth ADL difficulties_speaking or communicating with others (PUF)	439
Y1_k01a	Youth ADL equipment needs_speaking or communicating with others	440
Y1_k02_puf	Youth ADL difficulties_hearing a normal conversation (PUF)	441
Y1_k02a	Youth ADL equipment needs_hearing a normal conversation	442
Y1_k03_puf	Youth ADL difficulties_seeing (PUF)	443
Y1_k03a	Youth ADL equipment needs_seeing	444
Y1_k04_puf	Youth ADL difficulties_walking, standing, or climbing stairs (PUF)	445
Y1_k04a	Youth ADL equipment needs_walking, standing, or climbing stairs	446
Y1_k05_puf	Youth ADL difficulties_dressing, bathing, or eating (PUF)	447
Y1_k05a	Youth ADL equipment needs_dressing, bathing, or eating	448
Y1_k06_puf	Youth ADL difficulties_getting around inside the house (PUF)	449
Y1_k06a	Youth ADL equipment needs_getting around inside the house	450
Y1_k07_puf	Youth IADL difficulties_getting around outside the house (PUF)	451
Y1_k07a	Youth IADL equipment needs_getting around outside the house	452
Y1_k08_puf	Youth IADL difficulties_planning and carrying out activities (PUF)	453
Y1_k08a	Youth IADL equipment needs_planning and carrying out activities	454
Y1_k09_puf	Youth IADL difficulties_learning, remembering, or concentrating (PUF)	455
Y1_k09a	Youth IADL equipment needs_learning/remembering/concentrating	456
pufid	PUF ID	1

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

Variable	Label	Number
pufid	PUF ID	1
P1_a01_puf	Youth received special education or had IEP since RA (PUF)	2
P1_a02	Youth had 504 plan since RA	3
P1_a03	Parent met with youth's teacher to discuss goals after high school	4
P1_a04	Youth received other school supports since RA	5
P1_b01	Youth services received since RA_determine needs and connect to services	6
P1_b02	Youth services received since RA_life skills	7
P1_b03	Youth services received since RA_leadership or self-advocacy training	8
P1_b04	Youth services received since RA_help learning about jobs	9
P1_b05	Youth services received since RA_help applying to education or training program	10
P1_b06	Youth services received since RA_job skills training	11
P1_b07	Youth services received since RA_help finding or applying to jobs	12
P1_b08	Youth services received since RA_job coaching	13
P1_b09	Youth services received since RA_assistive technology	14
P1_b10	Youth services received since RA_understanding benefits	15
P1_b11	Youth services received since RA_learning to save and manage money	16
P1_b12	Youth services received since RA_other	17
P1_b13	Youth unmet needs since RA	18
P1_b13a01	Youth unmet needs since RA_discovering job interests or skills	19
P1_b13a02	Youth unmet needs since RA_independent living training	20
P1_b13a03	Youth unmet needs since RA_career counseling	21
P1_b13a04	Youth unmet needs since RA_learning how to look for a job	22
P1_b13a05	Youth unmet needs since RA_job shadowing	23
P1_b13a06	Youth unmet needs since RA_apprenticeship or internship	24
P1_b13a07	Youth unmet needs since RA_help finding a job	25
P1_b13a08	Youth unmet needs since RA_job coaching	26
P1_b13a09	Youth unmet needs since RA_help applying to school or training	27
P1_b13a10	Youth unmet needs since RA_understanding benefits	28
P1_b13a11	Youth unmet needs since RA_computer literacy classes	29
P1_b13a12	Youth unmet needs since RA_problem solving	30
P1_b13a13	Youth unmet needs since RA_social skills training	31
P1_b13a14	Youth unmet needs since RA_financial literacy or money management training	32
P1_b13a15	Youth unmet needs since RA_self-advocacy or self-determination training	33

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Variable	Label	Number
P1_b13a16	Youth unmet needs since RA_referrals	34
P1_b13a17	Youth unmet needs since RA_transportation	35
P1_b13a18	Youth unmet needs since RA_health services	36
P1_b13a19	Youth unmet needs since RA_case management	37
P1_b13a20	Youth unmet needs since RA_accommodations	38
P1_b13a21	Youth unmet needs since RA_education	39
P1_b13a22	Youth unmet needs since RA_financial support and basic needs	40
P1_b13a23	Youth unmet needs since RA_respite care	41
P1_b13a99	Youth unmet needs since RA_other	42
P1_c02_01	Youth provider 1_type of place	43
P1_c02_02	Youth provider 2_type of place	44
P1_c02_03	Youth provider 3_type of place	45
P1_c02_04	Youth provider 4_type of place	46
P1_c06_01	Youth provider 1_usefulness of services	47
P1_c06_02	Youth provider 2_usefulness of services	48
P1_c06_03	Youth provider 3_usefulness of services	49
P1_c06_04	Youth provider 4_usefulness of services	50
P1_currentlanguage	Parent 18-month survey language	51
P1_d01	Household services received since RA_determine needs and connect to services	52
P1_d02	Household services received since RA_help applying to school or training program	53
P1_d03	Household services received since RA_job skills training	54
P1_d04	Household services received since RA_help finding or applying to a job	55
P1_d05	Household services received since RA_help learning about youth's disability	56
P1_d06	Household services received since RA_understanding benefits	57
P1_d07	Household services received since RA_learning to save and manage money	58
P1_d08	Household services received since RA_help getting to know other parents	59
P1_d09	Household services received since RA_other	60
P1_d10	Household unmet needs since RA	61
P1_d10a01	Household unmet needs since RA_discovering job interests or skills	62
P1_d10a02	Household unmet needs since RA_career counseling	63
P1_d10a03	Household unmet needs since RA_learning how to look for a job	64
P1_d10a04	Household unmet needs since RA_job shadowing	65
P1_d10a05	Household unmet needs since RA_apprenticeship or internship	66
P1_d10a06	Household unmet needs since RA_help finding a job	67
P1_d10a07	Household unmet needs since RA_job coaching	68

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Variable	Label	Number
P1_d10a08	Household unmet needs since RA_help applying to school or training	69
P1_d10a09	Household unmet needs since RA_understanding benefits	70
P1_d10a10	Household unmet needs since RA_computer literacy classes	71
P1_d10a11	Household unmet needs since RA_problem solving	72
P1_d10a12	Household unmet needs since RA_financial literacy or money management training	73
P1_d10a13	Household unmet needs since RA_referrals	74
P1_d10a14	Household unmet needs since RA_transportation	75
P1_d10a15	Household unmet needs since RA_health services	76
P1_d10a16	Household unmet needs since RA_case management	77
P1_d10a17	Household unmet needs since RA_child care	78
P1_d10a18	Household unmet needs since RA_education	79
P1_d10a19	Household unmet needs since RA_financial support for basic needs	80
P1_d10a20	Household unmet needs since RA_financial support for school or training program	81
P1_d10a21	Household unmet needs since RA_housing	82
P1_d10a22	Household unmet needs since RA_independent living skills	83
P1_d10a23	Household unmet needs since RA_legal services	84
P1_d10a24	Household unmet needs since RA_parent training	85
P1_d10a25	Household unmet needs since RA_respite care	86
P1_d10a26	Household unmet needs since RA_vocational training	87
P1_d10a99	Household unmet needs since RA_other	88
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Y1_h01e	Youth self-realization_it is better to be yourself than to be popular	418
Y1_h01f	Youth self-realization_I know how to make up for my limitations	419
Y1_h01g	Youth self-realization_I am loved because I give love	420
Y1_i01	Youth expectations_education	421
Y1_i02	Youth expectations_independent living	422

## Appendix A

Variable	Label	Number
Y1_i03	Youth expectations_financial independence	423
Y1_i04	Youth expectations_paid employment	424
Y1_i05a	Youth expectations_barriers to employment_disability or health	425
Y1_i05b	Youth expectations_barriers to employment_transportation	426
Y1_i05c	Youth expectations_barriers to employment_won't be able to find job	427
Y1_i05d	Youth expectations_barriers to employment_attending school or training program	428
Y1_i05e	Youth expectations_barriers to employment_inaccessible workplaces	429
Y1_i05f	Youth expectations_barriers to employment_risk of losing benefits	430
Y1_i05g	Youth expectations_barriers to employment_won't want to work	431
Y1_i05h	Youth expectations_barriers to employment_others won't think able to work	432
Y1_i05i	Youth expectations_barriers to employment_other	433
Y1_j01	Youth health status	434
Y1_j02a	Youth used tobacco in past 30 days	435
Y1_j02b	Youth drank alcohol in past 30 days	436
Y1_j02c	Youth used marijuana in past 30 days	437
Y1_j02e	Youth used other illicit drug in past 30 days	438
Y1_k01_puf	Youth ADL difficulties_speaking or communicating with others (PUF)	439
Y1_k01a	Youth ADL equipment needs_speaking or communicating with others	440
Y1_k02_puf	Youth ADL difficulties_hearing a normal conversation (PUF)	441
Y1_k02a	Youth ADL equipment needs_hearing a normal conversation	442
Y1_k03_puf	Youth ADL difficulties_seeing (PUF)	443
Y1_k03a	Youth ADL equipment needs_seeing	444
Y1_k04_puf	Youth ADL difficulties_walking, standing, or climbing stairs (PUF)	445
Y1_k04a	Youth ADL equipment needs_walking, standing, or climbing stairs	446
Y1_k05_puf	Youth ADL difficulties_dressing, bathing, or eating (PUF)	447
Y1_k05a	Youth ADL equipment needs_dressing, bathing, or eating	448
Y1_k06_puf	Youth ADL difficulties_getting around inside the house (PUF)	449
Y1_k06a	Youth ADL equipment needs_getting around inside the house	450
Y1_k07_puf	Youth IADL difficulties_getting around outside the house (PUF)	451
Y1_k07a	Youth IADL equipment needs_getting around outside the house	452
Y1_k08_puf	Youth IADL difficulties_planning and carrying out activities (PUF)	453
Y1_k08a	Youth IADL equipment needs_planning and carrying out activities	454
Y1_k09_puf	Youth IADL difficulties_learning, remembering, or concentrating (PUF)	455
Y1_k09a	Youth IADL equipment needs_learning/remembering/concentrating	456

**Appendix B.**  
**PROMISE 18-Month Survey Parent Questionnaire**

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## PROMISE 18-Month Follow-Up Surveys: Parent / Guardian Questionnaire

Final: September 30, 2015

### Administrative Notes:

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- The surveys will be administered beginning **19 months after random assignment anniversary date** (to allow for a full 18 months of exposure to services). This instrument is designed in an **interviewer-administered format**. The parent / guardian modules are designed to take approximately 35 minutes to complete. Youth modules will take 25 minutes to complete. Interviews will be conducted in **English or Spanish**.
- **Consent** for participation in both interviews (parent, youth, 18-month and 5-year) was collected from parent during enrollment in PROMISE. All youth provided assent at the time of enrollment.
- The **target respondent** for the parent survey is the parent or guardian who completed the consent form at the time of enrollment. However, if this parent is not willing or able to take part in the interview, the youth's other parent or guardian who resides in the same household as youth could complete the interview. If those individuals are unwilling or unable to participate, the legal guardian may designate a proxy respondent.
- For the majority of cases, **the parent / guardian questions will be completed first, followed by the youth**. If the parent / legal guardian is unavailable or not able to continue, the interviewer may proceed with the youth interview and loop back to the parent interview at a later time to complete the remaining items. Youth may complete the youth modules by him or herself, or with support from a parent / guardian or other trusted adult. If a youth is not able to complete his / her interview – these modules may be completed by a proxy. If a proxy interview is conducted, no items that are subjective in nature will be included in the interview.
- Formatting is used to guide interviewing staff on question administration. Text shown in **ALL CAPS** is not read aloud. Text in **underline** format is emphasized.
- **Programming logic will be used to route respondents** to the next applicable item or section based on responses provided. The **target universe** for each item (based on skip logic or other criteria, such as age), is shown in the bar located above the item number. Logic designating which set of respondents complete specific sections are shown in the section outline as well as in the programming specifications at the start of each section.
- Youth identified as living in their own households, apart from parents or guardians, will respond to a subset of the parent modules during the youth interview. In these cases, the parent interview will be completed by the parent who provided consent at enrollment. If a youth is found to be **deceased**, the case will be coded as ineligible and no further contact will be attempted.
- Variable names will be flagged as: <      > following each item.

**Case Status Logic:**

Completed parent interviews will fall into the following completed case status based on the logic provided in the table below:

<b>Final Status</b>	<b>Descriptor</b>	<b>Blaise Logic Informing Case Status</b>
<b>2010</b>	CATI complete	(MakeDialPhone= 1 OR 2 OR 4) AND (PARENT-CLOSE-2=1)
<b>2011</b>	CATI complete - proxy	(MakeDialPhone= 1 OR 2 OR 4) AND (PROXY: KeyItems.Respondent.PersonNum := 8) (PARENT-CLOSE-2=1)
<b>2012</b>	CATI complete - from Field	MakeDialPhone=5 and PARENT-CLOSE-2=1
<b>2019</b>	CATI partial	(MakeDialPhone= 1 OR 2 OR 4) AND (I. Consent_2=1) AND (PARENT-CLOSE-2=.) AND B13=1, 0, D, or R and B14_new=populated.
<b>2020</b>	CAPI / Field complete	(ModeOfProcessing = Web) AND (KeyItems.Respondent.PersonNum := 5)
<b>2021</b>	CAPI / Field complete - proxy	(ModeOfProcessing = Web) AND (KeyItems.Respondent.PersonNum := 8)
<b>2029</b>	CAPI / Field partial	(I. Consent_2 and PARENT-CLOSE-2=.) AND B13=1, 0, D, or R and B14_new=populated.
<b>2023</b>	CAPI / Field complete by phone on laptop	FieldLoc = 2.
<b>2050</b>	Self-administered hardcopy complete	(MakeDialPhone= 6)

**SECTIONS OF THE PARENT / GUARDIAN QUESTIONNAIRE**

		<b>Asked of ...</b>		
		<b>Parent or Legal Guardian of Participating Youth (where youth resides with a parent / guardian)</b>	<b>Other adult (staff from group home, school) where parent /guardian granted consent to respond on his / her behalf</b>	<b>Consenting Parent of Independent Youth</b>
<b>Section:</b>		<b>I.Rtype=1 OR 2</b>	<b>I.ELIG_2=5 AND I.RTYPE=3</b>	<b>I.Rtype= 4</b>
<b>I.</b>	<b>Parent / Guardian Introduction</b>	<b>YES</b>	<b>YES</b>	<b>YES</b>
<b>II.</b>	<b>Service Receipt in Past 18 months</b>	<b>YES</b>	<b>SUBSECTION</b>	<b>YES</b>
<b>III.</b>	<b>Parent Employment Experience and Credentials</b>	<b>YES</b>	<b>NO</b>	<b>YES</b>
<b>IV.</b>	<b>Parent: Individual and Family Well-Being</b>	<b>YES</b>	<b>NO</b>	<b>NO</b>
<b>V.</b>	<b>Parent's Expectations for Youth</b>	<b>YES</b>	<b>NO</b>	<b>YES</b>
<b>VI.</b>	<b>Demographics &amp; Contact Information</b>	<b>YES</b>	<b>SUBSECTION</b>	<b>YES</b>

## Appendix B

### Variables from sample file used to populate logic include:

Fill variable in questionnaire specifications	String Length (max)	Sample file variable name	Note
PROGRAM NAME	100	ProgramName	
STATE PROGRAM LOCATED IN	2	ProgramState	
PROMISE SERVICES (TREATMENT) OR USUAL SERVICES GROUP ASSIGNMENT	1	RandomAssignment	Treatment = P Control = C
FIRST / LAST NAME OF CONSENTING PARENT / GUARDIAN	20/30	FirstName; LastName	Parent records are any row in tblPerson where RelationshipTypeID = 2
RA DATE	18	RADate	
RA MONTH	10	RAMonth	Separate field from RA Date
RA YEAR	4	RAYear	Separate field from RA Date
FIRST / LAST NAME OF YOUTH	20/30	YouthFirstName; YouthLastName	To indicate youth, tblPerson.InSample = 1 and tblPerson.RelationshipTypeID = 1 (Primary Sample Member)
CONSENTING PARENT MAILING ADDRESS	20 / 10 / 15 / 2 / 9	Address1; Address2...City, State, ZipCode	
CONSENTING PARENT PHONE	10	PhoneNum	
YOUTH MAILING ADDRESS	20 / 10 / 15 / 2 / 9	YouthAddress1... YouthZipCode	
YOUTH PHONE	10	YouthPhone	
SPANISH LANGUAGE FLAG		TBD from SMS	1 = YES, 0 = NO
COHORT NUMBER	2	TBD from SMS	01-25

**TEXT FILLS FOR SPECIFIC SITES AND STATES**

<b>Program State</b>	<b>Health Insurance Marketplace Name</b>	<b>State-Specific Name for Medicaid</b>	<b>State-Specific Name for TANF</b>	<b>State-Specific Name for American Job Center</b>	<b>State-Specific Name for S-Chip</b>	<b>Name for Case Manager</b>
AR	Federal Marketplace	Arkansas Medicaid	TANF	Workforce Center	ARKids	Connector
CA	Covered California ( <a href="http://www.coveredca.com/">http://www.coveredca.com/</a> )	Medi-Cal	CalWORKs	America’s Job Center of California	Healthy Families	Career Service Coordinator (CSC)
MD	Maryland Health Connection ( <a href="http://www.marylandhealthconnection.gov/">http://www.marylandhealthconnection.gov/</a> )	HealthChoice	Temporary Cash Assistance (TCA)	One Stop Career Centers	Maryland Children’s Health Program (MCHP)	Case manager and Family Employment Specialist
NY	NY State of Health ( <a href="https://nystateofhealth.ny.gov/">https://nystateofhealth.ny.gov/</a> )	Partnership for Long Term Care	Family Assistance (FA)	Career Center	Child Health Plus	Research Demonstration Site (RDS) case manager
WI	Federal Marketplace	Medicaid HMO Program	TANF	Job Center	BadgerCare Plus	Division of Vocational Rehabilitation (DVR) counselor
ASPIRE	AZ: Federal Marketplace CO: Connect for Health Colorado <a href="http://connectforhealthco.com/">http://connectforhealthco.com/</a> MT=federal marketplace, ND=federal marketplace, SD=federal marketplace, Utah=federal marketplace (individual) and Avenue H	AZ: AHCCCS (pronounced ‘access’) CO: Medical Assistance Program (CO) / Medicaid MT: Passport to Health / Medicaid or Passport	Arizona: Cash Assistance (CA) Colorado: Colorado Works Montana: TANF North Dakota: TANF South Dakota: TANF Utah: TANF	AZ: One Stop Center CO: Workforce Center MT: Job Service ND: Job Service SD: South Dakota Department of Labor and Regulation Local Office UT: Utah Department of Workforce Services Employment Center	AZ: KidsCare CO: Child Health Plan Plus (CHP+) MT: Healthy Montana Kids ND: Healthy Steps SD: Children’s Health Insurance Program (CHIP) UT: Children’s Health Insurance Program (CHIP)	Case Manager

		<b>Asked of ...</b>		
		<b>Parent or Legal Guardian of Participating Youth (where youth resides with a parent / guardian)</b>	<b>Other adult (staff from group home, school) where parent /guardian granted consent to respond on his / her behalf</b>	<b>Consenting Parent of Independent Youth</b>
<b>Section:</b>		<b>I.Rtype=1 OR 2</b>	<b>I.ELIG_2=5 AND I.RTYPE=3</b>	<b>I.Rtype= 4</b>
<b>I.</b>	<b>Parent / Guardian Introduction</b>	<b>YES</b>	<b>YES</b>	<b>YES</b>

**SECTION I PARENT / GUARDIAN INTRODUCTION**

WEB VERSION ONLY – ALL INTERVIEWS

**FieldLoc. FIELD STAFF MEMBER: HOW ARE YOU COMPLETING THIS INTERVIEW? <P1Sc\_FieldLoc>**

**CODE ONE ONLY**

IN-PERSON ..... 1 CONTINUE  
 OVER THE PHONE ..... 2 CONTINUE 2023

PROGRAMMER: MISSINGS NOT ALLOWED.

ALL
[INTERVIEWER'S FULL NAME], , [NAME OF CONSENTING PARENT] [YOUTH]

**I. Hello. Hi! My name is [INTERVIEWER'S FULL NAME]. I'm calling from Mathematica Policy Research on behalf of the Social Security Administration, as part of an important national study. May I please speak to [NAME OF CONSENTING PARENT]? <P1Sc\_Hello> ; <P1\_Callback\_Hello>**

IF UNAVAILABLE, ASK FOR ANOTHER PARENT OR GUARDIAN.

INTERVIEWER: IF YOUTH ANSWERS, BRIEFLY EXPLAIN WE NEED TO BEGIN WITH THE PARENT QUESTIONS FIRST AND THEN WOULD LIKE TO SPEAK WITH (HIM / HER) AFTERWARDS.

**CODE ONE ONLY**

SPEAKING TO [CONSENTING PARENT] .....	1	CONTINUE
SPEAKING TO OTHER PARENT / GUARDIAN.....	2	CONTINUE
WHAT IS CALL ABOUT .....	3	CONTINUE
PARENT / GUARDIAN BUSY, UNAVAILABLE .....	4	NOT AVAILABLE
PARENT / GUARDIAN MOVED / LIVES ELSEWHERE.....	5	NOT AVAILABLE
PARENT / GUARDIAN DOES NOT SPEAK ENGLISH .....	6	CONTINUE OR SET CB
PARENT / GUARDIAN HAS HEALTH PROBLEM.....	7	BARRIER
PARENT / GUARDIAN IN AN INSTITUTION.....	8	BARRIER
YOUTH IS DECEASED .....	9	INELIGIBLE
PARENT / GUARDIAN IS DECEASED.....	10	BARRIER
NEVER HEARD OF PARENT / GUARDIAN.....	11	BARRIER
WRONG NUMBER.....	12	BARRIER
HUNG UP DURING INTRODUCTION .....	13	BARRIER

ALL
[INTERVIEWER'S FULL NAME], , [NAME OF CONSENTING PARENT] [YOUTH]

I. Hello. **CMOTO: Hi! My name is \_\_\_\_\_ . I'm here from Mathematica Policy Research on behalf of the Social Security Administration, as part of an important national study. May I please speak to [NAME OF CONSENTING PARENT]?**

IF UNAVAILABLE, ASK FOR ANOTHER PARENT OR GUARDIAN.

INTERVIEWER: IF YOUTH ANSWERS, BRIEFLY EXPLAIN WE NEED TO BEGIN WITH THE PARENT QUESTIONS FIRST AND THEN WOULD LIKE TO SPEAK WITH (HIM / HER) AFTERWARDS.

**CODE ONE ONLY**

SPEAKING TO [CONSENTING PARENT] .....	1	CONTINUE
SPEAKING TO OTHER PARENT / GUARDIAN.....	2	CONTINUE
WHAT IS CALL ABOUT .....	3	CONTINUE
PARENT / GUARDIAN BUSY, UNAVAILABLE .....	4	NOT AVAILABLE
PARENT / GUARDIAN MOVED / LIVES ELSEWHERE.....	5	NOT AVAILABLE
PARENT / GUARDIAN DOES NOT SPEAK ENGLISH .....	6	CONTINUE OR SET CB
PARENT / GUARDIAN HAS HEALTH PROBLEM.....	7	BARRIER
PARENT / GUARDIAN IN AN INSTITUTION.....	8	BARRIER
YOUTH IS DECEASED .....	9	INELIGIBLE
PARENT / GUARDIAN IS DECEASED.....	10	BARRIER
NEVER HEARD OF PARENT / GUARDIAN .....	11	BARRIER
WRONG NUMBER.....	12	BARRIER
HUNG UP DURING INTRODUCTION .....	13	BARRIER



I.HELLO = 1, 2, 3, OR 6

[YOUTH]

**I. ELIG. IF NEEDED, REPEAT INTRODUCTION:**

**Hello, my name is [INTERVIEWER'S FULL NAME]. I'm calling from Mathematica Policy Research on behalf of the Social Security Administration. I'm calling to complete an interview with [YOUTH]'s parent or legal guardian, as well as an interview with [YOUTH].**

**ALL: To confirm I am speaking with someone who can complete this interview, can you please tell me how you are related to [YOUTH]? <P1Sc\_Elig>**

**CODE ONE ONLY**

MOTHER (BIOLOGICAL OR ADOPTED).....	1	GO TO I.ELIG_2
FATHER (BIOLOGICAL OR ADOPTED).....	2	GO TO I.ELIG_2
STEP MOTHER.....	3	GO TO I.ELIG_2
STEP FATHER.....	4	GO TO I.ELIG_2
LEGAL GUARDIAN - FEMALE .....	5	GO TO I.ELIG_2
LEGAL GUARDIAN - MALE .....	6	GO TO I.ELIG_2
FOSTER PARENT: FOSTER MOTHER .....	7	GO TO I.ELIG_2
FOSTER PARENT: FOSTER FATHER .....	8	GO TO I.ELIG_2
OTHER FAMILY MEMBER (PROXY FOR PARENT OR GUARDIAN) .....	9	GO TO I.ELIG_2
SOMEONE FROM [YOUTH]'S SCHOOL, GROUP HOME, OR OTHER INSTITUTION .....	10	GO TO I.ELIG_2
SOMEONE FROM AN AGENCY/ SERVICE PROVIDER.....	11	GO TO I.ELIG_2
OTHER (SPECIFY) .....	99	
_____ (STRING 150)		
DON'T KNOW.....	d	TERMINATE
REFUSED.....	r	TERMINATE

IF OTHER SPECIFY (99): **Other relationship is: <P1Sc\_Elig\_Oth>**

I.HELLO = 1, 2, 3, OR 6
[YOUTH]

**I. ELIG. IF NEEDED, REPEAT INTRODUCTION:**

**CMOTO:**

Hello, my name is [INTERVIEWER'S FULL NAME]. I'm here from Mathematica Policy Research on behalf of the Social Security Administration. I'm here to complete an interview with [YOUTH]'s parent or legal guardian, as well as an interview with [YOUTH].

**ALL:** To confirm I am speaking with someone who can complete this interview, can you please tell me how you are related to [YOUTH]?

**CODE ONE ONLY**

MOTHER (BIOLOGICAL OR ADOPTED).....	1	GO TO I.ELIG_2
FATHER (BIOLOGICAL OR ADOPTED).....	2	GO TO I.ELIG_2
STEP MOTHER.....	3	GO TO I.ELIG_2
STEP FATHER.....	4	GO TO I.ELIG_2
LEGAL GUARDIAN - FEMALE.....	5	GO TO I.ELIG_2
LEGAL GUARDIAN - MALE.....	6	GO TO I.ELIG_2
FOSTER PARENT: FOSTER MOTHER.....	7	GO TO I.ELIG_2
FOSTER PARENT: FOSTER FATHER.....	8	GO TO I.ELIG_2
OTHER FAMILY MEMBER (PROXY FOR PARENT OR GUARDIAN).....	9	GO TO I.ELIG_2
SOMEONE FROM [YOUTH]'S SCHOOL, GROUP HOME, OR OTHER INSTITUTION.....	10	GO TO I.ELIG_2
SOMEONE FROM AN AGENCY/ SERVICE PROVIDER.....	11	GO TO I.ELIG_2
OTHER (SPECIFY).....	99	
_____ (STRING 150)		
DON'T KNOW.....	d	TERMINATE
REFUSED.....	r	TERMINATE

IF OTHER SPECIFY (99): <b>Other relationship is:</b>
--

I.ELIG = 99
[CONSENTING PARENT] [YOUTH]

**I.ELIG\_1. Thanks for this information. We'd like to speak with [CONSENTING PARENT], and then we'll reach out to [YOUTH] for (his / her) interview. <P1Sc\_Elig\_1>**

**CODE ONE ONLY**

- |  |   |              |
|--|---|--------------|
| [CONSENTING PARENT] – CONSENTING PARENT COMES TO PHONE .....   | 1 | CONTINUE     |
| CONSENTING PARENT NOT AVAILABLE AT THIS TIME .....   | 2 | SET CALLBACK |
| CONSENTING PARENT WILL NOT PARTICIPATE .....   | 3 | REFUSAL      |
| CONSENTING PARENT PROVIDED CONSENT FOR OTHER ADULT TO RESPOND ON HIS / HER BEHALF (ADULT FROM SCHOOL, FACILITY, ETC) | 4 | CONTINUE     |

(I.ELIG =1-11) OR (I.ELIG\_1=1 OR 4)

[CONSENTING PARENT NAME] [YOUTH]

**I.ELIG\_2. May I confirm that you are the person who is most knowledgeable about the day-to-day activities of [YOUTH], and that you are the legal guardian of [YOUTH] and can answer questions about (him/her)? This includes knowledge of services or supports that he / she may have received. <P1SC\_Elig\_2> ; <P1\_Callback\_Elig\_2>**

INTERVIEWER NOTE: WE MUST HAVE RECEIVED PARENT / GUARDIAN'S APPROVAL TO SPEAK TO A NON-PARENT / GUARDIAN FOR THIS INTERVIEW. IF THIS APPROVAL HAS BEEN PROVIDED AND SUPERVISOR HAS CONFIRMED – SELECT OPTION 5 BELOW.

CMOTO INTERVIEWER NOTE: WE MUST HAVE RECEIVED PARENT / GUARDIAN'S APPROVAL TO SPEAK TO A NON-PARENT / GUARDIAN FOR THIS INTERVIEW. IF THIS APPROVAL HAS BEEN PROVIDED AND SUPERVISOR HAS CONFIRMED – SELECT 'NON-PARENT / GUARDIAN FOR WHOM PARENT / GUARDIAN PROVIDED CONSENT TO COMPLETE ON HIS / HER BEHALF (STAFF FROM SCHOOL, FACILITY, ETC.)'

INTERVIEWER NOTE: IF YOUTH IS 18 OR OLDER, OR NO LONGER HAS A LEGAL GUARDIAN, PLEASE CONFIRM THAT THE PARENT RESPONDENT WAS THE LEGAL GUARDIAN AT THE TIME OF ENROLLMENT – IF YES, SELECT OPTION 6 BELOW.

CMOTO INTERVIEWER NOTE: IF YOUTH IS 18 OR OLDER, OR NO LONGER HAS A LEGAL GUARDIAN, PLEASE CONFIRM THAT THE PARENT RESPONDENT WAS THE LEGAL GUARDIAN AT THE TIME OF ENROLLMENT – IF YES, SELECT 'YES – CONFIRMED AS KNOWLEDGEABLE (YOUTH HAS NO LEGAL GUARDIAN)'

CODE ONE ONLY

- YES – CONFIRMED AS KNOWLEDGEABLE AND LEGAL GUARDIAN..... 1 GO TO I.CONSENT
- NO – NOT THE MOST KNOWLEDGEABLE ADULT ..... 2 GO TO NeedProxy\_2
- NO – NOT THE LEGAL GUARDIAN..... 3 SUPERVISOR REVIEW
- REFUSES TO PARTICIPATE ..... 4 REFUSAL
- NON-PARENT / GUARDIAN FOR WHOM PARENT / GUARDIAN PROVIDED CONSENT TO COMPLETE ON HIS / HER BEHALF (STAFF FROM SCHOOL, FACILITY, ETC.)..... 5 GO TO I.CONSENT
- YES – CONFIRMED AS KNOWLEDGEABLE (YOUTH HAS NO LEGAL GUARDIAN) ..... 6 GO TO I.CONSENT

I.ELIG_2 = 2
[YOUTH]

**NeedProxy\_2. Is there another parent or legal guardian of [YOUTH] [that is more knowledgeable about the day to day activities of [YOUTH] who can complete the interview about [YOUTH]?**  
**<P1Sc\_NeedProxy2>**

**IF NEEDED: We can also complete the interview with another adult [that is more knowledgeable about the day to day activities of [YOUTH]], such as with a staff member from a group home or school, but we will first need permission from a parent / guardian of [YOUTH].**

**CODE ONE ONLY**

OTHER PARENT / LEGAL GUARDIAN WILL COMPLETE INTERVIEW NOW...1	Go to ProxyName3
YES, BUT NOT A GOOD TIME/PROXY NOT AVAILABLE...2	Go to ProxyName3
PROXY LIVES ELSEWHERE .....3	Go to ProxyName3
NO PROXY AVAILABLE .....4	Status 1470, Go to Thanks
SUPERVISOR REVIEW.....5	Status 1380, Go to Thanks
DON'T KNOW.....d	Go to Callback
REFUSED.....r	Status 2210

NeedProxy\_2= 1-3

**ProxyName3. Before we begin, can you please tell me their name? <P1Sc\_ProxyName3>**

\_\_\_\_\_ STRING (20)  
 FIRST NAME  
 \_\_\_\_\_ STRING (20)  
 MIDDLE INITIAL/NAME  
 \_\_\_\_\_ STRING (20)      Go To ProxyRel2

ProxyName3 = Populated

[YOUTH]

**ProxyRel2. And how are they related to [YOUTH]? <P1Sc\_ProxyRel3>**

**CODE ONE ONLY**

OTHER PARENT .....1      Go to I. BOX 0  
 GUARDIAN.....2      Go to I. BOX 0  
 GROUP HOME/FOSTER HOME/ SCHOOL FACULTY .....3      Go to I. BOX 0  
 OTHER SPECIFY .....4      Go to OtherRel\_2  
 DON'T KNOW.....d      Terminate –Sup review  
 REFUSED.....r      Terminate –Sup review

ProxyRel2 = 4

**OtherRel\_2      SPECIFY THE TYPE OF OTHER RELATIVE: <P1Sc\_OtherRel3>**

\_\_\_\_\_ STRING (20)      Go to Sup Review

**BOX I.0**

**PROGRAMMER:** If NeedProxy\_2 = 1, Go to Proxy2\_Available. If NeedProxy\_2= 2 or 3, go to ProxyPhone\_2

NeedProxy\_2 = 2 or 3

**ProxyPhone\_2. May I please have (his/her) telephone number? <P1Sc\_ProxyPhone2>**

|\_|\_|\_| - |\_|\_|\_| - |\_|\_|\_|\_| ..... Go To ProxyAddr\_2  
 RANGE RANGE RANGE  
 DON'T KNOW ..... d Go To ProxyAddr\_2  
 REFUSED..... r Go To ProxyAddr\_2

SOFT CHECK: IF CONDITION (e.g. Exchange = 555) **I have recorded 555, is that correct?**  
 HARD CHECK: IF CONDITION (e.g. Area code LE 200) INTERVIEWER: AREA CODE IS OUTSIDE OF RANGE

NeedProxy\_2 = 2 or 3

**ProxyAddr\_2. And (his/her) address? <P1Sc\_ProxyAddr2>**

**IF NEEDED: If you don't know the exact address, the city and state are helpful too.**

STREET \_\_\_\_\_ STRING (25)  
 CITY \_\_\_\_\_ STRING (25)  
 STATE \_\_\_\_\_ STRING (2)  
 |\_|\_|\_|\_|\_| - |\_|\_|\_|\_|  
 ZIP CODE Go to Callback  
 00501-99950 0001-9999  
 DON'T KNOW.....d Go To Callback  
 REFUSED.....r Go To Callback

NeedProxy\_2 = 1

[FILL PROXY NAME from ProxyName3]

**Proxy2\_Available. Would [FILL PROXY NAME from ProxyName3] be available to speak now? <P1Sc\_Proxy2\_Avail>**

YES – ABLE TO BEGIN INTERVIEW NOW ..... 1 GO TO I.Consent  
 NO – NOT ABLE TO BEGIN INTERVIEW NOW ..... 0 GO TO CALLBACK  
 DON'T KNOW..... d GO TO CALLBACK  
 REFUSED..... r GO TO CALLBACK

I.ELIG\_2=1, 5 OR 6

[PROMISE PROGRAM NAME] [FILL\$30 IF DATE OF INTERVIEW IS > 10 DAYS FROM LAUNCH / FILL \$40 IF DATE OF INTERVIEW IS < 10 DAYS FROM LAUNCH].

**I.Consent. IF SPEAKING TO CONSENTING PARENT [I.HELLO=1 OR WhatAbout=1 OR AmpPhone=1 OR CallTTY=1 OR I.Elig\_1=1], FILL:** About a year and a half ago, you enrolled in a program called [PROMISE PROGRAM NAME]. In that application, you may remember completing a consent form which explained that the study included two interviews. This is the first interview. The questions will cover topics such as: your health and wellbeing, services received over the last year or so, and your educational and employment experiences. This interview takes about 35 minutes to complete. You'll receive [\$30 / \$40] for completing the interview. I'd like to begin with some questions for you and then talk to [YOUTH].  
<P1Sc\_Consent\_1> ; <P1\_Callback\_Consent\_1>

**IF NEEDED:** All your answers will be held in strict confidence. Nothing you say will affect your child's SSI benefits now or in the future. We can start now and take a break whenever you need one.

**ELSE, FILL:** We are conducting a health study for SSA. This study includes two interviews, and this is the first one. The questions will cover topics such as: health and wellbeing, services received over the last year or so, and educational and employment experiences. This interview takes about 35 minutes to complete. You'll receive [\$30 / \$40] for completing the interview. I'd like to begin with some questions for you and then talk to [YOUTH].

**IF NEEDED:** All your answers will be held in strict confidence. Nothing you say will affect your child's benefits now or in the future. We can start now and take a break whenever you need one.

CODE ONE ONLY

YES.....	1	
NOT A GOOD TIME .....	2	SET CALLBACK
REFUSED.....	r	REFUSAL



I. Consent = 1

I. Consent\_2. IF SPEAKING TO CONSENTING PARENT [I.HELLO=1 OR WhatAbout=1 OR AmpPhone=1 or CallTTY=1 OR I.Elig\_1=1], FILL:

Before we begin, I want to confirm that you read the letter that we sent you. In it, there was information about how SSA can use and share the information you provide. I can read it to you now if you didn't read it in the letter.

READ TEXT BELOW IF REQUESTED - ELSE CONTINUE:

Section 1110 of the Social Security Act, as amended, authorizes us to request this information. We will use this information to evaluate the impact of services provided to you (the minor participant or household member) during your participation in the Promoting Readiness of Minors in SSI (PROMISE) project. Providing us this information is voluntary. Failing to provide us with all or part of the information will not affect the SSI benefits that you, your child, or other household members receive now or in the future. We may use the information for the administration of our programs, including sharing information: (1) To comply with Federal laws requiring the release of information from our records (e.g., to the Government Accountability Office and the Department of Veterans Affairs); and (2) To facilitate audit, investigative, or statistical research activities necessary to assure the integrity and improvement of our programs (e.g., to the Bureau of Census and to private entities under contract with us).

A complete list of when we may share your information with others, called routine uses, is available in our Privacy Act System of Records Notice entitled, Supplemental Security Income Studies, Surveys, Records and Extracts (Statistics), 60-0203. Additional information about this and other system of records notices and our programs are available from our Internet website at [www.socialsecurity.gov](http://www.socialsecurity.gov) or at your local Social Security office.

Do I have your permission to begin? <P1Sc\_Consent\_2> ; <P1\_Callback\_Consent\_2>

ELSE, FILL: Do I have your permission to begin?

CODE ONE ONLY

- |                       |   |              |
|-----------------------|---|--------------|
| YES.....              | 1 | CONTINUE     |
| NOT A GOOD TIME ..... | 2 | SET CALLBACK |
| REFUSED.....          | r | REFUSAL      |

I.CONSENT\_2 = 1

[YOUTH] IF SPEAKING TO CONSENTING PARENT [I.HELLO=1 OR WhatAbout=1 OR AmpPhone=1 or CallTTY=1], FILL [YOU]. ELSE, FILL [CONSENTING PARENT]

**I.R TYPE.** To help us know which questions to ask first, we need to know where [YOUTH] lives or stays most of the time. Does [YOUTH] live with [CONSENTING PARENT/you], with another parent or legal guardian, or somewhere else? <P1Sc\_IRType> ; <P1\_Callback\_IRType>

INTERVIEWER: IF YOUTH NO LONGER LIVES WITH PARENT OR GUARDIAN: CODE "4" BELOW. THIS DRIVES IMPORTANT SKIP LOGIC.

CMOTO INTERVIEWER NOTE: IF YOUTH NO LONGER LIVES WITH PARENT OR GUARDIAN SELECT 'YOUTH NO LONGER LIVES WITH PARENT/ GUARDIAN' BELOW. THIS DRIVES IMPORTANT SKIP LOGIC.

**CODE ONE ONLY**

- YOUTH LIVES WITH CONSENTING PARENT - [CONSENTING PARENT]..... 1 GO TO I.Q1
- YOUTH LIVES WITH OTHER PARENT OR GUARDIAN..... 2 GO TO I.Q1
- OTHER SETTING (NOT WITH PARENT OR GUARDIAN), E.G. GROUP HOME, INSTITUTION, OR BOARDING SCHOOL ..... 3 GO TO I.Q1
- YOUTH NO LONGER LIVES WITH PARENT/ GUARDIAN (INDEPENDENT)... 4

**SOFT CHECK: IF I.RTYPE=4: May I confirm I have recorded correctly that [YOUTH] no longer lives with any parent, a foster parent, or any legal guardian?**

INTERVIEWER: TO CONFIRM THIS IS CORRECT AND CONTINUE WITH INTERVIEW CLICK ON THE SUPPRESS BUTTON. TO GO BACK AND EDIT THIS QUESTION, PRESS THE CLOSE BUTTON.

I.RTYPE=4 AND I.HELLO=2

[YOUTH] [CONSENTING PARENT]

**I.R TYPE2.** Thanks for this information. Since [YOUTH] lives in (his / her) own household, apart from any parent or guardian, we'd like to ask the remaining questions with [CONSENTING PARENT], and then we will reach out to [YOUTH] for (his / her) portion of the interview. <P1Sc\_IRType2> ; <P1\_Callback\_IRType2>

**CODE ONE ONLY**

- [CONSENTING PARENT] COMES TO PHONE..... 1 CONTINUE
- [CONSENTING PARENT] NOT AVAILABLE ..... 2 SET CALLBACK
- [CONSENTING PARENT] REFUSES ..... 3 REFUSAL

I. CONSENT_2=1
[CONSENTING PARENT] [ProxyName] [YOUTH] [TEXT FILL IF I.ELIG=9,10, OR 11] [FILL\$30 IF DATE OF INTERVIEW IS > 10 DAYS FROM LAUNCH / FILL \$40 IF DATE OF INTERVIEW IS < 10 DAYS FROM LAUNCH].

**I.Q1. IF CONSENTING PARENT, [I.HELLO=1, OR WhatAbout=1, OR AmpPhone=1, OR CallTTY=1] FILL: To begin, may I double check the spelling of your name? I have [CONSENTING PARENT], is that correct? <P1Sc\_Q01>**

**IF PROXY [ProxyName=Populated]: To begin, may I double check the spelling of your name? I have [ProxyName], is that correct?**

**ELSE, FILL: I see that [CONSENTING PARENT] gave permission for [YOUTH] to enroll in PROMISE, however, either of [YOUTH]'s parent(s) or guardian(s) [IF I.ELIG=9,10, OR 11 FILL: or someone who can respond on their behalf] that is knowledgeable about services [YOUTH] receives can answer these questions. May I have your first and last name please?**

**IF NEEDED: This information tells us who answered the questions and will be used to send you the [\$30 / \$40] payment after completing the interview.**

INTERVIEWER: CORRECT OR UPDATE IF NEEDED – ELSE CODE “1” BELOW.

CMOTO INTERVIEWER NOTE: CORRECT OR UPDATE IF NEEDED – ELSE CODE ‘CORRECT AS SHOWN’ BELOW

CORRECT AS SHOWN ..... 1

\_\_\_\_\_ (STRING 20)  
[FIRST NAME]

\_\_\_\_\_ (STRING 1)  
[MIDDLE INITIAL]

\_\_\_\_\_ (STRING 30)  
[LAST NAME]

REFUSED..... r

I.ELIG\_2 = 1 OR 6

**I.Q2. The first few questions ask about your household and living situation. Your answers will help make the interview go faster because I will know which questions apply to you. Are you... (NLTS2012, H1) <P1Sc\_Q02>**

INTERVIEWER: PROBE, FOR CURRENT MARITAL STATUS. IF DIVORCED, NOW REMARRIED, THE STATUS WOULD BE "1" (MARRIED).

CMOTO INTERVIEWER NOTE: PROBE FOR CURRENT MARITAL STATUS. IF DIVORCED, NOW REMARRIED, THE STATUS WOULD BE 'MARRIED'.

**CODE ONE ONLY**

Married,.....	1	
In a marriage-like relationship,.....	2	
Divorced, .....	3	GO TO I.Q4
Separated, .....	4	GO TO I.Q4
Widowed, or .....	5	GO TO I.Q4
Single, never married?.....	6	GO TO I.Q4
DON'T KNOW.....	d	GO TO I.Q4
REFUSED.....	r	GO TO I.Q4

**SOFT CHECK: IF I.Q2=d or r; This information helps us know which types of questions to ask about your household. Are there any questions I can answer or any concerns you may have about answering this question that I could help address?**

**PROGRAMMER:** FOR ALL SUBSEQUENT ITEMS THAT FILL [SPOUSE/PARTNER] FILL SPOUSE IF I.Q2 = 1, FILL PARTNER IF I.Q2 = 2

I.Q2= 1 OR 2

[spouse / partner]

**I.Q3. Does your (spouse / partner) live in the same household with you? <P1Sc\_Q03>**

**PROBE:** Your answer to this question helps me make sure you get asked only the questions that apply to you.

**CODE ONE ONLY**

YES.....	1
NO .....	0
DON'T KNOW.....	d
REFUSED.....	r

I.CONSENT_2 = 1
[YOUTH]

**I.Q4. Some of our questions are only asked of males or females. May I confirm, is [YOUTH] male or female? <P1Sc\_Q04>**

**IF NEEDED: This information also helps us tailor the questions in specific ways – such as using “he” or “she” to describe [YOUTH], where needed.**

CODE ONE ONLY

- MALE ..... 1
- FEMALE ..... 2
- DON'T KNOW..... d
- REFUSED..... r

**PROGRAMMER: APPLY THIS LOGIC FOR ALL SUBSEQUENT ITEMS REFERENCING THE YOUTH:**

IF I.Q4=1, THEN USE MALE FILLS (HIM, HIS, HE). / IF I.Q4=2, THEN USE FEMALE FILLS (HER, SHE) / IF I.Q4= D OR R, THEN PRESENT BOTH POSSIBLE FILLS (HIM / HER), (HE / SHE), (HIS / HER) AND INTERVIEWERS WILL APPLY APPROPRIATE TEXT, AS NEEDED.

I.R TYPE=1, 2, OR 4
[YOUTH]

**I.Q5. Are there any other youth ages 14-21 living or staying in the same household with [YOUTH]? <P1Sc\_Q05>**

**PROBE: Your answer to this question helps me make sure you get asked only the questions that apply to you.**

CODE ONE ONLY

- YES..... 1
- NO ..... 0
- DON'T KNOW..... d
- REFUSED..... r

I.CONSENT_2 = 1
[YOUTH]

**I.Q5a. In order to confirm that I am speaking to the right person, what is [YOUTH]’s date of birth? <P1Sc\_Q05a>**

PROGRAMMER: COLLECT DATE WITH SINGLE FIELD

|\_|\_| / |\_|\_| / |\_|\_|\_|\_|  
 (1-12) (1 - 31) (1900- 2010)

- DON'T KNOW..... d **GO TO I.Q6**
- REFUSED..... r **GO TO I.Q6**

PROGRAMMER: MISSINGS NOT ALLOWED.

I.Q5A = RESPONSE IS VALID DATE AND ≠ YOUTH DOB ON FILE
[YOUTH]

**I.Q5b. And one more time, just so I can confirm that I am speaking to the right person, what is [YOUTH]’s date of birth? <P1Sc\_Q05b>**

PROGRAMMER: COLLECT DATE WITH SINGLE FIELD

|\_|\_|/|\_|\_|/|\_|\_|\_|\_|

(1-12) (1 - 31) (1900- 2010)

DON'T KNOW..... d

REFUSED..... r

PROGRAMMER: MISSINGS NOT ALLOWED.

I.CONSENT_2=1
[YOUTH]

**I.Q6. INTERVIEWER CHECK: <P1Sc\_Q06>**

IF RESPONDENT IS CONTINUING WITH THE INTERVIEW, SELECT “1” BELOW.

IF RESPONDENT IS NOT ABLE TO CONTINUE (BREAK OFF) AND YOUTH IS AVAILABLE, SELECT “2” BELOW.

IF NEITHER RESPONDENT NOR [YOUTH] ARE ABLE TO CONTINUE NOW, SET APPOINTMENT OR STATUS AS REFUSAL, AS APPLICABLE.

**CMOTO INTERVIEWER CHECK:**

IF RESPONDENT IS CONTINUING WITH THE INTERVIEW, SELECT ‘RESPONDENT ABLE TO CONTINUE’ BELOW.

IF RESPONDENT IS NOT ABLE TO CONTINUE (BREAK OFF) AND YOUTH IS AVAILABLE, SELECT ‘RESPONDENT BREAK OFF – CONTINUE WITH YOUTH’ BELOW.

IF NEITHER RESPONDENT NOR [YOUTH] ARE ABLE TO CONTINUE NOW, SET APPOINTMENT OR STATUS AS REFUSAL, AS APPLICABLE.

CODE ONE ONLY

RESPONDENT ABLE TO CONTINUE.....	1	GO TO II.A.INTRO
RESPONDENT BREAK OFF – CONTINUE WITH YOUTH .....	2	GO TO VII.A1
RESPONDENT BREAK OFF AND YOUTH UNAVAILABLE .....	3	SET CALLBACK

		Asked of ...		
Section:		Parent or Legal Guardian of Participating Youth (where youth resides with a parent / guardian)	Other adult (staff from group home, school) where parent /guardian granted consent to respond on his / her behalf	Consenting Parent of Independent Youth
		I.Rtype=1 OR 2	I.ELIG_2=5 AND I.RTYPE=3	I.Rtype= 4
<b>II.</b>	<b>Service Receipt in Past 18 months</b>	<b>YES</b>	<b>SUBSECTION</b>	<b>YES</b>

**SECTION II PART A. SPECIAL EDUCATION SERVICES AND SUPPORTS**

I.CONSENT_2 = 1
[YOUTH] [and your (spouse / partner)]

**II.A.INTRO.** These next questions are about special education and other education services that [YOUTH] might have received. <P1A\_INTRO>  
 CONTINUE ..... 1

I.CONSENT_2 = 1
[RA MONTH] [RA YEAR] [YOUTH]

**II.A1.** Since [RA MONTH] of [RA YEAR], did [YOUTH] receive special education services or have an IEP (Individualized Education Program)? (NLTS2012, modified) <P1A01>  
**IF NEEDED:** “IEP” stands for an Individualized Education Program. An IEP is a written statement for each student with a disability that sets goals for the student in school, says how progress will be measured, describes the special education and related services the school will provide, how much the student will be in the regular class with nondisabled students, and lists accommodations or modifications needed to measure what the student knows through tests.  
**IF NEEDED:** After a student turns 16, the IEP must also include goals for what the student is interested in doing after high school and services needed to help the student reach those goals. This could include goals related to post-secondary education, training, or employment.

CODE ONE ONLY

- YES..... 1
- NO ..... 0
- NOT APPLICABLE / NOT IN HIGH SCHOOL SINCE [RA MONTH] of [RA YEAR] ..... 2 GO TO II.A4
- DON'T KNOW..... d
- REFUSED..... r

II.A1=1, 0, D OR R
[RA MONTH] [RA YEAR] AND [YOUTH]

**II.A2. Since [RA MONTH] of [RA YEAR], has [YOUTH] had a Section 504 plan? (NLTS2012, modified) <P1A02>**

**IF NEEDED: A Section 504 plan, which falls under civil-rights law, removes barriers so students with disabilities can participate in school as freely as possible.**

**This may include students who do not need an IEP but may need extra help or assistance to participate fully in school. Such help may include more time on tests, or sitting in the front of the classroom. An IEP is more concerned with providing educational services.**

CODE ONE ONLY

- YES..... 1
- NO ..... 0
- DON'T KNOW..... d
- REFUSED..... r

II.A1=1, 0, D OR R
[RA MONTH] [RA YEAR], [YOUTH], [he/she]

**II.A3. Since [RA MONTH] of [RA YEAR], have you or another adult in the household met with teachers to set goals for what [YOUTH] will do after high school and make a plan for how [he/she] will achieve them? Sometimes this is called a transition plan or a transition focused IEP. (NLTS12 2012, modified) <P1A03>**

CODE ONE ONLY

- YES..... 1
- NO ..... 0
- DON'T KNOW..... d
- REFUSED..... r

I.CONSENT_2 = 1
[RA MONTH] [RA YEAR] [YOUTH]

**II.A4. Since [RA MONTH] of [RA YEAR], has [YOUTH] gotten any help with school expenses, obtaining a computer, getting accommodations at school, or help with any other school-related supports that we haven't already talked about? This help could have been provided by the school or by some other organization. <P1A04>**

**IF NEEDED: This could include help with school expenses and support for any kind of school, including high school, post-secondary education, or vocational training.**

CODE ONE ONLY

- YES..... 1
- NO ..... 0
- DON'T KNOW..... d
- REFUSED..... r



SECTION II PART B. OTHER YOUTH SERVICES

I.CONSENT\_2 = 1

[YOUTH] [RA MONTH] [RA YEAR] [TEXT FILL IF PROMISE SERVICE GROUP AND I.HELLO=1 OR WHATABOUT=1 OR AMPPHONE=1 OR CALLTTY=1] [PROMISE PROGRAM NAME]

**II.B.INTRO.** My next questions are about other services or training [YOUTH] might have received since [RA MONTH] of [RA YEAR]. Please only include services or training provided by someone outside of [YOUTH]'s family. <P1B\_Intro>

[IF PROMISE SERVICES GROUP AND CONSENTING PARENT INSERT: I don't know which services [YOUTH] received through [PROMISE PROGRAM NAME], so in the next set of questions, please tell me about those, along with any other services [YOUTH] received].

**ALL:** After these questions about [YOUTH], I will ask some questions about services or training you may have received since [RA MONTH] of [RA YEAR].

**PROGRAMMER:** WHERE [RA MONTH] of [RA YEAR] IS SHOWN ABOVE, FILL WITH MONTH AND YEAR

CONTINUE .....1

I.CONSENT_2 = 1
[RA MONTH] [RA YEAR], [YOUTH], [his / her], [him / her], [PROMISE SERVICES GROUP FILL BASED ON SITE], [he/she], [WI STATE-SPECIFIC TEXT FILL]

**II.B1.-II.B11.** Since [RA MONTH] of [RA YEAR] has [YOUTH] ... (Please only include services or training provided by someone outside of [YOUTH]’s family.)

**IF NEEDED:** This help could have come from one of the places you’ve already told me about.

	CODE ONE PER ROW			
	YES	NO	DK	REF
<b>B1.</b> Worked with anyone to <u>determine [his/her] needs</u> and <u>help connect [him/her] to services and supports</u> related to education, employment, health, housing or anything else? This person is sometimes called a case manager [IF PROMISE SERVICES GROUP: or a [SITE NAME - CASE MGR]. <P1B01>	1	0	d	r
<b>B2.</b> Been taught <u>skills needed for life</u> ? This includes skills such as telling time, interacting with people socially, or using public transportation. <P1B02>	1	0	d	r
<b>B3.</b> Had any training to teach [him/her] about <u>being a leader</u> or about how to <u>speak up for [him/her] self</u> to get the things [he/she] wants or needs? This is sometimes called self-advocacy or self-determination training. <P1B03>	1	0	d	r
<b>B4.</b> Participated in <u>activities</u> to help [him/her] learn about what jobs match [his/her] skills and interests? <P1B04>	1	0	d	r
<b>B5.</b> Had help with <u>learning about or getting into a school or training program</u> , including help with an application, entrance exam, or interview? For example, where someone told [him/her] about training programs or schools that are available and how to apply for them? Or if someone helped [YOUTH] complete an application for college or vocational school. <P1B05>	1	0	d	r
<b>B6.</b> Had any <u>training</u> to help [him/her] <u>learn new job skills</u> ? Please do not include any training [YOUTH] had on-the-job directly from [HIS/HER] employer. <P1B06>	1	0	d	r
<b>B7.</b> Had help in <u>finding</u> or <u>applying for a job</u> , such as help finding jobs available, filling out an application, writing a resume, or going for an interview? <P1B07>	1	0	d	r
<b>B8.</b> Received any help while <u>working at a job</u> , such as help with job accommodations or learning job duties? This could include help from a job coach. Please don’t include any help given by [YOUTH]’s employer. <P1B08>	1	0	d	r
<b>B9.</b> Received any help with <u>learning about, getting, or using assistive technology</u> ? IF NEEDED: This could include help with special tools or equipment, software, or devices that help [YOUTH] perform school or work activities that are difficult to do because of [his/her] disability. <P1B09>	1	0	d	r
<b>B10.</b> Had help in <u>understanding Social Security, SSI, or other program benefits and rules</u> ? This is sometimes called benefits counseling or benefits planning. IF NEEDED: SSI stands for Supplemental Security Income. <P1B10>	1	0	d	r
<b>B11.</b> Since [RA MONTH] of [RA YEAR], has [YOUTH] had help <u>learning about how to save and manage money</u> , [IF WI: including help with an Individual Development Account or IDA]? <P1B11>	1	0	d	r

I.CONSENT_2 = 1
[RA MONTH] [RA YEAR], [YOUTH] [him / her]

**II.B12.** Since [RA MONTH] of [RA YEAR], has [YOUTH] had any other services to help prepare [him/her] for working, going to school, or living independently? Please only include services or training provided by someone outside of [YOUTH]'s family. <P1B12>

**IF NEEDED:** This help could have come from one of the places you've already told me about.

CODE ONE ONLY

- YES..... 1
- NO ..... 0 GO TO Box 1
- DON'T KNOW..... d GO TO Box 1
- REFUSED..... r GO TO Box 1

II.B12=1
[YOUTH]

**II.B12a.** What kind of services did [YOUTH] receive? <P1B12a>

CODE ONE ONLY

- \_\_\_\_\_ (STRING 100)  
OTHER SERVICES
- DON'T KNOW..... d
- REFUSED..... r

**BOX 1**  
 IF NONE OF THE FOLLOWING SERVICES WERE RECEIVED  
 (ALL ITEMS II.B1= 0, II.B4=0, II.B6=0, II.B7=0, II.B8=0, II.B10=0, AND 11.B11=0)  
 GO TO II.B.13. ELSE GO TO II.B PROVIDER-INTRO.

IF ANY ITEM (II.B1, II.B4, II.B6, II.B7, II.B8, II.B10, OR II.B11=0)
[YOUTH]

**II.B. PROVIDER-INTRO.**

Thanks for this information. Now I'd like to ask about the places [YOUTH] received the services you have just told me about. <P1B\_Provider\_Intro>

- CONTINUE ..... 1

II.B1=1
[YOUTH] [him / her] [his/her]

**II.B1a. Who did [YOUTH] work with to determine [his/her] needs and help connect [him/her] to services? <P1B01a\_1> ; <P1B01a\_2> ; <P1B01a\_3>**

Anyone else?

**IF NEEDED: Who provided those services? Please tell me the name of the agency or program.**

**PROBE 1: Please only name someone outside of [YOUTH]’s family that provided these services or training.**

**PROBE 2: IF UNABLE TO STATE NAME OF PROVIDER: I need to enter something that will help us identify the provider later. Do you know his or her first or last name? Was he/she a doctor, a therapist, a vocational rehabilitation counselor, or some other type of provider?**

\_\_\_\_\_ (STRING 100) <P1B\_Prov1a\_1>  
 PROVIDER NAME -1

\_\_\_\_\_ (STRING 100) <P1B\_Prov1a\_2>  
 PROVIDER NAME -2

\_\_\_\_\_ (STRING 100) <P1B\_Prov1a\_3>  
 PROVIDER NAME -3

DON'T KNOW..... d

REFUSED..... r

II.B4=1
[YOUTH] [his/her]

**II.B4a. Who did [YOUTH] speak to about [his/her] career plans or go to for help learning about [HIS/HER] job interests? <P1B04a\_1> ; <P1B04a\_2> ; <P1B04a\_3>**

Anyone else?

**IF NEEDED: Who provided those services? Please tell me the name of the agency or program.**

**PROBE 1: Please only name someone outside of [YOUTH]’s family that provided these services or training.**

**PROBE 2: IF UNABLE TO STATE NAME OF PROVIDER: I need to enter something that will help us identify the provider later. Do you know his or her first or last name? Was he/she a doctor, a therapist, a vocational rehabilitation counselor, or some other type of provider?**

\_\_\_\_\_ (STRING 100) <P1B\_Prov4a\_1>  
 PROVIDER NAME -1

\_\_\_\_\_ (STRING 100) <P1B\_Prov4a\_2>  
 PROVIDER NAME -2

\_\_\_\_\_ (STRING 100) <P1B\_Prov4a\_3>  
 PROVIDER NAME -3

DON'T KNOW..... d

REFUSED..... r

II.B6=1

**II.B6a. Who provided the job skills training? <P1B06a\_1> ; <P1B06a\_2> ; <P1B06a\_3>**

Anyone else?

**IF NEEDED:** Who provided those services? Please tell me the name of the agency or program.

**PROBE 1:** Please only name someone outside of [YOUTH]'s family that provided these services or training.

**PROBE 2:** **IF UNABLE TO STATE NAME OF PROVIDER:** I need to enter something that will help us identify the provider later. Do you know his or her first or last name? Was he/she a doctor, a therapist, a vocational rehabilitation counselor, or some other type of provider?

\_\_\_\_\_ (STRING 100) <P1B\_Prov6a\_1>  
 PROVIDER NAME -1

\_\_\_\_\_ (STRING 100) <P1B\_Prov6a\_2>  
 PROVIDER NAME -2

\_\_\_\_\_ (STRING 100) <P1B\_Prov6a\_3>  
 PROVIDER NAME -3

DON'T KNOW..... d

REFUSED..... r

II.B7=1

[YOUTH]

**II.B7a. Who helped [YOUTH] in trying to find or apply for a job? <P1B07a\_1> ; <P1B07a\_2> ; <P1B07a\_3>**

Anyone else?

**IF NEEDED:** Who provided those services? Please tell me the name of the agency or program.

**PROBE 1:** Please only name someone outside of [YOUTH]'s family that provided these services or training.

**PROBE 2:** **IF UNABLE TO STATE NAME OF PROVIDER:** I need to enter something that will help us identify the provider later. Do you know his or her first or last name? Was he/she a doctor, a therapist, a vocational rehabilitation counselor, or some other type of provider?

\_\_\_\_\_ (STRING 100) <P1B\_Prov7a\_1>  
 PROVIDER NAME -1

\_\_\_\_\_ (STRING 100) <P1B\_Prov7a\_2>  
 PROVIDER NAME -2

\_\_\_\_\_ (STRING 100) <P1B\_Prov7a\_3>  
 PROVIDER NAME -3

DON'T KNOW..... d

REFUSED..... r

II.B8=1
[YOUTH], [he/she]

**II.B8a. Who helped [YOUTH] while [he/she] was working at a job? <P1B08a\_1> ; <P1B08a\_2> ; <P1B08a\_3>**  
**Anyone else?**  
**IF NEEDED: Who provided those services? Please tell me the name of the agency or program.**  
**PROBE 1: Please only name someone outside of [YOUTH]’s family that provided these services or training.**  
**PROBE 2: IF UNABLE TO STATE NAME OF PROVIDER: I need to enter something that will help us identify the provider later. Do you know his or her first or last name? Was he/she a doctor, a therapist, a vocational rehabilitation counselor, or some other type of provider?**

\_\_\_\_\_ (STRING 100) <P1B\_Prov8a\_1>  
 PROVIDER NAME -1

\_\_\_\_\_ (STRING 100) <P1B\_Prov8a\_2>  
 PROVIDER NAME -2

\_\_\_\_\_ (STRING 100) <P1B\_Prov8a\_3>  
 PROVIDER NAME -3

DON’T KNOW..... d  
 REFUSED..... r

II.B10=1
[YOUTH]

**II.B10a. Who helped [YOUTH] to understand Social Security, SSI, or other benefits? <P1B10a1> ; <P1B10a2> ; <P1B10a3>**  
**Anyone else?**  
**IF NEEDED: Who provided those services? Please tell me the name of the agency or program.**  
**PROBE 1: Please only name someone outside of [YOUTH]’s family that provided these services or training.**  
**PROBE 2: IF UNABLE TO STATE NAME OF PROVIDER: I need to enter something that will help us identify the provider later. Do you know his or her first or last name? Was he/she a doctor, a therapist, a vocational rehabilitation counselor, or some other type of provider?**

\_\_\_\_\_ (STRING 100) <P1B\_Prov10a\_1>  
 PROVIDER NAME -1

\_\_\_\_\_ (STRING 100) <P1B\_Prov10a\_2>  
 PROVIDER NAME -2

\_\_\_\_\_ (STRING 100) <P1B\_Prov10a\_3>  
 PROVIDER NAME -3

DON’T KNOW..... d  
 REFUSED..... r

II.B11=1
[YOUTH]

II.B11a. Who helped [YOUTH] learn about saving and managing money? <P1B11a\_1> ; <P1B11a\_2> ; <P1B11a\_3>

Anyone else?

IF NEEDED: Who provided those services? Please tell me the name of the agency or program.

PROBE 1: Please only name someone outside of [YOUTH]'s family that provided these services or training.

PROBE 2: IF UNABLE TO STATE NAME OF PROVIDER: I need to enter something that will help us identify the provider later. Do you know his or her first or last name? Was he/she a doctor, a therapist, a vocational rehabilitation counselor, or some other type of provider?

\_\_\_\_\_ (STRING 100) <P1B\_Prov11a\_1>  
 PROVIDER NAME -1

\_\_\_\_\_ (STRING 100) <P1B\_Prov11a\_2>  
 PROVIDER NAME -2

\_\_\_\_\_ (STRING 100) <P1B\_Prov11a\_3>  
 PROVIDER NAME -3

DON'T KNOW..... d

REFUSED..... r

I.CONSENT_2 = 1
[RA MONTH] [RA YEAR], [YOUTH], (him / her), [he/she]

II.B13. Since [RA MONTH] of [RA YEAR], has [YOUTH] needed any help or services to help (him / her) prepare for school or work that [he / she] did not receive? <P1B13>

CODE ONE ONLY

YES..... 1

NO ..... 0 GO TO BOX 2

DON'T KNOW..... d GO TO BOX 2

REFUSED..... r GO TO BOX 2

II.B13=1
[YOUTH] [he/she]

II.B13a. What help or services did [YOUTH] need that [he/she] did not get?

PROBE: Anything else?

**CODE ALL THAT APPLY**

- DISCOVERING JOB INTERESTS/SKILLS (INCLUDES ASSESSMENTS)..... 1 <P1B13a01>
  - INDEPENDENT LIVING SKILLS TRAINING ..... 2 <P1B13a02>
  - CAREER COUNSELING..... 3 <P1B13a03>
  - LEARNING HOW TO LOOK FOR A JOB ..... 4 <P1B13a04>
  - JOB SHADOWING ..... 5 <P1B13a05>
  - APPRENTICESHIP/INTERNSHIP ..... 6 <P1B13a06>
  - HELP FINDING A JOB ..... 7 <P1B13a07>
  - SUPPORT ON THE JOB (JOB COACHING)..... 8 <P1B13a08>
  - HELP GETTING INTO SCHOOL/TRAINING ..... 9 <P1B13a09>
  - UNDERSTANDING SSA/OTHER BENEFITS..... 10 <P1B13a10>
  - COMPUTER LITERACY CLASSES..... 11 <P1B13a11>
  - PROBLEM SOLVING ..... 12 <P1B13a12>
  - SOCIAL SKILLS TRAINING ..... 13 <P1B13a13>
  - FINANCIAL LITERACY/MONEY MANAGEMENT TRAINING..... 14 <P1B13a14>
  - SELF ADVOCACY/DETERMINATION TRAINING ..... 15 <P1B13a15>
  - REFERRAL TO ANOTHER AGENCY..... 16 <P1B13a16>
  - TRANSPORTATION SERVICES ..... 17 <P1B13a17>
  - HEALTH-RELATED SERVICES ..... 18 <P1B13a18>
  - CASE MANAGEMENT ..... 19 <P1B13a19>
  - ACCOMMODATIONS ..... 20 <P1B13a20>
  - EDUCATION-RELATED SUPPORTS OR SERVICES..... 21 <P1B13a21>
  - FINANCIAL SUPPORT AND BASIC NEEDS (FROM BACK-CODING)..... 22 <P1B13a22>
  - RESPIRE CARE (FROM BACK-CODING)..... 23 <P1B13a23>
  - OTHER (SPECIFY) ..... 99 <P1B13a99>
- \_\_\_\_\_ (STRING 50)
- DON'T KNOW..... d
- REFUSED..... r

IF OTHER SPECIFY (99): <b>Other service, not listed above: &lt;P1B13a_Other&gt;</b>
---

<p><b>BOX 2</b></p> <p>IF NONE OF THE FOLLOWING SERVICES WERE RECEIVED</p>
--



[B1=0, II.B4=0, II.B6=0, II.B7=0, II.B8=0, II.B10=0, II.B11=0],  
SKIP TO II.D. INTRO. - ELSE GO TO II.B14.

IF ANY OF THE FOLLOWING SERVICES RECEIVED [II.B1=1, II.B4=1, II.B6=1, II.B7=1, II.B8A=1, II.B10A=1, OR II.B11A=1] AND PROVIDER WAS SPECIFIED IN ANY [B1a, B4a, B6a, B7a, B8a, B10a, OR B11a], POPULATE FILLS AS SPECIFIED BY RESPONSE OPTIONS SHOWN BELOW.

FILLS SPECIFIED BELOW FOR EACH RESPONSE OPTION 1-21

**II.B14. PROGRAMMER: LIST PROVIDERS POPULATED AS APPLICABLE FROM RESPONSES TO: II.B1a, II.B4a, II.B6a, II.B7a, II.B8a, II.B10a, and II.B11a. AS FILLS IN BRACKETS SHOWN BELOW, AS APPLICABLE. APPEND THE TEXT SHOWN BELOW IN ALL CAPS TO EACH ROW WHERE A FILL IS POPULATED.**

INTERVIEWER: DOES ANY PROVIDER APPEAR ON THE LIST BELOW MORE THAN ONCE?  
IF SO, DELETE ONE FROM THE LIST BY CHECKING THE BOX NEXT TO THEIR NAME. DO NOT MARK BOTH PROVIDERS FOR DELETION. IF THERE ARE NO DUPLICATES, SELECT "NO DUPLICATES SHOWN ABOVE."

**CODE ALL THAT APPLY**

- [RESPONSE(S) FROM II.B1a\_1] - CASE MANAGEMENT ..... 1 <P1B14\_01>
- [RESPONSE(S) FROM II.B1a\_2] - CASE MANAGEMENT ..... 2 <P1B14\_02>
- [RESPONSE(S) FROM II.B1a\_3] (CASE MANAGEMENT)..... 3 <P1B14\_03>
- [RESPONSE(S) FROM II.B4a\_1] (CAREER PLANNING AND JOB INTERESTS) ..... 4 <P1B14\_04>
- [RESPONSE(S) FROM II.B4a\_2] (CAREER PLANNING AND JOB INTERESTS) ..... 5 <P1B14\_05>
- [RESPONSE(S) FROM II.B4a\_3] (CAREER PLANNING AND JOB INTERESTS) ..... 6 <P1B14\_06>
- [RESPONSE(S) FROM II.B6a\_1] (JOB SKILLS TRAINING)..... 7 <P1B14\_07>
- [RESPONSE(S) FROM II.B6a\_2] (JOB SKILLS TRAINING)..... 8 <P1B14\_08>
- [RESPONSE(S) FROM II.B6a\_3] (JOB SKILLS TRAINING)..... 9 <P1B14\_09>
- [RESPONSE(S) FROM II.B7a\_1] (HELP FINDING OR APPLYING TO JOBS)..... 10 <P1B14\_10>
- [RESPONSE(S) FROM II.B7a\_2] (HELP FINDING OR APPLYING TO JOBS)..... 11 <P1B14\_11>
- [RESPONSE(S) FROM II.B7a\_3] (HELP FINDING OR APPLYING TO JOBS)..... 12 <P1B14\_12>
- [RESPONSE(S) FROM II.B8a\_1] (HELP WHILE WORKING AT A JOB) ..... 13 <P1B14\_13>
- [RESPONSE(S) FROM II.B8a\_2] (HELP WHILE WORKING AT A JOB) ..... 14 <P1B14\_14>
- [RESPONSE(S) FROM II.B8a\_3] (HELP WHILE WORKING AT A JOB) ..... 15 <P1B14\_15>
- [RESPONSE(S) FROM II.B10a\_1] (UNDERSTANDING SSI AND OTHER BENEFITS)..... 16 <P1B14\_16>
- [RESPONSE(S) FROM II.B10a\_2] (UNDERSTANDING SSI AND OTHER BENEFITS)..... 17 <P1B14\_17>
- [RESPONSE(S) FROM II.B10a\_3] (UNDERSTANDING SSI AND OTHER BENEFITS)..... 18 <P1B14\_18>
- [RESPONSE(S) FROM II.B11a\_1] (SKILLS FOR SAVING AND MANAGING MONEY)..... 19 <P1B14\_19>
- [RESPONSE(S) FROM II.B11a\_2] (SKILLS FOR SAVING AND MANAGING MONEY)..... 20 <P1B14\_20>
- [RESPONSE(S) FROM II.B11a\_3] (SKILLS FOR SAVING AND MANAGING MONEY)..... 21 <P1B14\_21>
- NO DUPLICATES SHOWN ABOVE ..... 00 <P1B14\_23>

IF ANY OF THE FOLLOWING SERVICES RECEIVED [II.B1=1, II.B4=1, II.B6=1, II.B7=1, II.B8A=1, II.B10A=1, OR II.B11A=1] AND PROVIDER WAS SPECIFIED IN ANY [B1a, B4a, B6a, B7a, B8a, B10a, OR B11a], POPULATE FILLS AS SPECIFIED BY RESPONSE OPTIONS SHOWN BELOW.

**II.B14a. PROGRAMMER:** LIST REMAINING PROVIDERS FROM II.B14 AFTER DELETIONS OF DUPLICATES. <P1B14New>

INTERVIEWER: IF ANY PROVIDER STILL APPEARS MORE THAN ONCE GO BACK TO THE LAST QUESTION. OTHERWISE, PRESS 1 TO CONTINUE.

CMOTO INTERVIEWER NOTE: IF ANY PROVIDER STILL APPEARS MORE THAN ONCE GO BACK TO THE LAST QUESTION. OTHERWISE, PRESS THE BUTTON TO CONTINUE.

ENTER 1 TO CONTINUE.....1

**PROGRAMMER:** RESPONSE(S) TO II.B14 DETERMINE THE NUMBER OF LOOPS THROUGH THE NEXT SECTION, IN ITEMS II.C1-II.C6.

IF NO SERVICES WERE RECEIVED AND ([II.B1=0, II.B4=0, II.B6=0, II.B7=0, II.B8a=0, II.B10a=0, or II.B11a=0] AND / OR NO PROVIDERS WERE IDENTIFIED IN II.B14\_99=1. SKIP TO II.D INTRO.

**SECTION II PART C. INTENSITY OF SERVICE RECEIPT**

For each provider listed in II.B14 (P1B14\_01 through P1B14\_21), the parent respondent will go through the provider series (II.C1 to II.C6) to answer questions about the services [YOUTH] received from each provider. Since each parent respondent can list up to 21 different providers, they can go through the provider series a total of 21 times. As shown in the table below, the SAS variable names are adjusted to reflect which series the parent respondent's answers correspond to.

Question from Instrument	SAS Variable Name – Reflects provider series loop (_01; _02, _03; up to 21)			Provider Series (up to 21)		
II.C1	P1C01_01	P1C01_02	P1C01_03	1	2	3
II.C2	P1C02_01	P1C02_02	P1C02_03	1	2	3
II.C2a	P1C02a_Month_01 P1C02a_Year_01	P1C02a_Month_02 P1C02a_Year_02	P1C02a_Month_03 P1C02a_Year_03	1	2	3
II.C2b	P1C02b_01	P1C02b_02	P1C02_03	1	2	3
II.C2c	P1C02c_Month_01 P1C02c_Year_01	P1C02c_Month_02 P1C02c_Year_02	P1C02c_Month_03 P1C02c_Year_03	1	2	3
II.C3	P1C03_01	P1C03_02	P1C03_03	1	2	3
II.C4	P1C04_01	P1C04_02	P1C04_03	1	2	3
II.C5	P1C05_01	P1C05_02	P1C05_03	1	2	3
II.C6	P1C06_01	P1C06_02	P1C06_03	1	2	3

IF ANY OF THESE SERVICES RECEIVED [B1=1, II.B4=1, II.B6=1, II.B7=1, II.B8=1, II.B10=1, II.B11=1] AND NAME OF PROVIDER(S) POPULATED IN [II.B1a, II.B4a, II.B6a, II.B7a, II.B8a, B10a, II.B11a].  
[YOUTH] [PROVIDER NAME] [RA MONTH] [RA YEAR]

- II.C1. IF >1 PROVIDER, FILL: Now, I have some questions about these providers. Let's start with services [YOUTH] received from [PROVIDER NAME].**
- IF ONLY 1 PROVIDER OR SUBSEQUENT PROVIDERS WHEN >1 PROVIDER, FILL: Next, I have some questions about services [YOUTH] received from [PROVIDER NAME].**
- IF NEEDED: You said [YOUTH] got [FILL TYPE OF SERVICE] from [PROVIDER] since [RA MONTH] of [RA YEAR].**
- <P1C01\_01 to P1C01\_21>

CONTINUE ..... 1

IF ANY OF THESE SERVICES RECEIVED [B1=1, II.B4=1, II.B6=1, II.B7=1, II.B8=1, II.B10=1, II.B11=1] AND NAME OF PROVIDER(S) POPULATED IN [II.B1a, II.B4a, II.B6a, II.B7a, II.B8a, B10a, II.B11a].

[YOUTH] [PROVIDER], [PROVIDER NAME], [STATE-SPECIFIC NAMES IF APPLICABLE], [PROMISE SERVICES GROUP MEMBER, DISPLAY: PROMISE/ASPIRE PROGRAM]

**II.C2. Thinking about the place [YOUTH] went to get services from [PROVIDER], what type of place is this?**

**PROBE: Where did [YOUTH] go to get services from [PROVIDER NAME]? What was the name of the agency?**

**INTERVIEWER: If services came from a community service provider, a church, independent living center, or other non-governmental, non-academic organization, code as "2".**

<P1C02\_01 to P1C02\_21>

**CODE ONE ONLY**

- VOCATIONAL REHABILITATION AGENCY/VR ..... 1
- OTHER AGENCY (COMMUNITY SERVICE PROVIDER, CHURCH, INDEPENDENT LIVING CENTER, ETC.).....2
- AMERICAN JOB CENTER/DEPARTMENT OF WORKFORCE SERVICES/WORK FORCE DEVELOPMENT CENTER [STATE-SPECIFIC NAMES IF APPLICABLE] .....3
- HIGH SCHOOL OR OTHER SECONDARY SCHOOL .....4
- POST-SECONDARY SCHOOL (COLLEGE, VOCATIONAL SCHOOL, UNIVERSITY).....5
- (IF PROMISE SERVICES, DISPLAY: PROMISE/ASPIRE PROGRAM) .....6
- Other Specify Response option.....99
- \_\_\_\_\_ (STRING 200)
- DON'T KNOW.....d
- REFUSED.....r

IF OTHER SPECIFY (99): **What type of place is this? <P1C02Other\_01 to P1C02Other\_21>**

IF ANY OF THESE SERVICES RECEIVED [B1=1, II.B4=1, II.B6=1, II.B7=1, II.B8=1, II.B10=1, II.B11=1] AND NAME OF PROVIDER(S) POPULATED IN [II.B1a, II.B4a, II.B6a, II.B7a, II.B8a, B10a, II.B11a].

[YOUTH], [PROVIDER]

**II.C2a. When did [YOUTH] start going to [PROVIDER]?**

**PROBE: In what month and year?**

<P1C02a\_Month\_01 to P1C02a\_Month\_21> ; <P1C02a\_Year\_01 to P1C02a\_Year\_21>

PROGRAMMER: COLLECT DATE WITH SEPARATE FIELDS

_ _	/	_ _ _ _
MONTH		YEAR
(0-12)		(1997-2019)

DON'T KNOW..... d

REFUSED..... r

SOFT CHECK: IF YEAR RECORDED IN II.C2a > CURRENT YEAR (OF INTERVIEW): INTERVIEWER: THIS DATE IS IN THE FUTURE. PLEASE RECHECK THE RESPONSE RECORDED IN THE YEAR FIELD.

IF ANY OF THESE SERVICES RECEIVED [B1=1, II.B4=1, II.B6=1, II.B7=1, II.B8=1, II.B10=1, II.B11=1] AND NAME OF PROVIDER(S) POPULATED IN [II.B1a, II.B4a, II.B6a, II.B7a, II.B8a, B10a, II.B11a].

[YOUTH], [PROVIDER]

**II.C2b. Is [YOUTH] still going to [PROVIDER]? <P1C02b\_01 to P1C02b\_21>**

CODE ONE ONLY

YES..... 1 GO TO II.C4  
 NO ..... 0  
 DON'T KNOW..... d GO TO II.C3  
 REFUSED..... r GO TO II.C3

II.C2b=0

[YOUTH], [PROVIDER], [RA MONTH] [RA YEAR]

**II.C2c. When did [YOUTH] stop going to [PROVIDER] or when did these services end? <P1C02c\_Month\_01 to P1C02c\_Month\_21> ; <P1C02c\_Year\_01 to P1C02c\_Year\_21>**

**PROBE: In what month and year?**

PROGRAMMER: COLLECT DATE WITH SEPARATE FIELDS

|\_|\_| / |\_|\_|\_|\_|  
 MONTH YEAR..... GO TO II.C4  
 (0-12) (1997-2019)  
 DON'T KNOW..... d GO TO II.C3  
 REFUSED..... r GO TO II.C3

SOFT CHECK 1: IF MM/ YYYY is before [RA MONTH] of [RA YEAR]; **I recorded that [YOUTH] stopped receiving services prior to [RA MONTH] of [RA YEAR]. Is this correct?** IF YES, GO TO BOX 3.

SOFT CHECK 2: IF YEAR RECORDED IN II.C2c. > CURRENT YEAR (OF INTERVIEW): INTERVIEWER: THIS DATE IS IN THE FUTURE. PLEASE RECHECK THE RESPONSE RECORDED IN THE YEAR FIELD.

SOFT CHECK: If MM/YYYY recorded in II.C2c is before MM/YYYY recorded in II.C2a: **I recorded that [YOUTH] stopped going to this provider prior to the start date I recorded for seeing this provider earlier. Did I get the date wrong?**

INTERVIEWER: PLEASE RECHECK THIS RESPONSE AND RESPONSE IN PRIOR QUESTION ABOUT STARTING SERVICES.

START DATE UNKNOWN (II.C2a = d, r) OR IF STILL SEEING PROVIDER IS UNDETERMINED (II.C2b= d or r) OR END DATE OF SERVICES UNKNOWN (II.C2c= d or r)

[RA MONTH] [RA YEAR] [YOUTH] [PROVIDER]

**II.C3. Since [RA MONTH] of [RA YEAR] for how many months did [YOUTH] go to [PROVIDER]?**

**PROBE: Your best guess is fine. <P1C03\_01 to P1C03\_21>**

**INTERVIEWER: IF LESS THAN ONE MONTH, ENTER 0**

\_\_\_\_ MONTHS ..... GO TO II.C5  
(0-18)

DON'T KNOW..... d GO TO II.C5

REFUSED..... r GO TO II.C5

IF ANY OF THESE SERVICES RECEIVED [B1=1, II.B4=1, II.B6=1, II.B7=1, II.B8=1, II.B10=1, II.B11=1] AND NAME OF PROVIDER(S) POPULATED IN [II.B1a, II.B4a, II.B6a, II.B7a, II.B8a, B10a, II.B11a] AND EITHER STILL RECEIVING (II.C2b=1) OR END DATE IN II.C2c IS AFTER [RA MONTH] OF [RA YEAR].

[YOUTH], [PROVIDER], [he/ she]

**II.C4. Since [RA MONTH] of [RA YEAR], when [YOUTH] saw [PROVIDER], about how often did [he/she] go? <P1C04\_01 to P1C04\_21>**

**Your best estimate is fine.**

**CODE ONE ONLY**

**Every day,..... 1 GO TO II.C5**

**More than once a week,..... 2 GO TO II.C5**

**Weekly, ..... 3 GO TO II.C5**

**More than once a month,..... 4 GO TO II.C5**

**About once a month, or ..... 5 GO TO II.C5**

**Less often than once a month? ..... 6 GO TO II.C5**

DON'T KNOW..... d GO TO II.C5

REFUSED..... r GO TO II.C5

IF ANY OF THESE SERVICES RECEIVED [B1=1, II.B4=1, II.B6=1, II.B7=1, II.B8=1, II.B10=1, II.B11=1] AND NAME OF PROVIDER(S) POPULATED IN [II.B1a, II.B4a, II.B6a, II.B7a, II.B8a, B10a, II.B11a] AND EITHER STILL RECEIVING (II.C2B=1) OR END DATE IN II.C2C IS AFTER [RA MONTH] OF [RA YEAR].[RA MONTH] OF [RA YEAR]

II.C5. On average, how long was each meeting or session? On average, was it... <P1C05\_01 to P1C05\_21>

**CODE ONE ONLY**

- Less than an hour,..... 1
- About one hour,..... 2
- About 2 hours, ..... 3
- About 3 hours, ..... 4
- About 4 hours or half a day, or was it, ..... 5
- More than 4 hours per meeting? ..... 6
- DON'T KNOW..... d
- REFUSED..... r

IF ANY OF THESE SERVICES RECEIVED [B1=1, II.B4=1, II.B6=1, II.B7=1, II.B8=1, II.B10=1, II.B11=1] AND NAME OF PROVIDER(S) POPULATED IN [II.B1a, II.B4a, II.B6a, II.B7a, II.B8a, B10a, II.B11a]. AND EITHER STILL RECEIVING (II.C2b=1) OR END DATE IN II.C2c IS AFTER [RA MONTH] OF [RA YEAR]

[YOUTH], [PROVIDER] [IF II.C2b=1, FILL "have been" IF I.C2b=0, d, or r, fill "were"

II.C6. How useful do you think [PROVIDER]'s help or services [have been / were]? <P1C06\_01 to P1C06\_21>

Would you say ...

**CODE ONE ONLY**

- Very useful, ..... 1
- Somewhat useful, ..... 2
- Not very useful or, ..... 3
- Not at all useful? ..... 4
- DON'T KNOW ..... d
- REFUSED ..... r

**BOX 3**

LOOP THROUGH ITEMS II.C1 – II.C6 FOR EACH DE-DUPLICATED PROVIDER IN ITEM II.B14 (RESPONSE OPTIONS 01-21). ONCE LOOP(S) (UP TO 21) COMPLETED, PROCEED TO BOX SECTION II.D.



SECTION II PART D. PARENT AND FAMILY SERVICES

**BOX SECTION II.D**

IF RESPONDENT IS PARENT PROXY (I.ELIG\_2=5 AND R.TYPE=3) SKIP TO VI.D1.  
ELSE, CONTINUE TO II.D.INTRO.

**PROGRAMMER: IN THIS SERIES, POPULATE:**

- SPOUSE / PARTNER FILLS AND RESPONSE OPTIONS IF I.Q2=1 (SPOUSE) OR 2 (PARTNER).
- FILLS AND RESPONSE OPTIONS FOR "OTHER YOUTH IN THE HOUSEHOLD AGES 14-21" IF I.Q5=1.

I.CONSENT\_2 = 1

[(and your (spouse/partner)) (, or other youth in the household ages 14-21, besides (YOUTH))] [RA MONTH]  
[RA YEAR], [and your (spouse / partner) (or other youth in the household)] [PROMISE SERVICES GROUP  
TEXT FILL IF I.HELLO=1 OR WHATABOUT=1 OR AMPPHONE=1 OR CALLTTY=1] [PROMISE PROGRAM  
NAME]

**II.D.Intro.** Now that I've asked about [YOUTH], let's talk about services or training that you [(and your (spouse/partner)) (, or other youth in the household ages 14-21, besides (YOUTH))] might have received since [RA MONTH] of [RA YEAR].

**IF PROMISE SERVICES GROUP AND CONSENTING PARENT:** I don't know which services you [(and your (spouse / partner) (or other youth in the household))] received from [PROMISE PROGRAM NAME], so in this section, please tell me about [PROMISE PROGRAM NAME] services received. <P1D\_Intro>

CONTINUE .....1

I.CONSENT\_2 = 1

[RA MONTH] [RA YEAR], [and (your (spouse/partner)) (, or other youth in the household ages 14-21)] [IF PROMISE SERVICES GROUP FILL: or a [SITE NAME FOR CASE MANAGER], [either of],

II.D1-II.D8. Since [RA MONTH] of [RA YEAR] have you [(and your (spouse/partner)) (, or other youth in the household ages 14-21)] ...

IF NEEDED: This help could have come from one of the places you've already told me about.

CODE ONE PER ROW

YES	NO	DK	REF
-----	----	----	-----

D1. Worked with anyone to determine your needs and help get education, employment, health, housing or other services? <P1D01>

This person is sometimes called a case manager [IF PROMISE SERVICES GROUP FILL: or a [SITE NAME FOR CASE MANAGER].

1 0 d r

D2. Had help with getting into a school or training program, including help with an application, entrance exam, or interview? <P1D02>

This could include a place where someone told you [or (your (spouse/partner) (or other youth in the household ages 14-21)] about training programs or schools that are available and how to apply for them. Or if someone helped you complete an application for college or vocational school.

1 0 d r

D3. Had any training to help learn new job skills? Please do not include any training provided on-the-job by an employer. <P1D03>

1 0 d r

D4. Had help in finding or applying for a job, such as help finding jobs available, filling out an application, writing a resume, or going for an interview? <P1D04>

1 0 d r

D5. Had help learning about [YOUTH]'s disability and how to get the services or supports [he/she] needs, or had training on how to support [YOUTH]'s independence? <P1D05>

1 0 d r

D6. Had help in understanding Social Security, SSI, or other government program benefits and rules? This is sometimes called benefits counseling or benefits planning. <P1D06>

1 0 d r

IF NEEDED: SSI stands for supplemental Security Income.

D7. Had help learning about how to save and manage money [IN WI: , including help with an Individual Development Account or IDA]? <P1D07>

1 0 d r

D8. Since [RA MONTH] of [RA YEAR], have you [or your (spouse/partner)] had help getting to know other parents in the community who have children with disabilities? <P1D08>

1 0 d r

I.CONSENT_2 = 1
[RA MONTH] [RA YEAR], [(, your (spouse/partner) (or other youth in the household ages 14-21))]

**II.D9.** Since [RA MONTH] of [RA YEAR], have you [(, your (spouse/partner) (or other youth in the household ages 14-21))] had any other services to help you work, go to school, or help your family in other ways? <P1D09>

Please do not include services you've already told me about.

**IF NEEDED:** These services could have been provided by a person or place you have already told me about.

CODE ONE ONLY

- YES..... 1
- NO ..... 0 GO TO BOX 4
- DON'T KNOW..... d GO TO BOX 4
- REFUSED..... r GO TO BOX 4

II.D9=1
[(,your (spouse/partner) (or other youth in the household ages 14-21))]

**II.D9a.** What kind of other services did you [(, your (spouse/partner) (or other youth in the household ages 14-21))] receive? <P1D09a>

- \_\_\_\_\_ (STRING 200)
- SERVICES
- DON'T KNOW..... d
- REFUSED..... r

<p><b>BOX 4</b></p> <p>IF NO SERVICES RECEIVED (II.D1-II.D9. ALL = 0), SKIP TO II.D10. ELSE CONTINUE TO II.D_PRVDR-INTRO.</p>
---

IF ANY OF THE FOLLOWING SERVICES WERE RECEIVED – WHERE ANY ITEM: II.D1=1, II.D3=1, II.D4=1, II.D6=1, OR II.D7=1.
[YOUTH]

**II.D\_PRVDR-INTRO.** Thanks for this information. Now I'd like to ask about the places you [(, your (spouse/partner) (or other youth in the household ages 14-21))] received the services you have just told me about. <P1D\_Privr\_Intro>

- CONTINUE ..... 1

II.D1=1
FILL SPOUSE OR PARTNER IF I.Q2=1 OR 2 AND FILL “(or other youth in the household ages 14-21” IF 1.Q5=1. [(, your (spouse/partner) (or other youth in the household ages 14-21))]

**II.D1a. Who did you [(, your (spouse/partner) (or other youth in the household ages 14-21))] work with to determine your needs and get services? <P1D01a\_1> ; <P1D01a\_2> ; <P1D01a\_3>**

Anyone else?

**PROBE: IF UNABLE TO STATE NAME OF PROVIDER: I need to enter something that will help us identify the provider later. Do you know his or her first or last name? Was he/she a doctor, a therapist, a vocational rehabilitation counselor, or some other type of provider?**

\_\_\_\_\_ (STRING 100) <P1D\_Prov1a\_1>  
SERVICE PROVIDER -1

\_\_\_\_\_ (STRING 100) <P1D\_Prov1a\_2>  
SERVICE PROVIDER -2

\_\_\_\_\_ (STRING 100) <P1D\_Prov1a\_3>  
SERVICE PROVIDER -3

DON'T KNOW..... d

REFUSED..... r

II.D3=1
FILL SPOUSE OR PARTNER IF I.Q2=1 OR 2 AND FILL “(or other youth in the household ages 14-21” IF 1.Q5=1. [(,your (spouse/partner) (or other youth in the household ages 14-21))]

**II.D3a. Who provided or helped you [(, your (spouse/partner) (or other youth in the household ages 14-21))] get training to learn new job skills or to get a job? <P1D03a\_1> ; <P1D03a\_2> ; <P1D03a\_3>**

Anyone else?

**PROBE 2: IF UNABLE TO STATE NAME OF PROVIDER: I need to enter something that will help us identify the provider later. Do you know his or her first or last name? Was he/she a doctor, a therapist, a vocational rehabilitation counselor, or some other type of provider?**

\_\_\_\_\_ (STRING 100) <P1D\_Prov3a\_1>  
SERVICE PROVIDER -1

\_\_\_\_\_ (STRING 100) <P1D\_Prov3a\_2>  
SERVICE PROVIDER -2

\_\_\_\_\_ (STRING 100) <P1D\_Prov3a\_3>  
SERVICE PROVIDER -3

DON'T KNOW..... d

REFUSED..... r

II.D4=1
FILL SPOUSE OR PARTNER IF I.Q2=1 OR 2 AND 1.Q3=1. FILL "(or other youth in the household ages 14-21" IF 1.Q5=1. [(,your (spouse/partner) (or other youth in the household ages 14-21)]

**II.D4a. Who helped you [(, your (spouse/partner) (or other youth in the household ages 14-21)] find or apply for jobs? <P1D04a\_1> ; <P1D04a\_2> ; <P1D04a\_3>**

Anyone else?

**PROBE 1: IF UNABLE TO STATE NAME OF PROVIDER: I need to enter something that will help us identify the provider later. Do you know his or her first or last name? Was he/she a doctor, a therapist, a vocational rehabilitation counselor, or some other type of provider?**

\_\_\_\_\_ (STRING 100) <P1D\_Prov4a\_1>  
SERVICE PROVIDER -1

\_\_\_\_\_ (STRING 100) <P1D\_Prov4a\_1>  
SERVICE PROVIDER -2

\_\_\_\_\_ (STRING 100) <P1D\_Prov4a\_1>  
SERVICE PROVIDER -3

DON'T KNOW..... d

REFUSED..... r

II.D6=1
---------

**II.D6a. Who provided this help in understanding government program benefits and rules?**

<P1D06a\_1> ; <P1D06a\_2> ; <P1D06a\_3>

Anyone else?

**PROBE: IF UNABLE TO STATE NAME OF PROVIDER: I need to enter something that will help us identify the provider later. Do you know his or her first or last name? Was he/she a doctor, a therapist, a vocational rehabilitation counselor, or some other type of provider?**

\_\_\_\_\_ (STRING 100) <P1D\_Prov6a\_1>  
SERVICE PROVIDER-1

\_\_\_\_\_ (STRING 100) <P1D\_Prov6a\_2>  
SERVICE PROVIDER -2

\_\_\_\_\_ (STRING 100) <P1D\_Prov6a\_3>  
SERVICE PROVIDER -3

DON'T KNOW..... d

REFUSED..... r

II.D7=1

II.D7a. Who provided the help in learning how to save and manage money?

<P1D07a\_1> ; <P1D07a\_2> ; <P1D07a\_3>

Anyone else?

**PROBE:** IF UNABLE TO STATE NAME OF PROVIDER: I need to enter something that will help us identify the provider later. Do you know his or her first or last name? Was he/she a doctor, a therapist, a vocational rehabilitation counselor, or some other type of provider?

\_\_\_\_\_ (STRING 100) <P1D\_Prov7a\_1>  
SERVICE PROVIDER -1

\_\_\_\_\_ (STRING 100) <P1D\_Prov7a\_2>  
SERVICE PROVIDER -2

\_\_\_\_\_ (STRING 100) <P1D\_Prov7a\_3>  
SERVICE PROVIDER -3

DON'T KNOW..... d

REFUSED..... r

I.CONSENT\_2 = 1

[RA MONTH] [RA YEAR]

FILL SPOUSE OR PARTNER IF I.Q2=1 OR 2 AND I.Q4=1. FILL "(or other youth in the household ages 14-21" IF 1.Q5=1. [(,your (spouse/partner) (or other youth in the household ages 14-21)]. FILL PAREN "(he/she)" IF R HAS SPOUSE OR PARTNER (I.Q2=1 OR 2). FILL "the other youth" IF I.Q5=1

FILL "other" IF ANY ITEM (II.D1-II.D8)=1

II.D10. Since [RA MONTH] of [RA YEAR], have you [(, your (spouse/partner) (or other youth in the household ages 14-21)] needed any [FILL IF ANY ITEM II.D1-II.D8=1: other] help or services preparing for work, school, or help with family life that has not been received? <P1D10>

**PROBE:** Please do not include services you've already told me about.

CODE ONE ONLY

YES..... 1

NO ..... 0 GO TO BOX 5

DON'T KNOW..... d GO TO BOX 5

REFUSED..... r GO TO BOX 5

II.D10=1
FILL "YOUR SPOUSE / PARTNER" IF I.Q2 = 1 OR 2 AND I.Q3=1. FILL FOR YOUTH IF 1.Q5=1 [(your (spouse/partner) (or other youth in the household))]

**II.D10a. What help or services did you [(your spouse/partner) (or other youth in the household)] need that you did not get?**

**CODE ALL THAT APPLY**

- DISCOVERING JOB INTERESTS/SKILLS .....1 <P1D10a01>
- CAREER COUNSELING.....2 <P1D10a02>
- LEARNING HOW TO LOOK FOR A JOB .....3 <P1D10a03>
- JOB SHADOWING.....4 <P1D10a04>
- APPRENTICESHIP/INTERNSHIP .....5 <P1D10a05>
- HELP FINDING A JOB.....6 <P1D10a06>
- SUPPORT ON THE JOB (JOB COACHING).....7 <P1D10a07>
- HELP GETTING INTO SCHOOL/TRAINING .....8 <P1D10a08>
- UNDERSTANDING SSA/OTHER BENEFITS.....9 <P1D10a09>
- COMPUTER LITERACY CLASSES.....10 <P1D10a10>
- PROBLEM SOLVING.....11 <P1D10a11>
- FINANCIAL LITERACY/MONEY MGMT TRAINING.....12 <P1D10a12>
- REFERRAL TO ANOTHER AGENCY .....13 <P1D10a13>
- TRANSPORTATION SERVICES .....14 <P1D10a14>
- HEALTH-RELATED SERVICES .....15 <P1D10a15>
- CASE MANAGEMENT.....16 <P1D10a16>
- CHILDCARE, AFTER SCHOOL PROGRAMS (FROM BACK-CODING) .....17 <P1D10a17>
- EDUCATION SERVICES (FROM BACK-CODING).....18 <P1D10a18>
- FINANCIAL SUPPORT - RENT/HOUSING, UTILITIES, FOOD, CLOTHES (FROM BACK-CODING)  
.....19 <P1D10a19>
- FINANCIAL SUPPORT FOR SCHOOL OR TRAINING PROGRAM (FROM BACK-CODING)  
.....20 <P1D10a20>
- HOUSING SERVICES (FROM BACK-CODING).....21 <P1D10a21>
- INDEPENDENT LIVING SKILLS (FROM BACK-CODING) .....22 <P1D10a22>
- LEGAL SERVICES (FROM BACK-CODING) .....23 <P1D10a23>
- PARENT TRAINING AND SUPPORT (FROM BACK-CODING) .....24 <P1D10a24>
- RESPIRE CARE (FROM BACK-CODING).....25 <P1D10a25>
- VOCATIONAL TRAINING (FROM BACK-CODING).....26 <P1D10a26>
- OTHER (SPECIFY).....99 <P1D10a99>
- \_\_\_\_\_ (STRING 100)
- DON'T KNOW .....d
- REFUSED .....r

IF OTHER SPECIFY (99): **Any other services? <P1D10a\_Other>**

**BOX 5**

IF NONE OF THE FOLLOWING SERVICES WERE RECEIVED [II.D1=0, II.D3=0, II.D4=0, II.D6=0, OR II.D7=0] SKIP TO III.A.INTRO. ELSE PROCEED TO II.D11.



IF ANY OF THE FOLLOWING SERVICES WERE RECEIVED FOR PARENT / SPOUSE, OTHER YOUTH IN HOUSEHOLD AGES 14-21 [ANY ITEM: II.D1=1 , II.D3=1, II.D4=1, II.D6=1, II.D7=1] AND PROVIDER WAS SPECIFIED IN ANY OF THE FOLLOWING [II.D1a, II.D3a, II.D4a, II.D6a, II.D7a]

[SPOUSE/PARTNER]

**II.D11. INTERVIEWER:** DOES ANY PROVIDER APPEAR ON THE LIST BELOW MORE THAN ONCE?  
<P1D11\_01>

IF SO, DELETE ONE FROM THE LIST BY CHECKING THE BOX NEXT TO THEIR NAME. DO NOT MARK BOTH PROVIDERS FOR DELETION. IF THERE ARE NO DUPLICATES, SELECT "NO DUPLICATES SHOWN ABOVE."

**PROGRAMMER:** POPULATE APPLICABLE RESPONSE OPTIONS WITH PROVIDERS SPECIFIED IN II.D1a, D3a, D4a, D6a, or D7a.

**CODE ALL THAT APPLY**

- [FILL RESPONSE II.D1a\_1] - CASE MANAGEMENT SERVICES ..... 1 <P1D11\_02>
- [FILL RESPONSE II.D1a\_2] - CASE MANAGEMENT SERVICES ..... 2 <P1D11\_03>
- [FILL RESPONSE II.D1a\_3] - CASE MANAGEMENT SERVICES ..... 3 <P1D11\_04>
- [FILL RESPONSE II.D3a\_1] - TRAINING ON JOB SKILLS ..... 4 <P1D11\_05>
- [FILL RESPONSE II.D3a\_2] - TRAINING ON JOB SKILLS ..... 5 <P1D11\_06>
- [FILL RESPONSE II.D3a\_3] - TRAINING ON JOB SKILLS ..... 6 <P1D11\_07>
- [FILL RESPONSE II.D4a\_1] - HELP FINDING OR APPLYING FOR JOBS..... 7 <P1D11\_08>
- [FILL RESPONSE II.D4a\_2] - HELP FINDING OR APPLYING FOR JOBS..... 8 <P1D11\_09>
- [FILL RESPONSE II.D4a\_3] - HELP FINDING OR APPLYING FOR JOBS..... 9 <P1D11\_10>
- [FILL RESPONSE II.D6a\_1] - HELP IN UNDERSTANDING SSI BENEFITS / PROGRAM RULES ..... 10 <P1D11\_11>
- [FILL RESPONSE II.D6a\_2] - HELP IN UNDERSTANDING SSI BENEFITS / PROGRAM RULES ..... 11 <P1D11\_12>
- [FILL RESPONSE II.D6a\_3] - HELP IN UNDERSTANDING SSI BENEFITS / PROGRAM RULES ..... 12 <P1D11\_13>
- [FILL RESPONSE II.D7a\_1] - HELP IN LEARNING HOW TO SAVE / MANAGE MONEY ..... 13 <P1D11\_14>
- [FILL RESPONSE II.D7a\_2] - HELP IN LEARNING HOW TO SAVE / MANAGE MONEY ..... 14 <P1D11\_15>
- [FILL RESPONSE II.D7a\_3] - HELP IN LEARNING HOW TO SAVE / MANAGE MONEY ..... 15 <P1D11\_16>
- NO OTHER DUPLICATES / DONE ..... 16 <P1D11\_17>
- NO DUPLICATES SHOWN ABOVE ..... 00 <P1D11\_18>
- NO PROVIDERS SHOWN ABOVE ..... 99 <P1D11\_19>

IF ANY OF THE FOLLOWING SERVICES WERE RECEIVED FOR PARENT / SPOUSE, OTHER YOUTH IN HOUSEHOLD AGES 14-21 [ANY ITEM: II.D1=1 , II.D3=1, II.D4=1, II.D6=1, II.D7=1] AND PROVIDER WAS SPECIFIED IN ANY OF THE FOLLOWING [II.D1a, II.D3a, II.D4a, II.D6a, II.D7a]

**II.D11a.** INTERVIEWER: IF ANY PROVIDER STILL APPEARS MORE THAN ONCE GO BACK TO THE LAST QUESTION. OTHERWISE, PRESS 1 TO CONTINUE. <P1D11New>

CMOTO INTERVIEWER NOTE: IF ANY PROVIDER STILL APPEARS MORE THAN ONCE GO BACK TO THE LAST QUESTION. OTHERWISE, PRESS THE BUTTON TO CONTINUE.

PROGRAMMER: LIST REMAINING PROVIDERS FROM II.B14 AFTER DELETIONS OF DUPLICATES.

ENTER 1 TO CONTINUE..... 1

**PROGRAMMER:**

RESPONSE OPTIONS FROM II.D11 DETERMINE THE NUMBER OF LOOPS THROUGH THE NEXT SECTION (II.E1 THROUGH II.E8). ONE LOOP FOR EACH UNIQUE PROVIDER.

IF II.D11\_99=1 (NO PROVIDERS ARE LISTED) SKIP TO II.E9.

**SECTION II.E. INTENSITY OF SERVICE PROVISION FOR PARENT AND OTHER FAMILY MEMBERS**

For each provider listed in II.D11 (P1D11\_01 through P1D11\_16), the parent respondent will go through the provider series (II.E1 to II.E8) to answer questions about the services they, their spouse/partner, or other youth in the household received from each provider. Since each parent respondent can list up to 16 different providers, they can go through the provider series a total of 16 times. As shown in the table below, the SAS variable names are adjusted to reflect which series the parent respondent’s answers correspond to.

Question from Instrument	SAS Variable Name – Reflects provider series loop (_01; _02, _03; up to 16)			Provider Series (up to 16)		
II.E1	P1E01_01	P1E01_02	P1E01_03	1	2	3
II.E2	P1E02_01	P1E02_02	P1E02_03	1	2	3
II.E3	P1E03_01 P1E03Month_01 P1E03Year_01	P1E03_02 P1E03Month_02 P1E03Year_02	P1E03_03 P1E03Month_03 P1E03Year_03	1	2	3
II.E4	P1E04_01	P1E04_02	P1E04_03	1	2	3
II.E4a	P1E04a_01 P1E04a_Month_01 P1E04a_Year_01	P1E04a_02 P1E04a_Month_02 P1E04a_Year_02	P1E04a_03 P1E04a_Month_03 P1E04a_Year_03	1	2	3
II.E5	P1E05_01	P1E05_02	P1E05_03	1	2	3
II.E6	P1E06_01	P1E06_02	P1E06_03	1	2	3
II.E7	P1E07_01	P1E07_02	P1E07_03	1	2	3
II.E8	P1E08_01	P1E08_02	P1E08_03	1	2	3

PROGRAMMER: ACROSS THIS SERIES, APPLY THIS LOGIC TO POPULATE FILLS FOR SPOUSE /PARTNER AND OTHER YOUTH IN THE HOUSEHOLD: SPOUSE / PARTNER FILLS [IF 1.Q2=1 (SPOUSE) OR 2 (PARTNER). IF NO SPOUSE OR PARTNER, DO NOT ADD EITHER PART OF THE FILL]. FILLS AND RESPONSE OPTIONS FOR “OTHER YOUTH IN THE HOUSEHOLD” [IF 1.Q6=6].

IF THE FOLLOWING SERVICES WERE RECEIVED FOR PARENT / SPOUSE, OTHER YOUTH IN HOUSEHOLD AGES 14-21 (DE-DUPLICATED LIST GENERATED IN II.D11)
[PROVIDER NAME], [(or your spouse/partner) (or other youth in the household)] [TEXT FILL LOGIC BASED ON PROVIDERS >1]

**II.E1. IF >1 PROVIDER:** Now, I have some questions about the different service providers. Let’s start with services you [(or your spouse/partner) (or other youth in the household)] received from [PROVIDER NAME]. <P1E01\_01> to <P1E01\_16>

**IF ONLY 1 PROVIDER OR SUBSEQUENT PROVIDERS WHEN >1 PROVIDER:** Now, I have some questions about services you [(or your spouse/partner) (or other youth in the household)] received from [PROVIDER NAME].

CONTINUE ..... 1

IF THE FOLLOWING SERVICES WERE RECEIVED FOR PARENT / SPOUSE, OTHER YOUTH IN HOUSEHOLD AGES 14-21 (DE-DUPLICATED LIST GENERATED IN II.D11)

[PROVIDER], [(or your spouse/partner) (or other youth in the household)] [STATE-SPECIFIC NAMES FOR JOB CENTER / WORKFORCE DEVELOPMENT CENTERS], [IF TREATMENT, DISPLAY: PROMISE/ASPIRE PROGRAM]

**II.E2. Thinking about the place you [(or your spouse/partner) (or other youth in the household)] went to get services from [PROVIDER], what type of place is this? <P1E02\_01> to <P1E02\_16>**

**PROBE: Where did you [(or your spouse/partner) (or other youth in the household)] go to get services from [PROVIDER]? What was the name of the agency?**

**INTERVIEWER: If services came from a community service provider, a church, independent living center, or other non-governmental, non-academic organization, code as "2".**

**CODE ONE ONLY**

- VOCATIONAL REHABILITATION AGENCY (VR)..... 1
- OTHER AGENCY (COMMUNITY SERVICE PROVIDER, CHURCH, INDEPENDENT LIVING CENTER, ETC.)..... 2
- AMERICAN JOB CENTER/DEPARTMENT OF WORKFORCE SERVICES/WORK FORCE DEVELOPMENT CENTER [STATE-SPECIFIC NAMES IF APPLICABLE]..... 3
- (IF PROMISE SERVICES GROUP: [PROMISE PROGRAM NAME] ..... 4
- POST-SECONDARY SCHOOL (COLLEGE, VOCATIONAL SCHOOL, UNIVERSITY)..... 5
- Other ..... 99
- \_\_\_\_\_ (STRING 100)
- DON'T KNOW..... d
- REFUSED..... r

IF OTHER SPECIFY (99): **What type of place is this? <P1E02Other\_01> to <P1E02Other\_16>**

IF THE FOLLOWING SERVICES WERE RECEIVED FOR PARENT / SPOUSE, OTHER YOUTH IN HOUSEHOLD AGES 14-21 (DE-DUPLICATED LIST GENERATED IN II.D11)

[(or your spouse/partner) (or other youth in the household)] [PROVIDER]

**II.E3. When did you [(or your spouse/partner) (or other youth in the household)] start going to [PROVIDER]? <P1E03\_01> to <P1E03\_16>**

**PROBE: In what month and year?**

**<P1E03Month\_01> to <P1E03Month\_16> ; <P1E03Year\_01> to <P1E03Year\_16>**

INTERVIEWER: IF THE YEAR WAS PRIOR TO [FILL YEAR OF RA], SELECT "99" BELOW.

CMOTO INTERVIEWER NOTE: IF THE YEAR WAS PRIOR TO [FILL YEAR OF RA], SELECT 'PRIOR TO [YEAR OF RA]' BELOW.

PROGRAMMER: COLLECT DATE WITH SEPARATE FIELDS

\_\_\_\_/\_\_\_\_  
MONTH YEAR

(0-12) (YEAR OF RA TO CURRENT YEAR OF INTERVIEW)

PRIOR TO [YEAR OF RA] ..... 99

DON'T KNOW..... d

REFUSED..... r

SOFT CHECK: IF YEAR RECORDED IN II.E3 > CURRENT YEAR (OF INTERVIEW): INTERVIEWER: THIS DATE IS IN THE FUTURE. PLEASE RECHECK THE RESPONSE RECORDED IN THE YEAR FIELD.

IF THE FOLLOWING SERVICES WERE RECEIVED FOR PARENT / SPOUSE, OTHER YOUTH IN HOUSEHOLD AGES 14-21 (DE-DUPLICATED LIST GENERATED IN II.D11)

[(or your spouse/partner) (or other youth in the household)] [PROVIDER]

**II.E4. Are you [(or your spouse/partner) (or other youth in the household)] still going to [PROVIDER]? <P1E04\_01> to <P1E04\_16>**

CODE ONE ONLY

YES..... 1 GO TO II.E6

NO ..... 0

DON'T KNOW..... d GO TO II.E5

REFUSED..... r GO TO II.E5

II.E4=0
[(or your spouse/partner) (or other youth in the household)] [PROVIDER]

**II.E4a. When did you [(or your spouse/partner) (or other youth in the household)] stop going to [PROVIDER]? <P1E04a\_01> to <P1E04a\_16>**

**PROBE: In what month and year?**

**<P1E04a\_Month\_01> to <P1E04a\_Month\_16> ; <P1E04a\_Year\_01> to <P1E04a\_Year\_16>**

INTERVIEWER: IF THE YEAR WAS PRIOR TO [FILL YEAR OF RA], SELECT "99" BELOW.

CMOTO INTERVIEWER NOTE: IF THE YEAR WAS PRIOR TO [FILL YEAR OF RA], SELECT 'PRIOR TO [YEAR OF RA]' BELOW.

PROGRAMMER: COLLECT DATE WITH SEPARATE FIELDS

_ _ / _ _ _ _	.....	GO TO II.E6
MONTH	YEAR	
(0-12)	(YEAR OF RA TO CURRENT YEAR OF INTERVIEW)	

PRIOR TO [YEAR OF RA] ..... 99 GO TO BOX 6

DON'T KNOW..... d GO TO II.E5

REFUSED..... r GO TO II.E5

**SOFT CHECK 1: IF II.E4a MM/YYYY before [RA MONTH] of [RA YEAR]; I recorded that you [(or your spouse/partner) (or other youth in the household)] stopped receiving services prior to [RA MONTH] of [RA YEAR]. Is this correct? IF YES, GO TO BOX 6.**

**SOFT CHECK 2: IF YEAR RECORDED IN II.E3 > CURRENT YEAR (OF INTERVIEW): INTERVIEWER: THIS DATE IS IN THE FUTURE. PLEASE RECHECK THE RESPONSE RECORDED IN THE YEAR FIELD.**

**SOFT CHECK: If MM/YYYY recorded in II.E4a is before MM/YYYY recorded in II.E3: I recorded that you [(or your spouse/partner) (or other youth in the household)] stopped going to this provider prior to the start date I recorded for seeing this provider earlier. Did I get the date wrong?**

INTERVIEWER: PLEASE RECHECK THIS RESPONSE AND RESPONSE IN PRIOR QUESTION ABOUT STARTING SERVICES.

IF START DATE UNKNOWN OR NOT PROVIDED (II.E3= d or r) OR STILL GOING UNKNOWN OR NOT PROVIDED (E4=d, r) OR END DATE NOT KNOWN OR PROVIDED (II.E4a=d or r)

[RA MONTH] [RA YEAR], [SPOUSE/PARTNER], [PROVIDER]

**II.E5. Since [RA MONTH] of [RA YEAR] for how many months did you [(or your spouse/partner) (or other youth in the household)] go to [PROVIDER]? <P1E05\_01> to <P1E05\_16>**

**PROBE: Your best guess is fine.**

INTERVIEWER: IF LESS THAN ONE MONTH, ENTER 0.

|\_|\_| MONTHS

(0-99) ..... GO TO II.E7

DON'T KNOW..... d GO TO II.E7

REFUSED..... r GO TO II.E7

IF THE FOLLOWING SERVICES WERE RECEIVED FOR PARENT / SPOUSE, OTHER YOUTH IN HOUSEHOLD AGES 14-21 (DE-DUPLICATED LIST GENERATED IN II.D11) AND EITHER STILL RECEIVING (II.E4=1) OR END DATE AFTER RA DATE [II.E4A]

[(or your spouse/partner) (or other youth in the household)] [PROVIDER]

**II.E6. Since [RA MONTH] of [RA YEAR], when you [(or your spouse/partner) (or other youth in the household)] saw [PROVIDER], about how often did you [(or your spouse/partner) (or other youth in the household)] go? Your best estimate is fine. Was it ... <P1E06\_01> to <P1E06\_16>**

**CODE ONE ONLY**

**Every day,** ..... 1

**More than once a week,** ..... 2

**Weekly,** ..... 3

**More than once a month,** ..... 4

**About once a month, or** ..... 5

**Less often than once a month?** ..... 6

DON'T KNOW..... d

REFUSED..... r

IF THE FOLLOWING SERVICES WERE RECEIVED FOR PARENT / SPOUSE, OTHER YOUTH IN HOUSEHOLD AGES 14-21 (DE-DUPLICATED LIST GENERATED IN II.D11) AND EITHER STILL RECEIVING (II.E4=1) OR END DATE AFTER RA DATE [II.E4A]

II.E7. On average, how long was each meeting or session? Was it ... <P1E07\_01> to <P1E07\_16>  
 PROBE: How much time per day?

**CODE ONE ONLY**

- Less than an hour, ..... 1
- About one hour, ..... 2
- About 2 hours, ..... 3
- About 3 hours, ..... 4
- About 4 hours or half a day, or was it, ..... 5
- More than 4 hours per meeting? ..... 6
- DON'T KNOW ..... d
- REFUSED ..... r

IF THE FOLLOWING SERVICES WERE RECEIVED FOR PARENT / SPOUSE, OTHER YOUTH IN HOUSEHOLD AGES 14-21 (DE-DUPLICATED LIST GENERATED IN II.D11) AND EITHER STILL RECEIVING (II.E4=1) OR END DATE AFTER RA DATE [II.E4A]

[PROVIDER] [(or your spouse/partner) (or other youth in the household)]  
 IF II.E4=1, FILL "have been" IF II.E4= 0, d, r FILL "were"

II.E8. How useful do you think the help or services that you [(or your spouse/partner) (or other youth in the household)] got from (PROVIDER) [have been / were]? Would you say . . . <P1E08\_01> to <P1E08\_16>

**CODE ONE ONLY**

- Very useful, ..... 1
- Somewhat useful, ..... 2
- Not very useful, or ..... 3
- Not at all useful? ..... 4
- DON'T KNOW ..... d
- REFUSED ..... R

**BOX 6**

REPEAT LOOP FOR ITEMS II.E1 TO II.E8 FOR EACH RESPONSE OPTION  
 SELECTED (01-16) IN ITEM II.D11.  
 ONCE LOOPS (UP TO 15) ARE COMPLETED, PROCEED TO II.E9.



I.CONSENT\_2 = 1

**II.E9. PROGRAMMER: INSERT DATE THIS SECTION (II.E – PARENT / GUARDIAN AND OTHER FAMILY MEMBERS’ SERVICE RECEIPT) WAS COMPLETED HERE OR POPULATE THIS AS A VERIFICATION OF DATE COMPLETED FOR INTERVIEWER TO INPUT. THEN CONTINUE.**

<P1E09Date>

CONTINUE ..... 1 GO TO II.E10

CHECKPOINT – PARENT / GUARDIAN CONTINUING INTERVIEW

[YOUTH]

**II.E10. INTERVIEWER CHECK: <P1E10>**

IF RESPONDENT IS CONTINUING WITH THE INTERVIEW, SELECT “1” BELOW.

IF RESPONDENT IS NOT ABLE TO CONTINUE (BREAK OFF) AND YOUTH IS AVAILABLE, SELECT “2” BELOW.

IF NEITHER RESPONDENT NOR [YOUTH] ARE ABLE TO CONTINUE NOW, SET APPOINTMENT OR STATUS AS REFUSAL, AS APPLICABLE.

**CMOTO INTERVIEWER CHECK:**

IF RESPONDENT IS CONTINUING WITH THE INTERVIEW, SELECT ‘RESPONDENT ABLE TO CONTINUE’ BELOW.

IF RESPONDENT IS NOT ABLE TO CONTINUE (BREAK OFF) AND YOUTH IS AVAILABLE, SELECT ‘RESPONDENT BREAK OFF – CONTINUE WITH YOUTH’ BELOW.

IF NEITHER RESPONDENT NOR [YOUTH] ARE ABLE TO CONTINUE NOW, SET APPOINTMENT OR STATUS AS REFUSAL, AS APPLICABLE.

CODE ONE ONLY

RESPONDENT ABLE TO CONTINUE.....1	GO TO BOX III.A
RESPONDENT BREAK OFF – CONTINUE WITH YOUTH .....2	GO TO VII.A1
RESPONDENT BREAK OFF AND YOUTH UNAVAILABLE .....3	SET CALLBACK

		Asked of ...		
		Parent or Legal Guardian of Participating Youth (where youth resides with a parent / guardian)	Other adult (staff from group home, school) where parent /guardian granted consent to respond on his / her behalf	Consenting Parent of Independent Youth
<b>Section:</b>		I.Rtype=1 OR 2	I.ELIG_2=5 AND I.RTYPE=3	I.Rtype= 4
<b>III.</b>	<b>Parent Employment Experience and Credentials</b>	<b>YES</b>	<b>NO</b>	<b>YES</b>

**SECTION III. PART A. PARENT/GUARDIAN EMPLOYMENT**

**PROGRAMMER:**

POPULATE SPOUSE / PARTNER FILLS AND APPLICABLE RESPONSE OPTIONS IN THIS SECTION ONLY IF PARENT/LEGAL GUARDIAN HAS A SPOUSE OR COHABITING PARTNER WHO LIVES IN THE SAME HOUSEHOLD (I.Q3=1). ELSE DO NOT POPULATE THESE FILLS OR INCLUDE RESPONSE OPTION FOR SPOUSE / PARTNER.

(I.CONSENT\_2 = 1) AND (I.RTYPE=1, 2, OR 4 OR I.RTYPE=3 AND I.ELIG\_2 NE 5)

[or your (spouse/ partner)], [RA MONTH] [RA YEAR], [MONTH AND YEAR OF RA]

**III.A.Intro.**      **Next, I'll ask questions about jobs that you [or your (spouse/ partner)] have had since [RA MONTH] of [RA YEAR]. <P1F\_Intro>**

CONTINUE ..... 1

(I.CONSENT\_2 = 1) AND (I.RTYPE=1, 2, OR 4 OR I.RTYPE=3 AND I.ELIG\_2 NE 5)

[RA MONTH] [RA YEAR], [or your (spouse/ partner)],

**III.A1. A job could be working for a business or organization or work that you do on your own. Jobs include internships, apprenticeships and volunteer work even if you didn't get paid. A job is work either paid or unpaid other than work around the house.**

**Please include all jobs since [RA MONTH] of [RA YEAR], even if you only worked for a short time. Please include jobs that you currently have, as well as jobs that ended within the past year and a half. Also, please include jobs at which you [or your (spouse/ partner)] are or were self-employed. (YTD-36 II.A1, modified)**

**Have you [or your (spouse/ partner)] worked at a job or a business at any time since [RA MONTH] of [RA YEAR]? <P1F01>**

INTERVIEWER: IF RESPONDENT IS MARRIED OR LIVING IN PARTNERSHIP AS MARRIED, AND AT LEAST 1 PERSON WORKED, RECORD "YES" (1) BELOW.

CMOTO INTERVIEWER NOTE: IF RESPONDENT IS MARRIED OR LIVING IN PARTNERSHIP AS MARRIED, AND AT LEAST 1 PERSON WORKED, RECORD "YES" BELOW.

CODE ONE ONLY

YES ..... 1  
 NO ..... 0 GO TO III.A4  
 DON'T KNOW ..... d GO TO III.A4  
 REFUSED ..... r GO TO III.A4

III.A1=1

[or your (spouse/ partner)]

**III.A2. Were you [or your (spouse/ partner)] paid or self-employed in any of these jobs? By self-employed, we mean you work for yourself or own your own business. (NEW) <P1F02>**

INTERVIEWER: IF RESPONDENT IS MARRIED OR LIVING IN PARTNERSHIP AS MARRIED, AND AT LEAST 1 PERSON WAS PAID OR WAS SELF EMPLOYED, RECORD "YES" (1) BELOW.

CMOTO INTERVIEWER NOTE: IF RESPONDENT IS MARRIED OR LIVING IN PARTNERSHIP AS MARRIED, AND AT LEAST 1 PERSON WAS PAID OR WAS SELF EMPLOYED, RECORD "YES" BELOW.

CODE ONE ONLY

YES ..... 1  
 NO ..... 0  
 DON'T KNOW ..... d  
 REFUSED ..... r

III.A1=1
[or your (spouse/ partner)]

**III.A3. Now, I will ask questions about jobs you [or your (spouse/ partner)] may have had more recently. Did you [or your (spouse/ partner)] work for pay last month? (NBS, K2A modified) <P1F03>**

**CODE ONE ONLY**

- YES ..... 1
- NO ..... 0 GO TO III.A4
- RETIRED ..... 2 GO TO III.A5
- UNABLE TO WORK..... 3 GO TO III.A5
- DON'T KNOW ..... d GO TO III.A4
- REFUSED ..... r GO TO III.A4

RESPONDENT OR SPOUSE WORKED IN LAST MONTH (III.A3=1)
[and / or your (spouse/ partner)] [and / or your (spouse/ partner)]

**III.A3a. How much did you [and / or your (spouse/ partner)] earn from all jobs and businesses in the last month before taxes and deductions? Your best estimate is fine. (NBS K3 modified)**

**[IF MARRIED / HAS SPOUSE OR PARTNER, FILL: If both of you worked last month, please combine your earnings with your (spouse / partner's) earnings for that time period.**

INTERVIEWER: IF UNABLE TO PROVIDE EARNINGS BEFORE TAXES, RECORD AFTER TAX INCOME AND TYPE OF INCOME RECORDED IN THE NEXT ITEM.

**ENTER AMOUNT HERE <P1F03A\_AMT>**

\$ |\_|\_|\_|\_|\_|\_|\_| AMOUNT  
(1-99999)

RESPONDENT OR SPOUSE WORKED IN LAST MONTH (III.A3=1)

**III.A3b. ENTER TYPE OF INCOME HERE. <P1F03a\_Type>**

MONTHLY INCOME BEFORE TAXES AND DEDUCTIONS (GROSS INCOME).....1  
MONTHLY INCOME AFTER TAXES (NET INCOME) .....2  
DON'T KNOW .....d  
REFUSED .....r

SOFT CHECK IF III.A3a IS >0: May I confirm I have recorded this correctly, that you [and / or your (spouse/ partner)] earned [FILL VALUE FROM III.A3a.] from all jobs and businesses last month – and that amount is [(BEFORE / AFTER)] taxes and other deductions?

RESPONDENT OR SPOUSE WORKED IN LAST MONTH (III.A3=1)

[or your (spouse/ partner)]

**III.A3c. Did you [or your (spouse/ partner)] have access to health insurance through your job or work last month? <P1F03b>**

**You don't need to have taken the insurance; we just wanted to see if this employer offered it to you as an employment benefit. (NEW)**

INTERVIEWER: IF > 1 EMPLOYER IN THE PAST MONTH, PROBE IF ANY OF THESE EMPLOYERS OFFERED HEALTH INSURANCE.

IF RESPONDENT HAS A SPOUSE / PARTNER AND RESPONSE TO THIS ITEM IS YES FOR EITHER ONE, MARK "YES" BELOW.

CODE ONE ONLY

- YES ..... 1 GO TO III.A5
- NO ..... 0 GO TO III.A5
- DON'T KNOW ..... d GO TO III.A5
- REFUSED ..... r GO TO III.A5

PARENT / GUARDIAN DID NOT HAVE A JOB LAST MONTH (III.A3=0, D, R) or III.A1=0, d, or R

[or your (spouse/ partner)]

**III.A4. Do you [or your (spouse/ partner)] currently want a job, either full or part time? (CPS D-ant, modified response category) <P1F04>**

INTERVIEWER: IF RESPONDENT IS MARRIED OR LIVING IN PARTNERSHIP AS MARRIED, AND AT LEAST ONE PERSON DID NOT HAVE A JOB LAST MONTH AND WANTS A JOB, RECORD "YES" (1) BELOW.

CMOTO INTERVIEWER NOTE: IF RESPONDENT IS MARRIED OR LIVING IN PARTNERSHIP AS MARRIED, AND AT LEAST ONE PERSON DID NOT HAVE A JOB LAST MONTH AND WANTS A JOB, RECORD "YES" BELOW.

CODE ONE ONLY

- YES ..... 1
- MAYBE, IT DEPENDS ..... 2
- NO ..... 0
- DON'T KNOW ..... d
- REFUSED ..... r

(I.CONSENT\_2 = 1) AND (I.RTYPE=1, 2, OR 4 OR I.RTYPE=3 AND I.ELIG\_2 NE 5)

**III.A5. PROGRAMMER: INSERT DATE THIS SECTION (III.A – PARENT / GUARDIAN AND SPOUSE / PARTNER EMPLOYMENT) WAS COMPLETED HERE. OR POPULATE THIS AS A VERIFICATION OF DATE COMPLETED FOR INTERVIEWER TO INPUT. THEN CONTINUE. <P1F05Date>**

- CONTINUE ..... 1 GO TO III.B1

**SECTION III. PART B. PARENT AND SPOUSE PARTNER’S EDUCATIONAL CREDENTIALS**

**PROGRAMMER:** IF PARENT/LEGAL GUARDIAN HAS A SPOUSE OR COHABITING PARTNER WHO LIVES IN THE SAME HOUSEHOLD (I.Q4=1) POPULATE SPOUSE / PARTNER FILLS IN THIS SECTION, ELSE DO NOT POPULATE THESE FILLS OR INCLUDE RESPONSE OPTION FOR SPOUSE / PARTNER.

(I.CONSENT\_2 = 1) AND (I.RTYPE=1, 2, OR 4 OR I.RTYPE=3 AND I.ELIG\_2 NE 5)  
 [and your (spouse/ partner)]

**III.B1. What is the highest grade or year of school you [and your (spouse/ partner)] have finished? (NEW) <P1G01a> ; <P1G01b>**

INTERVIEWER: READ CATEGORIES IF NECESSARY.

PROGRAMMER: CREATE COLUMN (II.B1B) FOR SPOUSE PARTNER ONLY IF (I.Q3=1).

	CODE ONE PER COLUMN	
	II.B1A. PARENT / GUARDIAN	II.B1B. SPOUSE / PARTNER
8TH GRADE OR LESS	1	1
9TH GRADE OR ABOVE, NOT A HIGH SCHOOL GRADUATE	2	2
HIGH SCHOOL GRADUATE	3	3
GED	4	4
POST-HIGH SCHOOL EDUCATION, NO COLLEGE DEGREE	5	5
VOCATIONAL TECHNICAL (VOC-TECH) DEGREE OR CERTIFICATE	6	6
2-YEAR OR 3 YEAR COLLEGE DEGREE/AA DEGREE	7	7
4-YEAR COLLEGE DEGREE/ BACHELOR'S DEGREE	8	8
MASTER'S DEGREE	9	9
PHD, MD, JD, LLB OR OTHER PROFESSIONAL GRADUATE DEGREE	10	10
NEVER ATTENDED SCHOOL	11	11
OTHER – SPECIFY	99	99

IF OTHER SPECIFY (99): **Please specify highest grade or year or school finished (150 CHAR)**  
 <P1G01a\_Other> ; <P1G01b\_Other>

(I.CONSENT_2 = 1) AND (I.RTYPE=1, 2, OR 4 OR I.RTYPE=3 AND I.ELIG_2 NE 5)
[RA MONTH] [RA YEAR] [or your (spouse/ partner)]

**III.B2. Since [RA MONTH] of [RA YEAR], have you [or your (spouse/ partner)] received any diploma, GED, certificate, or professional license? (NEW) <P1G02>**

INTERVIEWER: MARRIED AND EITHER RESPONDENT OR SPOUSE / PARTNER RECEIVED ANY OF THESE, SELECT YES BELOW.

**CODE ONE ONLY**

YES ..... 1  
 NO ..... 0 GO TO III.B3  
 DON'T KNOW ..... d GO TO III.B3  
 REFUSED ..... r GO TO III.B3

III.B2=1
[RA MONTH] [RA YEAR],

**III.B2a. What kind of diploma(s), GED, certificate(s), or professional license(s) did you [or your (spouse/ partner)] receive since [RA MONTH] of [RA YEAR]? (NEW)**

INTERVIEWER: IF RESPONDENT HAS SPOUSE / PARTNER – RECORD ALL APPLICABLE RESPONSES FOR BOTH IN THE CATEGORIES BELOW.

**CODE ALL THAT APPLY**

GED..... 1  
**<P1G02a1>**  
 DIPLOMA FROM VOCATIONAL, TECHNICAL BUSINESS OR TRADE SCHOOL ..... 2  
**<P1G02a2>**  
 DIPLOMA FROM 2-YEAR OR 3-YEAR COLLEGE / COMMUNITY COLLEGE ..... 3  
**<P1G02a3>**  
 DIPLOMA FROM A 4-YEAR COLLEGE..... 4  
**<P1G02a4>**  
 CERTIFICATE FROM A JOB SKILLS TRAINING PROGRAM ..... 5  
**<P1G02a5>**  
 OTHER - SPECIFY ..... 99  
**<P1G02a6>**  
 \_\_\_\_\_ (STRING 100)  
 DON'T KNOW ..... d  
 REFUSED ..... r

IF OTHER SPECIFY (99): What did you [or your (spouse/ partner)] receive since [RA MONTH] of [RA YEAR]? <P1G02a_Other>
---



(I.CONSENT\_2 = 1) AND (I.RTYPE=1, 2, OR 4 OR I.RTYPE=3 AND I.ELIG\_2 NE 5)

(RA DATE) [or your (spouse/ partner)]

**III.B3. Have you [or your (spouse/ partner)] gone to school at any time since (RA DATE)? Please include adult basic education or GED courses, vocational or trade school, college and university. (NEW) <P1G03>**

INTERVIEWER: IF EITHER RESPONDENT OR SPOUSE / PARTNER WENT TO SCHOOL SINCE [RATE DATE], SELECT YES BELOW.

INTERVIEWER: CODE "YES" IF ON SUMMER BREAK.

- YES ..... 1
- NO ..... 0 GO TO III.B4
- DON'T KNOW ..... d GO TO III.B4
- REFUSED ..... r GO TO III.B4

III.B3=1

[RA MONTH] [RA YEAR] [or your (spouse/ partner)]

**III.B3a. Are you [or your (spouse/ partner)] currently attending or enrolled in school? Please include adult basic education or GED courses, vocational or trade school, college and university. (NEW) <P1G03a>**

INTERVIEWER: IF EITHER RESPONDENT OR SPOUSE / PARTNER IS CURRENTLY ATTENDING OR ENROLLED IN SCHOOL, SELECT YES BELOW.

**PROBE: Do you [or your (spouse/ partner)] go to school now?**

**IF SUMMER: If you [or your (spouse/ partner)] are off school for the summer, will you [or your (spouse/ partner)] be going back to school in the fall?**  
 [INTERVIEWER: IF RETURNING TO SCHOOL IN FALL, SELECT '1' (YES) BELOW]

[CMOTO INTERVIEWER: IF RETURNING TO SCHOOL IN FALL, SELECT YES BELOW]

**IF DON'T KNOW: When was the last time you [or your (spouse/ partner)] went to school?**

- YES ..... 1
- NO ..... 0
- DON'T KNOW ..... d
- REFUSED ..... r

(I.CONSENT_2 = 1) AND (I.RTYPE=1, 2, OR 4 OR I.RTYPE=3 AND I.ELIG_2 NE 5)
[RA MONTH] [RA YEAR], [or your (spouse/ partner)] [you/ (he/she)]

**III.B4.** Since [RA MONTH] of [RA YEAR], have you [or your (spouse/ partner)] attended a training program or taken any classes to improve job skills? Please include classes to learn English or improve reading skills. (NEW) <P1G04>

INTERVIEWER: IF RESPONSE IS "YES" FOR EITHER RESPONDENT OR SPOUSE / PARTNER, SELECT YES BELOW.

**IF DON'T KNOW: When was the last time [you/ (he/she)] went to training?**

- YES ..... 1
- NO ..... 0 GO TO III.B5
- DON'T KNOW ..... d GO TO III.B5
- REFUSED ..... r GO TO III.B5

III.B4=1
[or your (spouse/ partner)]

**III.B4a.** Are you [or your (spouse/ partner)] currently in a training program or taking classes to improve job skills? Please include classes to learn English or improve reading skills. (NEW) <P1G04a>

INTERVIEWER: IF RESPONSE IS "YES" FOR EITHER RESPONDENT OR SPOUSE / PARTNER, SELECT YES BELOW.

- YES ..... 1
- NO ..... 0
- DON'T KNOW ..... d
- REFUSED ..... r

CURRENTLY OR EVER IN SCHOOL, CLASSES, OR TRAINING PROGRAM (III.B3=1 OR III.B4=1)

[RA MONTH] [RA YEAR] [PROMISE PROGRAM NAME] [or your (spouse/ partner)]

**III.B5. Thinking about the school, training program or classes that you [or your (spouse/ partner)] are currently attending or you have attended since [RA MONTH] of [RA YEAR], what type of school, training program (is this / was it)? (NEW)**

INTERVIEWER: MARRIED OR LIVING IN PARTNERSHIP AS MARRIED AND RESPONSE IS DIFFERENT FOR EACH, PLEASE SELECT ALL PROGRAMS THAT APPLY (FOR BOTH).

PROGRAMMER: ONLY POPULATE RESPONSE 5 (PROMISE PROGRAM NAME). IF PROMISE SERVICES GROUP.

**CODE ALL THAT APPLY**

- VOCATIONAL, TECHNICAL BUSINESS OR TRADE SCHOOL ..... 1 <P1G05\_1>
- 2-YEAR OR 3-YEAR COLLEGE / COMMUNITY COLLEGE ..... 2 <P1G05\_2>
- 4-YEAR COLLEGE ..... 3 <P1G05\_3>
- JOB SKILLS TRAINING ..... 4 <P1G05\_4>
- [PROMISE PROGRAM NAME] ..... 5 <P1G05\_5>
- ADULT EDUCATION PROGRAMS (e.g., GED, ESL) (FROM BACK-CODING)..... 6 <P1G05\_6>
- OTHER..... 99 <P1G05\_99>
- \_\_\_\_\_ (STRING 100)
- DON'T KNOW ..... d
- REFUSED ..... r

IF OTHER SPECIFY (99): **What kind of school or training program was it? <P1G05Other>**

I.CONSENT_2 = 1
[YOUTH]

**III.B6. INTERVIEWER CHECK: <P1G06>**

- IF RESPONDENT IS CONTINUING WITH THE INTERVIEW, SELECT "1" BELOW.
- IF RESPONDENT IS NOT ABLE TO CONTINUE (BREAK OFF) AND YOUTH IS AVAILABLE, SELECT "2" BELOW.
- IF NEITHER RESPONDENT NOR [YOUTH] ARE ABLE TO CONTINUE NOW, SET APPOINTMENT OR STATUS AS REFUSAL, AS APPLICABLE.

**CMOTO INTERVIEWER CHECK:**

- IF RESPONDENT IS CONTINUING WITH THE INTERVIEW, SELECT 'RESPONDENT ABLE TO CONTINUE' BELOW.
- IF RESPONDENT IS NOT ABLE TO CONTINUE (BREAK OFF) AND YOUTH IS AVAILABLE, SELECT 'RESPONDENT BREAK OFF – CONTINUE WITH YOUTH' BELOW.
- IF NEITHER RESPONDENT NOR [YOUTH] ARE ABLE TO CONTINUE NOW, SET APPOINTMENT OR STATUS AS REFUSAL, AS APPLICABLE.

- RESPONDENT ABLE TO CONTINUE .....1 GO TO BOX IV.A
- RESPONDENT BREAK OFF – CONTINUE WITH YOUTH .....2 GO TO BOX VII.A1
- RESPONDENT BREAK OFF AND YOUTH UNAVAILABLE.....3 SET CALLBACK

		Asked of ...		
		Parent or Legal Guardian of Participating Youth (where youth resides with a parent / guardian)	Other adult (staff from group home, school) where parent /guardian granted consent to respond on his / her behalf	Consenting Parent of Independent Youth
<b>Section:</b>		I.Rtype=1 OR 2	I.ELIG_2=5 AND I.RTYPE=3	I.Rtype= 4
<b>IV.</b>	<b>Parent: Individual and Family Well-Being</b>	<b>YES</b>	<b>NO</b> (ASKED IN YOUTH INTERVIEW)	<b>NO</b> (ASKED IN YOUTH INTERVIEW)

**BOX III.A**

IF RESPONDENT IS CONSENTING PARENT OF INDEPENDENT YOUTH (I.RTYPE=4) THEN SKIP TO V.A.INTRO. ELSE, CONTINUE TO IV.A.INTRO.

**SECTION IV. PART A. HOUSEHOLD HEALTH AND CURRENT HEALTH INSURANCE COVERAGE**

(I.CONSENT\_2 = 1) AND (I. RTYPE= 1 OR 2)

**IV.A.Intro.** The next questions are about health insurance, including health insurance obtained through employment or purchased directly, as well as government programs like Medicaid and Medicare. <P1H\_Intro>

CONTINUE ..... 1

(I.CONSENT\_2 = 1) AND (I. RTYPE= 1 OR 2)

[, your (spouse / partner),] [YOUTH] [(you) / your (spouse / partner) / (youth)] [is / are]

**IV.A1.** Are you [, your (spouse / partner),] or [YOUTH] covered by any kind of health insurance or some other kind of health care plan? (Source: NHIS, modified)

**IF NEEDED: Who is covered?**

PROGRAMMER: POPULATE RESPONSE OPTION FOR SPOUSE / PARTNER ONLY IF 1.Q2=1 OR 2.

	CODE ONE PER ROW			
	YES	NO	DK	REF
a. PARENT / GUARDIAN IS COVERED <P1H01a>	1	0	d	r
b. SPOUSE / PARTNER IS COVERED <P1H01b>	1	0	d	r
c. YOUTH IS COVERED <P1H01c>	1	0	d	r

SOFT CHECK: IF ANY HOUSEHOLD MEMBER SHOWS AS NOT COVERED (IV.A1a, A1b, or A1c = 0): **May I confirm that I have recorded your answer correctly – that is that [(you) / your (spouse/ partner) / (youth)] [is / are] not covered by any kind of health insurance of any kind at this time. This includes private insurance, as well as other types of health insurance you may receive or have purchased through government programs?**

(I.CONSENT\_2 = 1) AND (I. RTYPE= 1 OR 2)

**IV.A2. Are there any other members of this household who are not covered by any kind of health insurance? This includes any kind of private insurance, as well as coverage people may get through the government. (NEW) <P1H02>**

**CODE ONE ONLY**

- YES ..... 1
- NO ..... 0 GO TO IV.A3
- NO OTHER MEMBERS IN OUR HOUSEHOLD ..... 3 GO TO IV.A3
- DON'T KNOW ..... d GO TO IV.A3
- REFUSED ..... r GO TO IV.A3

IV.A2=1

[VALUE FROM A2a\_specify] [YOUTH] [or your spouse / partner]

**IV.A2a. How many other household members are not covered by any kind of health insurance? <P1H02a>**

|\_|\_| NUMBER OF OTHER HOUSEHOLD MEMBERS NOT COVERED  
(1-99)

- DON'T KNOW ..... d
- REFUSED ..... r

**SOFT CHECK: IF A2a>1; May I confirm I have correctly recorded that [VALUE FROM A2a\_specify] members of your household are not covered by any kind of health insurance – and that number does not include you, or [YOUTH] [,or your spouse / partner])?**

IV.A2a>0 OR D OR R

(IF IVA2a=1 fill “is this” and if >1, fill “are these”), [YOUTH], (IF IVA2a=1 fill “member” and if >1, fill “members”),

**IV.A2b. How (is this / are these) household [member/ members] related to [YOUTH]?**

**CODE ALL THAT APPLY**

- SISTER ..... 1 <P1H02B01>
- BROTHER..... 2 <P1H02B02>
- MOTHER..... 3 <P1H02B03>
- FATHER..... 4 <P1H02B04>
- AUNT..... 5 <P1H02B05>
- UNCLE ..... 6 <P1H02B06>
- COUSIN ..... 7 <P1H02B07>
- FRIEND ..... 8 <P1H02B08>
- OTHER RELATIVE ..... 9 <P1H02B09>
- OTHER – NO RELATIVE..... 10 <P1H02B10>
- DON'T KNOW ..... d
- REFUSED ..... r

ANY (RESPONDENT, SPOUSE, YOUTH) WITH HEALTH INSURANCE COVERAGE (IV.A1A=1 OR IV.A1B=1 OR IV.A1C=1)

IF IV.A1=1, fill [you], IF IV.A1b=1, fill [, your (spouse / partner)], IF IV.A1c=1, fill [or (YOUTH)] [YOUTH] [STATE MEDICAID NAME]

**IV.A3-IV.A6. Are [you] [, your (spouse / partner),] [or (YOUTH)] now covered by any of the following types of health insurance?**

INTERVIEWER: CODE ALL THAT APPLY FOR EACH ROW. IF NO ONE HAS A PARTICULAR TYPE OF COVERAGE, SELECT "NONE OF THESE."

**Who is covered?**

PROGRAMMER: POPULATE COLUMN ONLY IF RESPONSE TO IV.A1A=1 OR IV.A1B=1 OR IV.A1C=1.

**CODE ALL THAT APPLY FOR EACH ROW**

SELF (PARENT / GUARDIAN)	YOUTH	SPOUSE / PARTNER	NONE OF THESE
--------------------------------	-------	---------------------	------------------

**IV.A3. Private health insurance?** This includes any health insurance other than [STATE MEDICAID NAME] or Medicare. (Source: NHIS, modified) <P1H03\_1> ; <P1H03\_2> ; <P1H03\_3> ; <P1H03\_4>

1            2            3            4

**IV.A4. Are you [, your (spouse / partner),] or [YOUTH] covered by Medicaid [, or STATE MEDICAID NAME]?** (Source: NHIS, modified) <P1H04\_1> ; <P1H04\_2> ; <P1H04\_3> ; <P1H04\_4>

1            2            3            4

**IV.A5. Are you [, is your (spouse / partner),] or is [YOUTH] covered by Medicare?** (NHIS, modified) <P1H05\_1> ; <P1H05\_2> ; <P1H05\_3> ; <P1H05\_4>

1            2            3            4

**IV.A6. Are you [, is your (spouse / partner),] or is [YOUTH] covered by any other kind of health insurance I have not already asked about?** <P1H06\_1> ; <P1H06\_2> ; <P1H06\_3> ; <P1H06\_4>

1            2            3            4

**HARD CHECK:**

IF IV.A3=4, CANNOT SELECT IV.A3=1, 2, OR 3 ; IF IV.A4=4, CANNOT SELECT IV.A4=1, 2, OR 3; IF IV.A5=4, CANNOT SELECT IV.A5=1, 2, OR 3; IF IV.A6=4, CANNOT SELECT IV.A6=1, 2, OR 3

INTERVIEWER: IF YOU HAVE RECORDED THAT RESPONDENT, YOUTH, AND/OR SPOUSE OR PARTNER HAS THIS TYPE OF INSURANCE, YOU SHOULD NOT RECORD THAT NO ONE IN THE FAMILY HAS THIS KIND OF INSURANCE.

**SOFT CHECK-1: (IF RESPONDENT IS REPORTED TO HAVE INSURANCE (IV.A1a=1), BUT NO TYPE OF INSURANCE IS REPORTED (IV.A3\_1=4, IV.A4\_1=4, IV.A5\_1=4, AND IV.A6\_1=4):**

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

IF NO, (NOT COVERED), RETURN TO IV.A1A TO CORRECT THE RESPONSE, AS NEEDED. IF YES (COVERED), RETURN TO IV.A3-IV.A6 TO UPDATE TYPE OF COVERAGE.

**SOFT CHECK-3: (IF SPOUSE / PARTNER) IS REPORTED TO HAVE INSURANCE (IV.A1b=1), BUT NO TYPE OF INSURANCE IS REPORTED (IV.A3\_3=4, IV.A4\_2=4, IV.A5\_3=4, AND IV.A6\_3=4):**

**May I confirm I have correctly recorded that your (SPOUSE / PARTNER) has health insurance coverage?**

IF NO, (NOT COVERED) RETURN TO IV.A1C TO CORRECT THE RESPONSE, AS NEEDED. IF YES (COVERED), RETURN TO IV.A3- IV.A6 TO UPDATE TYPE OF COVERAGE.



YOUTH IDENTIFIED AS NOT HAVING MEDICAID: (IV.A4\_2=0, d, or r)  
 [YOUTH], [FILL STATE-SPECIFIC NAME]

**IV.A7. Is [YOUTH] covered by the Children’s Health Insurance Program, also called S-CHIP or [FILL STATE-SPECIFIC NAME]? <P1H07>**

- YES ..... 1
- NO ..... 0
- DON'T KNOW ..... d
- REFUSED ..... r

**SOFT CHECK-2: (IF YOUTH IS REPORTED TO HAVE INSURANCE (IV.A1c=1), BUT NO TYPE OF INSURANCE IS REPORTED (IV.A3\_2=4, IV.A4\_2=4, IV.A5\_2=4, IV.A6\_2=4, AND IV.A7=4):**  
**May I confirm I have correctly recorded that [YOUTH] has health insurance coverage?**  
 IF NO, (NOT COVERED) RETURN TO IV.A1B TO CORRECT THE RESPONSE, AS NEEDED. IF YES (COVERED), RETURN TO IV.A3-IV.A7 TO UPDATE TYPE OF COVERAGE.

COVERED BY PRIVATE HEALTH INSURANCE (IV.A3\_1=1, IV.A3\_2=1, OR IV.A3\_3=1)  
 POPULATE APPLICABLE TABLE ROWS BELOW WHERE: [IV.A3\_1=1, IV.A3\_2=1, OR IV.A3\_3=1] [, your (spouse / partner),] [YOUTH] [, or your (spouse / partner)'s,]

**IV.A8. Is that private insurance through an employer, a union, a family member, or do you purchase it on your own? (Source: NHIS, modified)**

INTERVIEWER: IF COVERED BY MORE THAN ONE PRIVATE INSURANCE COVERAGE, ASK ABOUT THE PRIMARY OR MAIN COVERAGE.

CODE ONE PER ROW

	THROUGH EMPLOYER	THROUGH UNION	THROUGH FAMILY MEMBER	PURCHASED ON OWN	DK	REF
a. PARENT / GUARDIAN <P1H08a>	1	2	3	4	d	r
b. YOUTH <P1H08b>	1	2	3	4	d	r
c. SPOUSE / PARTNER (IF IQ.2= 1 or 2) <P1H08c>	1	2	3	4	d	r

IF INSURANCE PURCHASED ON OWN (IV.A8a=4, IV.A8b=4, OR IV.A8c=4)
[STATE MARKETPLACE NAME]

**IV.A9.** For each person covered by private insurance, purchased on his / her own, please tell me whether the private insurance was purchased through the Affordable Care Act or a health insurance exchange, sometimes called [*state marketplace name or Healthcare.gov*, or ObamaCare? (Source: NHIS, modified)

PROGRAMMER: POPULATE APPLICABLE ROWS WHERE: IV.A8a=4, IV.A8b=4, OR IV.A8c=4.

CODE ALL THAT APPLY

- PARENT/ GUARDIAN.....1 <P1H09\_1>
- YOUTH.....2 <P1H09\_2>
- SPOUSE/ PARTNER.....3 <P1H09\_3>
- NONE PURCHASED THROUGH THE AFFORDABLE CARE ACT .....4 <P1H09\_4>
- DON'T KNOW .....d
- REFUSED .....r

ANY HH MEMBER PURCHASED THROUGH THE AFFORDABLE CARE ACT:  
(IV.A9\_1=1, OR IV.A9\_2=1, OR IV.A9\_3=1)

[IF IV.A9\_1=1 FILL "Do you", IF IV.A9\_3=1 FILL: [, does your (spouse / partner),], IF IV.A9\_2=1 FILL: [ or does (YOUTH)], LEAVE THE ("or") IN PAREN FOR INTERVIEWER TO USE, AS NEEDED.

**IV.A10. [Do you] [, does your (spouse / partner),] [or does YOUTH] receive a tax credit to help pay for the private insurance premium? (Source: NHIS, modified)**

PROGRAMMER: POPULATE RESPONSE OPTIONS FOR ALL THOSE IDENTIFIED AS PURCHASING INSURANCE THROUGH THE AFFORDABLE CARE ACT IN IV.A8.

CODE ALL THAT APPLY

- PARENT/ GUARDIAN RECEIVES TAX CREDIT..... 1 <P1H10\_1>
- (SPOUSE/ PARTNER) RECEIVES TAX CREDIT.....2 <P1H10\_2>
- [YOUTH] RECEIVES TAX CREDIT.....3 <P1H10\_3>
- NO ONE RECEIVES TAX CREDIT .....4 <P1H10\_4>
- DON'T KNOW .....d
- REFUSED .....r

HARD CHECK:

IF IV.A10=4, CANNOT SELECT IF IV.A10=1, 2, OR 3

INTERVIEWER: IF YOU HAVE RECORDED THAT SOMEONE IN THE HOUSEHOLD RECEIVES THE TAX CREDIT, YOU SHOULD NOT RECORD HERE THAT NO ONE RECEIVES THE TAX CREDIT.

SECTION IV. PART B. HOUSEHOLD BENEFITS AND INCOME

(I.CONSENT\_2 = 1) AND (I. RTYPE= 1 OR 2)  
 [CALCULATE PRIOR CALENDAR YEAR FROM CURRENT CAL YEAR]

IV.B1. These questions will ask about benefits your household may receive, as well as your household income. Do you or does anyone in your household receive ...

	CODE ONE PER ROW			
	YES	NO	DK	REF
a. Assistance from temporary assistance to needy families or [FILL STATE-SPECIFIC NAME FOR TANF]? <P1I01a>	1	0	d	r
b. Assistance from food stamps, or SNAP (the Supplemental Nutrition Assistance Program)? <P1I01b>	1	0	d	r
c. Any government housing assistance in paying rent, such as through public housing or Section 8? <P1I01c>	1	0	d	r
d. Does anyone in your household besides [YOUTH] receive any income from SSI or SSDI because of a disability? <P1I01d>	1	0	d	r
e. Does anyone in your household receive retirement income from social security? <P1I01e>	1	0	d	r
f. Does anyone in your household receive social security survivor's benefits? <P1I01f>	1	0	d	r
g. Do you or does anyone in your household receive any other benefits that we have not already accounted for in this list? <P1I01g>	1	0	d	r

IV.B1\_g=1

IV.B1f. What other benefit(s) do you, or does anyone else in this household, receive? <P1I01\_Other>

\_\_\_\_\_ (STRING 300)  
 BENEFITS(S)

DON'T KNOW .....d

REFUSED .....r

(I.CONSENT\_2 = 1) AND (I. RTYPE= 1 OR 2)

[FILL PRIOR CALENDAR YEAR]

**IV.B2. Please tell me which group best describes the total income of all persons in your household last year, including salaries or other earnings, money from public assistance, child support, or retirement, and so on, for all household members, before taxes. <P1102>**

Was your household income last year, that is, in [FILL PRIOR CALENDAR YEAR]. . .

**CODE ONE ONLY**

- Less than \$10,000, ..... 1
- \$10,000 or more, but less than \$20,000, .....2
- \$20,000 or more, but less than \$30,000, .....3
- \$30,000 or more, but less than \$40,000, .....4
- \$40,000 or more, but less than \$50,000, .....5
- \$50,000 or more, but less than \$75,000, or .....6
- \$75,000 or more?.....7
- DON'T KNOW .....d
- REFUSED .....r

I.CONSENT_2 = 1
[YOUTH]

**IV.B3. INTERVIEWER CHECK: <P1103>**

IF RESPONDENT IS CONTINUING WITH THE INTERVIEW, SELECT "1" BELOW.

IF RESPONDENT IS NOT ABLE TO CONTINUE (BREAK OFF) AND YOUTH IS AVAILABLE, SELECT "2" BELOW.

IF NEITHER RESPONDENT NOR [YOUTH] ARE ABLE TO CONTINUE NOW, SET APPOINTMENT OR STATUS AS REFUSAL, AS APPLICABLE.

**CMOTO INTERVIEWER CHECK:**

IF RESPONDENT IS CONTINUING WITH THE INTERVIEW, SELECT 'RESPONDENT ABLE TO CONTINUE' BELOW.

IF RESPONDENT IS NOT ABLE TO CONTINUE (BREAK OFF) AND YOUTH IS AVAILABLE, SELECT 'RESPONDENT BREAK OFF – CONTINUE WITH YOUTH' BELOW.

IF NEITHER RESPONDENT NOR [YOUTH] ARE ABLE TO CONTINUE NOW, SET APPOINTMENT OR STATUS AS REFUSAL, AS APPLICABLE.

- RESPONDENT ABLE TO CONTINUE ..... 1 GO TO BOX V.A
- RESPONDENT BREAK OFF – CONTINUE WITH YOUTH ..... 2 GO TO VII.A1
- RESPONDENT BREAK OFF AND YOUTH UNAVAILABLE..... 3 SET CALLBACK

		Asked of ...		
		Parent or Legal Guardian of Participating Youth (where youth resides with a parent / guardian)	Other adult (staff from group home, school) where parent /guardian granted consent to respond on his / her behalf	Consenting Parent of Independent Youth
<b>Section:</b>		I.Rtype=1 OR 2	I.ELIG_2=5 AND I.RTYPE=3	I.Rtype= 4
<b>V.</b>	<b>Parent / Guardian Expectations for Youth</b>	<b>YES</b>	<b>NO</b>	<b>YES</b>

**BOX V.A**  
 IF RESPONDENT IS PROXY FOR PARENT / GUARDIAN (I.ELIG\_2=5 AND I.RTYPE=3) THEN SKIP TO V.A8. ELSE, CONTINUE TO V.A.INTRO.

**SECTION V. PART A. PARENT EXPECTATIONS FOR YOUTH**

(I.CONSENT\_2 = 1) AND (I.RTYPE=1, 2, OR 4 OR I.RTYPE=3 AND I.ELIG\_2 NE 5)  
 [YOUTH] [HIS / HER]

**V.A.Intro.** These questions will ask about expectations you have for [YOUTH] and (his / her) future.  
 <P1J\_Intro>

CONTINUE ..... 1

(I.CONSENT\_2 = 1) AND (I.RTYPE=1, 2, OR 4 OR I.RTYPE=3 AND I.ELIG\_2 NE 5)  
 [HIS/HER], [youth] [he/she]

**V.A1.** When the following chores need doing, about how often, on [HIS/HER] own, is [YOUTH] expected to ...(NLTS2)

CODE ONE PER ROW

	Never	Sometimes	Usually	Always
a. Fix [HIS/HER] own breakfast or lunch? <P1J01a>	1	2	3	4
b. Do [HIS/HER] own laundry? <P1J01b>	1	2	3	4
c. Straighten up [HIS/HER] own room or living area? <P1J01c>	1	2	3	4
d. Buy a few things at the store [he/she] needs? <P1J01d>	1	2	3	4

(I.CONSENT_2 = 1) AND (I.RTYPE=1, 2, OR 4 OR I.RTYPE=3 AND I.ELIG_2 NE 5)
[HIS/HER], [youth] [he/she]

V.A2. When the following chores need doing, about how often, on [HIS/HER] own, does [YOUTH] ... (NLTS2)

	CODE ONE PER ROW			
	Never	Sometimes	Usually	Always
a. Fix [HIS/HER] own breakfast or lunch? <P1J02a>	1	2	3	4
b. Do [HIS/HER] own laundry? <P1J02b>	1	2	3	4
c. Straighten up [HIS/HER] own room or living area? <P1J02c>	1	2	3	4
d. Buy a few things at the store [he/she] needs? <P1J02d>	1	2	3	4

(I.CONSENT_2 = 1) AND (I.RTYPE=1, 2, OR 4 OR I.RTYPE=3 AND I.ELIG_2 NE 5)
[YOUTH], [he/she], [HIS/HER]

V.A3. After [YOUTH] is finished with all of [his/her] schooling, how important to you is it that [he/she]....  
 Would you say very important, somewhat important, not very important, or not at all important? (Erik Carter survey)  
 IF NEEDED: By “finished with (his / her) schooling, we are talking about the time when [YOUTH] will have completed all of (his / her education), not completed school for the day.

	CODE ONE PER ROW					
	VERY IMPORTANT	SOMEWHAT IMPORTANT	NOT VERY IMPORTANT	NOT AT ALL IMPORTANT	DK	REF
a. Work at a paid job? <P1J03a>	1	2	3	4	d	r
b. Live somewhere away from home? <P1J03b>	1	2	3	4	d	r
c. Is able to support [him/her]self without help from family or government benefit programs? <P1J03c>	1	2	3	4	d	r



(I.CONSENT\_2 = 1) AND (I.RTYPE=1, 2, OR 4 OR I.RTYPE=3 AND I.ELIG\_2 NE 5)

[YOUTH]

**V.A4. How far do you think [YOUTH] will get in school? Will (he / she): (NLTS2012, modified)**

<P1J04>

**PROBE: What is highest level of schooling you think [YOUTH] will complete?**

**CODE ONE ONLY**

- Not complete high school,..... 1
- Complete high school with a diploma or a certificate of completion, ..... 2
- Get a GED, or ..... 3
- Continue beyond high school (vocational training, 2-year or community college, 4 year college, graduate degree)? ..... 4
- DON'T KNOW..... d
- REFUSED..... r

(I.CONSENT\_2 = 1) AND (I.RTYPE=1, 2, OR 4 OR I.RTYPE=3 AND I.ELIG\_2 NE 5)

[YOUTH], [he/she]

**V.A5. When [YOUTH] is age 25, do you think [he/she] will be living ... (NLTS2012, modified)**

<P1J05>

PROBE: IF RESPONDS "LIVES WITH FRIENDS" CODE AS 3.

CMOTO INTERVIEWER PROBE: IF RESPONDS "LIVES WITH FRIENDS" SELECT – 'ON (HIS/HER) OWN OR WITH A SPOUSE OR PARTNER'

**CODE ONE ONLY**

- With parents or guardians, ..... 1
- With a sibling or other relative, ..... 2
- On (his/her) own or with a spouse or partner, ..... 3
- In a group home or institution, or in an ..... 4
- Other living situation? ..... 99
- DON'T KNOW..... d
- REFUSED..... r

IF OTHER SPECIFY (99): **At Age 25. [YOUTH] will be living ... (STRING 100) <P1J05Other>**

(I.CONSENT_2 = 1) AND (I.RTYPE=1, 2, OR 4 OR I.RTYPE=3 AND I.ELIG_2 NE 5)
[YOUTH], [he/she]

**V.A6. When [YOUTH] is age 25, how likely do you think it is that [he/she] will be working at a paid job? Do you think [he/ she]... (NLTS2012) <P1J06>**

**CODE ONE ONLY**

- Definitely will,..... 1
- Probably will,..... 2
- Probably won't, or ..... 3
- Definitely won't? ..... 4
- DON'T KNOW..... d
- REFUSED..... r

(I.CONSENT_2 = 1) AND (I.RTYPE=1, 2, OR 4 OR I.RTYPE=3 AND I.ELIG_2 NE 5)
[YOUTH], [he/she], [HIM/HER]

**V.A7. When [YOUTH] is age 25, how likely do you think it is that [he/she] will earn enough to support [HIM/HER]self without financial help from family or government benefit programs? Do you think [he/she] ... (NLTS2012, modified) <P1J07>**

**CODE ONE ONLY**

- Definitely will,..... 1
- Probably will,..... 2
- Probably won't, or ..... 3
- Definitely won't? ..... 4
- DON'T KNOW..... d
- REFUSED..... r

I.CONSENT\_2 = 1

[YOUTH]

**V.A8. INTERVIEWER CHECK: <P1J08>**

IF RESPONDENT IS CONTINUING WITH INTERVIEW, SELECT “1” BELOW.

IF RESPONDENT IS NOT ABLE TO CONTINUE (BREAK OFF) AND YOUTH IS AVAILABLE, SELECT “2” BELOW.

IF NEITHER RESPONDENT NOR [YOUTH] ARE ABLE TO CONTINUE NOW, SET APPOINTMENT OR STATUS AS REFUSAL, AS APPLICABLE.

**CMOTO INTERVIEWER CHECK:**

IF RESPONDENT IS CONTINUING WITH THE INTERVIEW, SELECT ‘RESPONDENT ABLE TO CONTINUE’ BELOW.

IF RESPONDENT IS NOT ABLE TO CONTINUE (BREAK OFF) AND YOUTH IS AVAILABLE, SELECT ‘RESPONDENT BREAK OFF – CONTINUE WITH YOUTH’ BELOW.

IF NEITHER RESPONDENT NOR [YOUTH] ARE ABLE TO CONTINUE NOW, SET APPOINTMENT OR STATUS AS REFUSAL, AS APPLICABLE.

RESPONDENT ABLE TO CONTINUE.....1 GO TO BOX VI.A  
RESPONDENT BREAK OFF – CONTINUE WITH YOUTH .....2 GO TO VII.A1  
RESPONDENT BREAK OFF AND YOUTH UNAVAILABLE.....3 SET CALLBACK

		Asked of ...		
		Parent or Legal Guardian of Participating Youth (where youth resides with a parent / guardian)	Other adult (staff from group home, school) where parent /guardian granted consent to respond on his / her behalf	Consenting Parent of Independent Youth
<b>Section:</b>		I.Rtype=1 OR 2	I.ELIG_2=5 AND I.RTYPE=3	I.Rtype= 4
<b>VI.</b>	<b>Demographics &amp; Contact Information</b>	<b>YES</b>	<b>SUBSECTION</b>	<b>YES</b>

**SECTION VI PART A. PARENT / GUARDIAN DEMOGRAPHIC INFORMATION.**

(I.CONSENT\_2 = 1) AND (I.RTYPE=1, 2, OR 4 OR I.RTYPE=3 AND I.ELIG\_2 NE 5)

**VI.A.Intro.** The next set of questions help us understand the experiences of different groups of people who take part in the survey. <P1K\_Intro>

CONTINUE ..... 1

(I.CONSENT\_2 = 1) AND (I.RTYPE=1, 2, OR 4 OR I.RTYPE=3 AND I.ELIG\_2 NE 5)

**VI.A1.** Do you consider yourself to be of Hispanic or Latino origin, such as Mexican, Puerto Rican, Cuban, or other Spanish background? (YTD Baseline, 53) <P1K01>

YES ..... 1  
 NO ..... 0  
 DON'T KNOW ..... d  
 REFUSED ..... r

SPOUSE OR PARTNER LIVES WITH RESPONDENT: (I.Q3=1) AND (I.CONSENT\_2 = 1) AND (I.RTYPE=1, 2, OR 4 OR I.RTYPE=3 AND I.ELIG\_2 NE 5)

[SPOUSE / PARTNER]

**VI.A1a.** Is your [spouse / partner] of Hispanic or Latino origin, such as Mexican, Puerto Rican, Cuban, or other Spanish background? (YTD Baseline, 53) <P1K01a>

YES ..... 1  
 NO ..... 0  
 DON'T KNOW ..... d  
 REFUSED ..... r

(I.CONSENT\_2 = 1) AND (I.RTYPE=1, 2, OR 4 OR I.RTYPE=3 AND I.ELIG\_2 NE 5)

VI.A2. I'm going to read a list of race categories, please choose one or more races that best describes your race. Are you . . . (YTD Baseline 54)

PROBE: Are you white Hispanic or black Hispanic?

	CODE ALL THAT APPLY
American Indian or Alaska Native .....	1 <P1K02_1>
Asian.....	2 <P1K02_2>
Black or African American .....	3 <P1K02_3>
Native Hawaiian or Other Pacific Islander .....	4 <P1K02_4>
White.....	5 <P1K02_5>
Other race .....	99 <P1K02_6>
_____ (STRING 100)	
DON'T KNOW .....	d
REFUSED .....	r

IF OTHER SPECIFY (99): Please specify race(s) ... <P1K02Other>

SPOUSE OR PARTNER LIVES WITH RESPONDENT: (I.Q3=1) AND (I.CONSENT\_2 = 1) AND (I.RTYPE=1, 2, OR 4 OR I.RTYPE=3 AND I.ELIG\_2 NE 5)

[SPOUSE / PARTNER]

VI.A3. I'm going to read a list of race categories, please choose one or more races that best describes your [SPOUSE / PARTNER]'s race. Is your [SPOUSE / PARTNER] . . . (YTD Baseline 54)

PROBE: Is your [spouse / partner] white Hispanic or black Hispanic?

	CODE ALL THAT APPLY
American Indian or Alaska Native .....	1 <P1K03_1>
Asian.....	2 <P1K03_2>
Black or African American .....	3 <P1K03_3>
Native Hawaiian or Other Pacific Islander .....	4 <P1K03_4>
White.....	5 <P1K03_5>
Other race .....	99 <P1K03_6>
_____ (STRING 100)	
DON'T KNOW .....	d
REFUSED .....	r

IF OTHER SPECIFY (99): Please specify race(s) ... <P1K03Other>

(I.CONSENT_2 = 1) AND (I.RTYPE=1, 2, OR 4 OR I.RTYPE=3 AND I.ELIG_2 NE 5)
---

IF 1.Q2=1 OR 2 THEN FILL [or does your (spouse / partner)]
--

**VI.A4. Do you [or does your (spouse / partner)] have a health problem or a disability which prevents work or which limits the kind or amount of work you can do? <P1K04>**

INTERVIEWER: IF RESPONSE IS YES FOR EITHER RESPONDENT OR SPOUSE / PARTNER (IF APPLICABLE), RECORD YES BELOW.

YES ..... 1

NO ..... 0

DON'T KNOW ..... d

REFUSED ..... r

**SECTION VI PART B. PARENT / GUARDIAN CONTACT INFORMATION**

(I.CONSENT_2 = 1) AND (I.RTYPE=1, 2, OR 4 OR I.RTYPE=3 AND I.ELIG_2 NE 5)
[YOUTH]

**VI.B.Intro.** The last set of questions will help us reach you for [YOUTH]'s second interview about three years from now. <P1L\_Intro>

CONTINUE ..... 1

(I.CONSENT_2 = 1)
[FILL HOME ADDRESS FROM CONSENTING PARENT]

**VI.B1. What is your mailing address? (NLTS2012, A9a) <P1L01>**

**CONSENTING PARENT'S HOME ADDRESS PROVIDED FROM ENROLLMENT WAS:**

[FILL HOME ADDRESS FROM CONSENTING PARENT]

INTERVIEWER: DO NOT PROVIDE ADDRESS FOR CONFIRMATION IF SPEAKING TO NON-CONSENTING PARENT

**PROBE: PROBE FOR AND RECORD BOTH P.O. BOX AND STREET ADDRESS**

**PROBE: Where do you stay most often?**

CONFIRMED ABOVE ADDRESS AS CORRECT ..... 1

USE A DIFFERENT ADDRESS ..... 2

ADDRESS ABOVE NOT CORRECT – UPDATE AS FOLLOWS..... 99

\_\_\_\_\_  
ADDRESS 1

\_\_\_\_\_  
ADDRESS 2

\_\_\_\_\_  
CITY

\_\_\_\_\_  
STATE/ TERRITORY

\_\_\_\_\_  
ZIP

DON'T KNOW ..... d

REFUSED ..... r

(I.CONSENT_2 = 1) AND (I.RTYPE=1, 2, OR 4 OR I.RTYPE=3 AND I.ELIG_2 NE 5)
---

**VI.B2. What is the best telephone number at which to reach you: (NTLS2012, A10) <P1L02>**

|\_|\_|\_|\_| - |\_|\_|\_|\_|\_| - |\_|\_|\_|\_|\_|  
(0-999) (0-999) (0-9999)

DOES NOT HAVE A TELEPHONE NUMBER ..... 0 GO TO VI.B5

DON'T KNOW ..... d GO TO VI.B5

REFUSED ..... r GO TO VI.B5

VI.B2>1

**VI.B2a. Is that a landline or cell phone? (NLTS2012, A10a) <P1L02a>**

**CODE ONE ONLY**

LANDLINE.....1  
 CELL PHONE .....2  
 DON'T KNOW .....d  
 REFUSED .....r

VI.B2>1

[FILL PHONE PROVIDED]

**VI.B3. Is there another telephone number where we can reach you, besides [FILL PHONE PROVIDED in VI.B2]? (NLTS2012, I1) <P1L03>**

YES .....1  
 NO .....0 GO TO VI.B4  
 DON'T KNOW .....d GO TO VI.B4  
 REFUSED .....r GO TO VI.B4

VI.B3=1

**VI.B3a. What is that number? (NLTS2012, I1a) <P1L03a\_Phone\_PhoneNumber>**

|\_|\_|\_|\_| - |\_|\_|\_|\_|\_| - |\_|\_|\_|\_|\_|  
 (0-999) (0-999) (0-9999)

DON'T KNOW .....d  
 REFUSED .....r

VI.B3A>1

**VI.B3b. Is that a landline or cell phone? (NLTS2012, I1b) <P1L03b>**

**CODE ONE ONLY**

LANDLINE.....1  
 CELL PHONE .....2  
 DON'T KNOW .....d  
 REFUSED .....r



ANY CELL (V1.B2A=2 OR VI.B3b=2)

**VI.B4. When we contact you for the next survey, may we send you a text message on your cell phone? Please note that standard text message rates will apply. (NLTS2012, A10b REV) <P1L04>**

- YES ..... 1
- NO ..... 0
- PHONE DOES NOT USE TEXT MESSAGE ..... 2
- DON'T KNOW ..... d
- REFUSED ..... r

(I.CONSENT\_2 = 1) AND (I.RTYPE=1, 2, OR 4 OR I.RTYPE=3 AND I.ELIG\_2 NE 5)

**VI.B5. Do you have an e-mail address where we may send you study-related information? <P1L05>**

**This may include an email to verify your contact information, an invitation to complete the survey, or a reminder about the survey.**

**CODE ONE ONLY**

- YES (SPECIFY EMAIL) ..... 99  
\_\_\_\_\_ (STRING 50)
- NO ..... 0
- DON'T KNOW ..... d
- REFUSED ..... r

IF OTHER SPECIFY (99): **What is the email you check most often? <P1L05Email>**

SOFT CHECK: EMAIL ADDRESSES MUST HAVE A VALID FORMAT. MAKE SURE THE EMAIL ADDRESS INCLUDES TEXT, THE @ SYMBOL, TEXT, A PERIOD, AND A VALID DOMAIN, SUCH AS ABCD@EFGH.COM

**SECTION VI PART C. CONTACT INFORMATION FOR SPOUSE OR PARTNER**

RESPONDENT MARRIED OR IN MARRIED-LIKE RELATIONSHIP (I.Q2=1 OR 2) AND (I.CONSENT\_2 = 1) AND (I.RTYPE=1, 2, OR 4 OR I.RTYPE=3 AND I.ELIG\_2 NE 5)

[SPOUSE / PARTNER]

**VI.C1. In case we have trouble reaching you for the next survey, it'd be helpful to be able to reach out to your [spouse / partner]. May I have your [spouse / partner]'s first and last name? <P1M01>**

\_\_\_\_\_ (STRING 20)  
FIRST NAME

\_\_\_\_\_ (STRING 30)  
LAST NAME

DON'T KNOW .....d GO TO VI.D1

REFUSED .....r GO TO VI.D1

SPOUSE / PARTNER DOES NOT LIVE IN SAME HOUSEHOLD AS RESPONDENT (1.Q3=0, D OR R) AND VI.C1 = POPULATED

[SPOUSE / PARTNER NAME IN VI.C1]

**VI.C2. What's [SPOUSE / PARTNER NAME]'s mailing address? (NLTS2012, A9a) <P1M02>**

**PROBE: PROBE FOR AND RECORD BOTH P.O. BOX AND STREET ADDRESS**

**PROBE: Where does [SPOUSE / PARTNER NAME] stay most often?**

SAME AS MINE .....1

DIFFERENT (SPECIFY) .....99

\_\_\_\_\_  
ADDRESS 1

\_\_\_\_\_  
ADDRESS 2

\_\_\_\_\_  
CITY

\_\_\_\_\_  
STATE/ TERRITORY

\_\_\_\_\_  
ZIP

DON'T KNOW .....d

REFUSED .....r

VI.C1=POPULATED
[NAME IN VI.C1] [FILL VI.B2]

**VI.C3. What's the best telephone number at which to reach [NAME IN VI.C1]? (NLTS2012, A10) <P1M03>**

SAME AS MINE [FILL VI.B2] ..... 1  
 DIFFERENT (SPECIFY) ..... 99

|\_|\_|\_|\_| - |\_|\_|\_|\_|\_| - |\_|\_|\_|\_|\_|  
 (0-999) (0-999) (0-9999)

DOES NOT HAVE A TELEPHONE NUMBER ..... 0 GO TO VI.C6  
 DON'T KNOW ..... d GO TO VI.C6  
 REFUSED ..... r GO TO V1.C6

VI.C3>1
---------

**VI.C3a. Is that a landline or cell phone? (NLTS2012, A10a) <P1M03a>**

**CODE ONE ONLY**

LANDLINE ..... 1  
 CELL PHONE ..... 2  
 DON'T KNOW ..... d  
 REFUSED ..... r

VI.C3>1
[FILL PHONE PROVIDED IN VI.B2], [NAME IN VI.C1]

**VI.C4. Is there another telephone number where we can reach [NAME IN VI.C1], besides [PHONE IN VI.C3]? (NLTS2012, I1) <P1M04>**

YES ..... 1  
 NO ..... 0 GO TO VI.C5  
 DON'T KNOW ..... d GO TO VI.C5  
 REFUSED ..... r GO TO VI.C5

VI.C4=1
---------

**VI.C4a. What is that number? (NLTS2012, I1a) <P1M04a\_Phone\_PhoneNumber>**

|\_|\_|\_|\_| - |\_|\_|\_|\_|\_| - |\_|\_|\_|\_|\_|  
 (0-999) (0-999) (0-9999)

DON'T KNOW ..... d  
 REFUSED ..... r

VI.C4a>1

**VI.C4b. Is that a landline or cell phone? (NLTS2012, I1b) <P1M04b>**

**CODE ONE ONLY**

- LANDLINE..... 1
- CELL PHONE ..... 2
- DON'T KNOW ..... d
- REFUSED ..... r

SECTION VI PART D. CONTACT INFORMATION FOR YOUTH

YOUTH DOES NOT LIVE WITH PARENT RESPONDENT (I.RTYPE = 2, 3, OR 4)
[YOUTH] [PARENT MAILING ADDRESS FROM VI.B1]

**VI.D1. Thanks so much for the information you've provided. We'd appreciate your help in making sure we have the best way to get in touch with [YOUTH], to complete [his / her] interview.**

**What is [YOUTH]'s mailing address? Is it the same as yours or does (he/she) have a different address? (NLTS2012, A9a modified) <P1N01>**

**PARENT / GUARDIAN ADDRESS:** [FILL PARENT MAILING ADDRESS FROM VI.B1]

**PROBE: PROBE FOR AND RECORD BOTH P.O. BOX AND STREET ADDRESS**

**PROBE: Where does [YOUTH] stay most often?**

SAME AS MINE ..... 1  
 DIFFERENT (SPECIFY) ..... 99

\_\_\_\_\_  
 ADDRESS 1

\_\_\_\_\_  
 ADDRESS 2

\_\_\_\_\_  
 CITY

\_\_\_\_\_  
 STATE/ TERRITORY

\_\_\_\_\_  
 ZIP

DON'T KNOW ..... d

REFUSED ..... r

I.CONSENT_2 = 1
[YOUTH], [FILL PARENT PRIMARY PHONE FROM VI.B2] [TEXT FILL FOR I.RTYPE=1]

**VI.D2. IF I.RTYPE=1 FILL: IF NEEDED: Thanks so much for the information you've provided. We'd appreciate your help in making sure we have the best way to get in touch with [YOUTH], to complete [his / her] interview.**

**ALL: What's the best telephone number at which to reach [YOUTH]? (NLTS2012, A10) <P1N02>**

**PARENT / GUARDIAN'S PHONE:** [FILL PARENT PRIMARY PHONE FROM VI.B2]

SAME AS MINE .....0

DIFFERENT (SPECIFY) .....99

|\_|\_|\_|\_| - |\_|\_|\_|\_|\_| - |\_|\_|\_|\_|\_|  
 (0-999) (0-999) (0-9999)

DOES NOT HAVE A TELEPHONE NUMBER ..... 1 GO TO VI.D4

DON'T KNOW ..... d GO TO VI.D4

REFUSED ..... r GO TO VI.D4

<p><b>BOX 7</b></p> <p><b>UPDATES TO YOUTH REVIEW_CASE SCREEN BASED ON PARENT ANSWER TO VI.D2</b></p> <p>IF VI.D2 = 0: FILL PARENT PHONE FROM VI.B2</p> <p>IF VI.D2= 99: FILL PHONE FROM VI.D2</p> <p>IF VI.D2= 1, d, OR r: FILL FROM YOUTH ENROLLMENT FILE AS USUAL</p> <p>ADDITIONALLY, IF THE YOUTH PHONE NUMBER GETS UPDATED FROM THE PARENT INTERVIEW, ADD A DYNAMIC TEXT FILL AFTER THE YOUTH PHONE ON THE REVIEW_CASE SCREEN THAT SAYS: (UPDATED YOUTH PHONE NUMBER FROM PARENT INTERVIEW).</p>
--

VI.D2>1
---------

**VI.D2a. Is that a landline or cell phone? (NLTS2012, A10a) <P1N02a>**

**CODE ONE ONLY**

LANDLINE.....1

CELL PHONE .....2

DON'T KNOW ..... d

REFUSED ..... r

VI.D2>1
[YOUTH] [FILL PHONE PROVIDED IN VI.D2]

**VI.D3. Is there another telephone number where we can reach [YOUTH], besides [PHONE IN VI.D2]? (NLTS2012, I1) <P1N03>**

YES ..... 1

NO .....0 GO TO VI.D4  
 DON'T KNOW .....d GO TO VI.D4  
 REFUSED .....r GO TO VI.D4

VI.D3=1

**VI.D3a. What's that number? (NLTS2012, I1a) <P1N03a\_Phone\_PhoneNumber>**

|\_|\_|\_|\_| - |\_|\_|\_|\_|\_| - |\_|\_|\_|\_|\_|  
 (0-999) (0-999) (0-9999)

DON'T KNOW .....d  
 REFUSED .....r

VI.D3A>1

**VI.D3b. Is that a landline or cell phone? (NLTS2012, I1b) <P1N03b>**

**CODE ONE ONLY**

LANDLINE .....1  
 CELL PHONE .....2  
 DON'T KNOW .....d  
 REFUSED .....r

I.CONSENT\_2 = 1

[YOUTH]

**VI.D4. Does [YOUTH] have an e-mail address where we may send study-related information? <P1N04>**

**CODE ONE ONLY**

YES (SPECIFY EMAIL) .....1  
 \_\_\_\_\_ (STRING 50)  
 NO .....0  
 DON'T KNOW .....d  
 REFUSED .....r

IF OTHER SPECIFY (99): **What's the email [YOUTH] checks most often? <P1N04Email>**

SOFT CHECK: EMAIL ADDRESSES MUST HAVE A VALID FORMAT. MAKE SURE THE EMAIL ADDRESS INCLUDES TEXT, THE @ SYMBOL, TEXT, A PERIOD, AND A VALID DOMAIN, SUCH AS ABCD@EFGH.COM

SECTION VI PART E. PARENT / GUARDIAN – ADDITIONAL CONTACT 1

(I.CONSENT\_2 = 1) AND (I.RTYPE=1, 2, OR 4 OR I.RTYPE=3 AND I.ELIG\_2 NE 5)

**VI.E1. To help us reach you for the next survey, it can be helpful to have contact information for someone who does not live with you, but that we could contact should we have trouble reaching you.**

**Can you please tell me the name of a friend or relative who would know how to reach you if you move or change your telephone number? <P1O01>**

**What is his or her name? (YTD Baseline, 79)**

\_\_\_\_\_ (STRING 20)  
FIRST NAME

\_\_\_\_\_ (STRING 30)  
LAST NAME

DON'T KNOW .....d GO TO  
VI.G1

REFUSED .....r GO TO  
VI.G1

VI.E1= POPULATED

[FIRST NAME CONTACT 1]

**VI.E2. How is [FIRST NAME CONTACT 1] related to you? (YTD Baseline, 82) <P1O02>**

**CODE ONE ONLY**

- SISTER ..... 1
- BROTHER.....2
- MOTHER.....3
- FATHER.....4
- AUNT.....5
- UNCLE .....6
- COUSIN .....7
- FRIEND .....8
- OTHER RELATIVE .....9
- CASE MANAGER / SOCIAL WORKER.....10
- DON'T KNOW .....d
- REFUSED .....r



VI.E1= POPULATED
[FIRST NAME CONTACT 1]

**VI.E3. What is the name of the city and state where [FIRST NAME CONTACT 1]'s lives or stays? (YTD Baseline, 80 modified) <P1O03City> ; <P1O03State>**

**PROBE:** If you don't know the city or state, that's OK. Please share as much as you can remember.

\_\_\_\_\_

CITY

\_\_\_\_\_

STATE

DON'T KNOW .....d

REFUSED .....r

VI.E1= POPULATED
[FIRST NAME CONTACT 1]

**VI.E4. What's the best telephone number to reach [FIRST NAME CONTACT 1] at? (YTD Baseline, 81 rev) <P1O04Phone\_PhoneNumber>**

INTERVIEWER: IF THE RESPONDENT CANNOT PROVIDE A PHONE NUMBER FOR THIS CONTACT, ASK IF THERE IS ANOTHER CONTACT HE/SHE COULD PROVIDE INSTEAD, AS PHONE NUMBERS ARE A CRITICAL WAY OF CONTACTING THIS PERSON IN THE FUTURE.

|\_|\_|\_|\_| - |\_|\_|\_|\_|\_| - |\_|\_|\_|\_|\_|

(0-999) (0-999) (0-9999)

DON'T KNOW .....d

REFUSED .....r

SECTION VI PART G. TRANSITION TO YOUTH INTERVIEW

I.CONSENT_2 = 1
[FILL \$30 IF DATE OF INTERVIEW IS > 10 DAYS FROM LAUNCH / FILL \$40 IF DATE OF INTERVIEW IS ≤ 10 DAYS FROM LAUNCH] [RA DATE + 5 YEARS]

<PARENT-CLOSE-1>

Thank you for the time you have spent answering these questions. We look forward to speaking with you again in [FILL MONTH AND YEAR OF RA DATE + 5 YEARS] for [YOUTH]'s second interview. As we talked about earlier, we'll send you a gift card for completing this interview. We have two choices – do you prefer a card to Target or Walmart? <P1PARENT\_CLOSE\_1>

- TARGET CARD ..... 1
- WALMART CARD ..... 2
- DON'T KNOW ..... d
- REFUSED ..... r

<CMOTO PARENT-CLOSE-1>

Thank you for the time you have spent answering these questions. We look forward to speaking with you again in [FILL MONTH AND YEAR OF RA DATE + 5 YEARS] for [YOUTH]'s second interview. As we talked about earlier, we'll give you a gift card for completing this interview. We have two choices – do you prefer a card to Target or Walmart?

- TARGET CARD ..... 1
- WALMART CARD ..... 2
- DON'T KNOW ..... d
- REFUSED ..... r

I.CONSENT_2 = 1
[YOUTH], [HIS/HER]

**VI.G1. Before we speak with [YOUTH] for [HIS/HER] interview, what assistive technologies or supports, if any, should we have available? (NLTS2012, I14)**

**IF PARENT REQUESTS PROXY FOR YOUTH: May I confirm that [YOUTH] would not be able to answer any of the questions on (his / her) own, or without support from you or another trusted adult?**

INTERVIEWER: PLEASE MAKE NOTE OF ANY ASSISTIVE TECHNOLOGIES REQUESTED IN THE CASE NOTES.

**CODE ALL THAT APPLY**

NONE: NO ASSISTIVE TECHNOLOGY .....	0	GO TO
UPDATE.KID <P1Q01_0>		
PARENT REQUESTS PROXY INTERVIEW FOR YOUTH.....	1	GO TO
VI.G2 <P1Q01_1>		
PARENT WILL ASSIST WITH STUDENT INTERVIEW .....	2	GO TO
UPDATE.KID <P1Q01_2>		
VIDEO RELAY .....	3	GO TO
UPDATE.KID <P1Q01_3>		
VOICE AMPLIFICATION .....	4	GO TO
UPDATE.KID <P1Q01_4>		
OTHER TECHNOLOGY .....	99	GO TO
UPDATE.KID <P1Q01_5>		
_____ (STRING 50)		
DON'T KNOW .....	d	
REFUSED .....	r	

IF OTHER SPECIFY (99): **Other technology needed: <P1Q01Other>**

HARD CHECK:  
 IF VI.G1=0, CANNOT SELECT VI.G1=1, 2, OR 3, 4, OR 99

INTERVIEWER: IF YOU HAVE RECORDED THAT WE SHOULD HAVE SOME KIND OF ASSISTIVE TECHNOLOGIES AVAILABLE FOR YOUTH, YOU SHOULD NOT ALSO RECORD HERE THAT THE YOUTH DOES NOT NEED ASSISTIVE TECHNOLOGY.

VI. G1 = 1
[YOUTH]

**VI. G2. Thanks for letting us know that someone else will complete the survey on [YOUTH]'s behalf. Would you please tell me (his / her) first and last name? <P1Q02>**

**This information tells us who answered the questions and will be used to send the payment after completing the interview.**

\_\_\_\_\_ (STRING 30)  
 FIRST NAME

\_\_\_\_\_ (STRING 1)  
 MIDDLE INITIAL

\_\_\_\_\_ (STRING 60)  
 LAST NAME

DON'T KNOW .....d GO TO PARENT-CLOSE-2

REFUSED .....r GO TO PARENT-CLOSE-2

VI.G2= NAME POPULATED
[YOUTH]

**VI.G3. How is this person related to [YOUTH]? (NLTS2012, J1d) <P1Q03>**

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

**CODE ONE ONLY**

- PARENT..... 1
- SIBLING ..... 2
- OTHER FAMILY MEMBER..... 3
- SOMEONE FROM [YOUTH]'S SCHOOL ..... 4
- SOMEONE FROM AN AGENCY/ SERVICE PROVIDER ..... 5
- OTHER (SPECIFY)..... 99
- <P1Q03Other>** \_\_\_\_\_ (STRING 100)
- DON'T KNOW ..... d GO TO PARENT-CLOSE-2
- REFUSED ..... r GO TO PARENT-CLOSE-2

VI.G2= NAME POPULATED
[PROXY] = NAME POPULATED FROM VI.G2

**VI. G4. What is [PROXY]'s telephone number? (YTD Baseline, 85) <P1Q04Phone\_PhoneNumber>**

|\_|\_|\_| - |\_|\_|\_| - |\_|\_|\_|\_|\_|  
 (0-999) (0-999) (0-9999)

- DON'T KNOW ..... d
- REFUSED ..... r

VI.G1 = 0, 1, 2, 3, 4, 99

**Update.Kid.** PRESS THE BUTTON IN THE BOX TO UPDATE THE YOUTH RECORD WITH INFORMATION FROM THE PARENT RECORD. <P1UpDateKid>

AFTER YOU PRESS THE BUTTON, ENTER A '1' IN THE FIELD TO MOVE ON.

UPDATE CHILD RECORD ..... 1

VI.G1 = 0, 1, 2, 3, 4, 99

[you/YOUTH/YOUTH PROXY]

**End2.** Would [you/YOUTH/YOUTH PROXY] be available to speak now? <P1End2>

BEGIN INTERVIEW, SET APPT OR STATUS CASE AS APPLICABLE.

IF YOUTH NOT AVAILABLE NOW, SELECT 3 AND CONTINUE. DO NOT SET A YOUTH APPOINTMENT IN PARENT SURVEY.

If breaking off from partial parent, fill: BRIDGE TO YOUTH SURVEY AND RECORD APPT THERE.

If transferring from complete parent interview to youth interview, fill: CONTINUE PARENT SURVEY TO END. THEN BRIDGE TO YOUTH SURVEY AND RECORD APPOINTMENT THERE.

CODE ONE ONLY

YES, CONTINUE WITH YOUTH INTERVIEW NOW ..... 1  
CALL STUDENT AT A DIFFERENT NUMBER ..... 2  
CALL STUDENT AT DIFFERENT TIME (SET CALLBACK) ..... 3  
STUDENT REFUSES AT THIS TIME..... 4

I.CONSENT_2 = 1
-----------------

[FILL \$30 IF DATE OF INTERVIEW IS > 10 DAYS FROM LAUNCH / FILL \$40 IF DATE OF INTERVIEW IS ≤ 10 DAYS FROM LAUNCH] [RA DATE + 5 YEARS] [YOUTH]
---

**<PARENT-CLOSE-2>**

**We'll send you a thank-you letter, with a [\$30 / \$40] gift card, within the next 4-6 weeks. If you have any questions, feel free to call us at 844-306-5011. <P1PARENT\_CLOSE\_2>**

CONTINUE ..... 1 GO TO VI.G5

**<CMOTO PARENT-CLOSE-2>**

**Here is your [\$30 / \$40] gift card. If you have any questions, feel free to call us at 844-306-5011.**

CONTINUE ..... 1 GO TO VI.G5

I.CONSENT\_2 = 1

ADJUST FILLS FOR YOUTH INTERVIEW BY PROXY (VI.G11=1 OR 2)  
 [YOU / YOUTH / [YOUTH PROXY]], [YOU ABOUT YOUTH/ YOUTH / [YOUTH PROXY]  
 ABOUT YOUTH], [YOU / (HE / SHE) / [YOUTH PROXY]], [continue with the next interview /  
 speak]

**VI.G5.** We've reached the end of your portion of the survey. Now we need to complete the next set of questions with [YOU ABOUT YOUTH / YOUTH / [YOUTH PROXY] ABOUT YOUTH].

Would [you / (he/she) / [YOUTH PROXY]] be available to [continue with the next interview / speak] now? <P1Q05>

- YES – ABLE TO BEGIN YOUTH INTERVIEW NOW .....1 GO TO BOX 8
- NO – NOT ABLE TO BEGIN YOUTH INTERVIEW NOW .....0 GO TO VI.G6
- DON'T KNOW .....d GO TO VI.G6
- REFUSED .....r GO TO BOX 8

VI.G5 = 1 OR R

**LoadStudent.** CLICK BUTTON BELOW TO LAUNCH THE YOUTH INTERVIEW OR SET APPOINTMENT FOR YOUTH INTERVIEW. <P1LoadStudent>

AFTER RETURNING FROM THE YOUTH INTERVIEW, ENTER A '1' IN THIS FIELD TO MOVE ON.

RETURNED FROM YOUTH INTERVIEW .....1

RETURNED FROM YOUTH INTERVIEW

**ChildComplete.** INTERVIEWER: DID THE YOUTH COMPLETE THEIR INTERVIEW?  
 <P1ChildComplete>

- YES .....1
- NO .....0

ChildComplete = 1

**UpDateParent.** INTERVIEWER: THE YOUTH HAS COMPLETED THEIR INTERVIEW. YOU NEED TO PRESS THE BUTTON IN THE BOX TO UPDATE THE PARENT RECORD. <P1UpDateParent>  
 THEN ENTER A '1' IN THIS FIELD TO MOVE ON.

YOUTH COMPLETED INTERVIEW .....1



VI.G5=0, d
FILL WITH PROXY TEXT IF VI.G1_1=1 [you / YOUTH/[YOUTH PROXY]]

**VI.G6. What's the best day and time to reach [you / YOUTH / [YOUTH PROXY]] by telephone?  
(NEW) <P1Q06Day> ; <P1Q06Time>**

\_\_\_\_\_ (STRING 20)  
DAY OF WEEK

|\_|\_| HOURS (0-12)      |\_|\_| MINUTES (0-60)

AM ..... 1  
PM ..... 2  
DON'T KNOW ..... d  
REFUSED ..... r

<p style="text-align: center;"><b>BOX 8</b></p> <p style="text-align: center;">PROCEED TO YOUTH INTERVIEW IF V1.G5=1 OR R. ELSE TERMINATE. INTERVIEWER SHOULD UPDATE YOUTH INTERVIEW NOTES, AS NEEDED FOR NEXT CONTACT.</p>
---

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**Appendix C.**  
**PROMISE 18-Month Survey Youth Questionnaire**

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## **MATHEMATICA** Policy Research

### **PROMISE 18-Month Follow-Up Survey: Youth Questionnaire**

Final: September 30, 2015

#### **Administrative Notes:**

- The surveys will be administered beginning 19 months after random assignment anniversary date (to allow for a full 18 months of exposure to services). This instrument is designed in an **interviewer-administered** format. The youth interview is designed to take approximately 25 minutes to complete, on average.
- **Consent** for participation in both interviews (parent, youth, 18-month and 5-year) was collected from parent during enrollment in PROMISE. All youth provided assent at the time of enrollment.
- **Parent modules will be completed first, followed by the youth modules.** The **target respondent** for the youth survey is the youth who is enrolled in PROMISE. Youth may complete the youth modules him or herself, or with support from a parent / guardian or other trusted adult. If a youth is not able to complete his / her interview – these modules may be completed by a proxy. If a proxy interview is conducted, no items that are subjective in nature will be included in the interview.
- Interviews will be conducted in **English or Spanish**. Formatting is used to guide interviewing staff on question administration. Text shown in **ALL CAPS** is not read aloud. Text in **underline** format is emphasized.
- **Programming logic will be used to route respondents to the next applicable item or section based on responses provided.** The **target universe** for each item (based on skip logic or other criteria, such as age), is shown in the bar located above the item number.
- Logic determining which set of respondents complete specific sections are shown in the section outline as well as in the programming specifications at the start of each section.
  - For cases where the youth lives apart from a parent or guardian (such as in a group home or institutional setting), we will interview the parent or guardian who is most knowledgeable about the youth's education and services received.
  - Youth identified as living in their own household, apart from parents or guardians, will respond to a subset of the parent modules during the youth interview. In these cases, the parent module will be completed by the parent who provided consent at enrollment.
- If a youth is found to be deceased, the case will be coded as ineligible and no further contact will be attempted for the parent or youth at this round or in the 60-month follow-up.

**Case Status Logic:**

Completed parent interviews will fall into the following completed case status based on the logic provided in the table below:

Final Status	Descriptor	Blaise Logic Informing Case Status
2010	CATI complete	(MakeDialPhone= 1 OR 2 OR 4) AND (CLOSING-2=1)
2011	CATI complete - proxy	(MakeDialPhone= 1 OR 2 OR 4) AND (PROXY: KeyItems.Respondent.PersonNum= 2) (CLOSING-2=1)
2012	CATI complete - from Field	(MakeDialPhone=5) AND (CLOSING-2=1)
2019	CATI partial	(MakeDialPhone= 1 OR 2 OR 4) AND (VII.A2_1=1 OR 2) AND (CLOSING-2=.)
2020	CAPI / Field complete	(ModeOfProcessing = Web) AND (KeyItems.Respondent.PersonNum= 1) AND (CLOSING-2=1)
2021	CAPI / Field complete - proxy	ModeOfProcessing = Web AND (KeyItems.Respondent.PersonNum= 2) AND (CLOSING-2=1)
2029	CAPI / Field partial	ModeOfProcessing = Web AND (KeyItems.Respondent.PersonNum= 2) AND (VII.A2_1=1 OR 2) AND (CLOSING-2=.)
2023	CAPI / Field complete - by phone on laptop	ModeOfProcessing = web AND FieldLoc = 2.
2050	Self-administered hardcopy complete	(MakeDialPhone= 6)

**YOUTH MODULES**

		Asked of Self-Reporting Youth (VII.A2=1 or VII.A2_1=1)	Asked of Youth's Proxy Respondent (VII.A2_1=2 or VII.A3_1=1)
VII.	Youth: Introduction	YES	YES
VIII.	Youth Education	YES	YES
IX.	Youth Employment, Credentials & Work-Based Experiences	YES	YES
X.	Youth Service Receipt in Past 18 months	YES	YES
XI.	Youth's Self-Determination and Expectations for the Future	YES	NO
XII.	Youth's Health and Well-Being	YES	YES
XIII.	Youth Demographics and Contact Information	YES	YES

**Variables from sample file used to populate logic include:**

Fill variable in questionnaire specifications	String Length (max)	Sample file variable name	Note
PROGRAM NAME	100	ProgramName	
STATE PROGRAM LOCATED IN	2	ProgramState	
PROMISE SERVICES (TREATMENT) OR USUAL SERVICES GROUP ASSIGNMENT	1	GroupAssign	Treatment = P Control = C
RA DATE	18	RADate	
RA MONTH	10	RAMonth	Separate field from RA Date
RA YEAR	4	RAYear	Separate field from RA Date
FIRST / LAST NAME OF YOUTH	20/30	YouthFirstName; YouthLastName	
YOUTH MAILING ADDRESS	20 / 10 / 15 / 2 / 9	YouthAddress1 YouthZipCode	
YOUTH PHONE		YouthPhone	
YOUTH AGE	2	DOB loaded into SampleInfo.DOB when sample is loaded. Blaise function used to calculate age from DOB and put into KeyItems.SMem.Age. KeyItems.Smem.Age updated until Rtype is answered.	Use date of birth to calculate youth age for any applicable item.
SPANISH LANGUAGE FLAG		TBD from SMS	1 = YES, 0 = NO (If either parent or youth's spoken language is Spanish, please apply this flag for the CATI load file)
COHORT NUMBER	2	TBD from SMS	01-25

**Variables that transfer from Parent to Youth Interview:**

YOUTH INSTRUMENT LOGIC WILL REQUEST FROM PARENT INTERVIEW	VARIABLE FROM PARENT INTERVIEW
Youth living Arrangements (I.R.TYPE.)	I.RTYPE = 1 = lives with consenting parent / I.RTYPE = 2 = lives with other parent or guardian I.RTYPE = 3 = group home, institution, boarding schools I.RTYPE = 4 = lives independently in own household apart from parent or guardian <b>&lt;P1_RespType&gt;</b>
Youth sex	I.Q4 = 1 = female I.Q4= 2 = male I.Q4 = d or r = unknown (populate both options for fills) <b>&lt;P1Sc_Q04&gt;</b>
NAME OF PARENT SURVEY RESPONDENT	I.Q1_first name I.Q1_middle initial I.Q1_lastname <b>&lt;P1Sc_Q01&gt;</b>
PARENT / GUARDIAN SURVEY RESPONDENT PHONE NUMBER	V1.B2 <b>&lt;P1_L02Phone_Number&gt;</b>
PARENT / GUARDIAN INTERVIEW STATUS IS COMPLETE	PARENT-CLOSE-2=1 <b>&lt;P1Parent_Close_2&gt;</b>
PARENT REQUESTS YOUTH INTERVIEW DONE BY PROXY	VI.G1=1 <b>&lt;P1Q01_0 through P1Q01Other&gt;</b>
YOUTH'S MOTHER RESPONDED TO PARENT / GUARDIAN SURVEY	I.ELIG=1, 4, OR 7 <b>&lt;P1SC_ELIG&gt;</b>
YOUTH'S FATHER RESPONDED TO PARENT / GUARDIAN SURVEY	I.ELIG=2,5, OR 8 <b>&lt;P1SC_ELIG&gt;</b>

**Variables created for survey data file:**

- **Completion of youth interview by self or proxy <Y1\_KeyI\_RType>**. The youth instrument was programmed in such a way that the interview could convert from self-report or supported interviews to a proxy report at any time, as needed. The value of this code is based on an analysis of survey paradata and variables that describe self-versus proxy report explicitly. This value is the best indicator for universes of items that were only captured via self-report.
- **Youth Living Arrangement. <Y1\_CAI\_YouthLivArr>**. This item was captured in the parent instrument, as well as in the youth instrument for field cases only. Therefore, a single, final variable was constructed that represents this field, used to determine the universe for items only asked of independent youth, identified as living on their own, apart from either parent and not in a group home or other type of facility.



**Appendix C**

**TEXT FILLS FOR SPECIFIC SITES AND STATES**

<b>Program State</b>	<b>Health Insurance Marketplace Name</b>	<b>State-Specific Name for Medicaid</b>	<b>State-Specific Name for TANF</b>	<b>State-Specific Name for American Job Center</b>	<b>State-Specific Name for S-Chip</b>	<b>Name for Case Manager</b>
AR	Federal Marketplace	Arkansas Medicaid	TANF	Workforce Center	ARKids	Connector
CA	Covered California ( <a href="http://www.coveredca.com/">http://www.coveredca.com/</a> )	Medi-Cal	CalWORKs	America's Job Center of California	Healthy Families	Career Service Coordinator (CSC)
MD	Maryland Health Connection ( <a href="http://www.marylandhealthconnection.gov/">http://www.marylandhealthconnection.gov/</a> )	HealthChoice	Temporary Cash Assistance (TCA)	One Stop Career Centers	Maryland Children's Health Program (MCHP)	Case manager and Family Employment Specialist
NY	NY State of Health ( <a href="https://nystateofhealth.ny.gov/">https://nystateofhealth.ny.gov/</a> )	Partnership for Long Term Care	Family Assistance (FA)	Career Center	Child Health Plus	Research Demonstration Site (RDS) case manager
WI	Federal Marketplace	Medicaid HMO Program	TANF	Job Center	BadgerCare Plus	Division of Vocational Rehabilitation (DVR) counselor
ASPIRE	AZ: Federal Marketplace CO: Connect for Health Colorado <a href="http://connectforhealthco.com/">http://connectforhealthco.com/</a> MT=federal marketplace, ND=federal marketplace, SD=federal marketplace, Utah=federal marketplace (individual) and Avenue H	AZ: AHCCCS (pronounced 'access') CO: Medical Assistance Program (CO) / Medicaid MT: Passport to Health / Medicaid or Passport	Arizona: Cash Assistance (CA) Colorado: Colorado Works Montana: TANF North Dakota: TANF South Dakota: TANF Utah: TANF	AZ: One Stop Center CO: Workforce Center MT: Job Service ND: Job Service SD: South Dakota Department of Labor and Regulation Local Office UT: Utah Department of Workforce Services Employment Center	AZ: KidsCare CO: Child Health Plan Plus (CHP+) MT: Healthy Montana Kids ND: Healthy Steps SD: Children's Health Insurance Program (CHIP) UT: Children's Health Insurance Program (CHIP)	Case Manager

		Asked of Self-Reporting Youth	Asked of Youth's Proxy Respondent
VII.	Youth: Introduction	x	x

**SECTION VII. PART A. YOUTH INTRODUCTION**

WEB VERSION ONLY – ALL INTERVIEWS

**FieldLoc. FIELD STAFF MEMBER: HOW ARE YOU COMPLETING THIS INTERVIEW? <Y1Sc\_FieldLoc>**

**CODE ONE ONLY**

- IN-PERSON..... 1 CONTINUE
- OVER THE PHONE ..... 2 CONTINUE (2023)
- PROGRAMMER: MISSINGS NOT ALLOWED.

ALL

[INTERVIEWER'S FULL NAME], [YOUTH FIRST AND LAST NAME] [NAME OF PARENT SURVEY RESPONDENT (I.Q1 OR I.Q2 RESPONSE POPULATED)]

**VII.A1. Hi! My name is [INTERVIEWER'S FULL NAME]. I'm calling from Mathematica Policy Research on behalf of the Social Security Administration as part of an important national study. May I please speak to [YOUTH FIRST AND LAST NAME]? <Y1\_FirstContact\_Hello> ; <Y1\_Callback\_Hello>**

**IF NEEDED: We have completed an interview with [NAME OF PARENT SURVEY RESPONDENT (I.Q1 OR I.Q2 RESPONSE POPULATED)], and we are calling to begin [YOUTH FIRST NAME]'s interview now.**

INTERVIEWER: IF SPEAKING TO YOUTH'S PROXY, SELECT "3" BELOW.

CMOTO: IF SPEAKING TO YOUTH'S PROXY, SELECT "SPEAKING TO YOUTH'S PROXY" BELOW.

**CODE ONE ONLY**

- SPEAKING TO YOUTH..... 1 CONTINUE
- YOUTH COMES TO THE PHONE..... 2 CONTINUE
- SPEAKING TO YOUTH'S PROXY ..... 3 CONTINUE
- WHAT IS CALL ABOUT ..... 4 CONTINUE
- YOUTH BUSY, UNAVAILABLE, NOT HOME ..... 5 BARRIER
- YOUTH MOVED/LIVES ELSEWHERE ..... 6 BARRIER
- YOUTH SPEAKS SPANISH [SPANISH-SPEAKING INTERVIEWER] ..... 7 CONTINUE
- YOUTH DOES NOT SPEAK ENGLISH OR SPANISH ..... 8 BARRIER
- YOUTH HAS HEALTH PROBLEM..... 9 BARRIER
- YOUTH IN INSTITUTION..... 10 UNAVAILABLE
- YOUTH DECEASED ..... 11 INELIGIBLE
- WRONG NUMBER ..... 12 BARRIER
- HUNG UP DURING INTRODUCTION ..... 13 BARRIER

ALL
[INTERVIEWER'S FULL NAME], [YOUTH FIRST AND LAST NAME] [NAME OF PARENT SURVEY RESPONDENT (I.Q1 OR I.Q2 RESPONSE POPULATED)]

**VII.A1. CMOTO:**

Hi! My name is \_\_\_\_\_. I'm here from Mathematica Policy Research on behalf of the Social Security Administration as part of an important national study. May I please speak to [YOUTH FIRST AND LAST NAME]?

**IF NEEDED:** We have completed an interview with [NAME OF PARENT SURVEY RESPONDENT (I.Q1 OR I.Q2 RESPONSE POPULATED)], and we are calling to begin [YOUTH FIRST NAME]'s interview now.

INTERVIEWER: IF SPEAKING TO YOUTH'S PROXY, SELECT "3" BELOW.

CMOTO INTERVIEWER NOTE: IF SPEAKING TO YOUTH'S PROXY, SELECT "SPEAKING TO YOUTH'S PROXY" BELOW.

**CODE ONE ONLY**

SPEAKING TO YOUTH.....	1	CONTINUE
YOUTH COMES TO THE PHONE.....	2	CONTINUE
SPEAKING TO YOUTH'S PROXY.....	3	CONTINUE
WHAT IS CALL ABOUT .....	4	CONTINUE
YOUTH BUSY, UNAVAILABLE, NOT HOME .....	5	BARRIER
YOUTH MOVED/LIVES ELSEWHERE .....	6	BARRIER
YOUTH SPEAKS SPANISH [SPANISH-SPEAKING INTERVIEWER].....	7	CONTINUE
YOUTH DOES NOT SPEAK ENGLISH OR SPANISH.....	8	BARRIER
YOUTH HAS HEALTH PROBLEM.....	9	BARRIER
YOUTH IN INSTITUTION.....	10	UNAVAILABLE
YOUTH DECEASED .....	11	INELIGIBLE
WRONG NUMBER.....	12	BARRIER
HUNG UP DURING INTRODUCTION .....	13	BARRIER

VII.A1=1-4 OR 7

[YOU / YOUTH] [PROMISE PROGRAM NAME] [FILL \$30 IF DATE OF INTERVIEW IS > 10 DAYS FROM SAMPLE RELEASE DATE, FILL \$40 IF DATE OF INTERVIEW IS ≤ 10 DAYS FROM RELEASE DATE].

**VII.A2. About a year and a half ago, [you / YOUTH] enrolled in a research study through [PROMISE PROGRAM NAME]. [You may remember completing / YOUTH completed] a form where [you / YOUTH] agreed to take part in two interviews. This is the first one. The next one will be about three years from now.**

**This interview takes about 25 minutes to complete. There are questions about [your / YOUTH'S] education, experiences with jobs, services [you / YOUTH] may have received, [your / YOUTH'S] hopes for the future, and some general information about [your / YOUTH'S] day-to-day life.**

**You will get a [\$30 / \$40] gift card for completing it. <Y1Sc\_A02>**

**IF NEEDED:**

**The questions have been worded so you can answer for yourself. If you wish, you can ask someone to stay nearby in case you need help.**

**All of your answers will be held in strict confidence.**

**Nothing you say will affect [your / (YOUTH)'s] SSI benefits now or in the future.**

**We can start now and take a break if you need one.**

- YES - CONTINUE INTERVIEW WITH YOUTH ..... 1
- YES - CONTINUE INTERVIEW WITH YOUTH'S PROXY..... 2
- NOT A GOOD TIME ..... 3      BARRIER
- REFUSED..... 4      BARRIER

VII.A2. = 1 OR 2

**VII.A2\_1.** Before we begin, I want to confirm that you read the letter that we sent you. In it there was information about how SSA can use and share the information you provide. I can read it to you now if you didn't read it in the letter. <Y1Sc\_A02\_1>

IF REQUESTED – READ TEXT BELOW:

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

**(1) To comply with Federal laws requiring the release of information from our records (e.g., to the Government Accountability Office and the Department of Veterans Affairs); and,**

**(2) To facilitate audit, investigative, or statistical research activities necessary to assure the integrity and improvement of our programs (e.g., to the Bureau of Census and to private entities under contract with us).**

**A complete list of when we may share your information with others, called routine uses, is available in our Privacy Act System of Records Notice entitled, Supplemental Security Income Studies, Surveys, Records and Extracts (Statistics), 60-0203. Additional information about this and other system of records notices and our programs are available from our Internet website at [www.socialsecurity.gov](http://www.socialsecurity.gov) or at your local Social Security office.**

ALL CONTINUE HERE:

**Do I have your permission to begin?**

CODE ONE ONLY

- |  |   |              |
|--|---|--------------|
| YES – BEGIN INTERVIEW WITH YOUTH .....         | 1 |              |
| YES – BEGIN INTERVIEW WITH YOUTH'S PROXY ..... | 2 |              |
| NOT A GOOD TIME .....                          | 3 | SET CALLBACK |
| REFUSED.....                                   | r | REFUSAL      |

VII.A2_1 = 1 OR 2
[YOUTH],

**VII.A3. Are there any kinds of supports or assistive technologies you'd like to use to complete this interview? (NLTS2012, I14 modified) <Y1Sc\_A03>**

INTERVIEWER: IF SPEAKING TO PROXY, SELECT "1" BELOW.

INTERVIEWER: PLEASE MAKE NOTE OF ANY ASSISTIVE TECHNOLOGIES REQUESTED IN THE CASE NOTES.

CMOTO: IF SPEAKING TO PROXY, SELECT "PROXY INTERVIEW FOR YOUTH" BELOW.

**CODE ONE ONLY**

- NO SUPPORT NEEDED-PROCEED ..... 0
- PROXY INTERVIEW FOR YOUTH..... 1
- PARENT / GUARDIAN WILL ASSIST WITH STUDENT INTERVIEW ..... 2
- VOICE AMPLIFICATION ..... 3
- VIDEO RELAY ..... 4
- OTHER TECHNOLOGY ..... 99
- \_\_\_\_\_ (STRING 100)
- DON'T KNOW..... D
- REFUSED..... R

IF OTHER SPECIFY (99): <b>What other type of assistive technology should we use? &lt;Y1Sc_A03Specify&gt;</b>
--

YOUTH INTERVIEW BY PROXY (VII.A2_1 =2 OR VII.A3_1=1) TEXT FILL IF SELF-REPORT [VII.A3=0,2,3,4, OR 99] [FILL \$30 IF DATE OF INTERVIEW IS > 10 DAYS FROM LAUNCH / FILL \$40 IF DATE OF INTERVIEW IS < 10 DAYS FROM LAUNCH
--

[YOUTH]
---------

**VII.A4. Thanks for agreeing to complete the survey on [YOUTH]'s behalf. Would you please tell me your first and last name? <Y1Sc\_A04>**

**IF SELF REPORT (VII.A3=0, 2, 3, 4, OR 99) AND IF NEEDED: This information tells us who answered the questions and will be used to send you the [\$30/\$40] payment after completing the interview.**

\_\_\_\_\_ (STRING 30)  
FIRST NAME

\_\_\_\_\_ (STRING 1)  
MIDDLE INITIAL

\_\_\_\_\_ (STRING 60)  
LAST NAME

- DON'T KNOW..... d      TERMINATE
- REFUSED..... r      TERMINATE

VII.A4= NAME POPULATED
[YOUTH]

**VII.A5. How are you related to [YOUTH]? (NLTS2012, J1d) <Y1Sc\_A05>**

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

**CODE ONE ONLY**

- PARENT ..... 1
- SIBLING..... 2
- OTHER FAMILY MEMBER ..... 3
- SOMEONE FROM [YOUTH]'S SCHOOL ..... 4
- SOMEONE FROM AN AGENCY/SERVICE PROVIDER..... 5
- OTHER (SPECIFY) ..... 99
- \_\_\_\_\_ (STRING 100)
- DON'T KNOW..... d      TERMINATE
- REFUSED..... r      TERMINATE

IF OTHER SPECIFY (99): <b>Relationship to youth: &lt;Y1Sc_A05Other&gt;</b>
--

<b>CMOTO INSTRUMENT: ALL YOUTH AND PROXIES: VII.A2_1 = 1 OR 2</b>
[YOUTH]

WEB VERSION ONLY – ALL INTERVIEWS I.ELIG FROM PARENT INSTRUMENT, CMOTO ONLY: HOW IS THE PARENT RESPONDENT RELATED TO [YOUTH]?

CODE ONE ONLY

MOTHER (BIOLOGICAL OR ADOPTED).....	1
FATHER (BIOLOGICAL OR ADOPTED).....	2
STEP MOTHER.....	3
STEP FATHER.....	4
LEGAL GUARDIAN - FEMALE .....	5
LEGAL GUARDIAN - MALE .....	6
FOSTER PARENT: FOSTER MOTHER .....	7
FOSTER PARENT: FOSTER FATHER .....	8
OTHER FAMILY MEMBER (PROXY FOR PARENT OR GUARDIAN) .....	9
SOMEONE FROM [YOUTH]'S SCHOOL, GROUP HOME, OR OTHER INSTITUTION .....	10
SOMEONE FROM AN AGENCY/ SERVICE PROVIDER.....	11
OTHER (SPECIFY) .....	99
DON'T KNOW.....	d
REFUSED.....	r

**CMOTO INSTRUMENT: ALL YOUTH AND PROXIES: VII.A2\_1 = 1 OR 2**

[YOUTH]

I.R TYPE FROM PARENT INSTRUMENT, CMOTO ONLY: INDICATE WHERE YOUTH LIVES OR STAYS MOST OF THE TIME.

CODE ONE ONLY

YOUTH LIVES WITH CONSENTING PARENT - [CONSENTING PARENT].....	1
YOUTH LIVES WITH OTHER PARENT OR GUARDIAN.....	2
OTHER SETTING (NOT WITH PARENT OR GUARDIAN), E.G. GROUP HOME, INSTITUTION, OR BOARDING SCHOOL.....	3
YOUTH NO LONGER LIVES WITH PARENT/ GUARDIAN (INDEPENDENT).....	4



ALL YOUTH AND PROXIES: VII.A2\_1 = 1 OR 2

[your / YOUTH] [YOUTH FIRST AND LAST NAME] TEXT FILL IF SELF-REPORT [VII.A3=0, 2, 3, 4, OR 99]  
 [FILL\$30 IF DATE OF INTERVIEW IS > 10 DAYS FROM LAUNCH / FILL \$40 IF DATE OF INTERVIEW IS <  
 10 DAYS FROM LAUNCH].

**VII.A6. May I double check the spelling of [your / (YOUTH)'s] name? <Y1Sc\_A06>**

I have [YOUTH FIRST AND LAST NAME], is that correct?

**IF SELF REPORT (VII.A3=0, 2, 3, 4, OR 99) AND IF NEEDED: This information tells us who answered the questions today. It will also be used to send you the [\$30 / \$40] after completing the interview.**

INTERVIEWER: CORRECT, AS NEEDED:

\_\_\_\_\_ (STRING 30)  
 [FIRST NAME]

\_\_\_\_\_ (STRING 1)  
 [MIDDLE INITIAL]

\_\_\_\_\_ (STRING 60)  
 [LAST NAME]

CORRECT AS SHOWN - CONTINUE ..... 1

CORRECTIONS MADE, CONTINUE..... 2

REFUSED..... r

**PROGRAMMER:**

IF UPDATE MADE AND VII.A2=1 (YOUTH RESPONDING ON HIS / HER OWN),  
 USE UPDATED FIRST NAME FOR SUBSEQUENT FILLS ON "YOUTH" (FOR  
 YOUTH'S NAME).

		Asked of Self-Reporting Youth	Asked of Youth's Proxy Respondent
VIII.	Youth Education	x	x

**SECTION VIII. PART A. YOUTH'S EDUCATIONAL STATUS AND CREDENTIALS**

ALL: VII.A2_ 1=1 OR 2
[Are you / Is (YOUTH)], [Do you / does (YOUTH)], [you/ (him/her)], [YOU/(he/she)]

**VIII.A1. The first question is about school.**

**[Are you / Is (YOUTH)] currently attending or enrolled in school? Please include middle or high school, adult basic education or GED courses, vocational or trade school. (YTD-12 I.A1) <Y1A01>**

**PROBE: (Do you /Does (YOUTH)] go to school?**

**PROBE IF SUMMER: [If you are / If (YOUTH) is] off school for the summer, will [you / (he/she)] be going back to school in the fall? INTERVIEWER: CODE "YES" IF ON SUMMER BREAK.**

- YES..... 1 GO TO VIII.A2
- NO ..... 0
- DON'T KNOW..... d
- REFUSED..... r

VIII.A1=0, d, OR r
[HAVE YOU/ HAS YOUTH], [RA MONTH] [RA YEAR], [YOU/(HE/SHE)]

**VIII.A1a. [Have you / Has (YOUTH)] gone to school at any time since [RA MONTH] of [RA YEAR]? <Y1A01a>**

**PROBE IF DON'T KNOW: When was the last time [you / (he/she)] went to school?**

- YES..... 1
- NO ..... 0 GO TO VIII.A8
- DON'T KNOW..... d GO TO VIII.A8
- REFUSED..... r GO TO VIII.A8

**SAS Variable: Ever Enrolled (VIII.A1=1 OR VIII.A1a=1) <ANY\_ENRL>**

VIII.A1=1 OR VIII.A1a=1
[IS/WAS]

**VIII.A2. What type of school [is/was] this? (YTD-12 I.B2, modified response) <Y1A02>**

**INTERVIEWER: VOCATIONAL OR TRADE PROGRAMS CAN BE OFFERED AT THE HIGH SCHOOL AND POST-SECONDARY LEVEL. PROBE TO CLARIFY WHICH CATEGORY BEST APPLIES.**

**CODE ONE ONLY**

- A REGULAR MIDDLE OR HIGH SCHOOL (INCLUDES VOCATIONAL OR TRADE, MAGNET, CHARTER, PRIVATE, OR ONLINE SCHOOLS) SERVING A VARIETY OF STUDENTS ..... 1 GO TO VIII.A4
- A SPECIAL MIDDLE OR HIGH SCHOOL THAT SERVES ONLY STUDENTS WITH DISABILITIES ..... 2 GO TO VIII.A4
- HOME SCHOOL (BY PROFESSIONAL OR PARENT) ..... 3 GO TO VIII.A4
- POSTSECONDARY: VOCATIONAL OR TRADE SCHOOL OR PROGRAMS, 2 OR 4-YEAR COLLEGE, OR UNIVERSITY ..... 4 GO TO VIII.A4
- ANOTHER TYPE OF SCHOOL (SPECIFY) ..... 99 GO TO VIII.A4
- \_\_\_\_\_ (STRING 50)
- DON'T KNOW..... d GO TO VIII.A4
- REFUSED..... r GO TO VIII.A4

IF OTHER SPECIFY (99): <b>Specify type of school: &lt;Y1A02Other&gt;</b>
--

NOT CURRENTLY ATTENDING SCHOOL, BUT ATTENDED SINCE RA DATE (VIII.A1a=1)

[YOU/HE/SHE], [ARE YOU/ IS YOUTH], [YOU/YOUTH], [YOUR/(HIS/HER)]

**VIII.A3 Why did (YOU/YOUTH) stop going to school? (YTD-12 I.C5)**

**PROBE: Why [ARE YOU/IS YOUTH] no longer taking classes at school?**

**PROBE: Did [YOU/ YOUTH] graduate or complete [YOUR/ (HIS/HER)] classes, or did [YOU/ (HE/SHE)] leave for some other reason? What was the reason?**

	<b>CODE ALL THAT APPLY</b>
GRADUATED .....	01 <Y1A03_01>
FINISHED CLASSES WANTED TO TAKE .....	02 <Y1A03_02>
TRANSPORTATION PROBLEMS .....	03 <Y1A03_03>
DIDN'T GET SERVICES NEEDED .....	04 <Y1A03_04>
TOO EXPENSIVE/ COULDN'T AFFORD IT .....	05 <Y1A03_05>
DIDN'T HAVE TIME/SCHEDULE CONFLICT/CONFLICTS WITH OTHER DEMANDS ..	06 <Y1A03_06>
POOR GRADES/NOT DOING WELL IN SCHOOL.....	07 <Y1A03_07>
DIDN'T LIKE SCHOOL.....	08 <Y1A03_08>
WANTED/NEEDED TO FIND A JOB .....	09 <Y1A03_09>
OFFERED A JOB/CHOSE TO WORK.....	10 <Y1A03_10>
WANTED TO ENTER MILITARY .....	11 <Y1A03_11>
DIDN'T GET INTO THE PROGRAM SM WANTED .....	12 <Y1A03_12>
ILLNESS/DISABILITY/TOO SICK TO GO .....	13 <Y1A03_13>
GOT MARRIED .....	14 <Y1A03_14>
GOT PREGNANT OR HAD A CHILD.....	15 <Y1A03_15>
MOVED.....	16 <Y1A03_16>
SCHOOL TOO DANGEROUS .....	17 <Y1A03_17>
WANTED TO TRAVEL .....	18 <Y1A03_18>
FRIENDS WEREN'T IN SCHOOL/FRIENDS WERE DROPPING OUT.....	19 <Y1A03_19>
COULDN'T GET ALONG WITH TEACHERS .....	20 <Y1A03_20>
COULDN'T GET ALONG WITH OTHER STUDENTS .....	21 <Y1A03_21>
COULDN'T GET CHILD CARE .....	22 <Y1A03_22>
PARENTS/FAMILY DIDN'T WANT SM TO GO .....	23 <Y1A03_23>
INELIGIBLE DUE TO AGE.....	24 <Y1A03_24>
CLASSES ENDED/PROGRAM ENDED .....	25 <Y1A03_25>
EXPELLED .....	26 <Y1A03_26>
GENERAL DISCIPLINARY PROBLEMS .....	27 <Y1A03_27>
CHANGED SCHOOL/PROGRAM.....	28 <Y1A03_28>
GOT ARRESTED .....	29 <Y1A03_29>
OTHER (SPECIFY) .....	99 <Y1A03_30>
	(STRING 100)
DON'T KNOW.....	d
REFUSED.....	r

IF OTHER SPECIFY (99): **What other reason? <Y1A03Other>**

EVER ENROLLED IN SCHOOL SINCE RA: VIII.A1=1 OR VIII.A1a=1
[You/ (YOUTH)] [RA MONTH] [RA YEAR]

**VIII.A4. Since [RA MONTH] of [RA YEAR], did [you/ (YOUTH)] get promoted or move on to a higher grade in school? (NEW) <Y1A04>**

- YES..... 1
- NO ..... 0
- DON'T KNOW..... d
- REFUSED..... r

EVER ENROLLED IN SCHOOL SINCE RA: VIII.A1=1 OR VIII.A1a=1
[RA MONTH] [RA YEAR] [YOU/ [YOUTH]

**VIII.A5. Since [RA MONTH] of [RA YEAR], did [YOU/YOUTH] repeat any grade? (NEW) <Y1A05>**

- YES..... 1
- NO ..... 0
- DON'T KNOW..... d
- REFUSED..... r

EVER ENROLLED IN SCHOOL SINCE RA: VIII.A1=1 OR VIII.A1a=1
[YOU/ [YOUTH], [RA MONTH] [RA YEAR]

**VIII.A6. Since [RA MONTH] of [RA YEAR], did [you /YOUTH] repeat any classes that [you / YOUTH] had failed? (NEW) <Y1A06>**

- YES..... 1
- NO ..... 0 GO TO VIII.A7
- DON'T KNOW..... d GO TO VIII.A7
- REFUSED..... r GO TO VIII.A7

VIII.A6=1
[YOU/ [YOUTH]], [RA MONTH] [RA YEAR]

**VIII.A6a. Since [RA MONTH] of [RA YEAR], how many classes did [YOU/YOUTH] have to repeat because [you / YOUTH] received a failing grade? (NEW) <Y1A06a>**

- |\_|\_|\_| CLASSES  
(01-100)
- DON'T KNOW..... d
- REFUSED..... r

EVER ENROLLED IN SCHOOL SINCE RA: VIII.A1=1 OR VIII.A1a=1
[RA MONTH] [RA YEAR] [Have you / Has YOUTH]

**VIII.A7. Since [RA MONTH] of [RA YEAR] [have you /has YOUTH] been suspended or expelled from school? (NEW) <Y1A07>**

INTERVIEWER: IF INTERVIEW IS BEING CONDUCTED IN SUMMER, ASK YOUTH / PROXY TO REFER TO THE MOST RECENT ACADEMIC YEAR.

- YES..... 1
- NO ..... 0
- DON'T KNOW..... d
- REFUSED..... r

NOT IN SCHOOL NOW (VIII.D8A: VIII.A1= 0, d, r) OR WAS ENROLLED IN PSE, TRADE SCHOOL, OR OTHER TYPE OF SCHOOL SINCE RA (VIII.A2= 4, 99, d, r)
VIII.D8B: ALL ROWS WHERE VIII.D8A=1
[DO YOU/ Does (YOUTH)], [DO YOU/ DOES (HE/SHE)]

**VIII.A8A. [DO YOU/ Does (YOUTH)] have a ... (YTD-12 I.D2)**

**VIII.A8B. FOR EACH ROW, IF D8A=1, ASK: DID [YOU/ YOUTH] earn this after [RA MONTH] of [RA YEAR]? (NEW)**

	VIII.A8A.				IF VIII.A8A_a=1, ASK A8B_a. IF VIII.A8A_b=1, ASK A8B_b. IF VIII.A8A_c=1, ASK A8B_c. (CODE ONE PER ROW)			
	YES	NO	REF	DK	YES	NO	REF	DK
<b>a. High school diploma?</b> <Y1A08a_a> ; <Y1A08b_a>	1	0	r	d	1	0	r	d
<b>b. Certificate of completion?</b> <Y1A08a_b> ; <Y1A08b_b>	1	0	r	d	1	0	r	d
<b>c. GED (also known as a general equivalency degree or general education degree)?</b> <Y1A08a_c> ; <Y1A08b_c>	1	0	r	d	1	0	r	d

ALL: VII.A2\_1 =1 OR 2

[YOU HAVE/ YOUTH HAS]

**VIII.A9. What is the highest grade or year of school that [YOU HAVE/YOUTH HAS] finished? (YTD-12 I.D1)  
<Y1A09>**

**CODE ONE ONLY**

5TH GRADE OR LESS .....	1
6TH GRADE .....	2
7TH GRADE .....	3
8TH GRADE .....	4
9TH GRADE/FRESHMAN IN HS .....	5
10TH GRADE/SOPHOMORE IN HS.....	6
11TH GRADE/JUNIOR IN HS .....	7
12TH GRADE/SENIOR IN HS.....	8
SOME COLLEGE OR TECHNICAL SCHOOL .....	9
COMPLETED 2-YEAR COLLEGE/TECHNICAL SCHOOL .....	10
COMPLETED 4-YEAR COLLEGE/TECHNICAL SCHOOL .....	11
UNGRADED SCHOOL/PROGRAM .....	12
HOME SCHOOLED.....	13
OTHER (SPECIFY) .....	99
_____ (STRING 50)	
DON'T KNOW.....	d
REFUSED.....	r

IF OTHER SPECIFY (99): **Other grade or year of school.** <Y1A09Other>

**SECTION VIII. PART B. YOUTH'S EDUCATIONAL ACCOMMODATIONS**

VIII.B1A-E: ALL YOUTH AND PROXIES (VII.A2\_1 =1 OR 2)  
 VIII.B2A-D: ALL ROWS WHERE VIII.B1=0

[YOU HAVE/ [YOUTH] HAS], [RA MONTH] [RA YEAR], [HAVE YOU/ HAS [YOUTH]], [YOU/HE/SHE],  
 [YOU/YOUTH], [YOU/HIM/HER], [YOU/HIS/HER]

**VIII.B1. Next, I am going to read a list of services, accommodations or help that some people get at school. Please tell me whether or not (YOU HAVE/ YOUTH HAS) received any of these since [RA MONTH] of [RA YEAR]. (YTD-12 I.E1)**

**VIII.B2. IF VIII.B1=0, THEN ASK: Did (you/YOUTH) need...**

	RECEIVED VIII.B1 (Code one per row)				NEEDED IF VIII.B1_a=0 ASK VIII.B2_a IF VIII.B1_b=0 ASK VIII.B2_b IF VIII.B1_c=0 ASK VIII.B2_c IF VIII.B1_d=0 ASK VIII.B2_d (CODE ONE PER ROW)			
	YES	NO	DK	REF	YES	NO	DK	REF
a. <b>Any accommodations in how [you take/ (he/she) takes] tests, like more time to take tests, or a different setting to take tests? &lt;Y1B01a&gt; ; &lt;Y1B02a&gt;</b>	1	0	d	r	1	0	d	r
b. <b>Did (you/YOUTH) <u>need</u> any accommodations in how [you handle/(he/she) handles] class assignments, like having more time to finish assignments or getting different assignments? &lt;Y1B01b&gt; ; &lt;Y1B02b&gt;</b>	1	0	d	r	1	0	d	r
c. <b>Any <u>person assigned to help</u> [you/YOUTH], like a tutor, an interpreter, or someone who takes notes for [you/ (him/her)] in class? This can also include an aide or staff person who comes to class with [you / YOUTH] to help provide any other support needed in the classroom. &lt;Y1B01c&gt; ; &lt;Y1B02c&gt;</b>	1	0	d	r	1	0	d	r
d. <b>Any <u>adaptations to [your/ (his/her)] classrooms</u>, like a special desk for [you/ (him/her)] or different equipment because of a disability? &lt;Y1B01d&gt; ; &lt;Y1B02d&gt;</b>	1	0	d	r	1	0	d	r
e. ADAPTATIONS TO YOUR BOOKS OR OTHER MATERIALS, SUCH AS BOOKS WITH LARGER FONTS OR BIGGER PRINT?*	1	0	d	r				
f. <b>Any <u>other</u> accommodations at school during the last year? &lt;Y1B01f&gt; (SPECIFY)_____ (STRING 100)</b>	1	0	d	r				

IF OTHER SPECIFY: Other accommodations at school during the last year: <Y1B01f\_Other>



\*NOTE: Item VIII.B1.e was added as a result of open-ended coding of responses provided in item VIII.B1.f. As such, usefulness of this accommodation was not captured during the interview. ALL: VII.A2\_1 =1 OR 2

[YOU/ YOUTH]

**VIII.B3. Were there any other accommodations [you/YOUTH] needed that [you/ (he/she)] did not receive?**

**CODE ALL THAT APPLY**

- ACCOMMODATIONS IN TEST TAKING (MORE TIME, DIFF SETTINGS) ..... 1 <Y1B03\_01>
- ACCOMMODATIONS IN ASSIGNMENTS (LENGTH, TYPE) ..... 2 <Y1B03\_02>
- PERSON ASSIGNED TO HELP (1:1 SUPPORT)..... 3 <Y1B03\_03>
- PHYSICAL MODIFICATIONS TO CLASSROOM ..... 4 <Y1B03\_04>
- ADAPTATIONS TO BOOKS OR OTHER MATERIALS (LARGER FONT, BIGGER PRINT) ..... 5 <Y1B03\_05>
- COMPUTER, I-PAD, TABLET, OR OTHER ASSISTIVE TECHNOLOGY ..... 6 <Y1B03\_06>
- OTHER ACCOMMODATIONS - SPECIFY ..... 99 <Y1B03\_99>
- \_\_\_\_\_ (STRING 200)
- NO ..... 0
- DON'T KNOW..... d
- REFUSED..... r

IF OTHER SPECIFY (99): **What type of accommodation(s) were needed but not received?**  
<Y1B03\_Other>

**SECTION VIII. PART C. YOUTH'S TRAINING**

ALL: VII.A2\_1 =1 OR 2

[YOU/ YOUTH], [RA MONTH] [RA YEAR], [YOU/HE/SHE]

**VIII.C1. Since [RA MONTH] of [RA YEAR] did [you/YOUTH] attend a training program or take any classes outside of school to help [you/YOUTH] learn job skills or get a job? <Y1C01>**

**IF DON'T KNOW: When was the last time (you/he/she) went to training outside of the school?**  
**INTERVIEWER: IF RESPONSE TO PROBE IS SINCE RA DATE, CODE "YES" ('1') BELOW.**

CMOTO INTERVIEWER: IF RESPONSE TO PROBE IS SINCE RA DATE, CODE "YES" BELOW.

- YES..... 1
- NO ..... 0 GO TO IX.INTRO
- DON'T KNOW..... d GO TO IX.INTRO
- REFUSED..... r GO TO IX.INTRO

UNDERTOOK TRAINING SINCE RA DATE: VIII.C1=1
[ARE YOU/ IS YOUTH] [YOU / YOUTH]

**VIII.C2. [Are you /Is (YOUTH)] currently in a training program or taking classes outside of school to help [you/ (YOUTH)] learn job skills or get a job? (YTD-12 I.A1a) <Y1C02>**

- YES..... 1
- NO ..... 0
- DON'T KNOW..... d
- REFUSED..... r

UNDERTOOK TRAINING SINCE RA DATE: (VIII.C1=1)
---

**VIII.C3. What type of training (is/was) this? (Modified YTD-12 I.B2)**

**CODE ALL THAT APPLY**

- VOCATIONAL, TECHNICAL, BUSINESS, OR TRADE SCHOOL..... 1 <Y1C03\_1>
- LIFE SKILLS TRAINING ..... 2 <Y1C03\_2>
- JOB SKILLS TRAINING ..... 3 <Y1C03\_3>
- LEADERSHIP SKILLS / SELF-DETERMINATION SKILLS TRAINING ..... 4 <Y1C03\_4>
- PROMISE TRAINING PROGRAM ..... 5 <Y1C03\_5>
- OTHER (SPECIFY)..... 99 <Y1C03\_6>
- \_\_\_\_\_ (STRING 150)
- DON'T KNOW ..... d
- REFUSED ..... r

IF OTHER SPECIFY (99): <b>What type of training (is/was) this? &lt;Y1C03Other&gt;</b>
---

UNDERTOOK TRAINING SINCE RA DATE: (VIII.C1 = 1)
[RA MONTH] [RA YEAR], [you / (YOUTH)]

**VIII.C4. Since [RA MONTH] of [RA YEAR], did [you/ (YOUTH)] receive a training diploma, certificate, or license? (NEW) <Y1C04>**

- YES..... 1
- NO ..... 0
- DON'T KNOW..... d
- REFUSED..... r

		Asked of Self-Reporting Youth	Asked of Youth's Proxy Respondent
IX.	Youth Employment, Credentials & Work-Based Experiences	x	x

**SECTION IX. PART A. YOUTH EMPLOYMENT**

ALL YOUTH AND PROXIES (VII.A2_1 =1 OR 2)
[you have /(YOUTH) has], [RA MONTH] [RA YEAR], [you /(YOUTH)], [MONTH AND YEAR OF RA] [you are / YOUTH is]

**IX.Intro.** Next I'll ask questions about jobs that [you have / (YOUTH) has] had since [RA MONTH] of [RA YEAR]. This includes any job or jobs [you /(YOUTH)] may have now, as well as jobs that ended after [MONTH AND YEAR OF RA]. <Y1D\_Intro>

When we talk about employment, please include paid or unpaid jobs, but not chores around the house – even if [you are / (YOUTH) is] paid to do them.

CONTINUE ..... 1

ALL YOUTH AND PROXIES (VII.A2_1 =1 OR 2)
[HAVE YOU/HAS YOUTH], [RA MONTH] [RA YEAR], [YOU/YOUTH], [YOU (ARE OR WERE) / YOUTH (IS OR WAS)], [YOU ARE/ YOUTH IS], [YOU / YOUTH] [YOUR/(HIS/HER)], [YOU/(HE/SHE)], [YOU GET/YOUTH GETS]

**IX.A1.** [Have you / Has (YOUTH)] worked at a job or a business at any time since [RA MONTH] of [RA YEAR]? Please include all jobs since [RA MONTH] of [RA YEAR], even if [you/ (YOUTH)] only worked for a short time. Please include jobs at which [you (are or were) / (YOUTH) (is or was)] self-employed. <Y1D01>

A job is work, either paid or unpaid, other than chores around the house. A job could be a school-sponsored job or a work study job. Jobs include internships, apprenticeships and volunteer work even if [(you/ (YOUTH)] didn't get paid. A job could be working for a business or organization or work that [you/ (he/she)] do on [your / (his/ her)] own such as babysitting or dog walking, that [you get/ (YOUTH) gets] paid to do.

**IF NEEDED:** Self-employed means that you work for yourself or own your own business.

- YES..... 1
- NO ..... 0 GO TO IX.A21
- DON'T KNOW..... d GO TO IX.A21
- REFUSED..... r GO TO IX.A21

<b>SOFT CHECK:</b> IX.A1=0: <b>May I confirm I have correctly recorded that [(you have / (YOUTH has)] not done any work since [RA MONTH] of [RA YEAR], paid or unpaid, even volunteer or community service work?</b>
--

IX.A1=1
[WERE YOU/ WAS YOUTH], [YOU/(HE/SHE)]

**IX.A2. [Were you / Was (YOUTH)] paid or did [you / (he/she)] receive income through self-employment in any of these jobs? (NEW) <Y1D02>**

**PROBE: Self-employed means that you work for yourself/ or own your own business.**

- YES..... 1
- NO ..... 0
- DON'T KNOW..... d
- REFUSED..... r

IX.A1=1
[HAVE YOU/HAS YOUTH], [CALCULATE AND FILL MONTH AND YEAR ONE YEAR PRIOR]. [RA MONTH] [RA YEAR], [YOU DO/ YOUTH DOES], [YOU ARE/YOUTH IS] [MONTH AND YEAR ONE YEAR AGO], [YOUR/(HIS/HER)], [YOU GET/YOUTH GETS]

**IX.A3. Now let's talk about jobs [you have / YOUTH has] had within the past 12 months – that is since [CALCULATE AND FILL MONTH AND YEAR ONE YEAR PRIOR]. This includes any job or jobs [you/YOUTH] may currently have as well as jobs that have ended in the past year.**

**[HAVE YOU/HAS YOUTH] worked at a job or a business at any time in the past year? (YTD36M-II.A1) <Y1D03>**

**IF NEEDED:** Please include all jobs within the past 12 months, even if [you/YOUTH] only worked for a short time. Include paid or unpaid jobs, but not chores around the house, even if [you are / YOUTH is] paid to do them.

**IF NEEDED:** A job could be a school-sponsored job or a work study job. Jobs include internships, apprenticeships and volunteer work even if (YOU/YOUTH) didn't get paid. A job could be working for a business or organization or work (you do / YOUTH does) on [(your / (his/her))] own, such as babysitting or dog walking, that (YOU GET/ YOUTH GETS) paid to do.

**IF NEEDED:** Self-employed means that you work for yourself/ or own your own business.

- YES..... 1
- NO ..... 0 GO TO IX.A21
- DON'T KNOW..... d GO TO IX.A21
- REFUSED..... r GO TO IX.A21

<b>SOFT CHECK, IF IX.A3=0: May I confirm I have recorded this correctly, that (you have / YOUTH has) done <u>no</u> work in the past year, paid or unpaid, even volunteer or community service work?</b>
--

IX.A3=1

[HAVE YOU/ HAS YOUTH], (YOU/ YOUTH), (HAVE/HAS), [YOU (are or were)/ YOUTH (is or was)], [MONTH AND YEAR ONE YEAR AGO]

**IX.A4. How many jobs [have you /has (YOUTH)] had within the past year?**

**Please include jobs that [you/(YOUTH)] currently [have/ has] as well as jobs that ended within the past year. Please include jobs at which [you (are or were)/ (YOUTH) (is or was)] self-employed. Do not include chores around the house, even if (you are/(YOUTH) is) paid to do them. (YTD36M-II.A1\_num) <Y1D04>**

INTERVIEWER: JOBS SUCH AS YARD WORK OR BABYSITTING COUNT AS ONE 'JOB' EACH (SELF EMPLOYED AS A . . . ). PROBE TO CONFIRM THESE ARE NOT COUNTED IN TERMS OF THE NUMBER OF TIMES SUCH A JOB WAS PERFORMED IN THE PAST YEAR.

|\_|\_| JOBS  
(01-99)

DON'T KNOW..... d

REFUSED..... r

**SOFT CHECK: May I confirm I have recorded that (You have/ YOUTH has) had [FILL IX.A4] jobs in the past year?**

**BOX 9**

IF WORKED IN PAST YEAR (IXA3=1) and NUMBER OF JOBS (IX.A4) = DK or R,  
TREAT AS 1 JOB.

IF WORKED IN PAST YEAR IXA3 = D or R and NUMBER OF JOBS IX.A4= D or R,  
GO TO IX.A21.

(IX.A5 thru IX.A19 ASKED FOR EACH JOB AT IX.A4 – UP TO 10 JOBS.

YOUTH HAS OR HAD >1 JOB: IX.A3a>1
[YOU HAVE/ YOUTH HAS], [YOUR/HIS/HER], [YOU/YOUTH], [WORK/WORKS], [YOU ARE/HE IS/ SHE IS] [MONTH AND YEAR ONE YEAR AGO]

**IX.A5. IF IX.A4 = 1, (ONE JOB), FILL:** Now, I would like to get more information about this job. What is the name of the place [YOU/YOUTH] currently [work/works] at or worked at most recently? (YTD36M-II.A2)

**IF IX.A4 > 1, FIRST JOB, FILL:** Now, I would like to get more information about each job [YOU HAVE/YOUTH HAS] had in the past year. I'd like to start with [YOUR/ (HIS/HER)] most recent job and work backwards. What is the name of the place [YOU/YOUTH] currently [work/works] at or worked at most recently? Please include jobs at which [YOU ARE/ (HE IS/SHE IS)] self-employed.]

**IF IX.A4 > 1, AND LOOPING TO NEXT JOB FILL:** Now, I'd like to get more information about each of the other jobs [you have/YOUTH has] had in the past year. What is the name of the next place [you have/he has/she has] worked at since [MONTH AND YEAR ONE YEAR AGO]?

**PROBE:** Please include jobs at which [you were/YOUTH was] self-employed.

**INTERVIEWER:** RECORD ANY JOBS THAT WERE SELF EMPLOYMENT AS "SELF EMPLOYED: \_\_\_(FILL THE TYPE OF WORK)." FOR EXAMPLE: SELF-EMPLOYED: BABYSITTER OR SELF-EMPLOYED: LAWN MOWING.

IF RESPONDENT CANNOT REMEMBER THE NAME OF THE JOB, PLEASE PROVIDE SOME KIND OF DESCRIPTION/IDENTIFICATION OF JOB IN THE NAME OF PLACE BOX. FOR EXAMPLE: PIZZA PLACE; THE OFFICE BUILDING; THE BOOK STORE.

THIS KEEPS EACH SET OF EMPLOYMENT EXPERIENCES SEPARATE IN FOLLOW UP QUESTIONS.

	NAME OF PLACE WORKED (1-10)	Self employed?	DK	REF
a.	_____ Name of place worked – 1 (STRING 150) <Y1D05_01> ; <Y1D05SelfEmp_01>	99	d	r
b.	_____ Name of place worked – 2 (STRING 150) <Y1D05_02> ; <Y1D05SelfEmp_02>	99	d	r
c.	_____ Name of place worked – 3 (STRING 150) <Y1D05_03> ; <Y1D05SelfEmp_03>	99	d	r
d.	_____ Name of place worked – 4 (STRING 150) <Y1D05_04> ; <Y1D05SelfEmp_04>	99	d	r
e.	_____ Name of place worked – 5 (STRING 150) <Y1D05_05> ; <Y1D05SelfEmp_05>	99	d	r
f.	_____ Name of place worked – 6 (STRING 150) <Y1D05_06> ; <Y1D05SelfEmp_06>	99	d	r
g.	_____ Name of place worked – 7 (STRING 150) <Y1D05_07> ; <Y1D05SelfEmp_07>	99	d	r
h.	_____ Name of place worked – 8 (STRING 150) <Y1D05_08> ; <Y1D05SelfEmp_08>	99	d	r
i.	_____ Name of place worked – 9 (STRING 150) <Y1D05_09> ; <Y1D05SelfEmp_09>	99	d	r
j.	_____ Name of place worked – 10 (STRING 150) <Y1D05_10> ; <Y1D05SelfEmp_10>	99	d	r

**Appendix C**

For each job the youth lists in IX.A5 (Y1D05\_01 through Y1D05\_10 in SAS), the youth will go through the subsequent job loop (IX.A6 to IX.A18) to answer questions about that specific job. Since each youth can list up to 10 jobs, they can go through the job loop a total of 10 times. As shown in the table below, the SAS variable names are adjusted to reflect which job loop the youth's answers correspond to.

Question from Instrument	SAS Variable Name – Reflects job loop (_01; _02, _03; up to 10)			Job Loop Series (up to 10)		
IX.A6	Y1D06_01	Y1D06_02	Y1D06_03	1	2	3
IX.A7	Y1D07_01	Y1D07_02	Y1D07_03	1	2	3
	Y1D07Code_01	Y1D07Code_02	Y1D07Code_03	1	2	3
	Y1D07Other_01	Y1D07Other_02	Y1D07Other_03	1	2	3
IX.A8	Y1D08_01	Y1D08_02	Y1D08_03	1	2	3
	Y1D08Month_01	Y1D08Month_02	Y1D08Month_03	1	2	3
	Y1D08Year_01	Y1D08Year_02	Y1D08Year_03	1	2	3
IX.A9	Y1D09_01	Y1D09_02	Y1D09_03	1	2	3
	Y1D09Other_01	Y1D09Other_02	Y1D09Other_03	1	2	3
IX.A10	Y1D10_01	Y1D10_02	Y1D10_03	1	2	3
	Y1D10Probe_01	Y1D10Probe_02	Y1D10Probe_03	1	2	3
IX.A11	Y1D11_01	Y1D11_02	Y1D11_03	1	2	3
	Y1D11Other_01	Y1D11Other_02	Y1D11Other_03	1	2	3
IX.A12	Y1D12AmtThing_01	Y1D12AmtThing_02	Y1D12AmtThing_03	1	2	3
	Y1D12HrsThing_01	Y1D12HrsThing_02	Y1D12HrsThing_03	1	2	3
	Y1D12Amt_01	Y1D12Amt_02	Y1D12Amt_03	1	2	3
	Y1D12Unit_01	Y1D12Unit_02	Y1D12Unit_03	1	2	3
	Y1D12Other_01	Y1D12Other_02	Y1D12Other_03	1	2	3
IX.A12a	Y1D12Tax_01	Y1D12Tax_02	Y1D12Tax_03	1	2	3
IX.A13	Y1D13a_01	Y1D13a_02	Y1D13a_03	1	2	3
	Y1D13b_01	Y1D13b_02	Y1D13b_03	1	2	3
	Y1D13c_01	Y1D13c_02	Y1D13c_03	1	2	3
IX.A14	Y1D14_01	Y1D14_02	Y1D14_03	1	2	3
IX.A15	Y1D15_01	Y1D15_02	Y1D15_03	1	2	3
IX.A16	Y1D16_01	Y1D16_02	Y1D16_03	1	2	3
	Y1D16Month_01	Y1D16Month_02	Y1D16Month_03	1	2	3
	Y1D16Year_01	Y1D16Year_02	Y1D16Year_03	1	2	3
IX.A16a	Y1D16A_Amt_01	Y1D16A_Amt_02	Y1D16A_Amt_03	1	2	3
	Y1D16A_Unit_01	Y1D16A_Unit_02	Y1D16A_Unit_03	1	2	3
IX.A16b	Y1D16B_01	Y1D16B_02	Y1D16B_03	1	2	3
	Y1D17_01	Y1D17_02	Y1D17_03	1	2	3
IX.A17	Y1D17Other_01	Y1D17Other_02	Y1D17Other_03	1	2	3
IX.A18	Y1D18_01	Y1D18_02	Y1D18_03	1	2	3

**Appendix C**

**PROGRAMMER:** USE "NAME OR PLACE" PROVIDED IN IX.A5a-j, AS FILL, WHERE APPLICABLE, FOR ITEMS IX.A6-IX.A18.

	<b>JOB 1 CURRENT OR MOST RECENT JOB</b>	<b>JOB(S) 2-10 NEXT MOST RECENT JOB(S)</b>
IX.A4=01-99		
[DO YOU/DOES (YOUTH)] IF JOBS 2-10, FILL [NOW I'D LIKE TO GET MORE INFORMATION ABOUT THE NEXT JOB.]	(NAME OR PLACE) FILLED FROM RESPONSE TO IX.A5a	(NAME OR PLACE) FILLED FROM RESPONSE TO IX.A5b – IXA5j, AS APPLICABLE.
<b>IX.A6.[Now I'd like to get more information about the next job.]</b> <b>[Do you/Does (YOUTH)] currently work at (NAME OR PLACE)? (YTD36M-II.B1)</b> <b>&lt;Y1D06_01&gt; to</b> <b>&lt;Y1D06_10&gt;</b>  IF SELF-EMPLOYED: (Do you/Does YOUTH) still do this (NAME OR PLACE) job?	YES..... 1 NO..... 0 DON'T KNOW..... d REFUSED..... r	YES.....1 NO .....0 DON'T KNOW.....d REFUSED.....r
IX.A4=01-99		
IF IX.A6 = 1, APPLY PRESENT TENSE FILLS. IF IX.A6= 0 APPLY PAST TENSE FILLS. IF IX.A6= d or r, present both options in the parenthesis. [YOUR/ (HIS/HER)], [HAVE YOU/ HAS (HE/SHE)], [(YOU/ (HE/SHE)], [(YOU/ (HE/SHE)]	(NAME OR PLACE) FILLED FROM RESPONSE TO IX.A5a	(NAME OR PLACE) FILLED FROM RESPONSE TO IX.A5b – IXA5j, AS APPLICABLE.



	<b>JOB 1</b> <b>CURRENT OR MOST RECENT JOB</b>	<b>JOB(S) 2-10</b> <b>NEXT MOST RECENT JOB(S)</b>
<p><b>IX.A7. What (do/does/did) (you/he/she) do at (NAME OR PLACE)? (YTD36M-II.B3)</b></p> <p>&lt;Y1D07_01&gt; to &lt;Y1D07_10&gt;</p> <p><b>PROBE:</b> What (are/were) [your/ (his/her)] responsibilities?</p> <p><b>PROBE:</b> What kinds of things [have you/ has (he/she)] done there?</p> <p><b>PROBE:</b> Tell me what [(you/ (he/she)) (do/did) when [you/ (he/she)] (get/got) to work? After that? Then what?</p> <p><b>IF SELF-EMPLOYED, ASK:</b> What [(do/did) (you/he/she)] do as a (NAME OR PLACE)?</p>	<p><b>RECORD VERBATIM AND CODE:</b>                      &lt;Y1D07Code_01&gt;</p> <hr/> <p>ASSEMBLY WORK (SORTING STUFFING) ..... 1                      ANIMAL CARE (DOG WALKING, VETERINARY HELPER).....2                      CAMP COUNSELOR.....3                      CASHIER—GROCERY STORE, FAST FOOD PLACE, ETC.....4                      CHILD CARE—BABYSITTING/MOTHERS HELPER .....5                      CLEANING—JANITOR/MAID .....6                      CLERICAL—FILING, RECEPTIONIST, DATA ENTRY .....7                      COMPUTER WORK—DATA ENTRY/ PROGRAMMING/                      WEB PAGE DEVELOPMENT ..... 8                      DELIVERY—OF FOOD OR NEWSPAPERS OR PRESCRIPTIONS .....9                      FARM WORK.....10                      FOOD SERVICE—BUS BOY, WAITER, COOK ..... 11                      GARDENING AND GROUNDS MAINTENANCE .....12                      GAS STATION ATTENDANT.....13                      HEALTH CARE AIDE—PERSONAL CARE ATTENDANT, NURSES AIDE .....14                      MECHANIC (AUTO REPAIR) .....15                      RETAIL SALES.....16                      SKILLED LABOR APPRENTICE—PLUMBER, CARPENTER, ELECTRICIAN .....17                      SPORTS RELATED—UMPIRE, CADDY, REFEREE, COACH, LIFEGUARD.....18                      STOCK CLERK—GROCERY STORE OR DRUG STORE.....19                      USHER—MOVIE THEATER.....20                      OTHER (SPECIFY).....99                      &lt;Y1D07Other_01&gt;</p> <hr/> <p>PROGRAMMER: STRING ON OTHER-SPECIFY = 100 CHAR</p>	<p><b>RECORD VERBATIM AND CODE:</b>                      &lt;Y1D07Code_02&gt; to &lt;Y1D07Code_10&gt;</p> <hr/> <p>ASSEMBLY WORK (SORTING STUFFING) ..... 1                      ANIMAL CARE (DOG WALKING, VETERINARY HELPER).....2                      CAMP COUNSELOR.....3                      CASHIER—GROCERY STORE, FAST FOOD PLACE, ETC.....4                      CHILD CARE—BABYSITTING/MOTHERS HELPER .....5                      CLEANING—JANITOR/MAID .....6                      CLERICAL—FILING, RECEPTIONIST, DATA ENTRY .....7                      COMPUTER WORK—DATA ENTRY/ PROGRAMMING/                      WEB PAGE DEVELOPMENT ..... 8                      DELIVERY—OF FOOD OR NEWSPAPERS OR PRESCRIPTIONS .....9                      FARM WORK.....10                      FOOD SERVICE—BUS BOY, WAITER, COOK ..... 11                      GARDENING AND GROUNDS MAINTENANCE .....12                      GAS STATION ATTENDANT.....13                      HEALTH CARE AIDE—PERSONAL CARE ATTENDANT, NURSES AIDE .....14                      MECHANIC (AUTO REPAIR) .....15                      RETAIL SALES.....16                      SKILLED LABOR APPRENTICE—PLUMBER, CARPENTER, ELECTRICIAN .....17                      SPORTS RELATED—UMPIRE, CADDY, REFEREE, COACH, LIFEGUARD.....18                      STOCK CLERK—GROCERY STORE OR DRUG STORE.....19                      USHER—MOVIE THEATER.....20                      OTHER (SPECIFY).....99                      &lt;Y1D07Other_02&gt; to &lt;Y1D07Other_10&gt;</p> <hr/> <p>PROGRAMMER: STRING ON OTHER-SPECIFY = 100 CHAR</p>
<p>IX.A4=01-99</p>		
	<p>(NAME OR PLACE) FILLED FROM RESPONSE TO IX.A5a</p>	<p>(NAME OR PLACE) FILLED FROM RESPONSE TO IX.A5b – IXA5j, AS APPLICABLE.</p>
<p><b>IX.A8. When did [you/ (he/she)] start working at (NAME OR PLACE)? (YTD36M-II.B4)</b></p> <p>&lt;Y1D08_01&gt; to &lt;Y1D08_10&gt;</p> <p><b>IF SELF-EMPLOYED, SAY:</b> When did [you/ (he/she)] start working as a (JOB FROM IX.A5)?</p> <p><b>INTERVIEWER:</b> IF JOB BEGAN &gt; 1 YR AGO AND R CANNOT RECALL START DATE, SELECT “MORE THAN ONE YR AGO”</p> <p>CMOTO INTERVIEWER: ENTER MONTH AS NUMBER HERE.</p>	<p><b>START DATE:</b>  __ /20 __                       MONTH YEAR</p> <p>&lt;Y1D08Month_01&gt; ; &lt;Y1D08Year_01&gt;</p> <p>MORE THAN ONE YEAR AGO ..... 9999</p> <p>PROGRAMMER: ALLOWABLE VALUES FOR MONTH = 01-12; ALLOWABLE ON YEAR = 1997-CURRENT YEAR OF INTERVIEW.</p>	<p><b>START DATE:</b>  __ /20 __                       MONTH YEAR</p> <p>&lt;Y1D08Month_02&gt; ; &lt;Y1D08Year_02&gt; to &lt;Y1D08Month_10&gt; ; &lt;Y1D08Year_10&gt;</p> <p>MORE THAN ONE YEAR AGO ..... 9999</p> <p>PROGRAMMER: ALLOWABLE VALUES FOR MONTH = 01-12; ALLOWABLE ON YEAR = 1997-CURRENT YEAR OF INTERVIEW.</p>

Appendix C

	JOB 1 CURRENT OR MOST RECENT JOB	JOB(S) 2-10 NEXT MOST RECENT JOB(S)
IF CURRENT JOB: IX.A6=1		
<b>IX.A9. How did [you/ (he/she)] find this job? (YTD36M-II.B5)</b> <Y1D09_01> to <Y1D09_10>  <b>PROBES: How did [you/ (he/she)] hear about this job?</b>	NEWSPAPER AD ..... 1 INTERNET ..... 2 EMPLOYMENT AGENCY (PRIVATE) ..... 3 SPECIAL EDUCATOR, VOCATIONAL EDUCATOR, COUNSELOR, OR OTHER SCHOOL STAFF ..... 4 FRIENDS OR RELATIVES ..... 5 DIRECT APPLICATION TO EMPLOYER ..... 6 VOC REHAB OR OTHER SERVICE AGENCY .. 7 AMERICAN JOB CENTERS (UNEMPLOYMENT OFFICE, FORMERLY KNOWN AS ONE STOPS OR WORKFORCE DEVELOPMENT CENTERS) ..... 8 [PROMISE PROGRAM] ..... 9 OTHER (SPECIFY) ..... 10 <u>&lt;Y1D09Other 01&gt;</u>  PROGRAMMER: STRING ON OTHER-SPECIFY = 100 CHAR	NEWSPAPER AD ..... 1 INTERNET ..... 2 EMPLOYMENT AGENCY (PRIVATE)..... 3 SPECIAL EDUCATOR, VOCATIONAL EDUCATOR, COUNSELOR, OR OTHER SCHOOL STAFF ..... 4 FRIENDS OR RELATIVES..... 5 DIRECT APPLICATION TO EMPLOYER..... 6 VOC REHAB OR OTHER SERVICE AGENCY... 7 AMERICAN JOB CENTERS (UNEMPLOYMENT OFFICE, FORMERLY KNOWN AS ONE STOPS OR WORKFORCE DEVELOPMENT CENTERS) ..... 8 [PROMISE PROGRAM] ..... 9 OTHER (SPECIFY) ..... 10 <u>&lt;Y1D09Other 02&gt; to &lt;Y1D09Other 10&gt;</u>  PROGRAMMER: STRING ON OTHER-SPECIFY = 100 CHAR
IX.A4=01-99		
<b>IX.A10. How many hours per week [(do or did you) / (does or did YOUTH)] usually work at this job? (YTD36M-II.B6)</b>  <Y1D10_01> to <Y1D10_10>  USE THE FOLLOWING PROBES TO CALCULATE HOURS WORKED:  <b>PROBES:</b> Which days [do you/ does (he/she)] work? / What time [do you/ does (he/she)] start work? / What time [do you/ does (he/she)] finish work? / [Do you/Does (YOUTH)] take a break for lunch?	_____ HOURS PER WEEK USUALLY WORKED  CATI: RANGE OF ALLOWABLE VALUES ON HOURS = 00-99.  DON'T KNOW ..... d REFUSED ..... r	_____ HOURS PER WEEK USUALLY WORKED  CATI: RANGE OF ALLOWABLE VALUES ON HOURS = 00-99.  DON'T KNOW .....d REFUSED .....r
IX.A10=D OR R		
<b>IX.A10_fill</b> <b>IF CANNOT ANSWER EXACT HOURS, PROBE FOR RANGE: [Do you/Does (YOUTH)] think (you work / (he/she) works] . . . (YTD36M-II.B6)</b>  <Y1D10Probe_01> to <Y1D10Probe_10>	Less than 10 hours per week? ..... 1 10-20 hours per week? ..... 2 21-30 hours per week? ..... 3 Or more than 30 hours per week? ..... 4	Less than 10 hours per week? .....1 10-20 hours per week? .....2 21-30 hours per week? .....3 Or more than 30 hours per week? .....4

Appendix C

<p>IX.A4=01-99</p> <p>IF IX.A6 = 1, APPLY PRESENT TENSE FILLS. IF IX.A6= 0 APPLY PAST TENSE FILLS. IF IX.A6= d or r, present both options in the parenthesis.</p>	<p>(NAME OR PLACE) FILLED FROM RESPONSE TO IX.A5a</p> <p>PROGRAMMER: THE "MAKE / SELL / DO" IS NOT TO BE PROGRAMMED AS A FILL FOR EACH OF THESE WORDS – KEEP THIS TEXT IN PARENTHESIS FOR THE INTERVIEWER TO FILL AT HIS / HER DISCRETION BASED ON TYPE OF WORK. AND FILL ONLY BASED ON SELF-REPORT VS. PROXY RESPONSE.</p>	<p>(NAME OR PLACE) FILLED FROM RESPONSE TO IX.A5a</p> <p>PROGRAMMER: THE "MAKE / SELL / DO" IS NOT TO BE PROGRAMMED AS A FILL – KEEP THIS TEXT IN PARENTHESIS FOR THE INTERVIEWER TO FILL AT HIS / HER DISCRETION BASED ON TYPE OF WORK AND FILL ONLY BASED ON SELF-REPORT VS. PROXY RESPONSE.</p>
<p><b>IXA11.</b>  <b>Next, I'd like to ask you some questions about how [(you are) / (he/she is)] / [(you were) / (he/she was)] paid at (NAME or PLACE).</b></p> <p><b>[(Do / Did) you/ (Does / did) (YOUTH)] get paid by the hour or by how many things (you/he/she) [(make/ do/ sell) / (makes /does / sells)]? (YTD36M-II.C2)</b>  <b>&lt;Y1D11_01&gt; to &lt;Y1D11_10&gt;</b></p> <p><b>PROBE: Are you paid a certain amount per day, per week, per month, or per year? / Do you get a salary?</b></p>	<p>Hour, day, week, month, year ..... 1          Things ..... 2          Some other way (SPECIFY) ..... 99  <b>&lt;Y1D11Other_01&gt;</b>          Unpaid ..... 4 GO TO IX.A14</p>	<p>Hour, day, week, month, year .....1          Things .....2          Some other way (SPECIFY) .....99  <b>&lt;Y1D11Other_02&gt; to &lt;Y1D11Other_10&gt;</b>          Unpaid .....4 GO TO IX.A14</p>
<p>IX.A11 = 99</p> <p>SPECIFY HOW PAID:</p>	<p>Other way (SPECIFY): _____</p>	<p>Other way (SPECIFY): _____</p>
<p>IF PAID JOB:          (IX.A11=1, 2, OR 99)</p>		
<p><b>IX.A12. About how much [(are or were) you] / (is or was) (YOUTH)] paid on this job?</b>  <b>(YTD36M-II.C2)</b></p> <p><b>PROBES:</b> How much [do or did you] / (does (he/she)] get paid for each thing [you (make/do/sell) / (he/she)] / (makes/does/sells)]?</p> <p>How many things (do you/does [he/she]) (make/do/sell) in an (hour/day/week)?</p>	<p>IF IX.A11 = 2, POPULATE THESE RESPONSE OPTIONS:</p> <p style="text-align: center;">\$  __ __ _ . __ __ _  per /thing  <b>&lt;Y1D12AmtThing_01&gt;</b></p> <p style="text-align: center;"> __ __ __ _  things/hour  <b>&lt;Y1D12HrsThing_01&gt;</b></p> <p style="text-align: center;"><b>or</b></p> <p>IF IX.A11= 1 OR 99, POPULATE THESE RESPONSE OPTIONS:</p> <p>\$  __ __ _ . __ __ _  <b>&lt;Y1D12Amt_01&gt;</b></p> <p><b>&lt;Y1D12Unit_01&gt; &gt;</b></p> <p>Per hour.....1          per day..... 2          per week..... 3          every other week..... 4          twice a month..... 5          once a month..... 6          OTHER (SPECIFY)..... 7  <b>&lt;Y1D12Other_01&gt;</b></p>	<p>IF IX.A11 = 2, POPULATE THESE RESPONSE OPTIONS:</p> <p style="text-align: center;">\$  __ __ _ . __ __ _  per /thing  <b>&lt;Y1D12AmtThing_02&gt; to &lt;Y1D12AmtThing_10</b></p> <p style="text-align: center;"> __ __ __ _  things/hour  <b>&lt;Y1D12HrsThing_02&gt; to &lt;Y1D12HrsThing_10</b></p> <p style="text-align: center;"><b>or</b></p> <p>IF IX.A11= 1 OR 99, POPULATE THESE RESPONSE OPTIONS:</p> <p>\$  __ __ _ . __ __ _  <b>&lt;Y1D12Amt_02&gt; to &lt;Y1D12Amt_10&gt;</b></p> <p><b>&lt;Y1D12Unit_02&gt; to &lt;Y1D12Unit_10&gt;</b></p> <p>Per hour.....1          per day.....2          per week.....3          every other week.....4          twice a month.....5          once a month.....6          OTHER (SPECIFY).....7  <b>&lt;Y1D12Other_02&gt; to &lt;Y1D12Other_10&gt;</b></p>

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IF FREQUENCY OF PAY BASED ON TIME PERIOD: IX.A12a	IF FREQUENCY OF PAY BASED ON TIME PERIOD: IX.A12a = 2-7	IF FREQUENCY OF PAY BASED ON TIME PERIOD: IX.A12b-j = 2-7
<p><b>IX.A12A.</b> Is that the amount of pay [(you bring or brought / (he/she brings or brought)] home or is that the amount of [your/ (his/her)] pay before taxes are taken out? (YTD36M- &lt;Y1D12Tax_01&gt; to &lt;Y1D12Tax_10&gt;</p>	<p>BEFORE TAXES (GROSS PAY)..... 1 AFTER TAXES (NET PAY)..... 2 DON'T KNOW ..... d REFUSED ..... r</p>	<p>BEFORE TAXES (GROSS PAY).....1 AFTER TAXES (NET PAY) .....2 DON'T KNOW.....d REFUSED.....r</p>
<p>IF PAID JOB: (IX.A11=1,2, OR 99)</p>		
<p><b>IX.A13.</b> (Does/Did) this job offer Health insurance? (YTD36M-II.C3)  &lt;Y1D13a_01&gt; to &lt;Y1D13a_10&gt; PROBE: It does not matter if you use this benefit / take the benefit or not. Our focus in this question is simply on whether or not it is offered to you.</p>	<p>YES..... 1 NO..... 0 DON'T KNOW ..... d REFUSED ..... r</p>	<p>YES.....1 NO .....0 DON'T KNOW.....d REFUSED.....r</p>
<p>IF PAID JOB: (IX.A11=1,2, OR 99)</p>		
<p><b>IX.A13.</b> (Does/Did) this job offer Paid vacation or sick leave? (YTD36M-II.C3)  &lt;Y1D13b_01&gt; to &lt;Y1D13b_10&gt; PROBE: It does not matter if you use this benefit / take the benefit or not. Our focus in this question is simply on whether or not it is offered to you.</p>	<p>YES..... 1 NO..... 0 DON'T KNOW ..... d REFUSED ..... r</p>	<p>YES.....1 NO .....0 DON'T KNOW.....d REFUSED.....r</p>
<p>IF PAID JOB: (IX.A11=1,2, OR 99)</p>		
<p><b>IX.A13.</b> (Does/Did) this job offer Any kind of pension or retirement plan? (YTD36M-II.C3)  &lt;Y1D13c_01&gt; to &lt;Y1D13c_10&gt; PROBE: It does not matter if you use this benefit / take the benefit or not. Our focus in this question is simply on whether or not it is offered to you.</p>	<p>YES..... 1 NO..... 0 DON'T KNOW ..... d REFUSED ..... r</p>	<p>YES.....1 NO .....0 DON'T KNOW.....d REFUSED.....r</p>
<p>IX.A4=01-99</p>		
<p><b>IX.A14.</b> At this job, do most of the other workers have disabilities? (YTD36M-II.D1)  &lt;Y1D14_01&gt; to &lt;Y1D14_10&gt;</p>	<p>YES..... 1 NO..... 0 DON'T KNOW ..... d REFUSED ..... r</p>	<p>YES.....1 NO .....0 DON'T KNOW.....d REFUSED.....r</p>
<p>IX.A4=01-99</p>		
<p>IF IX.A6 = 1, APPLY PRESENT TENSE FILLS. IF IX.A6= 0 APPLY PAST TENSE FILLS. IF IX.A6= d or r, PRESENT BOTH OPTIONS IN THE PARENTHESIS.</p>	<p>(NAME OR PLACE) FILLED FROM RESPONSE TO IX.A5a</p>	<p>(NAME OR PLACE) FILLED FROM RESPONSE TO IX.A5b – IXA5j, AS APPLICABLE.</p>

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<p><b>IX.A15</b> (Is/was) this job at (NAME OR PLACE) part of any school sponsored work activities like a work-study job, an internship, or part of a school-based business? (YTD36M-II.D2)</p>	<p>YES..... 1 NO..... 0 DON'T KNOW..... d REFUSED..... r</p>	<p>YES.....1 NO.....0 DON'T KNOW.....d REFUSED.....r</p>
<p>&lt;Y1D15_01&gt; to &lt;Y1D15_10&gt;</p>		
<p>NOT CURRENT JOB (IX.A6=0)</p>		
<p>[you/(he/she)], [your/ (his/her)], (Is/Was)</p>		
<p><b>IX.A16. When did (you/he/she) stop working at .... (YTD36M-II.D4)</b></p> <p>&lt;Y1D16_01&gt; to &lt;Y1D16_10&gt;</p> <p>CMOTO INTERVIEWER: ENTER MONTH AS NUMBER HERE. <b>PROBE: In which month did [you/ (he/she)] stop?</b></p> <p><b>What was the weather like? Was it around a holiday or [your/ (his/her)] birthday? Was it during the school year or during the summer? (Is/Was) this a summer job?</b></p>	<p><b>END DATE:</b>    _ _  / 20  _ _                    MONTH   YEAR</p> <p>&lt;Y1D16Month_01&gt; ; &lt;Y1D16Year_01&gt;</p> <p>DON'T KNOW..... d REFUSED..... r</p> <p>PROGRAMMER: ALLOWABLE VALUES FOR MONTH = 01-12; ALLOWABLE ON YEAR = 1997-CURRENT YEAR OF INTERVIEW.</p> <p>INTERVIEWER: IF "STILL WORKING" AT THIS JOB, SELECT 9999 RESPONSE AND CHANGE RESPONSE TO IX.A6 TO "1."</p>	<p><b>END DATE:</b>    _ _  / 20  _ _                    MONTH   YEAR</p> <p>&lt;Y1D16Month_02&gt; ; &lt;Y1D16Year_02&gt; to &lt;Y1D16Month_10&gt; ; &lt;Y1D16Year_10&gt;</p> <p>DON'T KNOW.....d REFUSED.....r</p> <p>PROGRAMMER: ALLOWABLE VALUES FOR MONTH = 01-12; ALLOWABLE ON YEAR = 1997-CURRENT YEAR OF INTERVIEW.</p> <p>INTERVIEWER: IF "STILL WORKING" AT THIS JOB, SELECT 9999 RESPONSE AND CHANGE RESPONSE TO IX.A6 TO "1."</p>
<p>EXACT DATE STOPPED WORKING AT JOB NOT PROVIDED (IX.A16= D OR R)</p>		
<p>[you/ (he/she)], (NAME OR PLACE)</p>		
<p><b>IX.A16A. How long did [you/ (he/she)] work at (NAME OR PLACE)?</b></p> <p>&lt;Y1D16A_Amt_01&gt; to &lt;Y1D16A_Amt_10&gt;</p> <p><b>PROBE: Your best estimate is fine.</b></p>	<p> _ _  MONTHS..... 1  _ _  WEEKS ..... 2</p> <p>&lt;Y1D16A_Unit_01&gt;</p> <p>DON'T KNOW..... d REFUSED..... r</p> <p>PROGRAMMER: ALLOWABLE RANGE WEEKS = 0-99 AND FOR MONTHS = 0-99.</p>	<p> _ _  MONTHS .....1  _ _  WEEKS .....2</p> <p>&lt;Y1D16A_Unit_02&gt; to &lt;Y1D16A_Unit_10&gt;</p> <p>DON'T KNOW.....d REFUSED.....r</p> <p>PROGRAMMER: ALLOWABLE RANGE WEEKS = 0-99 AND FOR MONTHS = 0-99.</p>
<p>TIME WORKED AT JOB NOT PROVIDED (IX.A16A= D OR R)</p>		
<p>[(Do you/Does (YOUTH)), [(you/(he/she)), (NAME OR PLACE)</p>		
<p><b>IX.A16B. [(Do you/Does (YOUTH)) think [(you/(he/she)) worked at (NAME OR PLACE)</b></p> <p>&lt;Y1D16B_01&gt; to &lt;Y1D16B_10&gt;</p>	<p><b>Three months of less?</b>..... 1 <b>4-6 months?</b>..... 2 <b>Or more than 6 months?</b> ..... 3 DON'T KNOW..... d REFUSED..... r</p>	<p><b>Three months of less?</b> .....1 <b>4-6 months?</b> .....2 <b>Or more than 6 months?</b> .....3 DON'T KNOW.....d REFUSED.....r</p>

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NOT CURRENT JOB (IX.A6=0)		
<p>IX.A17 Why did [you/ (he/she)] leave this job? &lt;Y1D17_01&gt; to &lt;Y1D17_10&gt; PROBE: Why (are you/is NAME) no longer working (NAME OR PLACE)?</p> <p>PROBE FOR MAIN REASON. CODE ONE REASON ONLY.</p> <p>IF RESPONSE IS "DOES NOT WANT TO WORK," PROBE FOR THE REASON WHY.</p>	<p>(NAME OR PLACE) FILLED FROM RESPONSE TO IX.A5a</p> <p>CODE ONE ONLY</p> <p>JOB WAS TOO HARD ..... 1 JOB WAS TOO EASY ..... 2 FOUND A BETTER JOB ..... 3 TEMPORARY JOB ENDED ..... 4 WENT BACK TO SCHOOL ..... 5 JOB DID NOT PAY ENOUGH/ OFFER ENOUGH HOURS ..... 6 DOES NOT NEED THE MONEY ..... 7 DID NOT LIKE BOSS ..... 8 DID NOT LIKE COWORKERS ..... 9 TRANSPORTATION PROBLEMS ..... 10 I MOVED TOO FAR ..... 11 JOB MOVED TOO FAR ..... 12 LAID OFF OR GOT FIRED PERFORMANCE PROBLEMS ..... 13 HEALTH REASONS ..... 14 EMPLOYER WOULDN'T PROVIDE ACCOMMODATIONS ..... 15 NEEDED TO SUCCEED AT JOB ..... 15 GOT PREGNANT / HAD A BABY ..... 16 FAMILY OBLIGATIONS ..... 17 DID NOT WANT TO LOSE DISABILITY OR OTHER BENEFITS ..... 18 PARENTS DO NOT WANT YOUTH TO WORK ..... 19 END OF JOB TRAINING PROGRAM ..... 20 DID NOT LIKE JOB ..... 21 TO FOCUS ON MY STUDIES ..... 22 OTHER (SPECIFY) ..... 99 &lt;Y1D17Other_01&gt; _____</p> <p>PROGRAMMER: STRING ON OTHER-SPECIFY = 100 CHAR</p>	<p>(NAME OR PLACE) FILLED FROM RESPONSE TO IX.A5b – IXA5j, AS APPLICABLE.</p> <p>CODE ONE ONLY</p> <p>JOB WAS TOO HARD ..... 1 JOB WAS TOO EASY ..... 2 FOUND A BETTER JOB ..... 3 TEMPORARY JOB ENDED ..... 4 WENT BACK TO SCHOOL ..... 5 JOB DID NOT PAY ENOUGH/ OFFER ENOUGH HOURS ..... 6 DOES NOT NEED THE MONEY ..... 7 DID NOT LIKE BOSS ..... 8 DID NOT LIKE COWORKERS ..... 9 TRANSPORTATION PROBLEMS ..... 10 I MOVED TOO FAR ..... 11 JOB MOVED TOO FAR ..... 12 LAID OFF OR GOT FIRED PERFORMANCE PROBLEMS ..... 13 HEALTH REASONS ..... 14 EMPLOYER WOULDN'T PROVIDE ACCOMMODATIONS NEEDED TO SUCCEED AT JOB ..... 15 GOT PREGNANT / HAD A BABY ..... 16 FAMILY OBLIGATIONS ..... 17 DID NOT WANT TO LOSE DISABILITY OR OTHER BENEFITS ..... 18 PARENTS DO NOT WANT YOUTH TO WORK ..... 19 END OF JOB TRAINING PROGRAM ..... 20 DID NOT LIKE JOB ..... 21 TO FOCUS ON MY STUDIES ..... 22 OTHER (SPECIFY) ..... 99 &lt;Y1D17Other_02&gt; to &lt;Y1D17Other_10&gt; _____</p> <p>PROGRAMMER: STRING ON OTHER-SPECIFY = 100 CHAR</p>
IX.A4=01-99		
[do you / does (he/she)/did (you/he/she)], (NAME OF PLACE)	(NAME OR PLACE) FILLED FROM RESPONSE TO IX.A5a	(NAME OR PLACE) FILLED FROM RESPONSE TO IX.A5b – IXA5j, AS APPLICABLE.
<p>IX.A18 Overall, how much [do you/does (he/she)/did (you/he/she)] like this job at (NAME OF PLACE)? (YTD36M-II.E2,rev)</p> <p>&lt;Y1D18_01&gt; to &lt;Y1D18_10&gt;</p> <p>Would [you/(he/she)] say that [you / (he/she)] . . .</p>	<p>Liked it very much, ..... 1 Somewhat liked it, or ..... 2 Did not like it? ..... 3 DON'T KNOW ..... d REFUSED ..... r</p>	<p>Liked it very much ..... 1 Somewhat liked it, or ..... 2 Did not like it? ..... 3 DON'T KNOW ..... d REFUSED ..... r</p>
	CONTINUE WITH OTHER JOB(S) OR COMPLETE JOB GRID. IF NO MORE JOBS GO TO IX.A19, ELSE GO TO JOB 2	CONTINUE WITH OTHER JOB(S) OR COMPLETE JOB GRID. IF NO MORE JOBS GO TO IX.A19, ELSE GO TO NEXT JOB IN SEQUENCE (3, 4, 5, ...)

IX.A4>0
[YOU/YOUTH], [YOUR/YOUTH], [YOU DO/YOUTH DOES], [YOU ARE/YOUTH IS] [YOUR / (HIS/ HER)]

**IX.A19. Thank you for telling me about these jobs, I just want to be sure we haven't missed any job [you/ (YOUTH)] had in the past year. We just spoke about [your/(YOUTH)'s] job at:**

[FILL JOB(S) FROM A5a-j.]

**Did (you/YOUTH) have any other jobs during the past year, even ones that lasted for just a short time? Do not include chores that (you do/YOUTH does) around the house, even if [you are/ (YOUTH) is] paid to do them. (YTD36M-II.F2) <Y1D19>**

**PROBE: A job is work, either paid or unpaid, other than work around the house.**  
**A job could be a school sponsored job or a work study job. Jobs include internships, apprenticeships, and volunteer work, even if you don't get paid.**  
**A job could be working for a business or organization or work that [you/(he/she)] do on [your/ (his/her)] own such as babysitting or dog walking.**

YES.....	1	
NO .....	0	GO TO IX.A21
DON'T KNOW.....	d	GO TO IX.A21
REFUSED.....	r	GO TO IX.A21

IX.A19=1
[YOU/ YOUTH], [MONTH AND YEAR 1 YEAR AGO], [YOU WERE/ YOUTH WAS]

**IX.A20. How many other jobs did [you /YOUTH] have during the past year? Please do not include jobs you already told me about. Please include all jobs, even if [YOU/YOUTH] only worked for a short period of time. Please include jobs at which [YOU WERE /YOUTH WAS] self-employed or volunteered. (YTD36M-II.F2\_num) <Y1D20>**

**PROBE: That is since [MONTH AND YEAR 1 YEAR AGO]?**

|\_|\_| JOBS  
 (01-99)

DON'T KNOW.....	d	GO TO IX.A21
REFUSED.....	r	GO TO IX.A21

SOFT CHECK IF IX.A20>1: May I confirm that you have had [FILL IX.A20] jobs since this time last year, in addition to the jobs you have already told me about?
---

IX.A20>0
[YOU/YOUTH], [NUMBER]

**IX.A20a. Did any of these jobs last more than two weeks? (YTD36M-II.F3) <Y1D20a>**

YES..... 1  
NO ..... 0  
DON'T KNOW..... d  
REFUSED..... r

SOFT CHECK: To confirm, (YOU/YOUTH) had [value from IX.A20] job(s) that lasted less than two weeks?
---

<p style="text-align: center;"><b>BOX 10</b></p> <p>IF IX.A20<math>\geq</math>1, GO TO IX.A4 AND ADD ADDITIONAL JOBS, RETURN THROUGH THE LOOP AS NEEDED FOR EACH NEW JOB IDENTIFIED. ONLY ADD ADDITIONAL JOB(S) IF IX.A5 &lt;10. ONCE LOOP(S) COMPLETED, GO TO IX. A21.</p>
---

ALL YOUTH AND PROXIES: (VII.A2_1 =1 OR 2)
---

IX.A21. PROGRAMMER: INSERT DATE THIS SECTION IX.A (YOUTH EMPLOYMENT) WAS COMPLETED HERE OR POPULATE THIS AS A VERIFICATION OF DATE COMPLETED FOR INTERVIEWER TO INPUT. THEN CONTINUE. <Y1D21Date>

CONTINUE..... 1



		Asked of Self-Reporting Youth	Asked of Youth's Proxy Respondent
X.	Youth Service Receipt in Past 18 months	x	x

**SECTION X. PART A. YOUTH SERVICE RECEIPT IN PAST 18 MONTHS**

X.A2A: ALL YOUTH AND PROXIES: (VII.A2\_1 =1 OR 2)  
 X.A2B: ALL ROWS (a-d) WHERE X.A2A=1  
 [RA MONTH] [RA YEAR] [you/ YOUTH]

- X.A2A.** Since [RA MONTH] of [RA YEAR], [have you / has YOUTH] received any of the following services? (NEW)
- X.A2B.** IF X.A2A=1 IN ANY ROW THEN ASK: How helpful was this service to [you/ YOUTH] in helping [you/ YOUTH] prepare for school or work, or to help [you/YOUTH] prepare for living on [your / (his / her)] own as an adult? (NEW)

	X.A2A		(CODE ONE PER ROW)		
	YES	NO	Not at all helpful	Somewhat helpful	Extremely helpful
a. Help with a disability or health issue at school? <Y1E02a_a> ; <Y1E02b_a>	1	0	1	2	3
b. Help finding a job or learning about the kinds of jobs [you / YOUTH] might like? <Y1E02a_b> ; <Y1E02b_b>	1	0	1	2	3
c. Help learning to manage money? <Y1E02a_c> ; <Y1E02b_c>	1	0	1	2	3
d. Help understanding government benefits? <Y1E02a_d> ; <Y1E02b_d>	1	0	1	2	3

IF X.A2Aa=YES, THEN ASK: X.A2Ba  
 IF X.A2Ab=YES, THEN ASK: X.A2Bb  
 IF X.A2Ac=YES, THEN ASK: X.A2Bc  
 IF X.A2Ad=YES, THEN ASK: X.A2Bd

ALL YOUTH AND PROXIES: (VII.A2\_1 =1 OR 2)  
 [RA MONTH] [RA YEAR] Fill [have] if VII.A2\_1=1, Fill [has] if VII.A2\_1=2 [you / YOUTH]

- X.A3.** Since [RA MONTH] of [RA YEAR], [have/has] [you / YOUTH] needed any help or services preparing for school or work that [you / YOUTH] did not receive? (YTD 12-mo) <Y1E03>
- YES..... 1
- NO ..... 0 GO TO X.A5
- DON'T KNOW..... d GO TO X.A5
- REFUSED..... r GO TO X.A5

X.A3=1

[you / YOUTH]

**X.A4. What help or services did [you / YOUTH] need that [you / YOUTH] did not get? (YTD 12-mo)**

**CODE ALL THAT APPLY**

- DISCOVERING JOB INTERESTS/SKILLS ..... 1 <Y1E04\_01>
  - INDEPENDENT LIVING SKILLS TRAINING ..... 2 <Y1E04\_02>
  - CAREER COUNSELING ..... 3 <Y1E04\_03>
  - LEARNING HOW TO LOOK FOR A JOB ..... 4 <Y1E04\_04>
  - JOB SHADOWING ..... 5 <Y1E04\_05>
  - APPRENTICESHIP/INTERNSHIP ..... 6 <Y1E04\_06>
  - HELP FINDING A JOB ..... 7 <Y1E04\_07>
  - SUPPORT ONCE ON THE JOB (JOB COACHING) ..... 8 <Y1E04\_08>
  - HELP GETTING INTO SCHOOL/TRAINING ..... 9 <Y1E04\_09>
  - UNDERSTANDING SSA/OTHER BENEFITS ..... 10 <Y1E04\_10>
  - COMPUTER LITERACY CLASSES ..... 11 <Y1E04\_11>
  - PROBLEM SOLVING ..... 12 <Y1E04\_12>
  - SOCIAL SKILLS TRAINING ..... 13 <Y1E04\_13>
  - FINANCIAL LITERACY/MONEY MGMT TRAINING ..... 14 <Y1E04\_14>
  - SELF ADVOCACY/DETERMINATION TRAINING ..... 15 <Y1E04\_15>
  - REFERRAL TO ANOTHER AGENCY ..... 16 <Y1E04\_16>
  - TRANSPORTATION SERVICES ..... 17 <Y1E04\_17>
  - HEALTH-RELATED SERVICES ..... 18 <Y1E04\_18>
  - CASE MANAGEMENT ..... 19 <Y1E04\_19>
  - ACCOMMODATIONS ..... 20 <Y1E04\_20>
  - EDUCATION-RELATED SUPPORTS OR SERVICES ..... 21 <Y1E04\_21>
  - OTHER (SPECIFY) ..... 99 <Y1E04\_22>
- \_\_\_\_\_ (STRING 150)
- DON'T KNOW ..... d
  - REFUSED ..... r

IF OTHER SPECIFY (99): **What other service did [you / YOUTH] need but not get? <Y1E04Other>**

ALL YOUTH AND PROXIES: (VII.A2\_1 =1 OR 2)

**X.A5. PROGRAMMER: INSERT DATE THIS SECTION X.A (YOUTH SERVICES) WAS COMPLETED HERE OR POPULATE A VERIFICATION OF DATE COMPLETED FOR INTERVIEWER TO INPUT. THEN CONTINUE. <Y1E05Date>**

CONTINUE ..... 1 GO TO BOX 11

		Asked of Self-Reporting Youth	Asked of Youth's Proxy Respondent
<b>XI.</b>	<b>Youth's Self-Determination and Expectations for the Future</b>	<b>YES</b>	<b>NO</b>

**BOX 11**

THIS SECTION IS ASKED IF YOUTH IS SELF-REPORTING (VII.A2=1 OR VII.A2\_1=1) IF SELF-REPORTING, PROCEED TO XI.A1. IF PROXY RESPONDENT (VII.A2\_1=2 OR VII.A3\_1=1) SKIP TO XII.A1.

**SECTION XI. PART A. SELF-DETERMINATION: AUTONOMY**

SELF-REPORTING YOUTH ONLY (VII.A2=1 OR VII.A2\_1=1)

**XI.A1. Now I am going to read some statements. For each, please tell me the answer that best tells how you act in that situation. There are no right or wrong answers.**

**PROBE:** Tell me the answer that best tells how you act in this situation.

**PROBE:** If your disability limits you from actually performing the activity, but you have control over the activity – such as a personal care attendant, answer as if you performed that activity.

CODE ONE PER ROW

	I do not do that even if I have the chance	I do that sometimes when I have the chance	I do that most of the time I have the chance	I do that every time I have the chance	DK	REF
<b>a. “My friends and I choose activities that we want to do.” The choices are... (ARC SD. Scale, 14) &lt;Y1F01a&gt;</b>	1	2	3	4	d	r
<b>b. “I write letters, texts, or talk on the phone to friends and family.” (ARC SD. Scale, 15) &lt;Y1F01b&gt;</b>	1	2	3	4	d	r
<b>c. “I go to restaurants that I like.” (ARC SD. Scale, 18) &lt;Y1F01c&gt;</b>	1	2	3	4	d	r
<b>d. “I choose gifts to give to family and friends.” The choices are...(ARC SD. Scale, 30) &lt;Y1F01d&gt;</b>	1	2	3	4	d	r
<b>e. “I go to movies, concerts, and dances.” The choices are ... (ARC SD. Scale, 19) &lt;Y1F01e&gt;</b>	1	2	3	4	d	r
<b>f. “I plan weekend activities that I like to do.” (ARC SD. Scale, 12) &lt;Y1F01f&gt;</b>	1	2	3	4	d	r
<b>g. “I decorate my own room.” (ARC SD. Scale, 31) &lt;Y1F01g&gt;</b>	1	2	3	4	d	r

**SECTION XI. PART B. SELF-DETERMINATION: PSYCHOLOGICAL EMPOWERMENT**

SELF-REPORTING YOUTH ONLY (VII.A2=1 OR VII.A2\_1=1)

**XI.B1. Next, I am going to read you two statements. I want you to tell me the one that best describes you. Choose only one answer. There are no right or wrong answers.**

**Which of the following statements best describes you? (ARC SD. Scale, 47)**

**<Y1G01>**

**CODE ONE ONLY**

- Trying hard at school doesn't do me much good, or ..... 1
- Trying hard at school will help me get a good job. .... 2
- DON'T KNOW..... d
- REFUSED..... r

SELF-REPORTING YOUTH ONLY (VII.A2=1 OR VII.A2\_1=1)

**XI.B2. Which of the following statements best describes you? (ARC SD. Scale, 49)**

**<Y1G02>**

**PROBE: There are no right or wrong answers.**

**CODE ONE ONLY**

- It is no use to keep trying because that won't change things, or..... 1
- I keep trying even after I get something wrong..... 2
- DON'T KNOW..... d
- REFUSED..... r

SELF-REPORTING YOUTH ONLY (VII.A2=1 OR VII.A2\_1=1)

**XI.B3. READ IF NECESSARY: Which of the following statements best describes you? (ARC SD. Scale, 51)**

**<Y1G03>**

**PROBE: There are no right or wrong answers.**

**CODE ONE ONLY**

- I don't know how to make friends, or ..... 1
- I know how to make friends. .... 2
- DON'T KNOW..... d
- REFUSED..... r

SELF-REPORTING YOUTH ONLY (VII.A2=1 OR VII.A2\_1=1)

XI.B4. READ IF NECESSARY: Which of the following statements best describes you? (ARC SD. Scale, 53)

<Y1G04>

PROBE: There are no right or wrong answers.

CODE ONE ONLY

I do not make good choices, or..... 1

I can make good choices ..... 2

DON'T KNOW..... d

REFUSED..... r

SELF-REPORTING YOUTH ONLY (VII.A2=1 OR VII.A2\_1=1)

XI.B5. READ IF NECESSARY: Which of the following statements best describes you? (ARC SD. Scale, 57)

<Y1G05>

PROBE: There are no right or wrong answers.

CODE ONE ONLY

My choices will not be honored, or..... 1

I will be able to make choices that are important to me ..... 2

DON'T KNOW..... d

REFUSED..... r

SELF-REPORTING YOUTH ONLY (VII.A2=1 OR VII.A2\_1=1)

XI.B6. READ IF NECESSARY: Which of the following statements best describes you? (ARC SD. Scale, 55)

<Y1G06>

PROBE: There are no right or wrong answers.

CODE ONE ONLY

I will have a hard time making new friends, or..... 1

I will be able to make friends in new situations ..... 2

DON'T KNOW..... d

REFUSED..... r

**SECTION XI. PART C. SELF-DETERMINATION: SELF-REALIZATION**

SELF-REPORTING YOUTH ONLY (VII.A2=1 OR VII.A2\_1=1)

**XI.C1. Now I am going to read some statements. Please tell me whether you think each of these describes how you feel about yourself or not. Choose the answer that best fits you. There are no right or wrong answers. (ARC SD Scale, items 65, 68, 72, 71, 63, 70, 64)**

**IF NEEDED: You agree or you don't agree?**

CODE ONE PER ROW

	Agree	Don't agree	DK	REF
a. I know what I do best. <Y1H01a>	1	2	d	r
b. I like myself. <Y1H01b>	1	2	d	r
c. I am confident in my abilities. <Y1H01c>	1	2	d	r
d. Other people like me. <Y1H01d>	1	2	d	r
e. It is better to be yourself than to be popular. <Y1H01e>	1	2	d	r
f. I know how to make up for my limitations. <Y1H01f>	1	2	d	r
g. I am loved because I give love. <Y1H01g>	1	2	d	r

**SECTION XI. PART D. YOUTH'S EXPECTATIONS FOR THE FUTURE**

SELF-REPORTING YOUTH ONLY (VII.A2=1 OR VII.A2\_1=1)

**XI.D.Intro My next questions are about what you think will happen in the future. <Y1I\_Intro>**

CONTINUED ..... 1

SELF-REPORTING YOUTH ONLY (VII.A2=1 OR VII.A2\_1=1)

**XI.D1. How far do you think you will get in school? <Y1I01>**

**PROBE: What is highest level of schooling you think you will complete?**

INTERVIEWER: CODE A CERTIFICATE OF COMPLETION OR ATTENDANCE AS "2."  
 IF RESPONDENT SAYS "COLLEGE" PROBE AS TO WHETHER THAT IS A 2-YEAR OR A 4-YEAR COLLEGE.  
 CMOTO INTERVIEWER NOTE: CODE A CERTIFICATE OF COMPLETION OR ATTENDANCE AS "HIGH SCHOOL DIPLOMA."  
 IF RESPONDENT SAYS "COLLEGE" PROBE AS TO WHETHER THAT IS A 2-YEAR OR A 4-YEAR COLLEGE.

**CODE ONE ONLY**

- Less than high school (will not graduate or get a GED)..... 1
- High school diploma, ..... 2
- GED, ..... 3
- Technical or trade school, ..... 4
- 2-Year college, ..... 5
- 4-year college, or a ..... 6
- Master's, PhD, or other advanced degree? ..... 7
- DON'T KNOW..... d
- REFUSED..... r

SELF-REPORTING YOUTH ONLY (VII.A2=1 OR VII.A2\_1=1)

**XI.D2. When you are age 25, do you think you will be living ... <Y1I02>**

**CODE ONE ONLY**

- With parent / guardian(s), ..... 1
- With a sibling or other relative, ..... 2
- On your own or with a spouse or partner, ..... 3
- In a group home or institution, or in an ..... 4
- Other living situation? ..... 5
- DON'T KNOW..... d
- REFUSED..... r

SELF-REPORTING YOUTH ONLY (VII.A2=1 OR VII.A2\_1=1)

XI.D3. When you are age 25, how likely do you think it is that you will earn enough to support yourself without financial help from your family or government benefit programs? Do you think you ... <Y1103>

CODE ONE ONLY

- Definitely will,..... 1
- Probably will,..... 2
- Probably won't, or ..... 3
- Definitely won't? ..... 4
- DON'T KNOW..... d
- REFUSED..... r

SELF-REPORTING YOUTH ONLY (VII.A2=1 OR VII.A2\_1=1)

XI.D4. When you are age 25, how likely do you think it is that you will be working at a paid job? Do you think you ... <Y1104>

CODE ONE ONLY

- Definitely will,..... 1 GO TO XII.A1
- Probably will,..... 2
- Probably won't, or ..... 3
- Definitely won't? ..... 4
- DON'T KNOW..... d GO TO XII.A1
- REFUSED..... r GO TO XII.A1



XI.D4 = 2,3, OR 4

FILL TEXT SHOWN BELOW BASED ON RESPONSE TO XI.D4

**XI.D5. I am going to read you a list of reasons why some people do not work.**

**[IF XI.D4=2, FILL: For each, please tell me if it is a reason why you are not certain that you will be working at a paid job when you are age 25.]**

**[IF XI.D4=3 OR 4, FILL: For each, please tell me if it is a reason why you think you may not be working at a paid job when you are age 25.] (YTD and NBS, modified)**

**IF NEEDED: Do you think this is something that may prevent you from working a paid job when you are 25 years old?**

SELECT CODING TYPE

	YES	NO	DK	REF
a. Your disability or health will prevent you from working? <Y1I05a>	1	0	d	r
b. You won't have reliable transportation to and from work? <Y1I05b>	1	0	d	r
c. You won't be able to find a job you want? <Y1I05c>	1	0	d	r
d. You will still be in school or a training program? <Y1I05d>	1	0	d	r
e. Workplaces are not accessible to people with your disability? <Y1I05e>	1	0	d	r
f. You will not want to lose benefits such as disability or Medicaid? <Y1I05f>	1	0	d	r
g. You just don't want to work at a job? <Y1I05g>	1	0	d	r
h. Others do not think you will be able to work? <Y1I05h>	1	0	d	r
i. Any other reasons? <Y1I05i>	99	0	d	r

\_\_\_\_\_ (STRING 100)

**IF OTHER SPECIFY (99): What are the other reason(s) why you think you may not be working at a paid job when you are 25? <Y1I05Other>**

		Asked of Self-Reporting Youth	Asked of Youth's Proxy Respondent
XII.	Youth's Health and Well-Being	x	x

**SECTION XII. PART A. YOUTH HEALTH**

ALL YOUTH AND PROXIES: (VII.A2_1 =1 OR 2)
(your/ (YOUTH)'s) [your / (his/ her)]

**XII.A1. In general, would [(you/YOUTH) say that [your/ (his / her)] health is. . . (YTD) <Y1J01>**

CODE ONE ONLY

- Excellent, .....1
- Very good, .....2
- Good, .....3
- Fair, or.....4
- Poor? .....5
- DON'T KNOW.....d
- REFUSED.....r

ALL YOUTH AND PROXIES: (VII.A2_1 =1 OR 2)
[YOU / YOUTH]

**XII.A2. My next set of questions will be about health-related choices people make. These questions, like all the others in this interview, are voluntary. You can decide to answer them or not. During the past 30 days...**

CODE ONE PER ROW

	YES	NO	DK	REF
a. Did [you / [YOUTH] use tobacco? IF NEEDED: This may include smoking cigarettes or using chewing tobacco (also known as dip, chew, or snuff). (NEW) <Y1J02a>	1	0	d	r
b. Did [you / [YOUTH] have at least one drink of alcohol? (NLTS2 wave 2) <Y1J02b>	1	0	d	r
c. Did [you / [YOUTH] use marijuana? (NLTS2 wave 2) <Y1J02c>	1	0	d	r
d. Did [you / [YOUTH] use any kind of illegal drug or pills that [you / [YOUTH] took without a doctor's prescription? (NLTS2 wave 2, modified) <Y1J02e>				
IF NEEDED: Examples include: any form of cocaine (coke, dust, snow, blow), LSD, Acid, Ecstasy, Liquid X, Molly, Rohypnol, Roofies, mushrooms, speed, Methamphetamines (such as Speed, meth, ice, uppers), or heroin.	1	0	d	r

**SECTION XII. PART B. YOUTH'S ABILITIES AND USE OF SUPPORTS IN DAILY LIFE**

ALL YOUTH AND PROXIES: (VII.A2_1 =1 OR 2)
[YOU DO / YOUTH DOES], [your / (his /her)], [you do / YOUTH does]

**XII.INTRO.** Next I'll ask you about how well [YOU DO/YOUTH DOES] some things in [your / (his /her)] daily life. If there are things I ask about that [you do / YOUTH does] not do at all, because of a disability or health condition, please let me know that, as well.

Your answers to these questions help us better understand the experiences of youth who have enrolled in PROMISE. <Y1K\_Intro>

CONTINUE ..... 1

ALL YOUTH AND PROXIES: (VII.A2_1 =1 OR 2)
[YOU DO / YOUTH DOES] [Do you/ Does (YOUTH)]

**XII.B1.** [Do you/ Does YOUTH] experience any difficulty with speaking or communicating with others? (Pathways Baseline Survey) <Y1K01>

- YES.....1
- NO .....0 GO TO XII.B2
- DOES NOT DO THIS ACTIVITY AT ALL.....2
- DON'T KNOW.....d GO TO XII.B2
- REFUSED.....r GO TO XII.B2

XII.B1=1 OR 2
[Do you/ Does (YOUTH)]

**XII.B1a.** [Do you/ Does YOUTH] require special equipment or help from another person to speak or communicate with others? (Pathways Baseline Survey) <Y1K01a>

- YES.....1
- NO .....0
- DON'T KNOW.....d
- REFUSED.....r

ALL YOUTH AND PROXIES: (VII.A2_1 =1 OR 2)
[Do you/ Does (YOUTH)]

**XII.B2.** [Do you/ Does YOUTH] experience any difficulty with hearing normal conversations? (Pathways Baseline Survey) <Y1K02>

- YES.....1
- NO .....0 GO TO XII.B3
- DOES NOT DO THIS ACTIVITY AT ALL.....2
- DON'T KNOW.....d GO TO XII.B3
- REFUSED.....r GO TO XII.B3

XII.B2=1 OR 2
[Do you/Does (YOUTH)]

**XII.B2a. [Do you/Does (YOUTH)] require special equipment or help from another person to hear a normal conversation? (Pathways Baseline Survey) <Y1K02a>**

- YES.....1
- NO .....0
- DON'T KNOW.....d
- REFUSED.....r

ALL YOUTH AND PROXIES: (VII.A2_1 =1 OR 2)
[Do you/Does (YOUTH)]

**XII.B3. [Do you/Does (YOUTH)] experience any difficulty with seeing, even with the use of prescription glasses or contact lenses? (Pathways Baseline Survey) <Y1K03>**

- YES.....1
- NO .....0 GO TO XII.B4
- DOES NOT DO THIS ACTIVITY AT ALL.....2
- DON'T KNOW.....d GO TO XII.B4
- REFUSED.....r GO TO XII.B4

XII.B3=1 OR 2
[Do you/Does (YOUTH)]

**XII.B3a. [Do you/Does (YOUTH)] require special equipment or help from another person to see, other than the use of prescription glasses or contact lenses? (Pathways Baseline Survey) <Y1K03a>**

- YES.....1
- NO .....0
- DON'T KNOW.....d
- REFUSED.....r

ALL YOUTH AND PROXIES: (VII.A2_1 =1 OR 2)
[Do you/Does (YOUTH)]

**XII.B4. [Do you/Does (YOUTH)] experience any difficulty with walking, standing, or climbing the stairs? (Pathways Baseline Survey) <Y1K04>**

- YES.....1
- NO .....0 GO TO XII.B5
- DOES NOT DO THIS ACTIVITY AT ALL.....2
- DON'T KNOW.....d GO TO XII.B5
- REFUSED.....r GO TO XII.B5

XII.B4=1 OR 2
[Do you/ Does (YOUTH)]

**XII.B4a. [Do you/ Does (YOUTH)] require special equipment or help from another person to walk, stand, or climb the stairs? (Pathways Baseline Survey) <Y1K04a>**

- YES.....1
- NO .....0
- DON'T KNOW.....d
- REFUSED.....r

ALL YOUTH AND PROXIES: (VII.A2_1 =1 OR 2)
[Do you/ Does (YOUTH)]

**XII.B5. [Do you/Does (YOUTH)] experience any difficulty with dressing, bathing, or eating? (Pathways Baseline Survey) <Y1K05>**

- YES.....1
- NO .....0 GO TO XII.B6
- DOES NOT DO THIS ACTIVITY AT ALL.....2
- DON'T KNOW.....d GO TO XII.B6
- REFUSED.....r GO TO XII.B6

XII.B5=1 OR 2
[Do you/ Does (YOUTH)]

**XII.B5a. [Do you/ Does YOUTH] require special equipment or help from another person to dress, bathe, or eat? (Pathways Baseline Survey) <Y1K05a>**

- YES.....1
- NO .....0
- DON'T KNOW.....d
- REFUSED.....r

ALL YOUTH AND PROXIES: (VII.A2_1 =1 OR 2)
[Do you/ Does (YOUTH)]

**XII.B6. [Do you/ Does (YOUTH)] experience any difficulty with getting around inside the home? (Pathways Baseline Survey) <Y1K06>**

- YES.....1
- NO .....0 GO TO XII.B7
- DOES NOT DO THIS ACTIVITY AT ALL.....2
- DON'T KNOW.....d GO TO XII.B7
- REFUSED.....r GO TO XII.B7

XII.B6=1 OR 2
[Do you/ Does (YOUTH)]

**XII.B6a. [Do you/ Does (YOUTH)] require special equipment or help from another person to get around inside the home? (Pathways Baseline Survey) <Y1K06a>**

- YES.....1
- NO .....0
- DON'T KNOW.....d
- REFUSED.....r

ALL YOUTH AND PROXIES: (VII.A2_1 =1 OR 2)
[Do you/ Does (YOUTH)]

**XII.B7. [Do you/ Does (YOUTH)] have any difficulty with getting around outside the home, like to school, to a nearby store or park, or to a neighbor’s house? (Pathways Baseline Survey) <Y1K07>**

- YES.....1
- NO .....0 GO TO XII.B8
- DOES NOT DO THIS ACTIVITY AT ALL.....2
- DON'T KNOW.....d GO TO XII.B8
- REFUSED.....r GO TO XII.B8

XII.B7=1 OR 2
[Do you/ Does (YOUTH)]

**XII.B7a. [Do you/ Does (YOUTH)] require special equipment or help from another person to get around outside the home? (Pathways Baseline Survey) <Y1K07a>**

- YES.....1
- NO .....0
- DON'T KNOW.....d
- REFUSED.....r

ALL YOUTH AND PROXIES: (VII.A2_1 =1 OR 2)
[Do you/ Does (YOUTH)]

**XII.B8. [Do you/ Does (YOUTH)] experience any difficulty with planning and carrying out activities to achieve a goal? (Pathways Baseline Survey) <Y1K08>**

- YES.....1
- NO .....0 GO TO XII.B9
- DOES NOT DO THIS ACTIVITY AT ALL.....2
- DON'T KNOW.....d GO TO XII.B9
- REFUSED.....r GO TO XII.B9

XII.B8=1 OR 2
DO YOU/DOES THE YOUTH

**XII.B8a. [Do you/ Does (YOUTH)] require special equipment, assistive technology, or help from another person to plan and carry out activities to achieve a goal? (Pathways Baseline Survey, modified) <Y1K08a>**

- YES.....1
- NO .....0
- DON'T KNOW.....d
- REFUSED.....r

ALL YOUTH AND PROXIES: (VII.A2_1 =1 OR 2)
[DO YOU/ Does (YOUTH)]

**XII.B9. [Do you/ Does (YOUTH)] experience any difficulty with learning, remembering, or concentrating? (Pathways Baseline Survey) <Y1K09>**

- YES.....1
- NO .....0 GO TO BOX 12
- DOES NOT DO THIS ACTIVITY AT ALL.....2
- DON'T KNOW.....d GO TO BOX 12
- REFUSED.....r GO TO BOX 12

XIII.B9=1 OR 2
[Do you / Does (YOUTH)]

**XII.B9a. [Do you/Does (YOUTH)] require special equipment, assistive technology, or help from another person to learn, remember, or concentrate? (NEW) <Y1K09a>**

- YES.....1
- NO .....0
- DON'T KNOW.....d
- REFUSED.....r

**SECTION XII.C. YOUTH'S HEALTH INSURANCE COVERAGE**

<b>BOX 12</b>
SECTION C IS ASKED ONLY OF <u>YOUTH</u> WHERE PARENT INTERVIEW I.RTYPE=3 OR I.RTYPE=4). ALL OTHER YOUTH AND PROXIES SKIP TO BOX 13.

ALL INDEPENDENT YOUTH AND THEIR PROXIES: (VII.A2_1 =1 OR 2) AND [I.RTYPE=3 OR I.RTYPE=4]
--

**XII.C.Intro. The next questions are about health insurance, including health insurance obtained through employment or purchased directly, as well as government programs like Medicaid and Medicare. <Y1L\_Intro>**

CONTINUE ..... 1

ALL INDEPENDENT YOUTH AND THEIR PROXIES: (VII.A2\_1 =1 OR 2) AND [I.RTYPE=3 OR I.RTYPE=4]  
 [ARE YOU / IS (YOUTH)]

**XII.C1. [Are you / Is (YOUTH)] covered by any kind of health insurance or some other kind of health care plan? (NHIS, modified) <Y1L01>**

- YES..... 1
- NO ..... 0 GO TO BOX 13
- DON'T KNOW..... d GO TO BOX 13
- REFUSED..... r GO TO BOX 13

**SOFT CHECK: IF XII.C1=0: May I confirm that I have recorded your answer correctly – that is that [you are / YOUTH is] not covered by any kind of health insurance of any kind at this time. This includes private insurance, as well as any insurance you may get through government programs.**

XII.C1=1  
 [Are you / Is YOUTH], [Are you / Is YOUTH], [or {state Medicaid program name}], CALCULATE AGE OF YOUTH (IF ≥18 YEARS) FROM YEAR OF BIRTH PROVIDED IN SAMPLE FILE [STATE-SPECIFIC NAME]

**XII.C2-C6. [Are you / Is YOUTH]...**

	CODE ONE PER ROW			
	YES	NO	REF	DK
<b>XII.C2. Now covered by <u>private health insurance</u>? (NHIS, modified) &lt;Y1L02&gt;</b>	1	0	r	d
<b>XII.C3. Covered by <u>Medicaid</u> [or {state Medicaid program name}]? (Source: NHIS, modified) &lt;Y1L03&gt;</b>	1	0	r	d
<b>XII.C4. IF YOUTH AGE IS ≥ 18: Covered by <u>Medicare</u>? (NHIS, modified) &lt;Y1L04&gt;</b>	1	0	r	d
<b>XII.C5. IF MEDICAID COVERAGE NOT IDENTIFIED (XII.C3=0, d, r): Covered by the Children’s Health Insurance Program, also called S-CHIP or [STATE-SPECIFIC NAME]? &lt;Y1L05&gt;</b>	1	0	r	d
<b>XII.C6. Covered by <u>any other kind</u> of health insurance I have not already asked about? &lt;Y1L06&gt;</b>	1	0	r	d

**SOFT CHECK: (IF REPORTED TO HAVE INSURANCE (XII.C1=1), BUT NO INSURANCE IS REPORTED (XII.C2-XII.C6 ALL=0): May I confirm I have correctly recorded you have health insurance coverage? IF NO, (NOT COVERED), RETURN TO XII.C1 TO CORRECT THE RESPONSE. IF YES (COVERED), RETURN TO XII.C2-C6 TO RECORD THE TYPE OF COVERAGE.**



XII.C2=1
[you purchase / YOUTH purchases] [your / (his / her)]

**XII.C2a. Is that private insurance through an employer, a union, a family member, or that [you purchase / YOUTH purchases] on [your / (his / her)] own? (NHIS, modified) <Y1L02a>**

INTERVIEWER: IF COVERED BY MORE THAN ONE PRIVATE INSURANCE, ASK FOR SOURCE OF PRIMARY OR MAIN PRIVATE INSURANCE COVERAGE.

- YES..... 1
- NO ..... 0 GO TO BOX 13
- DON'T KNOW..... d GO TO BOX 13
- REFUSED..... r GO TO BOX 13

PURCHASED ON OWN: XII.C2a=1
[state marketplace name, or]

**XII.C2b. Was the private insurance purchased through the Affordable Care Act or a health insurance exchange, sometimes called [state marketplace name, or], Healthcare.gov, or ObamaCare? (NHIS, modified) <Y1L02b>**

- YES..... 1
- NO ..... 0 GO TO BOX 13
- DON'T KNOW..... d GO TO BOX 13
- REFUSED..... r GO TO BOX 13

PURCHASED THROUGH THE AFFORDABLE CARE ACT: XII.C2b=1
[Do you / Does (YOUTH)]

**XII.C2c. [Do you / Does (YOUTH)] receive a tax credit to help pay for private insurance premiums? (Source: NHIS, modified) <Y1L02c>**

- YES..... 1
- NO ..... 0
- DON'T KNOW..... d
- REFUSED..... r

**SECTION XII.D. HOUSEHOLD BENEFITS AND INCOME**

**BOX 13**  
 CONTINUE TO XII.D.INTRO ONLY IF [I.RTYPE=3 OR I.RTYPE=4].  
 ALL OTHER YOUTH AND YOUTH PROXIES SKIP TO XIII.A1.

ALL YOUTH AND PROXIES: (VII.A2\_1 =1 OR 2) AND [I.RTYPE=3 OR I.RTYPE=4]

**XII.D.Intro.** These questions will ask about benefits your household may receive, as well as your household income. <Y1M\_Intro>

CONTINUE .....1

ALL INDEPENDENT YOUTH AND PROXIES: (VII.A2\_1 =1 OR 2) AND [I.RTYPE=3 OR I.RTYPE=4]

[Do you / Does (YOUTH)], [your / YOUTH's] [FILL STATE-SPECIFIC NAME FOR TANF]

**XII.D1.** [Do you / Does (YOUTH)] or does anyone in [your / YOUTH's] household receive ...

	CODE ONE PER ROW			
	YES	NO	DK	REF
<b>a. Assistance from temporary assistance to needy families or [FILL STATE-SPECIFIC NAME FOR TANF]? (YTD36M-XI.B1) &lt;Y1M01a&gt;</b>	1	0	d	r
<b>b. Assistance from food stamps, or SNAP (the Supplemental Nutrition Assistance Program). (YTD36M-XI.B2) &lt;Y1M01b&gt;</b>	1	0	d	r
<b>c. Any government housing assistance in paying rent, such as through public housing or Section 8? (YTD36M-XI.B3) &lt;Y1M01c&gt;</b>	1	0	d	r
<b>d. Receive any income from SSI or SSDI because of a disability? (YTD36M-XI.C1) &lt;Y1M01d&gt;</b>	1	0	d	r
<b>e. Receive retirement income from social security? &lt;Y1M01e&gt;</b>	1	0	d	r
<b>f. Receive social security survivor's benefits? &lt;Y1M01f&gt;</b>	1	0	d	r
<b>g. Receive any other government benefits that we have not yet accounted for in this list? &lt;Y1M01g&gt;</b>	1	0	d	r

XII.D1G=1
[do you/does YOUTH]

**XII.D2. What other government benefits [do you/does (YOUTH)] receive? <Y1M02>**

- \_\_\_\_\_ (STRING 100)  
 BENEFITS  
 DON'T KNOW..... d  
 REFUSED..... r

ALL INDEPENDENT YOUTH AND PROXIES: (VII.A2_1 =1 OR 2) AND [I.RTYPE=3 OR I.RTYPE=4]
[YOUR / YOUTH's] [CALCULATE AND FILL PRIOR CALENDAR YEAR]

**XII.D3. Please tell me which group best describes the total income of all persons in your household last year, including salaries or other earnings, money from public assistance, retirement, and so on, for all household members, before taxes.**

Was [your / YOUTH's] household income last year, that is, in [PRIOR CALENDAR YEAR]. . . <Y1M03>

**CODE ONE ONLY**

- Less than \$10,000,..... 1  
 \$10,000 or more, but less than \$20,000,..... 2  
 \$20,000 or more, but less than \$30,000,..... 3  
 \$30,000 or more, but less than \$40,000,..... 4  
 \$40,000 or more, but less than \$50,000..... 5  
 \$50,000 or more, but less than \$75,000, or ..... 6  
 \$75,000 or more? ..... 7  
 DON'T KNOW..... d  
 REFUSED..... r

		Asked of Self-Reporting Youth	Asked of Youth's Proxy Respondent
<b>XIII.</b>	<b>Youth Demographics and Contact Information</b>	<b>x</b>	<b>x</b>

**SECTION XIII. PART A. YOUTH'S DEMOGRAPHICS**

ALL YOUTH AND PROXIES: (VII.A2_1 =1 OR 2)
[DO YOU/ DOES (YOUTH)] [yourself / (himself /herself)]

**XIII.A1. The next set of questions help us understand the experiences of different groups of people who take part in the survey. <Y1N01>**

**[Do you /Does (YOUTH)] consider [yourself / (himself /herself)] to be of Hispanic or Latino origin, such as Mexican, Puerto Rican, Cuban, or other Spanish background? (YTD Baseline, 53)**

- YES ..... 1
- NO ..... 0
- DON'T KNOW ..... d
- REFUSED ..... r

ALL YOUTH AND PROXIES: (VII.A2_1 =1 OR 2)
[YOUR/youth's], [ARE YOU/ IS [YOUTH]]

**XIII.A2. I'm going to read a list of race categories, please choose one or more races that best describes (YOUR/YOUTH'S) race. [Are you /Is (YOUTH)] . . . (YTD Baseline 54)**

INTERVIEWER: IF RESPONDENT SAYS MIXED RACE OR BI- OR MULTIRACIAL, ASK WHICH RACES THE YOUTH REPRESENTS AND CODE EACH.

**CODE ALL THAT APPLY**

- American Indian or Alaska Native** ..... 1 <Y1N02\_1>
- Asian**..... 2 <Y1N02\_2>
- Black or African American** ..... 3 <Y1N02\_3>
- Native Hawaiian or Other Pacific Islander** ..... 4 <Y1N02\_4>
- White**..... 5 <Y1N02\_5>
- Other race** ..... 99 <Y1N02\_6>

\_\_\_\_\_ (STRING 200)

- DON'T KNOW ..... d
- REFUSED ..... r

IF OTHER SPECIFY (99): <b>What is (your race/ (YOUTH)'s race) &lt;Y1N02Other&gt;</b>
--

**SECTION XIII. PART B. YOUTH'S CONTACT INFORMATION**

ALL YOUTH AND PROXIES: (VII.A2_1 =1 OR 2)
[you/ YOUTH], [your / YOUTH'S]

**XIII.B.Intro.** The next questions will be about how to contact [you/ YOUTH]. It is important that we do not lose touch with [you / YOUTH], so I will ask for [your / YOUTH's] contact information, such as your address and telephone number, as well as others who may be able to help us reach [you / YOUTH] in the future. <Y10\_Intro>

CONTINUE .....0

ALL YOUTH AND PROXIES: (VII.A2_1 =1 OR 2)
[YOUR/YOUTH'S] [YOUTH MAILING ADDRESS FROM SAMPLE FILE] [do you / does YOUTH]

**XIII.B1.** What is [your/YOUTH's] home address? This is where we will mail your thank you letter and payment for this interview. Is it [YOUTH MAILING ADDRESS FROM SAMPLE FILE]? (YTD Baseline, 5 modified) <Y1001>

**PROBE:** What street [do you/does YOUTH] live on? In what town? If you don't know the full address, that's OK, just share as much as you can remember.

INTERVIEWER: IF REFUSES, PROBE FOR ZIP CODE.

SAME ADDRESS AS SHOWN ABOVE .....1

USE A DIFFERENT ADDRESS.....2

ADDRESS ABOVE NOT CORRECT – UPDATE AS FOLLOWS:.....99

\_\_\_\_\_

STREET 1

\_\_\_\_\_

STREET 2

\_\_\_\_\_

CITY

\_\_\_\_\_

STATE

\_\_\_\_\_

ZIP

DON'T KNOW .....d

REFUSED .....r

ALL YOUTH AND PROXIES: (VII.A2_1 =1 OR 2)
[YOUR/(YOUTH)'S], POPULATE FILL FOR [YOUTH PHONE] FROM SAMPLE FILE

**XIII.B2. What is the best telephone number to reach [you / (YOUTH)] at? Is it [YOUTH PHONE] or another number? <Y1O02>**

- SAME PHONE NUMBER AS SHOWN ABOVE .....1
- DIFFERENT PHONE NUMBER – UPDATE BELOW.....99

<Y1O02Phone\_PhoneNumber>

|\_|\_|\_|\_| - |\_|\_|\_|\_|\_| - |\_|\_|\_|\_|\_|  
 (0-999 ) (0-999) (0-9999)

- NO PHONE NUMBER .....0 GO TO XIII.B4
- DON'T KNOW .....d GO TO XIII.B4
- REFUSED .....r GO TO XIII.B4

XIII.B2>1
[YOUR/(YOUTH)'S]

**XIII.B3. Is that a landline or a cell phone? <Y1O03>**

- LAND LINE.....1 GO TO XIII.B4
- CELL PHONE .....2
- DON'T KNOW .....d GO TO XIII.B4
- REFUSED .....r GO TO XIII.B4

XIII.B3 =2
[YOUR/YOUTH'S]

**XIII.B3a. Would it be ok for us to send a text message when we try to contact [you/ (YOUTH)] for the next survey? Please note that standard text message rates will apply. (NLTS2012, J11b) <Y1O03a>**

- YES .....1
- NO, DOES NOT USE TEXT MESSAGING .....2
- NO .....0
- DON'T KNOW .....d
- REFUSED .....r

ALL YOUTH AND PROXIES: (VII.A2\_1 =1 OR 2)  
 [YOUR/ YOUTH'S] [you check / (YOUTH) checks]

**XIII.B4. What is [your/(YOUTH)'s] email address? (YTD Baseline, 8) <Y1O04>**

\_\_\_\_\_ (STRING 100)  
 Email address  
 NO EMAIL ADDRESS.....0  
 DON'T KNOW .....d  
 REFUSED .....r

IF OTHER SPECIFY (99): **What is the email [you check / (YOUTH) checks] most often?**  
 <Y1O04Email>

SOFT CHECK: EMAIL ADDRESSES MUST HAVE A VALID FORMAT. MAKE SURE THE EMAIL ADDRESS INCLUDES TEXT, THE @ SYMBOL, TEXT, A PERIOD, AND A VALID DOMAIN, SUCH AS ABCD@EFGH.COM

**SECTION XIII. PART C. MOTHER'S CONTACT INFORMATION**

ALL YOUTH AND PROXIES: (VII.A2\_1 =1 OR 2) WHERE MOTHER (BIOLOGICAL, ADOPTED, OR STEP) DID NOT COMPLETE THE PARENT / GUARDIAN INTERVIEW (I.ELIG=5, 6, 8, 9, 10, 11, OR 99)  
 [YOUR/YOUTH'S]

**XIII.C1. What is [your /(YOUTH)'s] mother's name? (YTD Baseline, 66) <Y1P01>**

\_\_\_\_\_ (STRING 30)  
 FIRST NAME  
 \_\_\_\_\_ (STRING 1)  
 MIDDLE INITIAL  
 \_\_\_\_\_ (STRING 60)  
 LAST NAME

INTERVIEWER: IF MOTHER IS DECEASED, PLEASE SELECT OPTION 1, "DOES NOT HAVE A MOTHER." IF YOUTH OFFERS THAT HE / SHE DOES NOT HAVE A MOM BUT INSTEAD HAS 2 DADS, PLEASE RECORD THE CONTACT INFORMATION FOR THE FIRST OF THE TWO DADS HERE.

CMOTO INTERVIEWER NOTE: IF MOTHER IS DECEASED, PLEASE SELECT, "DOES NOT HAVE A MOTHER." IF YOUTH OFFERS THAT HE / SHE DOES NOT HAVE A MOM BUT INSTEAD HAS 2 DADS, PLEASE RECORD THE CONTACT INFORMATION FOR THE FIRST OF THE TWO DADS HERE.

DOES NOT HAVE A MOTHER .....1 GO TO  
 XIII.D1  
 DON'T KNOW .....d GO TO  
 XIII.D1

REFUSED .....r GO TO  
XIII.D1

XIII.C1=POPULATED NAME
[ADDRESS FROM YOUTH MAILING ADDRESS IN SAMPLE FILE]

**XIII.C2. What is her address? Is it [YOUTH MAILING ADDRESS IN SAMPLE FILE] or someplace else? (YTD Baseline, 67 modified) <Y1P02>**

**PROBE: Where does she live or stay?**

**PROBE: If you don't know the full address, that's OK, just share as much as you can remember.**

SAME ADDRESS AS YOUTH (SHOWN ABOVE) ..... 1

DIFFERENT ADDRESS: UPDATE BELOW:.....99

\_\_\_\_\_  
STREET 1

\_\_\_\_\_  
STREET 2

\_\_\_\_\_  
CITY

\_\_\_\_\_  
STATE

\_\_\_\_\_  
ZIP

DON'T KNOW .....d

REFUSED .....r

XIII.C1=POPULATED NAME
[PHONE FROM VI.B2] [FILL FIRST NAME FROM XIII.C1]

**XIII.C3. What is the best telephone number to reach [FILL FIRST NAME FROM XIII.C1] at? <Y1P03>**

PHONE NUMBER GIVEN .....99

**<Y1P03Phone\_PhoneNumber>**

|\_|\_|\_|\_| - |\_|\_|\_|\_|\_| - |\_|\_|\_|\_|\_|  
(0-999 ) (0-999) (0-9999)

DOES NOT HAVE A TELEPHONE .....0 GO TO  
XIII.C4

DON'T KNOW .....d GO TO  
XIII.C4

REFUSED .....r GO TO  
XIII.C4



XIII.C3=>1

**XIII.C3a. Is that number a land line or cell phone? (NLTS2012, I1b) <Y1P03a>**

**CODE ONE ONLY**

- LANDLINE.....1
- CELL PHONE .....2
- DON'T KNOW .....d
- REFUSED .....r

**SECTION XIII. PART D. YOUTH'S FATHER'S CONTACT INFORMATION**

ALL YOUTH AND PROXIES: (VII.A2\_1 =1 OR 2) WHERE FATHER (BIOLOGICAL, ADOPTED, OR STEP) DID NOT COMPLETE THE PARENT / GUARDIAN INTERVIEW (I.ELIG=5,6, 7, 9, 10, 11 OR 99]

[YOUR/ (YOUTH)'s]

**XIII.D1. What is [YOUR/ (YOUTH)'s] father's name? (YTD Baseline, 69) <Y1Q01>**

- \_\_\_\_\_ (STRING 30)  
FIRST NAME
- \_\_\_\_\_ (STRING 30)  
MIDDLE INITIAL/NAME
- \_\_\_\_\_ (STRING 60)  
LAST NAME

INTERVIEWER: IF FATHER IS DECEASED, PLEASE SELECT OPTION 1, "DOES NOT HAVE A FATHER." IF YOUTH OFFERS THAT HE / SHE DOES NOT HAVE A DAD BUT INSTEAD HAS 2 MOMS, PLEASE RECORD THE CONTACT INFORMATION FOR THE SECOND OF THE TWO MOMS HERE.

CMOTO INTERVIEWER NOTE: IF FATHER IS DECEASED, PLEASE SELECT "DOES NOT HAVE A FATHER." IF YOUTH OFFERS THAT HE / SHE DOES NOT HAVE A DAD BUT INSTEAD HAS 2 MOMS, PLEASE RECORD THE CONTACT INFORMATION FOR THE SECOND OF THE TWO MOMS HERE.

- DOES NOT HAVE A FATHER .....1 GO TO  
XIII.E1
- DON'T KNOW .....d GO TO  
XIII.E1
- REFUSED .....r GO TO  
XIII.E1

XIII.D1=POPULATED NAME
[Your / (YOUTH)'s], [YOUTH MAILING ADDRESS IN SAMPLE FILE]

**XIII.D2a. What is [your / (YOUTH)'s] father's address? Is it [YOUTH MAILING ADDRESS IN SAMPLE FILE] or someplace else? (YTD Baseline, 71 modified) <Y1Q02>**

**PROBE: Where does he live or stay? Where does he get mail delivered? If you don't know the full address, that's OK, just share as much as you can remember.**

SAME ADDRESS AS YOUTH (SHOWN ABOVE) ..... 1  
 DIFFERENT ADDRESS: UPDATE BELOW:.....99

\_\_\_\_\_

STREET 1

\_\_\_\_\_

STREET 2

\_\_\_\_\_

CITY

\_\_\_\_\_

STATE

\_\_\_\_\_

ZIP

DON'T KNOW .....d

REFUSED .....r

XIII.D1=POPULATED NAME
[FILL FIRST NAME FROM XIII.D1]

**XIII.D3. What's the best telephone number to reach [FILL FIRST NAME FROM XIII.D1] at? (YTD Baseline, 72) <Y1Q03>**

PHONE NUMBER GIVEN .....99

**<Y1Q03Phone\_PhoneNumber>**

|\_|\_|\_|\_| - |\_|\_|\_|\_|\_| - |\_|\_|\_|\_|\_|

(0-999) (0-999) (0-9999)

DOES NOT HAVE A TELEPHONE .....0 GO TO XIII.D4

DON'T KNOW .....d GO TO XIII.D4

REFUSED .....r GO TO XIII.D4

XIII.D3=>1

**XIII.D3a. Is that number a land line or cell phone? (NLTS2012, I1b) <Y1Q03a>**

**CODE ONE ONLY**

LANDLINE.....1  
 CELL PHONE .....2  
 DON'T KNOW .....d  
 REFUSED .....r

**SECTION XIII. PART E. YOUTH'S ADDITIONAL CONTACT 1**

THIS SECTION IS ASKED OF ALL YOUTH AND PROXIES.

YOUTH AND PROXIES: (VII.A2\_1 =1 OR 2)

[YOU/(YOUTH)], [YOU/(HIM/HER)], [YOU MOVE/YOUTH MOVES]

**XIII.E1. Can you please tell me the name of a friend or relative who does not live with [you/ (YOUTH)] and would know how to reach [you/ (him/her)] if [you move /(YOUTH) moves] or get a new telephone number? (YTD Baseline, 79) <Y1R01>**

**What is his or her name?**

\_\_\_\_\_ (STRING 30)  
 FIRST NAME  
 \_\_\_\_\_ (STRING 1)  
 MIDDLE INITIAL  
 \_\_\_\_\_ (STRING 60)  
 LAST NAME

DON'T KNOW .....d GO TO  
 BOX 14  
 REFUSED .....r GO TO  
 BOX 14

XIII.E1= NAME POPULATED
[YOU/(YOUTH)]

**XIII.E2. How is this person related to [you/ (YOUTH)]? (YTD Baseline, 82) <Y1R02>**

**CODE ONE ONLY**

- SISTER ..... 1
- BROTHER..... 2
- GRANDMOTHER..... 3
- GRANDFATHER..... 4
- AUNT..... 5
- UNCLE ..... 6
- COUSIN ..... 7
- FRIEND ..... 8
- OTHER RELATIVE ..... 9
- DON'T KNOW ..... d
- REFUSED ..... r

XIII.E1. NAME POPULATED
-------------------------

**XIII.E3. What is the city and state in which [NAME FROM XII.E1] lives or stays? (YTD Baseline, 80 modified) <Y1R03City> ; <Y1R03State>**

**PROBE: If you don't know both, that's OK, just share as much as you can remember.**

\_\_\_\_\_

CITY

\_\_\_\_\_

STATE

- DON'T KNOW ..... d
- REFUSED ..... r

XIII.E1=NAME POPULATED
[NAME FROM XII.E1]

**XIII.E4. What's the best telephone number to reach [NAME FROM XII.E1] at? (YTD Baseline, 81) <Y1R04>**

INTERVIEWER: IF THE RESPONDENT CANNOT PROVIDE A PHONE NUMBER FOR THIS CONTACT, ASK IF THERE IS ANOTHER CONTACT HE / SHE COULD PROVIDE INSTEAD, AS PHONE NUMBERS ARE A CRITICAL WAY OF CONTACTING THIS PERSON IN THE FUTURE.

|\_|\_|\_|\_| - |\_|\_|\_|\_|\_| - |\_|\_|\_|\_|\_| <Y1R04Phone\_PhoneNumber>  
 (0-999) (0-999) (0-9999)

- DOES NOT HAVE A TELEPHONE ..... 1 GO TO BOX 14

DON'T KNOW .....d GO TO  
 BOX 14

REFUSED .....r GO TO  
 BOX 14

YOUTH AND PROXIES: (VII.A2\_1 =1 OR 2)

[You / (YOUTH)] [you / does (YOUTH)] [your/(his/her)] [CALCULATE DATE OF INTERVIEW FROM SAMPLE LAUNCH DATE. IF > 10 DAYS, FILL \$30, IF ≤ 10 DAYS, FILL \$40].

**CLOSING-1.** Thank you for the time you have spent answering these questions. As we talked about earlier, we will send [you/(YOUTH)] a gift card for completing this interview. We have two choices – do [you / does (YOUTH)] prefer a card to Target or Walmart? <YZCLOSING\_1>

[You / (YOUTH)] should receive [your / (his/her)] thank you letter which has the [CALCULATE AND FILL: \$30 / \$40] gift card in the next 4-6 weeks.

**CMOTO CLOSING-1.** Thank you for the time you have spent answering these questions. As we talked about earlier, we will give [you/(YOUTH)] a gift card for completing this interview. We have two choices – do [you / does (YOUTH)] prefer a card to Target or Walmart?

TARGET CARD ..... 1

WALMART CARD .....0

DON'T KNOW .....d

REFUSED .....r

YOUTH AND PROXIES: PARENT-CLOSE-2 NOT POPULATED AND INTERVIEW CONDUCTED IN CATI MODE

**XIII.F1 CATI MODE ONLY:** We've reached the end of your portion of the survey. Now we need to complete the remaining set of questions with [FILL NAME OF PARENT RESPONDENT].

Would (he/she) be available to speak now?

**IF ABLE TO FINISH PARENT INTERVIEW NOW: FINISH YOUTH INTERVIEW AND GO TO THE PARENT INSTRUMENT**

**IF UNABLE TO FINISH PARENT INTERVIEW NOW BUT CAN SET AN APPOINTMENT: FINISH YOUTH INTERVIEW, GO TO THE PARENT INSTRUMENT, AND SET AN APPOINTMENT**

**IF NOT ABLE TO FINISH INTERVIEW: FINISH YOUTH INTERVIEW**

YES – ABLE TO FINISH PARENT INTERVIEW NOW ..... 1 GO TO PARENT INTERVIEW

NO – NOT ABLE TO FINISH PARENT INTERVIEW NOW BUT CAN SET AN APPOINTMENT  
 ..... 0 GO TO PARENT  
 INTERVIEW

NO – NOT ABLE TO FINISH PARENT INTERVIEW ..... 2 GO TO CLOSING-  
 2

DON'T KNOW ..... d GO TO CLOSING-  
 2

REFUSED ..... r GO TO CLOSING-2

YOUTH AND PROXIES: (VII.A2\_1 =1 OR 2)

**CLOSING-2. That completes the interview. Thank you and have a wonderful day!**  
 <Y1Z\_CLOSING\_2>

TERMINATE ..... 1 GO TO  
 BOX 15

**BOX 15**

PARENT INTERVIEW IS COMPLETE IF PARENT-CLOSE-2=1  
 YOUTH INTERVIEW IS COMPLETE IF CLOSING-2=1.  
 IF CLOSING -2 (YOUTH) AND PARENT-CLOSE-2 =1 CASE IS FINALIZED AS  
 COMPLETE.  
 IF CLOSING-2 (YOUTH) IS “.” OR PARENT-CLOSE-2= “.” THEN CASE REMAINS IN  
 PARTIALLY COMPLETED STATUS. SUBSEQUENT CALL BACKS SHOULD ROUTE TO  
 COMPLETE THE PORTION OF THE INTERVIEW WHERE FINAL VARIABLE  
 (CLOSING-2 OR PARENT-CLOSE-2) IS “.”

CLOSING-2 = 1, AND YOUTH INTERVIEW WAS COMPLETED DIRECTLY FROM PARENT  
 INTERVIEW

**LoadStudent.** AFTER RETURNING FROM THE YOUTH INTERVIEW, ENTER A ‘1’ IN THIS FIELD TO  
 MOVE ON.

RETURNED FROM YOUTH INTERVIEW ..... 1

RETURNED FROM YOUTH INTERVIEW

**ChildComplete.** INTERVIEWER: DID THE YOUTH COMPLETE THEIR INTERVIEW?

YES ..... 1  
 NO ..... 0

ChildComplete = 1

**UpdateParent.** INTERVIEWER: THE YOUTH HAS COMPLETED THEIR INTERVIEW. YOU NEED TO  
 PRESS THE BUTTON IN THE BOX TO UPDATE THE PARENT RECORD.

THEN ENTER A ‘1’ IN THIS FIELD TO MOVE ON.

YOUTH COMPLETED INTERVIEW ..... 1

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