

ICPSR 38417

**National Couples' Health and Time
Study (NCHAT), United States,
2020-2021**

Claire M. Kamp Dush
University of Minnesota

Wendy D. Manning
Bowling Green State University

English Questionnaire for Time Diary Data

Inter-university Consortium for
Political and Social Research
P.O. Box 1248
Ann Arbor, Michigan 48106
www.icpsr.umich.edu

Terms of Use

The terms of use for this study can be found at:
<http://www.icpsr.umich.edu/web/ICPSR/studies/38417/terms>

Information about Copyrighted Content

Some instruments administered for studies archived with ICPSR may contain in whole or substantially in part contents from copyrighted instruments. Reproductions of the instruments are provided as documentation for the analysis of the data associated with this collection. Restrictions on "fair use" apply to all copyrighted content. More information about the reproduction of copyrighted works by educators and librarians is available from the United States Copyright Office.

NOTICE

WARNING CONCERNING COPYRIGHT RESTRICTIONS

The copyright law of the United States (Title 17, United States Code) governs the making of photocopies or other reproductions of copyrighted material. Under certain conditions specified in the law, libraries and archives are authorized to furnish a photocopy or other reproduction. One of these specified conditions is that the photocopy or reproduction is not to be "used for any purpose other than private study, scholarship, or research." If a user makes a request for, or later uses, a photocopy or reproduction for purposes in excess of "fair use," that user may be liable for copyright infringement.

National Couples' Health and Time Study Wave 1 Time Diary (English)

Dir Directions: For the next 24 hours, we'd like you to keep a detailed record of how you spend your time. You will be reporting everything you've done from 4 am on **<START DAY>** to 4 am on **<END DAY>**. You can login to the survey as many times as you want to enter your activities, but we'll remind you every 4 hours to enter your activities.

----- **NEW SCREEN** -----

Intro We'll ask you to enter each activity you did during the day, and the time you started and ended that activity. Then we'll ask a few more questions about each activity you did, like:

- were you doing anything else;
- where you were;
- who was doing the activity with you,
- who else was there;
- and some follow-up questions.

----- **NEW SCREEN** -----

Q80 First, we will ask you about all members of your household who live there most of the time. We will ask you to use initials (first letter of their first name and first letter of their last name) to identify members of your household.

If two or more members of your household have the same first and last initial, indicate the difference between them by also using their middle initials or by numbering them 1, 2, etc. For example, if two members of their household have AB as their initials, you could label them ACB (if their middle name begins with C) and ADB (if their middle name begins with D) or AB1 and AB2.

Q100 Including yourself, how many people live in your household?

- a. 1 **[SKIP Q ConfHH]**
- b. 2
- c. 3
- d. 4
- e. 5
- f. 6
- g. 7
- h. 8
- i. 9
- j. 10
- k. 11
- l. 12
- m. 13
- n. 14
- o. 15 or more

----- **NEW SCREEN** -----

CONFQ100 You said there are **<RESPONSE FROM Q100>** people, including yourself, living in your household. Is this correct? **PROGRAMMER: FORCE RESPONSE**

- a. Yes
- b. No **[RETURN TO Q80]**

----- NEW SCREEN -----

Q100A What are your initials?
<TEXT ENTRY>

HH1-14 **[FOR NUMBER OF HOUSEHOLD MEMBERS MINUS ONE (Q100-1)]** What are the initials for household member # <2-15>?
<TEXT ENTRY>

----- NEW SCREEN -----

HHi1-14 **[FOR NUMBER OF HOUSEHOLD MEMBERS MINUS ONE (Q100-1)]** Which of the following best describes your relationship with **[INSERT INITIALS FROM HH1-14]**?
a. My spouse/wife/husband
b. My partner/boyfriend/girlfriend
c. My biological child
d. My adopted child
e. My spouse/partner's child
f. My non-biological child
g. My foster child
h. My grandchild
i. My parent
j. My stepparent My spouse/partner's parent
k. My sibling
l. My spouse/partner's sibling
m. My other family member or relative
n. My spouse/partner's other family member or relative
o. Friend (no family relation)
p. Roommate (no relation)
q. Other

----- NEW SCREEN -----

ConfHH Are the following relationships correct? Select those that may need to be updated.
a. **[FOR EACH HOUSEHOLD MEMBER] <RELATIONSHIP> - <INITIALS>**
b. **All household members are recorded correctly**

[IF NONE SELECTED, SKIP TO Q1]

----- NEW SCREEN -----

[FOR EACH SELECTION FROM ConfHH]

REHHI You entered: <RELATIONSHIP> - <INITIALS>
Please reenter the initials of this household member.
<TEXT ENTRY>

Re-EnterHHR2 Which of the following best describes your relationship with this household member?
a. My spouse/wife/husband
b. My partner/boyfriend/girlfriend
c. My biological child
d. My adopted child

- e. My spouse/partner's child
- f. My non-biological child
- g. My foster child
- h. My grandchild
- i. My parent
- j. My stepparent My spouse/partner's parent
- k. My sibling
- l. My spouse/partner's sibling
- m. My other family member or relative
- n. My spouse/partner's other family member or relative
- o. Friend (no family relation)
- p. Roommate (no relation)
- q. Other

----- NEW SCREEN -----

HHg1-14 **[FOR NUMBER OF HOUSEHOLD MEMBERS MINUS ONE (Q100-1)]** What is the gender of:
[INSERT INITIALS FROM HH1-14]?

- a. Man/Boy
- b. Woman/Girl
- c. Trans man/Trans boy
- d. Trans woman/Trans girl
- e. Nonbinary
- f. Do not identify as any of the above

HHa1-14 **[FOR NUMBER OF HOUSEHOLD MEMBERS MINUS ONE (Q100-1)]** What is the age of:
[INSERT INITIALS FROM HH1-14]?

- a. 0-2
- b. 3-4
- c. 5-9
- d. 10-17
- e. 18 or older

----- NEW SCREEN -----

[PROGRAMMER: IF MULTIPLE ROMANTIC PARTNERS (SPOUSE/WIFE/HUSBAND OR PARTNER/BOYFRIEND/GIRLFRIEND) SELECTED, ASK:]

PRP Which of these people do you spend the most time with?
[FOR EACH ROMANTIC PARTNER MEMBER] <RELATIONSHIP> - <INITIALS>

----- NEW SCREEN -----

Q1 What were you doing at 4 am today?

Sleeping/Napping

- a. Sleeping/napping **[NOTE: IF THIS IS SELECTED, SKIP TO Q9.1_1]**

Personal Care

- b. Grooming/personal care (showering, getting dressed, getting haircut, etc.)
- c. Attending a medical appointment/taking medicine (going to the doctor or dentist, attending therapy or mental health appointment, etc.)
- d. Doing or attending a health-related activity

Food/Drink

- e. Eating
- f. Cooking/baking
- g. Drinking alcohol

- h. Ordering/picking up food

Working

- i. Working
- j. Attending a work event
- k. Checking work emails or messages
- l. Looking for work/working on job applications or materials

Childcare Activities

- m. Caring for child(ren)/bathing child/putting child to bed/helping with homework/schooling
- n. Playing/reading/spending time with child(ren)
- o. Dropping/picking up child(ren) for school, childcare, or activity
- p. Attending a child(ren)s event

Household/Repair

- q. Cleaning/doing laundry
- r. Doing home improvement or vehicle maintenance
- s. Paying bills
- t. Scheduling appointments

Pet/Animal Care

- u. Taking care of or spending time with pet(s) (playing with pet, taking pet to vet, etc.)

Traveling

- v. Driving/traveling (flying, biking, public transportation, etc.) **[IF SELECTED ASK Q9B_1]**

Socializing, Relaxing, or Leisure

- w. On your phone or device
- x. Watching a TV show or movie
- y. Listening to music, audiobook, podcast, etc.
- z. Reading
- aa. Attending a religious service or activity
- bb. Socializing/spending time with someone
- cc. Making love, having sex, or doing something sex-related (cuddling, kissing, etc.)
- dd. Playing games or video games
- ee. Relaxing/thinking/daydreaming

Shopping/Running errands

- ff. Running errands (banking, grocery shopping, getting gas, etc.)
- gg. Shopping (online or in-store)

Smoking/Vaping/Drugs

- hh. Vaping
- ii. Smoking cigarettes
- jj. Smoking cigars
- kk. Smoking marijuana/weed
- ll. Doing drugs

Education

- mm. Studying or attending school (studying, homework, attending class, online class, etc.)

Providing care for an adult

- nn. Providing care for an adult

Exercising/Other physical activity

- oo. Exercising/other physical activity

Volunteering

- pp. Volunteering

Other

- qq. Don't know/can't remember **[SKIP TO Q2]**

----- **NEW SCREEN** -----

Q6 What else were you doing at the same time?

[REMOVE RESPONSE OPTION FROM Q1]

Nothing

- a. Nothing **[NOTE: IF THIS IS SELECTED, THERE SHOULD BE NO “and <RESPONSE FROM Q6>” in Q7.2-Q15.2]**

Sleeping/Napping

- b. Sleeping/napping

Personal Care

- c. Grooming/personal care (showering, getting dressed, getting haircut, etc.)
- d. Attending a medical appointment/taking medicine (going to the doctor or dentist, attending therapy or mental health appointment, etc.)
- e. Doing or attending a health-related activity

Food/Drink

- f. Eating
- g. Cooking/baking
- h. Drinking alcohol
- i. Ordering/picking up food

Working

- j. Working
- k. Attending a work event
- l. Checking work emails or messages
- m. Looking for work/Working on job applications or materials

Childcare Activities

- n. Caring for child(ren)/bathing child/putting child to bed/helping with homework/schooling
- o. Playing/reading/spending time with child(ren)
- p. Dropping/picking up child(ren) for school, childcare, or activity
- q. Attending a child(ren)s event

Household/Repair

- r. Cleaning/doing laundry
- s. Doing home improvement or vehicle maintenance
- t. Paying bills
- u. Scheduling appointments

Pet/Animal Care

- v. Taking care of or spending time with pet(s) (playing with pet, taking pet to vet, etc.)

Traveling

- w. Driving/traveling (flying, biking, public transportation, etc.)

Socializing, Relaxing, or Leisure

- x. On your phone or device
- y. Watching a TV show or movie
- z. Listening to music, audiobook, podcast, etc.
- aa. Reading
- bb. Attending a religious service or activity
- cc. Socializing/spending time with someone
- dd. Making love, having sex, or doing something sex-related (cuddling, kissing, etc.)
- ee. Playing games or video games
- ff. Relaxing/thinking/daydreaming

Shopping/Running errands

- gg. Running errands (banking, grocery shopping, getting gas, etc.)
- hh. Shopping (online or in-store)

Smoking/Vaping/Drugs

- ii. Vaping
- jj. Smoking cigarettes
- kk. Smoking cigars
- ll. Smoking marijuana/weed
- mm. Doing drugs

Education

- nn. Studying or attending school (studying, homework, attending class, online class, etc.)

Providing care for an adult

- oo. Providing care for an adult

Exercising/Other physical activity

- pp. Exercising/other physical activity

Volunteering

- qq. Volunteering

Other

- rr. Don't know/can't remember

----- **NEW SCREEN** -----

IF "DRINKING ALCOHOL" IS SELECTED IN Q1 OR Q6, ASK:

Q07 How many alcoholic beverages did you consume? (**PROGRAMMER: NUMERICAL DROPDOWN**)

1-24

25 or more

----- **NEW SCREEN** -----

Q7.1/Q7.2 Who was there while you were **<RESPONSE FROM Q1>** and **<RESPONSE FROM Q6>**?

- a. No one/Alone [**PROGRAMMER: EXCLUSIVE**] [PROGRAMMER: SKIP 8.2]
- b. [FOR EACH HOUSEHOLD MEMBER] **<RELATIONSHIP>** - **<INITIALS>**
- c. Parent(s) who does/do not live in my household
- d. Step-parent(s) who does/do not live in my household
- e. In-law(s) who does/do not live in my household
- f. Other family member 18 and older
- g. Other family member under the age of 18
- h. My friend(s)
- i. My coworker(s)
- j. Someone else

----- **NEW SCREEN** -----

Q8.1/Q8.2 Which of these people were directly involved in **<RESPONSE FROM Q1>** and **<RESPONSE FROM Q6>** with you?

- a. [**FOR EACH HOUSEHOLD MEMBER**] **<RELATIONSHIP>** - **<INITIALS>**
- b. Parent(s) who does/do not live in my household
- c. Step-parent(s) who does/do not live in my household
- d. In-Law(s) who does/do not live in my household
- e. Other family member 18 and older
- f. Other family member under the age of 18
- g. My friend(s)
- h. My coworker(s)
- i. Someone else
- j. None of these people (**exclusive**)

----- NEW SCREEN -----

Q9.1/Q9.2 Where were you when you were <RESPONSE FROM Q1> and <RESPONSE FROM Q6>?

- a. Inside your home
- b. Outside your home (patio, yard, etc.)
- c. Your workplace
- d. Car, truck, or motorcycle
- e. School
- f. Grocery store
- g. Mall/other store
- h. Someone else's home
- i. Restaurant or bar
- j. Restaurant drive-thru
- k. Gym/health club
- l. Outdoors away from home
- m. Place of worship (church/synagogue/temple/mosque/chapel)
- n. Library, bank or post office
- o. Doctor's office or hospital
- p. Bus
- q. Subway/train
- r. Boat/ferry
- s. Airplane
- t. Other place
- u. Other mode of transportation

----- NEW SCREEN -----

[PROGRAMMER: IF car, truck, or motorcycle) SELECTED IN Q9, ASK:, ASK:]

Q9B_1 Were you driving or were you a passenger?

- a. Driver
- b. Passenger

[ALL IN Q9B_1, SKIP TO Q2.1_L1]

----- NEW SCREEN -----

Q10 Were you using a (another) device such as a smartphone, tablet, or laptop during this activity?

- a. Yes
- b. No

----- NEW SCREEN -----

T_Q11 For the following questions, please use a scale from 0 to 6, where 0 means you did not have this feeling at all and 6 means the feeling was very strong

T_Q11.1/T_Q11.1 From 0 to 6, how **happy** did you feel while <RESPONSE FROM Q1> and <RESPONSE FROM Q6>, where 0 means not at all happy and 6 means very happy?

- a. 0 – Not happy at all
- b. 1
- c. 2
- d. 3

- e. 4
- f. 5
- g. 6 – Very happy

T_Q13.1/T_Q13.1 From 0 to 6, how **stressed** did you feel while **<RESPONSE FROM Q1>** and **<RESPONSE FROM Q6>**, where 0 means not stressed at all and 6 means very stressed?

- a. 0 – Not stressed at all
- b. 1
- c. 2
- d. 3
- e. 4
- f. 5
- g. 6 – Very stressed

T_Q15.1/T_Q15.1 From 0 to 6, how **engaged** did you feel while **<RESPONSE FROM Q1>** and **<RESPONSE FROM Q6>**, where 0 means not at all engaged and 6 means very engaged?

- a. 0 – Not at all engaged
- b. 1
- c. 2
- d. 3
- e. 4
- f. 5
- g. 6 – Very engaged

----- **NEW SCREEN** -----

Q2 What time did you stop **<SELECTION FROM Q1>** and **<SELECTION FROM Q6>**? If have not yet completed [activity], please return when you have finished and enter your end time.

- a. **<START DAY>** 4:00 AM
...etc...
- b. **<START DAY>** 11:50 PM
- c. **<END DAY>** 12:00 AM
- d. **<END DAY>** 12:10 AM
...etc...
- e. **<END DAY>** 3:50 AM
- f. **<END DAY>** 4:00AM or later **[SKIP TO Q24]**

----- **NEW SCREEN** -----

2_Q1 You said your last activity **<SELECTION FROM Q1>** and **<SELECTION FROM Q6>** ended at **<SELECTION FROM Q2>**? What did you do next?

- a. Sleeping/Napping **[NOTE: IF THIS IS SELECTED, SKIP 2_Q6, 2_Q07 _1, 2_Q8./ 2_Q8.2, 2_Q10, 2_T_Q11, 2_Q11.1/2_Q11.2, 2_Q13.1/2_Q13.2, 2_Q15.1/2_Q15.2]**

Personal Care

- b. Grooming/Personal Care (showering, getting dressed, getting haircut, etc.)
- c. Attending a medical appointment/taking medicine (going to the doctor or dentist, attending therapy or mental health appointment, etc.)
- d. Doing or attending a Health-related activity

Food/Drink

- e. Eating
- f. Cooking/Baking
- g. Drinking alcohol
- h. Ordering/picking up food

Working

- i. Working
- j. Attending a work event
- k. Checking work emails or messages
- l. Looking for work/Working on job applications or materials

Childcare Activities

- m. Caring for child(ren)/bathing child/putting child to bed/helping with homework/schooling
- n. Playing/Reading/Spending time with child(ren)
- o. Dropping/Picking up child(ren) for school, childcare, or activity
- p. Attending a child(ren)s event

Household/Repair

- q. Cleaning/Doing laundry
- r. Doing home improvement or vehicle maintenance
- s. Paying bills
- t. Scheduling appointments

Pet/Animal Care

- u. Taking care of or spending time with pet(s) (playing with pet, taking pet to vet, etc.)

Traveling

- v. Driving/traveling (flying, biking, public transportation, etc.)

Socializing, Relaxing, or Leisure

- w. On your phone or device
- x. Watching a TV show or movie
- y. Listening to music, audiobook, podcast, etc.
- z. Reading
- aa. Attending a religious service or activity
- bb. Socializing/spending time with someone
- cc. Making love, having sex, or doing something sex-related (cuddling, kissing, etc.)
- dd. Playing games or video games
- ee. Relaxing/thinking/daydreaming

Shopping/Running errands

- ff. Running errands (banking, grocery shopping, getting gas, etc.)
- gg. Shopping (online or in-store)

Smoking/Vaping/Drugs

- hh. Vaping
- ii. Smoking cigarettes
- jj. Smoking cigars
- kk. Smoking marijuana/weed
- ll. Doing drugs

Education

- mm. Studying or attending school (studying, homework, attending class, online class, etc.)

Providing care for an adult

- nn. Providing care for an adult

Exercising/Other physical activity

- oo. Exercising/Other physical activity

Volunteering

- pp. Volunteering

Other

- qq. Don't know/Can't remember [2_Q2]

----- NEW SCREEN -----

2_Q6

What else were you doing at the same time?

[REMOVE RESPONSE OPTION FROM Q2_Q1]

Nothing

- a. Nothing [NOTE: IF THIS IS SELECTED, THERE SHOULD BE NO “and <RESPONSE FROM Q250>” in Q252-Q265]

Sleeping/Napping

- b. Sleeping/Napping

Personal Care

- c. Grooming/Personal Care (showering, getting dressed, getting haircut, etc.)
- d. Attending a medical appointment/taking medicine (going to the doctor or dentist, attending therapy or mental health appointment, etc.)
- e. Doing or attending a Health-related activity

Food/Drink

- f. Eating
- g. Cooking/Baking
- h. Drinking alcohol
- i. Ordering/picking up food

Working

- j. Working
- k. Attending a work event
- l. Checking work emails or messages
- m. Looking for work/Working on job applications or materials

Childcare Activities

- n. Caring for child(ren)/bathing child/putting child to bed/helping with homework/schooling
- o. Playing/Reading/Spending time with child(ren)
- p. Dropping/Picking up child(ren) for school, childcare, or activity
- q. Attending a child(ren)s event

Household/Repair

- r. Cleaning/Doing laundry
- s. Doing home improvement or vehicle maintenance
- t. Paying bills
- u. Scheduling appointments

Pet/Animal Care

- v. Taking care of or spending time with pet(s) (playing with pet, taking pet to vet, etc.)

Traveling

- w. Driving/traveling (flying, biking, public transportation, etc.)

Socializing, Relaxing, or Leisure

- x. On your phone or device
- y. Watching a TV show or movie
- z. Listening to music, audiobook, podcast, etc.
- aa. Attending a religious service or activity
- bb. Socializing/spending time with someone
- cc. Making love, having sex, or doing something sex-related (cuddling, kissing, etc.)
- dd. Playing games or video games
- ee. Relaxing/thinking/daydreaming

Shopping/Running errands

- ff. Running errands (banking, grocery shopping, getting gas, etc.)
- gg. Shopping (online or in-store)

Smoking/Vaping/Drugs

- hh. Vaping
- ii. Smoking cigarettes
- jj. Smoking cigars
- kk. Smoking marijuana/weed
- ll. Doing drugs

Education

- mm. Studying or attending school (studying, homework, attending class, online class, etc.)

Providing care for an adult

nn. Providing care for an adult

Exercising/Other physical activity

oo. Exercising/Other physical activity

Volunteering

pp. Volunteering

Other

qq. Don't know/Can't remember

----- **NEW SCREEN** -----

IF "DRINKING ALCOHOL" IS SELECTED IN Q248 OR Q250, ASK:

2_Q07 _1 How many alcoholic beverages did you consume? (**PROGRAMMER: NUMERICAL DROPDOWN**)

1-24

25 or more

----- **NEW SCREEN** -----

2_Q7.1/2_Q7.2 Who was there while you were **<RESPONSE FROM Q248>** and **<RESPONSE FROM Q250>**?

- a. No one/ Alone [PROGRAMMER: EXCLUSIVE] [SKIP TO Q542]
- b. [FOR EACH HOUSEHOLD MEMBER] **<RELATIONSHIP>** - **<INITIALS>**
- c. Parent(s) who does/do not live in my household
- d. Step-parent(s) who does/do not live in my household
- e. In-law(s) who does/do not live in my household
- f. Other family member 18 and older
- g. Other family member under the age of 18
- h. My friend(s)
- i. My coworker(s)
- j. Someone else

----- **NEW SCREEN** -----

2_Q8./ 2_Q8.2 Which of these people were directly involved in **<RESPONSE FROM Q248>** and **<RESPONSE FROM Q250>** with you?

- a. **[FOR EACH HOUSEHOLD MEMBER] **<RELATIONSHIP>** - **<INITIALS>****
- b. Parent(s) who does/do not live in my household
- c. Step-parent(s) who does/do not live in my household
- d. In-law(s) who does/do not live in my household
- e. Other family member 18 and older
- f. Other family member under the age of 18
- g. M friend(s)
- h. My coworker(s)
- i. Someone else
- j. None of these people

----- **NEW SCREEN** -----

2_Q9.1/2_Q9.2 Where were you when you were **<RESPONSE FROM Q248>** and **<RESPONSE FROM Q250>**?

- a. Inside your home
- b. Outside your home (patio, yard, etc.)
- c. Your workplace
- d. Car, truck, or motorcycle

- e. School
- f. Grocery store
- g. Mall/other store
- h. Someone else's home
- i. Restaurant or bar
- j. Restaurant drive-thru
- k. Gym/health club
- l. Outdoors away from home
- m. Place of worship (church/synagogue/temple/mosque/chapel)
- n. Library, bank or post office
- o. Doctor's office or hospital
- p. Bus
- q. Subway/train
- r. Boat/ferry
- s. Airplane
- t. Other place
- u. Other mode of transportation

----- **NEW SCREEN** -----

2_Q10 Were you using a (another) device such as a smartphone, tablet, or laptop during this activity?

- c. Yes
- d. No

----- **NEW SCREEN** -----

2_T_Q11 For the following questions, please use a scale from 0 to 6, where 0 means you did not have this feeling at all and 6 means the feeling was very strong

2_Q11.1/2_Q11.2 From 0 to 6, how **happy** did you feel while <<**RESPONSE FROM Q248**> and <**RESPONSE FROM Q250**>, where 0 means not at all happy and 6 means very happy?

- h. 0 – Not happy at all
- i. 1
- j. 2
- k. 3
- l. 4
- m. 5
- n. 6 – Very happy

2_Q13.1/2_Q13.2 From 0 to 6, how **stressed** did you feel while <**RESPONSE FROM Q248**> and <**RESPONSE FROM Q250**>, where 0 means not stressed at all and 6 means very stressed?

- h. 0 – Not stressed at all
- i. 1
- j. 2
- k. 3
- l. 4
- m. 5
- n. 6 – Very stressed

2_Q15.1/2_Q15.2 From 0 to 6, how **engaged** did you feel while <**RESPONSE FROM Q248**> and <**RESPONSE FROM Q250**> where 0 means not at all engaged and 6 means very engaged?

- h. 0 – Not at all engaged
- i. 1

- j. 2
- k. 3
- l. 4
- m. 5
- n. 6 – Very engaged

----- **NEW SCREEN** -----

2_Q2 You said that you began **<SELECTION FROM 2_Q1>** and **<SELECTION FROM 2_Q6>** at **<TIME>**.
 What time did you stop **<SELECTION FROM 2_Q1>** and **<SELECTION FROM 2_Q6>**? If you have not yet completed [activity], please return when you have finished and enter your end time.

- a. **<START DAY>** 4:00 AM
- b. **<START DAY>** 4:10 AM
- c. **<START DAY>** 4:20 AM
- d. **<START DAY>** 4:30 AM
- ...etc...
- e. **<START DAY>** 11:50 PM
- f. **<END DAY>** 12:00 AM
- g. **<END DAY>** 12:10 AM
- ...etc...
- h. **<END DAY>** 3:50 AM
- i. **<END DAY>** 4:00AM or later

REPEAT Q2_Q1 – Q2_Q2 UNTIL “4:00AM or later” IS SELECTED ON 2_Q2

----- **NEW SCREEN** -----

Q24. Please imagine a ladder with steps numbered from zero at the bottom to 10 at the top.
 The top of the ladder represents the best possible life for you and the bottom of the ladder represents the worst possible life for you.

On which step of the ladder would you say you personally feel you stand at this time?

- a. 10 – Best possible
- b. 9
- c. 8
- d. 7
- e. 6
- f. 5
- g. 4
- h. 3
- i. 2
- j. 1
- k. 0 – Worst possible

----- **NEW SCREEN** -----

Q25. Did you experience any of the following between **<START DAY>** and **<END DAY>** Select all that apply.

- a. You were treated with less respect than other people
- b. You received poorer service than other people at restaurants or stores
- c. People acted as if they were afraid of you
- d. People acted as if they thought you were dishonest

- e. People acted as if they were better than you
- f. You were called names or insulted
- g. You were threatened or harassed
- h. You were hit, beaten, physically attacked, or assaulted
- i. You were robbed, or your property was stolen, vandalized, or purposely damaged
- j. None of the above **[SKIP TO Q31]**

----- **NEW SCREEN** -----

[PROGRAMMER, REPEAT Q25A FOR EACH RESPONSE IN Q25]

Q25A. How frequently did you experience **[INSERT RESPONSE FROM Q25]** between **<START DAY>** and **<END DAY>**?

- a. Never
- b. Very rarely
- c. Rarely
- d. Occasionally
- e. Frequently
- f. Very frequently

----- **NEW SCREEN** -----

Q21 How fatigued did you feel yesterday (**<START DAY>**) while you were awake?

- a. 1– Not at all fatigued
- b. 2
- c. 3
- d. 4
- e. 5
- f. 6
- g. 7 – Very fatigued

----- **NEW SCREEN** -----

Q20 What time did you wake up on **<END DAY>**?

- a. 12:20 AM
- b. 12:10 AM
- Etc.....
- c. 11:50 PM

Q22 How well did you sleep?

- a. 1 – Very bad
- b. 2
- c. 3
- d. 4
- e. 5
- f. 6
- g. 7 – Very good

Q23 Did you take a sleep aid to help you fall or stay asleep?

- b. Yes
- c. No