Sect-0. \*\*\*\*\*Admin\*\*\*\*\*

**Calculated Variable**

TODAY\_V3

8

TODAY\_V3 = Today's date

***Info-1.*** (For Respondent) **PLEASE TURN VOLUME DOWN TO ZERO AND ANSWER THE FOLLOWING QUESTIONS FOR THE PARTICIPANT.**

***Q1.* Interviewer Initials**

II\_V3

Interviewer Initials 3

**0 - 3** = length of response

***Q2.* Subject ID**

SUBJECT

Subject ID Number 4

**2000 - 2999** = Subject ID

***Q3.* What is the participant's treatment group?**

GROUP

GROUP: Participant's treatment group 1

**1** = Usual Case Management (UCM)

**2** = Usual Care plus Smartphone (UCM+SP)

**3** = Usual Care plus Smartphone based Case Management (SPCM)

***Q4.* Which visit is the participant completing?**

VISIT\_V3

Which visit is the participant completing? 1

**1** = Visit 1: Baseline

**2** = Visit 2: Randomization

**3** = Visit 3: 1 Month Follow-Up

**4** = Visit 4: 3 Month Follow-Up

**5** = Visit 5: 6 Month Follow-Up

***Skip-1.*** If ( VISIT\_V3=3 ), Skip to **Sect-1**

***Q5.* This assessment is for the 1 Month Follow-Up Visit. You selected a different option. Please double check the file and the participants visit. If you meant to open the 1 Month Follow-Up visit, please press YES to continue. If NO, please close the assessment and select the correct QDS file.**

TEST\_V3

This assessment is for the 1 Month Follow-Up. 1

**0** = No

**1** = Yes

**9** = skipped

***Edit-1.*** If ( TEST\_V3=0 ), Loop back to question **Q4**

*Display message: Please close this assessment and select the correct visit file.*

Sect-1. \*\*\*\*\*Biological/Anthropometric Measures \*\*\*\*\*

***Q6.* What is the participant's gender?**

GENDER

Gender 1

**0** = Male

**1** = Female

**2** = Other

***Q7.* Weight (lbs)**

WEIGHT\_3

weight

Weight (lbs) 3

**0 - 500** = lbs

***Q8.* Height (centimeters)**

HEIGHT\_3

height

Height (centimeters) 3

**0 - 500** = cm

***Q9.* Waist Circumference (centimeters)**

WAIST\_C3

waist\_c

Waist Circumference (centimeters) 4

**0 - 1000** = cm

***Q10.* Carbon Monoxide Reading**

CO\_V3

Carbon Monoxide Reading 3

**0 - 200** = ppm

***Q11.* Do you use reading glasses?**

READ1\_V3

Do you use reading glasses? 1

**0** = No

**1** = Yes

***Skip-2.*** If ( READ1\_V3=0 ), Skip to calculated variable **CTIME\_V3**

***Q12.* Do you have your reading glasses with you?**

READ2\_V3

Do you have your reading glasses with you? 1

**0** = No

**1** = Yes

**9** = skipped

***Skip-3.*** If ( READ2\_V3=1 ), Skip to calculated variable **CTIME\_V3**

***Q13.* Please give the individual reading glasses to use to complete the QDS:**

READ3\_V3

Please give the participant reading glasses to use to complete the QDS: 1

**0** = No, the inidividual was not given reading glasses

**1** = Yes, the individual was given reading glasses

**9** = skipped

**Calculated Variable**

CTIME\_V3

8

CTIME\_V3 = Current time

***Info-2.*** (For Respondent) **Please hand tablet to participant. TURN VOLUME UP TO MEET INDIVIDUALS NEEDS.**

***Sect-2.*** **\*\*\*\*\*SOCIOECONOMIC STATUS/ DEMOGRAPHIC QUESTIONNAIRES\*\*\*\*\***

Sect-3. \*\*\*\*\*Demographic/Background Information Questionnaire\*\*\*\*\*

***Q14.* Please choose your employment status. Please check only one that applies.**

DEM6V3

Employment status. Please check only one that applies. 1

**1** = Regular full-time work (40 or more hours per week)

**2** = Regular part-time work (less than 40 hours per week)

**3** = Unemployed-currently looking for work

**4** = Unemployed-currently not looking for work

**5** = Homemaker- Not employed

**6** = Student- Not employed

**7** = Retired- Not employed

**8** = Unable to work or disabled

**9** = Other

***Skip-4.*** If ( DEM6V3=1 OR DEM6V3=2 ), Skip to question **Q15**

***Skip-5.*** Skip to question **Q16**

***Q15.* How many total hours per week do you work at those jobs?**

DEM6AV3

How many total hours per week do you work at those jobs? 2

**0** = 0 hours

**1** = 1-5

**2** = 6-10

**3** = 11-15

**4** = 16-20

**5** = 21-25

**6** = 26-30

**7** = 31-35

**8** = 36-40

**9** = 41-45

**10** = 46-50

**11** = 51 or more

**99** = skipped

***Q16.* How many days in the past 7 days did you work for money?**

DME6BV3

How many days in the past 7 days did you work for money? 1

**0** = 0

**1** = 1

**2** = 2

**3** = 3

**4** = 4

**5** = 5

**6** = 6

**7** = 7

***Q17.* Do you have health insurance? Please check all that apply.**

DEM7V3

Do you have health insurance? Please check all that apply. 1

**0 - 5** = number of selected items

DEM7V3A

Do you have health insurance? Please check all that apply.: Medicare 1

**0** = No

**1** = Yes

DEM7V3B

Do you have health insurance? Please check all that apply.: Medicaid/Soonercare 1

**0** = No

**1** = Yes

DEM7V3C

Do you have health insurance? Please check all that apply.: Military Insurance 1

**0** = No

**1** = Yes

DEM7V3D

Do you have health insurance? Please check all that apply.: Insurance from a job or Private insurance 1

**0** = No

**1** = Yes

DEM7V3E

Do you have health insurance? Please check all that apply.: I do not have health insurance 1

**0** = No

**1** = Yes

***Q18.* Do you currently receive Social Security benefits?**

DEM8V3

Do you currently receive Social Security benefits? 1

**0** = No

**1** = Yes

***Skip-6.*** If ( DEM8V3=0 ), Skip to question **Q20**

***Q19.* What is the amount of your monthly Social Security check?**

DEM9V3

What is the amount of your monthly Social Security check? 6

**0 - 999999** = Dollars

**9999999** = skipped

***Q20.* Do you currently receive food stamps (SNAP benefits)?**

DEM10V3

Do you currently receive food stamps? 1

**0** = No

**1** = Yes

***Skip-7.*** If ( DEM10V3=0 ), Skip to question **Q22**

***Q21.* What is the amount of food stamps (SNAP) do you get each month?**

DEM11V3

What is the amount of food stamps (SNAP) do you get each month? 4

**0 - 9999** = Dollars

**99999** = skipped

***Q22.* What are your sources of income? (Please check all that apply).**

DEM12V3

What are your sources of income? (Please check all that apply). 2

**0 - 12** = number of selected items

DEM12V3A

What are your sources of income? (Please check all that apply).: Paid work 1

**0** = No

**1** = Yes

DEM12V3B

What are your sources of income? (Please check all that apply).: Criminalized activity (example: panhandling, stealing) 1

**0** = No

**1** = Yes

DEM12V3C

What are your sources of income? (Please check all that apply).: Disability benefits 1

**0** = No

**1** = Yes

DEM12V3D

What are your sources of income? (Please check all that apply).: Employment benefits 1

**0** = No

**1** = Yes

DEM12V3E

What are your sources of income? (Please check all that apply).: Self-employed 1

**0** = No

**1** = Yes

DEM12V3F

What are your sources of income? (Please check all that apply).: Trade sex 1

**0** = No

**1** = Yes

DEM12V3G

What are your sources of income? (Please check all that apply).: Trade drugs 1

**0** = No

**1** = Yes

DEM12V3H

What are your sources of income? (Please check all that apply).: Social assistance 1

**0** = No

**1** = Yes

DEM12V3I

What are your sources of income? (Please check all that apply).: Student loans 1

**0** = No

**1** = Yes

DEM12V3J

What are your sources of income? (Please check all that apply).: Receive support from family, friends, relatives 1

**0** = No

**1** = Yes

DEM12V3K

What are your sources of income? (Please check all that apply).: You don't have an option that applies to my income 1

**0** = No

**1** = Yes

DEM12V3L

What are your sources of income? (Please check all that apply).: I have no income 1

**0** = No

**1** = Yes

***Q23.* What was your total household income from all sources LAST MONTH?**

DEM14V3

What was your total income from all sources LAST MONTH? 1

**0** = $0 to $999

**1** = $1,000 to $1,999

**2** = $2,000 to $2,999

**3** = $3,000 to $3,999

**4** = $4,000 to $4,999

**5** = $5,000 to $5,999

**6** = $6,000 to $6,999

**7** = $7,000 or more

**999** = Refuse to Answer

***Skip-8.*** If ( DEM14V3^=0 ), Skip **DEM14AV3**

***Q24.* You reported that your household income over the LAST MONTH was "$0 to $999", please select the amount that is closest to your actual past month household income.**

DEM14AV3

You reported that your household income over the LAST MONTH was "$0 to $999", please select the amount that is closest to your actual past month household income. 1

**0** = $0

**1** = $1 to $250

**2** = $251 to $500

**3** = $501 to $750

**4** = $751 to $999

**9** = skipped

***Skip-9.*** If ( DEM14V3^=1 ), Skip **DEM14BV3**

***Q25.* You reported that your household income over the LAST MONTH was "$1,000 to $1,999", please select the amount that is closest to your actual past month household income.**

DEM14BV3

You reported that your household income over the LAST MONTH was "$1000 to $1,999", please select the amount that is closest to your actual past month household income. 1

**0** = $1000 to $1,250

**1** = $1,251 to $1,500

**2** = $1,501 to $1,750

**3** = $1,751 to $1,999

**9** = skipped

***Skip-10.*** If ( DEM14V3^=2 ), Skip **DEM14CV3**

***Q26.* You reported that your household income over the LAST MONTH was "$2,000 to $2,999", please select the amount that is closest to your actual past month household income.**

DEM14CV3

You reported that your household income over the LAST MONTH was "$2000 to $2,999", please select the amount that is closest to your actual past month household income. 1

**0** = $2000 to $2,250

**1** = $2,251 to $2,500

**2** = $2,501 to $2,750

**3** = $2,751 to $2,999

**9** = skipped

***Skip-11.*** If ( DEM14V3^=3 ), Skip **DEM14DV3**

***Q27.* You reported that your household income over the LAST MONTH was "$3,000 to $3,999", please select the amount that is closest to your actual past month household income.**

DEM14DV3

You reported that your household income over the LAST MONTH was "$3000 to $3,999", please select the amount that is closest to your actual past month household income. 1

**0** = $3000 to $3,250

**1** = $3,251 to $3,500

**2** = $3,501 to $3,750

**3** = $3,751 to $3,999

**9** = skipped

***Skip-12.*** If ( DEM14V3^=4 ), Skip **DEM14EV3**

***Q28.* You reported that your household income over the LAST MONTH was "$4,000 to $4,999", please select the amount that is closest to your actual past month household income.**

DEM14EV3

You reported that your household income over the LAST MONTH was "$4000 to $4,999", please select the amount that is closest to your actual past month household income. 1

**0** = $4000 to $4,250

**1** = $4,251 to $4,500

**2** = $4,501 to $4,750

**3** = $4,751 to $4,999

**9** = skipped

***Skip-13.*** If ( DEM14V3^=5 ), Skip **DEM14FV3**

***Q29.* You reported that your household income over the LAST MONTH was "$5,000 to $5,999", please select the amount that is closest to your actual past month household income.**

DEM14FV3

You reported that your household income over the LAST MONTH was "$5000 to $5,999", please select the amount that is closest to your actual past month household income. 1

**0** = $5000 to $5,250

**1** = $5,251 to $5,500

**2** = $5,501 to $5,750

**3** = $5,751 to $5,999

**9** = skipped

***Skip-14.*** If ( DEM14V3^=6 ), Skip **DEM14GV3**

***Q30.* You reported that your household income over the LAST MONTH was "$6,000 to $6,999", please select the amount that is closest to your actual past month household income.**

DEM14GV3

You reported that your household income over the LAST MONTH was "$6000 to $6,999", please select the amount that is closest to your actual past month household income. 1

**0** = $6000 to $6,250

**1** = $6,251 to $6,500

**2** = $6,501 to $6,750

**3** = $6,751 to $6,999

**9** = skipped

***Skip-15.*** If ( DEM14V3^=7 ), Skip **DEM14HV3**

***Q31.* You reported that your household income over the LAST MONTH was "$7,000 or more", please select the amount that is closest to your actual past month household income.**

DEM14HV3

You reported that your household income over the LAST MONTH was "$7,000 or more", please select the amount that is closest to your actual past month household income. 1

**0** = $6000 to $6,250

**1** = $6,251 to $6,500

**2** = $6,501 to $6,750

**3** = $6,751 to $6,999

**9** = skipped

Sect-4. \*\*\*\*\*The Brief Homelessness Questionnaire\*\*\*\*\*

***Q32.* Are you currently attending Substance Abuse Classes (for example, AA/NA, AAPA)?**

BH8V3

Are you currently attending Substance Abuse Classes (For example, AA/NA, AAPA)? 1

**0** = No

**1** = Yes

***Q33.* Are you currently receiving treatment for mental health problems (For example: Depression, Bipolar Disorder, Anxiety)?**

BH9V3

Are you currently receiving treatment for mental health problems (For example: Depression, Bipolar Disorder, Anxiety)? 1

**0** = No

**1** = Yes

***Skip-16.*** If ( BH9V3=0 ), Skip **BH10V3**

***Q34.* What type of mental health treatment are you currently receiving for mental health problems?**

BH10V3

What type of mental health treatment? 1

**1** = counseling

**2** = medication

**3** = both counseling and medication

**4** = other

**9** = skipped

***Q35.* On average, how many hours do you spend at the bridge each day (counting sleep time)?**

BH11AV3

On average, how many hours do you spend at shelters each day (counting sleep time)? 2

**0 - 24** = (Hours)

***Q36.* Were you arrested or booked for breaking the law in the PAST MONTH? Booked means that you were taken into custody and processed by the police or someone connected with the courts, even if you were released.**

BH14V3

Were you arrested or booked for breaking the law in the PAST MONTH? 1

**0** = No

**1** = Yes, in Dallas County

**2** = Yes, but not in Dallas County

***Skip-17.*** If ( BH14V3=0 ), Skip **BH14BV3**

***Q37.* During your most recent incarceration, how long were you in jail?**

BH14BV3

During your most recent incarceration, how long were you in jail? 2

**0 - 31** = (Days)

**99** = skipped

BH14BV3M

Months: During your most recent incarceration, how long were you in jail? 3

**0 - 1** = range

**999** = skipped

BH14BV3W

Weeks: During your most recent incarceration, how long were you in jail? 3

**0 - 3** = range

**999** = skipped

BH14BV3D

Days: During your most recent incarceration, how long were you in jail? 3

**0 - 6** = range

**999** = skipped

***Q38.* Are you currently under correctional supervision (such as probation, parole, or bail)?**

BH18V3

Are you currently under correctional supervision (such as probation, parole, or bail)? 1

**0** = No

**1** = Yes

***Skip-18.*** If ( BH18V3=0 ), Skip **BH18BV3**

***Q39.* What type of correctional supervision are you now under? (check all that apply)**

BH18BV3

What type of correctional supervision are you now under? (check all that apply) 1

**0 - 8** = number of selected items

**9** = skipped

BH18BV3A

What type of correctional supervision are you now under? (check all that apply): Probation 1

**0** = No

**1** = Yes

**9** = skipped

BH18BV3B

What type of correctional supervision are you now under? (check all that apply): Parole 1

**0** = No

**1** = Yes

**9** = skipped

BH18BV3C

What type of correctional supervision are you now under? (check all that apply): Pre-Trial Release (for example, bail bond) 1

**0** = No

**1** = Yes

**9** = skipped

BH18BV3D

What type of correctional supervision are you now under? (check all that apply): Day Reporting 1

**0** = No

**1** = Yes

**9** = skipped

BH18BV3E

What type of correctional supervision are you now under? (check all that apply): Drug Treatment Court 1

**0** = No

**1** = Yes

**9** = skipped

BH18BV3F

What type of correctional supervision are you now under? (check all that apply): Other Specialized Court 1

**0** = No

**1** = Yes

**9** = skipped

BH18BV3G

What type of correctional supervision are you now under? (check all that apply): Not under any supervision (served sentence) 1

**0** = No

**1** = Yes

**9** = skipped

BH18BV3H

What type of correctional supervision are you now under? (check all that apply): Other 1

**0** = No

**1** = Yes

**9** = skipped

***Skip-19.*** If ( BH18BV3H ^=1 ), Skip **BH18B1V3**

***Q40.* If other, please specify:**

BH18B1V3

If other, please specify: 50

**0 - 50** = length of response

**99** = skipped

Sect-5. \*\*\*\*\*MacArthur Scale of Subjective Soical Status\*\*\*\*\*

***Q41.* Think of this ladder as representing where people stand in their communities. People define community in different ways; please define it in whatever way is most meaningful to you. At the top of the ladder are the people who have the highest standing in their community. At the bottom are the people who have the lowest standing in their community. Where would you place yourself on this ladder? Indicate the step where you think you stand at this time in your life, relative to other people in your community.**

SSS1\_V3

Community Ladder 2

**1** = bottom of ladder

**2 - 9** = unlabeled scale points

**10** = top of ladder

***Q42.* Think of this ladder as representing where people stand in the United States. At the top of the ladder are the people who are the best off- those who have the most money, the most education and the most respected jobs. At the bottom are the people who are the worst off- who have the least money, least education and the least respected jobs or no job. The higher up you are on this ladder, the closer you are to the people at the very top; the lower you are, the closer you are to the people at the very bottom. Where would you place yourself on this ladder? Indicate the step where you think you stand at this time in your life, relative to other people in the United States.**

SSS2\_V3

United States Ladder 2

**1** = bottom of ladder

**2 - 9** = unlabeled scale points

**10** = top of ladder

***Sect-6.*** **\*\*\*\*\*HEALTH, MENTAL HEALTH, AND HEALTH BEHAVOIR\*\*\*\*\***

Sect-7. \*\*\*\*\*Patient Health Questionnaire\*\*\*\*\*

***Q43.* Over the last 2 weeks, how often have you been bothered by, little interest or pleasure in doing things?**

PHQ1\_V3

Over the last 2 weeks, how often have you been bothered by, little interest or pleasure in doing things 1

**0** = Not at all

**1** = Several days

**2** = More than half the days

**3** = Nearly every day

***Q44.* Over the last 2 weeks, how often have you been bothered by, feeling down, depressed, or hopeless?**

PHQ2\_V3

Over the last 2 weeks, how often have you been bothered by, feeling down, depressed, or hopeless 1

**0** = Not at all

**1** = Several days

**2** = More than half the days

**3** = Nearly every day

***Q45.* Over the last 2 weeks, how often have you been bothered by, trouble falling or staying asleep, or sleeping too much?**

PHQ3\_V3

Over the last 2 weeks, how often have you been bothered by, trouble falling or staying asleep, or sleeping too much 1

**0** = Not at all

**1** = Several days

**2** = More than half the days

**3** = Nearly every day

***Q46.* Over the last 2 weeks, how often have you been bothered by, feeling tired or having little energy?**

PHQ4\_V3

Over the last 2 weeks, how often have you been bothered by, feeling tired or having little energy 1

**0** = Not at all

**1** = Several days

**2** = More than half the days

**3** = Nearly every day

***Q47.* Over the last 2 weeks, how often have you been bothered by, poor appetite or overeating?**

PHQ5\_V3

Over the last 2 weeks, how often have you been bothered by, poor appetite or overeating 1

**0** = Not at all

**1** = Several days

**2** = More than half the days

**3** = Nearly every day

***Q48.* Over the last 2 weeks, how often have you been bothered by, feeling bad about yourself- or that you are a failure or have let yourself or your family down?**

PHQ6\_V3

Over the last 2 weeks, how often have you been bothered by, feeling bad about yourself- or that you are a failure or have let yourself or your family down 1

**0** = Not at all

**1** = Several days

**2** = More than half the days

**3** = Nearly every day

***Q49.* Over the last 2 weeks, how often have you been bothered by, trouble concentrating on things, such as reading the newspaper or watching television?**

PHQ7\_V3

Over the last 2 weeks, how often have you been bothered by, trouble concentrating on things, such as reading the newspaper or watching television 1

**0** = Not at all

**1** = Several days

**2** = More than half the days

**3** = Nearly every day

***Q50.* Over the last 2 weeks, how often have you been bothered by, moving or speaking so slowly that other people could have noticed? Or the opposite- being so fidgety or restless that you have been moving around a lot more than usual?**

PHQ8\_V3

Over the last 2 weeks, how often have you been bothered by, moving or speaking so slowly that other people could have noticed? Or the opposite- being so fidgety or restless that you have been moving around a lot more than usual 1

**0** = Not at all

**1** = Several days

**2** = More than half the days

**3** = Nearly every day

***Q51.* Over the last 2 weeks, how often have you been bothered by feeling nervous, anxious, or on edge?**

PHQ9\_V3

Over the last 2 weeks, how often have you been bothered by feeling nervous, anxious, or on edge? 1

**0** = Not at all

**1** = Several days

**2** = More than half the days

**3** = Nearly every day

***Q52.* Over the last 2 weeks, how often have you been bothered by not being able to stop or control worrying?**

PHQ10\_V3

Over the last 2 weeks, how often have you been bothered by not being able to stop or control worrying? 1

**0** = Not at all

**1** = Several days

**2** = More than half the days

**3** = Nearly every day

***Q53.* Over the last 2 weeks, how often have you been bothered by worrying too much about different things?**

PHQ11\_V3

Over the last 2 weeks, how often have you been bothered by worrying too much about different things? 1

**0** = Not at all

**1** = Several days

**2** = More than half the days

**3** = Nearly every day

***Q54.* Over the last 2 weeks, how often have you been bothered by trouble relaxing?**

PHQ12\_V3

Over the last 2 weeks, how often have you been bothered by trouble relaxing? 1

**0** = Not at all

**1** = Several days

**2** = More than half the days

**3** = Nearly every day

***Q55.* Over the last 2 weeks, how often have you been bothered by being so restless that it is hard to sit still?**

PHQ13\_V3

Over the last 2 weeks, how often have you been bothered by being so restless that it is hard to sit still? 1

**0** = Not at all

**1** = Several days

**2** = More than half the days

**3** = Nearly every day

***Q56.* Over the last 2 weeks, how often have you been bothered by becoming easily annoyed or irritable?**

PHQ14\_V3

Over the last 2 weeks, how often have you been bothered by becoming easily annoyed or irritable? 1

**0** = Not at all

**1** = Several days

**2** = More than half the days

**3** = Nearly every day

***Q57.* Over the last 2 weeks, how often have you been bothered by feeling afraid as if something awful might happen?**

PHQ15\_V3

Over the last 2 weeks, how often have you been bothered by feeling afraid as if something awful might happen? 1

**0** = Not at all

**1** = Several days

**2** = More than half the days

**3** = Nearly every day

Sect-8. \*\*\*\*\*SF-12 Health Survey\*\*\*\*\*

***Info-3.*** (For Respondent) **This next survey asks for your views about your health. This information will help keep track of how you feel and how well you are able to do your usual activities. If you are unsure about how to answer, please give the best answer you can. Please press "next question" to continue...**

***Q58.* In general, would you say your health is:**

HS1\_V3

In general, would you say your health is: 1

**1** = Excellent

**2** = Very Good

**3** = Good

**4** = Fair

**5** = Poor

***Info-4.*** (For Respondent) **The following questions are about activities you might do during a typical day. Does your health now limit you in these activities? If so, how much? Please press "next question" to continue**

***Q59.* Does your health now limit you during moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf?**

HS2\_V3

Moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf? 1

**1** = Yes, limited a lot

**2** = Yes, limited a little

**3** = No, not limited at all

***Q60.* Does your health now limit you when climbing several flights of stairs?**

HS3\_V3

climbing several flights of stairs? 1

**1** = Yes, limited a lot

**2** = Yes, limited a little

**3** = No, not limited at all

***Q61.* During the past 4 weeks, as a result of your physical health, have you accomplished less than you would like?**

HS4\_V3

Accomplished less than you would like 1

**0** = No

**1** = Yes

***Q62.* During the past 4 weeks, as a result of your physical health, were you limited in the kind of work or other activities you regularly perform?**

HS5\_V3

Were limited in the kind of work or other activities 1

**0** = No

**1** = Yes

**7** = Don't Know

**8** = Refuse to Answer

**9** = Not Applicable

***Q63.* During the past 4 weeks, as a result of any emotional problems (such as feeling depressed or anxious), have you accomplished less than you would like?**

HS6\_V3

Accomplished less than you would like 1

**0** = No

**1** = Yes

***Q64.* During the past 4 weeks, as a result of any emotional problems (such as feeling depressed or anxious), did you do work or other activities less carefully than usual?**

HS7\_V3

Did work or other activities less carefully than usual 1

**0** = No

**1** = Yes

***Q65.* During the past 4 weeks, how much did pain interfere with your normal work (including both work outside the home and housework)?**

HS8\_V3

During the past 4 weeks, how much did pain interfere with your normal work (including both work outside the home and housework)? 1

**1** = Not at all

**2** = A little bit

**3** = Moderately

**4** = Quite a bit

**5** = Extremely

***Q66.* How much time during the past 4 weeks have you felt calm and peaceful?**

HS9\_V3

How much time during the past 4 weeks have you felt calm and peaceful? 1

**1** = All of the time

**2** = Most of the time

**3** = A good bit of the time

**4** = Some of the time

**5** = A little of the time

**6** = None of the time

***Q67.* How much time during the past 4 weeks did you have a lot of energy?**

HS10\_V3

How much time during the past 4 weeks did you have a lot of energy? 1

**1** = All of the time

**2** = Most of the time

**3** = A good bit of the time

**4** = Some of the time

**5** = A little of the time

**6** = None of the time

***Q68.* How much time during the past 4 weeks have you felt downhearted and blue?**

HS11\_V3

How much time during the past 4 weeks have you felt downhearted and blue? 1

**1** = All of the time

**2** = Most of the time

**3** = A good bit of the time

**4** = Some of the time

**5** = A little of the time

**6** = None of the time

***Q69.* During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities (like visiting with friends, relatives, etc.)?**

HS12\_V3

During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities (like visiting with friends, relatives, etc.)? 1

**1** = All of the time

**2** = Most of the time

**3** = A good bit of the time

**4** = Some of the time

**5** = A little of the time

**6** = None of the time

Sect-9. \*\*\*\*\*Health Related Quality of Life\*\*\*\*\*

***Q70.* Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?**

HRQ1\_V3

Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good? 2

**0 - 30** = (Days)

***Q71.* Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?**

HRQ2\_V3

Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good? 2

**0 - 30** = (Days)

***Q72.* During the past 30 days, for about how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation?**

HRQ3\_V3

During the past 30 days, for about how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation? 2

**0 - 30** = (Days)

Sect-10. \*\*\*\*\*Self-Rated Health Questionnaire\*\*\*\*\*

***Q73.* Which of the following apply to you? (Check all that apply)**

S2\_V3

Which of the following apply to you? (Check all that apply) 1

**0 - 8** = number of selected items

S2\_V3A

Which of the following apply to you? (Check all that apply): I smoke cigarettes 1

**0** = No

**1** = Yes

S2\_V3B

Which of the following apply to you? (Check all that apply): I have unsafe or unprotected sex 1

**0** = No

**1** = Yes

S2\_V3C

Which of the following apply to you? (Check all that apply): I drink alcohol or use illegal drugs 1

**0** = No

**1** = Yes

S2\_V3D

Which of the following apply to you? (Check all that apply): I don't eat enough fruit and vegetables 1

**0** = No

**1** = Yes

S2\_V3E

Which of the following apply to you? (Check all that apply): I am unhappy with my weight 1

**0** = No

**1** = Yes

S2\_V3F

Which of the following apply to you? (Check all that apply): I do not get enough physical activity 1

**0** = No

**1** = Yes

S2\_V3G

Which of the following apply to you? (Check all that apply): I do not get enough sleep 1

**0** = No

**1** = Yes

S2\_V3H

Which of the following apply to you? (Check all that apply): None of these apply to me 1

**0** = No

**1** = Yes

***Skip-20.*** If ( S2\_V3H=1 AND S2\_V3A=0 AND S2\_V3B=0 AND S2\_V3C=0 AND S2\_V3D=0 AND S2\_V3E=1 AND S2\_V3F=0 AND S2\_V3G=0 ), Skip to question **Q80**

***Skip-21.*** If ( S2\_V3A^=1 ), Skip **SR3A\_V3**

***Q74.* The image shows some thoughts that smokers have about quitting. Pick one statement that shows what you think about quitting and click on the corresponding number below.**

SR3A\_V3

Smoking 1

**1** =

**2 - 7** = unlabeled scale points

**8** =

**9** = skipped

***Skip-22.*** If ( S2\_V3B ^=1 ), Skip **SR3B\_V3**

***Q75.* The image shows some thoughts that people have about changing unsafe sexual behaviors. Pick the one statement that shows what you think about this topic. Please read each sentence carefully before deciding.**

SR3B\_V3

Unsafe Sexual Behaviors 2

**1** =

**2 - 7** = unlabeled scale points

**8** =

**99** = skipped

***Skip-23.*** If ( S2\_V3C ^=1 ), Skip **SR3C\_V3**

***Q76.* The image shows some thoughts that people have about changing alcohol and illegal drug behaviors. Pick the one statement that shows what you think about this topic. Please read each sentence carefully before deciding.**

SR3C\_V3

Alcohol or illegal drugs 2

**1** =

**2 - 7** = unlabeled scale points

**8** =

**99** = skipped

***Skip-24.*** If ( S2\_V3D ^=1 ), Skip **SR3D\_V3**

***Q77.* The image shows some thoughts that people have about changing fruit and vegetable intake. Pick the one statement that shows what you think about this topic. Please read each sentence carefully before deciding.**

SR3D\_V3

Fruit and Vegetable Intake 2

**1** =

**2 - 6** = unlabeled scale points

**7** =

**99** = skipped

***Skip-25.*** If ( S2\_V3E ^=1 ), Skip **SR3E\_V3**

***Q78.* The image shows some thoughts that people have about changing behaviors to impact their weight. Pick the one statement that shows what you think about this topic. Please read each sentence carefully before deciding.**

SR3E\_V3

Weight 2

**1** =

**2 - 7** = unlabeled scale points

**8** =

**99** = skipped

***Skip-26.*** If ( S2\_V3F ^=1 ), Skip **SR3F\_V3**

***Q79.* The image shows some thoughts that people have about changing their physical activity. Pick the one statement that shows what you think about this topic. Please read each sentence carefully before deciding.**

SR3F\_V3

Physical Activity 2

**1** =

**2 - 6** = unlabeled scale points

**7** =

**99** = skipped

***Q80.* I am currently taking medication for: (check all conditions for which you ARE taking medication)**

S18\_V3

I am currently taking medication for: (check all conditions for which you ARE taking medication) 2

**0 - 12** = number of selected items

S18\_V3A

I am currently taking medication for: (check all conditions for which you ARE taking medication): Heart Disease 1

**0** = No

**1** = Yes

S18\_V3B

I am currently taking medication for: (check all conditions for which you ARE taking medication): Lung or Pulmonary Disease 1

**0** = No

**1** = Yes

S18\_V3C

I am currently taking medication for: (check all conditions for which you ARE taking medication): Cancer 1

**0** = No

**1** = Yes

S18\_V3D

I am currently taking medication for: (check all conditions for which you ARE taking medication): High Blood Pressure 1

**0** = No

**1** = Yes

S18\_V3E

I am currently taking medication for: (check all conditions for which you ARE taking medication): Diabetes 1

**0** = No

**1** = Yes

S18\_V3F

I am currently taking medication for: (check all conditions for which you ARE taking medication): High Cholesterol 1

**0** = No

**1** = Yes

S18\_V3G

I am currently taking medication for: (check all conditions for which you ARE taking medication): Allergies 1

**0** = No

**1** = Yes

S18\_V3H

I am currently taking medication for: (check all conditions for which you ARE taking medication): Hepatitis 1

**0** = No

**1** = Yes

S18\_V3I

I am currently taking medication for: (check all conditions for which you ARE taking medication): Arthritis 1

**0** = No

**1** = Yes

S18\_V3J

I am currently taking medication for: (check all conditions for which you ARE taking medication): HIV or AIDS 1

**0** = No

**1** = Yes

S18\_V3K

I am currently taking medication for: (check all conditions for which you ARE taking medication): HIV prevention 1

**0** = No

**1** = Yes

S18\_V3L

I am currently taking medication for: (check all conditions for which you ARE taking medication): I am not taking medications for any of these problems 1

**0** = No

**1** = Yes

***Q81.* I have a prescription for the following disorders: (check all that apply)**

S24\_V3

I have a prescription for the following disorders: (check all that apply) 1

**0 - 6** = number of selected items

S24\_V3A

I have a prescription for the following disorders: (check all that apply): Depression 1

**0** = No

**1** = Yes

S24\_V3B

I have a prescription for the following disorders: (check all that apply): Schizophrenia or Schizoaffective disorder 1

**0** = No

**1** = Yes

S24\_V3C

I have a prescription for the following disorders: (check all that apply): Bipolar Disorder 1

**0** = No

**1** = Yes

S24\_V3D

I have a prescription for the following disorders: (check all that apply): Anxiety Disorder 1

**0** = No

**1** = Yes

S24\_V3E

I have a prescription for the following disorders: (check all that apply): Post Traumatic Stress Disorder (PTSD) 1

**0** = No

**1** = Yes

S24\_V3F

I have a prescription for the following disorders: (check all that apply): None of the above 1

**0** = No

**1** = Yes

***Skip-27.*** If ( S24\_V3F=1 ), Skip to question **Q92**

***Skip-28.*** Skip to **Skip-29**

***Skip-29.*** If ( S24\_V3A=1 ), Skip to question **Q82**

***Skip-30.*** Skip to **Skip-32**

***Q82.* Did you take your depression medication yesterday?**

S25A\_V3

Did you take your depression medication yesterday? 1

**0** = No

**1** = Yes

**9** = skipped

***Q83.* What were the reasons that you did not take your depression medication yesterday? (check all that apply)**

S26A\_V3

What were the reasons that you did not take your depression medication yesterday? (check all that apply) 1

**0 - 7** = number of selected items

**9** = skipped

S26A\_V3A

What were the reasons that you did not take your depression medication yesterday? (check all that apply): Side effects 1

**0** = No

**1** = Yes

**9** = skipped

S26A\_V3B

What were the reasons that you did not take your depression medication yesterday? (check all that apply): Forgot 1

**0** = No

**1** = Yes

**9** = skipped

S26A\_V3C

What were the reasons that you did not take your depression medication yesterday? (check all that apply): The medication is not working 1

**0** = No

**1** = Yes

**9** = skipped

S26A\_V3D

What were the reasons that you did not take your depression medication yesterday? (check all that apply): I do not need the medication anymore 1

**0** = No

**1** = Yes

**9** = skipped

S26A\_V3E

What were the reasons that you did not take your depression medication yesterday? (check all that apply): I have not picked up the medication from the pharmacy 1

**0** = No

**1** = Yes

**9** = skipped

S26A\_V3F

What were the reasons that you did not take your depression medication yesterday? (check all that apply): I cannot get the medication refilled 1

**0** = No

**1** = Yes

**9** = skipped

S26A\_V3G

What were the reasons that you did not take your depression medication yesterday? (check all that apply): Other reasons 1

**0** = No

**1** = Yes

**9** = skipped

***Skip-31.*** Skip to **Skip-32**

***Skip-32.*** If ( S24\_V3B=1 ), Skip to question **Q84**

***Skip-33.*** Skip to **Skip-35**

***Q84.* Did you take your Schizophrenia or Schizoaffective disorder medication yesterday?**

S25B\_V3

Did you take your Schizophrenia or Schizoaffective disorder medication yesterday? 1

**0** = No

**1** = Yes

**9** = skipped

***Q85.* What were the reasons that you did not take your Schizophrenia or Schizoaffective disorder medication yesterday? (check all that apply)**

S26B\_V3

What were the reasons that you did not take your Schizophrenia or Schizoaffective disorder medication yesterday? (check all that apply) 1

**0 - 7** = number of selected items

**9** = skipped

S26B\_V3A

What were the reasons that you did not take your Schizophrenia or Schizoaffective disorder medication yesterday? (check all that apply): Side effects 1

**0** = No

**1** = Yes

**9** = skipped

S26B\_V3B

What were the reasons that you did not take your Schizophrenia or Schizoaffective disorder medication yesterday? (check all that apply): Forgot 1

**0** = No

**1** = Yes

**9** = skipped

S26B\_V3C

What were the reasons that you did not take your Schizophrenia or Schizoaffective disorder medication yesterday? (check all that apply): The medication is not working 1

**0** = No

**1** = Yes

**9** = skipped

S26B\_V3D

What were the reasons that you did not take your Schizophrenia or Schizoaffective disorder medication yesterday? (check all that apply): I do not need the medication anymore 1

**0** = No

**1** = Yes

**9** = skipped

S26B\_V3E

What were the reasons that you did not take your Schizophrenia or Schizoaffective disorder medication yesterday? (check all that apply): I have not picked up the medication from the pharmacy 1

**0** = No

**1** = Yes

**9** = skipped

S26B\_V3F

What were the reasons that you did not take your Schizophrenia or Schizoaffective disorder medication yesterday? (check all that apply): I cannot get the medication refilled 1

**0** = No

**1** = Yes

**9** = skipped

S26B\_V3G

What were the reasons that you did not take your Schizophrenia or Schizoaffective disorder medication yesterday? (check all that apply): Other reasons 1

**0** = No

**1** = Yes

**9** = skipped

***Skip-34.*** Skip to **Skip-35**

***Skip-35.*** If ( S24\_V3C=1 ), Skip to question **Q86**

***Skip-36.*** Skip to **Skip-38**

***Q86.* Did you take your Bipolar Disorder medication yesterday?**

S25C\_V3

Did you take your Bipolar Disorder medication yesterday? 1

**0** = No

**1** = Yes

**9** = skipped

***Q87.* What were the reasons that you did not take your Bipolar Disorder medication yesterday? (check all that apply)**

S26C\_V3

What were the reasons that you did not take your Bipolar Disorder medication yesterday? (check all that apply) 1

**0 - 7** = number of selected items

**9** = skipped

S26C\_V3A

What were the reasons that you did not take your Bipolar Disorder medication yesterday? (check all that apply): Side effects 1

**0** = No

**1** = Yes

**9** = skipped

S26C\_V3B

What were the reasons that you did not take your Bipolar Disorder medication yesterday? (check all that apply): Forgot 1

**0** = No

**1** = Yes

**9** = skipped

S26C\_V3C

What were the reasons that you did not take your Bipolar Disorder medication yesterday? (check all that apply): The medication is not working 1

**0** = No

**1** = Yes

**9** = skipped

S26C\_V3D

What were the reasons that you did not take your Bipolar Disorder medication yesterday? (check all that apply): I do not need the medication anymore 1

**0** = No

**1** = Yes

**9** = skipped

S26C\_V3E

What were the reasons that you did not take your Bipolar Disorder medication yesterday? (check all that apply): I have not picked up the medication from the pharmacy 1

**0** = No

**1** = Yes

**9** = skipped

S26C\_V3F

What were the reasons that you did not take your Bipolar Disorder medication yesterday? (check all that apply): I cannot get the medication refilled 1

**0** = No

**1** = Yes

**9** = skipped

S26C\_V3G

What were the reasons that you did not take your Bipolar Disorder medication yesterday? (check all that apply): Other reasons 1

**0** = No

**1** = Yes

**9** = skipped

***Skip-37.*** Skip to **Skip-38**

***Skip-38.*** If ( S24\_V3D=1 ), Skip to question **Q88**

***Skip-39.*** Skip to **Skip-41**

***Q88.* Did you take your Anxiety Disorder medication yesterday?**

S25D\_V3

Did you take your Anxiety Disorder medication yesterday? 1

**0** = No

**1** = Yes

**9** = skipped

***Q89.* What were the reasons that you did not take your Anxiety Disorder medication yesterday? (check all that apply)**

S26D\_V3

What were the reasons that you did not take your Anxiety Disorder medication yesterday? (check all that apply) 1

**0 - 7** = number of selected items

**9** = skipped

S26D\_V3A

What were the reasons that you did not take your Anxiety Disorder medication yesterday? (check all that apply): Side effects 1

**0** = No

**1** = Yes

**9** = skipped

S26D\_V3B

What were the reasons that you did not take your Anxiety Disorder medication yesterday? (check all that apply): Forgot 1

**0** = No

**1** = Yes

**9** = skipped

S26D\_V3C

What were the reasons that you did not take your Anxiety Disorder medication yesterday? (check all that apply): The medication is not working 1

**0** = No

**1** = Yes

**9** = skipped

S26D\_V3D

What were the reasons that you did not take your Anxiety Disorder medication yesterday? (check all that apply): I do not need the medication anymore 1

**0** = No

**1** = Yes

**9** = skipped

S26D\_V3E

What were the reasons that you did not take your Anxiety Disorder medication yesterday? (check all that apply): I have not picked up the medication from the pharmacy 1

**0** = No

**1** = Yes

**9** = skipped

S26D\_V3F

What were the reasons that you did not take your Anxiety Disorder medication yesterday? (check all that apply): I cannot get the medication refilled 1

**0** = No

**1** = Yes

**9** = skipped

S26D\_V3G

What were the reasons that you did not take your Anxiety Disorder medication yesterday? (check all that apply): Other reasons 1

**0** = No

**1** = Yes

**9** = skipped

***Skip-40.*** Skip to **Skip-41**

***Skip-41.*** If ( S24\_V3E=1 ), Skip to question **Q90**

***Skip-42.*** Skip to question **Q92**

***Q90.* Did you take your PTSD medication yesterday?**

S25E\_V3

Did you take your PTSD medication yesterday? 1

**0** = No

**1** = Yes

**9** = skipped

***Q91.* What were the reasons that you did not take your PTSD medication yesterday? (check all that apply)**

S26E\_V3

What were the reasons that you did not take your PTSD medication yesterday? (check all that apply) 1

**0 - 7** = number of selected items

**9** = skipped

S26E\_V3A

What were the reasons that you did not take your PTSD medication yesterday? (check all that apply): Side effects 1

**0** = No

**1** = Yes

**9** = skipped

S26E\_V3B

What were the reasons that you did not take your PTSD medication yesterday? (check all that apply): Forgot 1

**0** = No

**1** = Yes

**9** = skipped

S26E\_V3C

What were the reasons that you did not take your PTSD medication yesterday? (check all that apply): The medication is not working 1

**0** = No

**1** = Yes

**9** = skipped

S26E\_V3D

What were the reasons that you did not take your PTSD medication yesterday? (check all that apply): I do not need the medication anymore 1

**0** = No

**1** = Yes

**9** = skipped

S26E\_V3E

What were the reasons that you did not take your PTSD medication yesterday? (check all that apply): I have not picked up the medication from the pharmacy 1

**0** = No

**1** = Yes

**9** = skipped

S26E\_V3F

What were the reasons that you did not take your PTSD medication yesterday? (check all that apply): I cannot get the medication refilled 1

**0** = No

**1** = Yes

**9** = skipped

S26E\_V3G

What were the reasons that you did not take your PTSD medication yesterday? (check all that apply): Other reasons 1

**0** = No

**1** = Yes

**9** = skipped

***Skip-43.*** Skip to question **Q92**

***Q92.* What percent of your friends consume alcohol on a regular basis?**

S27\_V3

What percent of your friends consume alcohol on a regular basis? 1

**0** = None of my friends drink alcohol on a regular basis

**1** = 25% (1 out of 4) of my friends drink alcohol

**2** = 50% (half) of my friends drink alcohol

**3** = 75% (3 out of 4) of my friends drink alcohol

**4** = 100% (all) of my friends drink alcohol

***Q93.* What percent of your friends use an illegal drug or substance on a regular basis?**

S28\_V3

What percent of your friends use an illegal drug or substance on a regular basis? 1

**0** = None of my friends use illegal drugs on a regular basis

**1** = 25% (1 out of 4) of my friends use illegal drugs

**2** = 50% (half) of my friends use illegal drugs

**3** = 75% (3 out of 4) of my friends use illegal drugs

**4** = 100% (all) of my friends use illegal drugs

***Q94.* Please select all the substances that you used in the past 30 days. (check all that apply)**

S32\_V3

Please select all the substances that you used in the past 30 days. 1

**0 - 9** = number of selected items

S32\_V3A

Please select all the substances that you used in the past 30 days.: Alcohol 1

**0** = No

**1** = Yes

S32\_V3B

Please select all the substances that you used in the past 30 days.: Cannabis (example: marijuana) 1

**0** = No

**1** = Yes

S32\_V3C

Please select all the substances that you used in the past 30 days.: Cocaine (example: crack, powder, freebase) 1

**0** = No

**1** = Yes

S32\_V3D

Please select all the substances that you used in the past 30 days.: K2 (synthetic marijuana, spice) 1

**0** = No

**1** = Yes

S32\_V3E

Please select all the substances that you used in the past 30 days.: Opiate (example: heroin, oxycontin, pain pills) 1

**0** = No

**1** = Yes

S32\_V3F

Please select all the substances that you used in the past 30 days.: Amphetamine (example: crystal meth, speed) 1

**0** = No

**1** = Yes

S32\_V3G

Please select all the substances that you used in the past 30 days.: Sedative, Hypnotic, or Anxiolytic (example: valium, xanax) 1

**0** = No

**1** = Yes

S32\_V3H

Please select all the substances that you used in the past 30 days.: Other Substance 1

**0** = No

**1** = Yes

S32\_V3I

Please select all the substances that you used in the past 30 days.: I did not use any of these substances in the past 30 days 1

**0** = No

**1** = Yes

***Q95.* How often do you brush your teeth?**

S33\_V3

How often do you brush your teeth? 1

**0** = Never

**1** = Less than 1 time per week

**2** = 1 to 3 times per week

**3** = 4 to 6 times per week

**4** = Every day

***Q96.* During the past 7 days, how many times did you drink a can, bottle, or glass of soda or pop, such as Coke, Pepsi, or Sprite? (Do not count diet soda or diet pop)**

S37\_V3

During the past 7 days, how many times did you drink a can, bottle, or glass of soda or pop, such as Coke, Pepsi, or Sprite? (Do not count diet soda or diet pop) 1

**0** = I did not drink soda or pop during the past 7 days

**1** = 1 to 3 times during the past 7 days

**2** = 4 to 6 times during the past 7 days

**3** = 1 time per day

**4** = 2 times per day

**5** = 3 times per day

**6** = 4 or more times per day

***Q97.* Are you limited in any way in any activities because of physical, mental, or emotional problems?**

S39A\_V3

Are you limited in any way in any activities because of physical, mental, or emotional problems? 1

**0** = No

**1** = Yes

***Q98.* Do you receive government benefits (example, social security) because you have a physical, mental, or emotional disability?**

S39B\_V3

Do you receive government benefits (example, social security) because you have a physical, mental, or emotional disability? 1

**0** = No

**1** = Yes

***Q99.* How much bodily pain have you had during the past four weeks?**

S40\_V3

How much bodily pain have you had during the past four weeks? 1

**0** = None

**1** = Very Mild

**2** = Mild

**3** = Moderate

**4** = Severe

***Q100.* Do you believe that a smartphone app can help you to change your actions or behavior?**

S41\_V3

Do you believe that a smartphone app can help you to change your actions or behavior? 1

**0** = No

**1** = Yes

**7** = Don't Know

**8** = Refuse to Answer

**9** = Not Applicable

***Q101.* Have you ever used a smartphone app to manage one or more health-related issues?**

S42\_V3

Have you ever used a smartphone app to manage one or more health-related issues? 1

**0** = No

**1** = Yes

**7** = Don't Know

**8** = Refuse to Answer

**9** = Not Applicable

***Skip-44.*** If ( S42\_V3 = 0 ), Skip **S43\_V3**

***Q102.* What type of health related issue? (Check all types of smartphone apps that you have used)**

S43\_V3

What type of health related issue? (Check all types of smartphone apps that you have used) 1

**0 - 9** = number of selected items

**99** = skipped

S43\_V3A

What type of health related issue? (Check all types of smartphone apps that you have used): Food/calorie tracking 1

**0** = No

**1** = Yes

**9** = skipped

S43\_V3B

What type of health related issue? (Check all types of smartphone apps that you have used): Medication reminders 1

**0** = No

**1** = Yes

**9** = skipped

S43\_V3C

What type of health related issue? (Check all types of smartphone apps that you have used): Mood manager 1

**0** = No

**1** = Yes

**9** = skipped

S43\_V3D

What type of health related issue? (Check all types of smartphone apps that you have used): Physical activity 1

**0** = No

**1** = Yes

**9** = skipped

S43\_V3E

What type of health related issue? (Check all types of smartphone apps that you have used): Sleep Tracker 1

**0** = No

**1** = Yes

**9** = skipped

S43\_V3F

What type of health related issue? (Check all types of smartphone apps that you have used): Smoking Cessation 1

**0** = No

**1** = Yes

**9** = skipped

S43\_V3G

What type of health related issue? (Check all types of smartphone apps that you have used): Stress reduction 1

**0** = No

**1** = Yes

**9** = skipped

S43\_V3H

What type of health related issue? (Check all types of smartphone apps that you have used): Weight loss tracking 1

**0** = No

**1** = Yes

**9** = skipped

S43\_V3I

What type of health related issue? (Check all types of smartphone apps that you have used): Other 1

**0** = No

**1** = Yes

**9** = skipped

Sect-11. \*\*\*\*\*Tobacco History Questionnaire\*\*\*\*\*

***Q103.* Have you smoked at least 100 cigarettes (or cigarillos) in your entire life? (NOTE: 5 packs = 100 cigarettes)**

T1\_V3

Have you smoked at least 100 cigarettes (or cigarillos) in your entire life? (NOTE: 5 packs = 100 cigarettes) 1

**0** = No

**1** = Yes

***Skip-45.*** If ( T1\_V3=0 ), Skip to question **Q133**

***Q104.* Have you smoked cigarettes or cigarillos in the past 30 days?**

T2\_V3

Have you smoked cigarettes or cigarillos in the past 30 days? 1

**0** = No

**1** = Yes

**9** = skipped

***Skip-46.*** If ( T2\_V3=1 ), Skip to question **Q107**

***Q105.* How long ago did you quit smoking? (for example 3 and a half years would be 3 years and 6 months)**

T3A\_V3

How long ago did you quit smoking? (for example 3 and a half years would be 3 years and 6 months) 3

**0 - 999** = (Months)

**9999** = skipped

T3A\_V3Y

Years: How long ago did you quit smoking? (for example 3 and a half years would be 3 years and 6 months) 3

**0 - 83** = range

**999** = skipped

T3A\_V3M

Months: How long ago did you quit smoking? (for example 3 and a half years would be 3 years and 6 months) 3

**0 - 11** = range

**999** = skipped

***Q106.* How many years were you a smoker:**

T3B\_V3

How many years were you a smoker 2

**0 - 96** = years

**99** = skipped

***Skip-47.*** Skip to question **Q122**

***Q107.* In the last 24 hours, how many cigarettes or cigarillos have you smoked?**

T5\_V3

In the last 24 hours, how many cigarettes or cigarillos have you smoked? 1

**0** = 0

**1** = 1 to 5

**2** = 6 to 10

**3** = 11 to 15

**4** = 16 to 20

**5** = 21 to 25

**6** = more than 25

**9** = skipped

***Skip-48.*** Skip to **Skip-49**

***Skip-49.*** If ( T5\_V3=1 ), Skip to question **Q108**

***Skip-50.*** Skip to **Skip-52**

***Q108.* You reported that you smoked 1 to 5 cigarettes or cigarillos yesterday, how many did you smoke yesterday?**

T5A1\_V3

You reported that you smoked 1 to 5 cigarettes or cigarillos yesterday, did you smoke? 2

**1** = 1

**2** = 2

**3** = 3

**4** = 4

**5** = 5

**99** = skipped

***Skip-51.*** Skip to **Skip-52**

***Skip-52.*** If ( T5\_V3=2 ), Skip to question **Q109**

***Skip-53.*** Skip to **Skip-55**

***Q109.* You reported that you smoked 6 to 10 cigarettes or cigarillos yesterday, how many did you smoke?**

T5A2\_V3

You reported that you smoked 6 to 10 cigarettes or cigarillos yesterday, did you smoke? 1

**6** = 6

**7** = 7

**8** = 8

**9** = 9

**10** = 10

**99** = skipped

***Skip-54.*** Skip to **Skip-55**

***Skip-55.*** If ( T5\_V3=3 ), Skip to question **Q110**

***Skip-56.*** Skip to **Skip-58**

***Q110.* You reported that you smoked 11 to 15 cigarettes or cigarillos yesterday, how many did you smoke?**

T5A3\_V3

You reported that you smoked 11 to 15 cigarettes or cigarillos yesterday, did you smoke? 2

**11** = 11

**12** = 12

**13** = 13

**14** = 14

**15** = 15

**99** = skipped

***Skip-57.*** Skip to **Skip-58**

***Skip-58.*** If ( T5\_V3=4 ), Skip to question **Q111**

***Skip-59.*** Skip to **Skip-61**

***Q111.* You reported that you smoked 16 to 20 cigarettes or cigarillos yesterday, how many did you smoke?**

T5A4\_V3

You reported that you smoked 16 to 20 cigarettes or cigarillos yesterday, did you smoke? 2

**16** = 16

**17** = 17

**18** = 18

**19** = 19

**20** = 20

**99** = skipped

***Skip-60.*** Skip to **Skip-61**

***Skip-61.*** If ( T5\_V3=5 ), Skip to question **Q112**

***Skip-62.*** Skip to **Skip-64**

***Q112.* You reported that you smoked 21 to 25 cigarettes or cigarillos yesterday, how many did you smoke?**

T5A5\_V3

You reported that you smoked 21 to 25 cigarettes or cigarillos yesterday, did you smoke? 2

**21** = 21

**22** = 22

**23** = 23

**24** = 24

**25** = 25

**99** = skipped

***Skip-63.*** Skip to **Skip-64**

***Skip-64.*** If ( T5\_V3=6 ), Skip to question **Q113**

***Skip-65.*** Skip to question **Q114**

***Q113.* You reported that you smoked 26 or more cigarettes or cigarillos yesterday, how many did you smoke?**

T5A6\_V3

You reported that you smoked 26 or more cigarettes or cigarillos yesterday, did you smoke? 2

**26** = 26

**27** = 27

**28** = 28

**29** = 29

**30** = 30 or more

**99** = skipped

***Skip-66.*** Skip to question **Q114**

***Q114.* How many cigarettes or cigarillos do you usually smoke in a day?**

T6\_V3

How many cigarettes or cigarillos do you usually smoke in a day? 1

**0** = 0

**1** = 1 to 5

**2** = 6 to 10

**3** = 11 to 15

**4** = 16 to 20

**5** = 21 to 25

**6** = more than 25

**9** = skipped

***Skip-67.*** Skip to **Skip-68**

***Skip-68.*** If ( T6\_V3=1 ), Skip to question **Q115**

***Skip-69.*** Skip to **Skip-71**

***Q115.* You reported that you usually smoke 1 to 5 cigarettes or cigarillos per day, how many do you usually smoke?**

T6A1\_V3

You reported that you usually smoke 1 to 5 cigarettes or cigarillos per day, do you usually smoke? 2

**1** = 1

**2** = 2

**3** = 3

**4** = 4

**5** = 5

**99** = skipped

***Skip-70.*** Skip to **Skip-71**

***Skip-71.*** If ( T6\_V3=2 ), Skip to question **Q116**

***Skip-72.*** Skip to **Skip-74**

***Q116.* You reported that you usually smoke 6 to 10 cigarettes or cigarillos per day, how many do you usually smoke?**

T6A2\_V3

You reported that you usually smoke 6 to 10 cigarettes or cigarillos per day, do you usually smoke? 1

**6** = 6

**7** = 7

**8** = 8

**9** = 9

**10** = 10

**99** = skipped

***Skip-73.*** Skip to **Skip-74**

***Skip-74.*** If ( T6\_V3=3 ), Skip to question **Q117**

***Skip-75.*** Skip to **Skip-77**

***Q117.* You reported that you usually smoke 11 to 15 cigarettes or cigarillos per day, how many do you usually smoke?**

T6A3\_V3

You reported that you usually smoke 11 to 15 cigarettes or cigarillos per day, do you usually smoke? 2

**11** = 11

**12** = 12

**13** = 13

**14** = 14

**15** = 15

**99** = skipped

***Skip-76.*** Skip to **Skip-77**

***Skip-77.*** If ( T6\_V3=4 ), Skip to question **Q118**

***Skip-78.*** Skip to **Skip-80**

***Q118.* You reported that you usually smoke 16 to 20 cigarettes or cigarillos per day, how many do you usually smoke?**

T6A4\_V3

You reported that you usually smoke 16 to 20 cigarettes or cigarillos per day, do you usually smoke? 2

**16** = 16

**17** = 17

**18** = 18

**19** = 19

**20** = 20

**99** = skipped

***Skip-79.*** Skip to **Skip-80**

***Skip-80.*** If ( T6\_V3=5 ), Skip to question **Q119**

***Skip-81.*** Skip to **Skip-83**

***Q119.* You reported that you usually smoke 21 to 25 cigarettes or cigarillos per day, how many do you usually smoke?**

T6A5\_V3

You reported that you usually smoke 21 to 25 cigarettes or cigarillos per day, do you usually smoke? 2

**21** = 21

**22** = 22

**23** = 23

**24** = 24

**25** = 25

**99** = skipped

***Skip-82.*** Skip to **Skip-83**

***Skip-83.*** If ( T6\_V3=6 ), Skip to question **Q120**

***Skip-84.*** Skip to question **Q121**

***Q120.* You reported that you usually smoke 26 or more cigarettes or cigarillos per day, how many do you usually smoke?**

T6A6\_V3

You reported that you usually smoke 26 or more cigarettes or cigarillos per day, do you usually smoke? 2

**26** = 26

**27** = 27

**28** = 28

**29** = 29

**30** = 30 or more

**99** = skipped

***Skip-85.*** Skip to question **Q121**

***Q121.* How much money do you usually spend on cigarettes or cigarillos each week?**

T7\_V3

How much money do you usually spend on cigarettes or cigarillos each week? 1

**1** = $5 or less

**2** = $6 to $10

**3** = $11 to $20

**4** = $21 to $30

**5** = $31 to $40

**6** = $41 to $50

**7** = $51 to $60

**8** = $61 to $70

**9** = $71 or more

**99** = skipped

***Q122.* In the past 30 days, how many times have you successfully quit smoking for at least 24 hours (only include times where you wanted to quit smoking - do not include times when you wanted to smoke but didn't have money to buy cigarettes)?**

T10\_V3

In the past 30 days, how many times have you successfully quit smoking for at least 24 hours (only include times where you wanted to quit smoking – do not include times when you wanted to smoke but didn’t have money to buy cigarettes)? 2

**0** = 0

**1** = 1

**2** = 2

**3** = 3

**4** = 4

**5** = 5

**6** = 6

**7** = 7

**8** = 8

**9** = 9 or more

**99** = skipped

***Q123.* Have you received treatment to help you quit smoking in the past 30 days?**

T16\_V3

Have you received treatment to help you quit smoking in the past 30 days? 1

**0** = No

**1** = Yes

**9** = skipped

***Q124.* Have you taken smoking cessation medications in the past 30 days?**

T17\_V3

Have you taken smoking cessation medications in the past 30 days? 1

**0** = No

**1** = Yes

**9** = skipped

***Skip-86.*** If ( T2\_V3=0 ), Skip to question **Q133**

***Q125.* If you were to try to quit smoking, which tobacco cessation medication would you prefer?**

T22\_V3

If you were to try to quit smoking, which tobacco cessation medication would you prefer? 1

**1** = Chantix/Varenicline

**2** = Zyban/Wellbutrin

**3** = Nicotine Patch

**4** = Nicotine Gum

**5** = Nicotine Nasal Spray

**6** = Other Medication

**7** = If I were to try to quit smoking, I would prefer not to use any of these smoking cessation medications

**9** = skipped

***Q126.* Which of the following is true?**

T24\_V3

Which of the following is true? 1

**1** = I now smoke LESS cigarettes per day than I did a year ago

**2** = I now smoke the SAME number of cigarettes per day as I did a year ago

**3** = I now smoke MORE cigarettes per day than I did a year ago

**9** = skipped

***Q127.* Which option would give you the best chance for quitting smoking? (choose only one answer)**

T25\_V3

Which option would give you the best chance for quitting smoking? 1

**1** = Medications

**2** = Counseling

**3** = Both medications and counseling

**4** = Smartphone app

**5** = Both smartphone app and medications

**6** = Quitting "cold turkey" - without counseling or medications

**9** = skipped

***Q128.* If you were to try to quit smoking, which of the following would you prefer to receive:**

T26\_V3

If you were to try to quit smoking, which of the following would you prefer to receive: 1

**1** = Medications

**2** = Group counseling

**3** = Smartphone app

**4** = In person individual counseling

**5** = Helpline phone counseling

**6** = None of the above

**9** = skipped

***Q129.* Would you prefer to use tobacco cessation medications if you were to try to quit in the future?**

T27\_V3

Would you prefer to use tobacco cessation medications if you were to try to quit in the future? 1

**0** = No

**1** = Yes

**9** = skipped

***Q130.* What are your chances of developing at least one smoking related disease if you quit for good?**

T28\_V3

What are your chances of developing at least one smoking related disease if you quit for good? 1

**0** = 0% I will DEFINITELY NOT develop

**1** = 25%

**2** = 50% I have 50/50 chance

**3** = 75%

**4** = 100% I will DEFINITELY develop

**9** = skipped

***Q131.* What are your chances of developing at least one smoking related disease if you do NOT quit for good?**

T29\_V3

What are your chances of developing at least one smoking related disease if you do NOT quit for good? 1

**0** = 0% I will DEFINITELY NOT develop

**1** = 25%

**2** = 50% I have 50/50 chance

**3** = 75%

**4** = 100% I will DEFINITELY develop

**9** = skipped

***Q132.* How likely is that you will be a NON-smoker 3 months from now?**

T30\_V3

How likely is that you will be a NON-smoker 3 months from now? 1

**0** = 0% I will DEFINITELY BE smoking 3 months from now

**1** = 25%

**2** = 50% I have a 50/50 chance I will be smoking 3 months from now

**3** = 75%

**4** = 100% I will DEFINITELY NOT be smoking 3 months from now

**9** = skipped

***Q133.* Which of the following products have you tried, even just one time (click all items that you have used in the past)?**

T31\_V3

Which of the following products have you tried, even just one time (click all items that you have used in the past)? 2

**0 - 10** = number of selected items

T31\_V3A

Which of the following products have you tried, even just one time (click all items that you have used in the past)?: Snus, such as Camel or Marlboro Snus 1

**0** = No

**1** = Yes

T31\_V3B

Which of the following products have you tried, even just one time (click all items that you have used in the past)?: Roll-your-own cigarettes 1

**0** = No

**1** = Yes

T31\_V3C

Which of the following products have you tried, even just one time (click all items that you have used in the past)?: Tobacco from a hookah or a waterpipe 1

**0** = No

**1** = Yes

T31\_V3D

Which of the following products have you tried, even just one time (click all items that you have used in the past)?: Dissolvable tobacco products like Ariva/ Stonewall/Camel/ Camel Orbs/Camel sticks 1

**0** = No

**1** = Yes

T31\_V3E

Which of the following products have you tried, even just one time (click all items that you have used in the past)?: Electronic cigarettes, vapes, or other vaping devices 1

**0** = No

**1** = Yes

T31\_V3F

Which of the following products have you tried, even just one time (click all items that you have used in the past)?: Cigars 1

**0** = No

**1** = Yes

T31\_V3G

Which of the following products have you tried, even just one time (click all items that you have used in the past)?: Little cigars/cigarillos/bidis 1

**0** = No

**1** = Yes

T31\_V3H

Which of the following products have you tried, even just one time (click all items that you have used in the past)?: Chewing tobacco, dip, or snuff 1

**0** = No

**1** = Yes

T31\_V3I

Which of the following products have you tried, even just one time (click all items that you have used in the past)?: Other tobacco product (besides conventional cigarettes) 1

**0** = No

**1** = Yes

T31\_V3J

Which of the following products have you tried, even just one time (click all items that you have used in the past)?: None of these 1

**0** = No

**1** = Yes

***Skip-87.*** If ( T31\_V3E=1 ), Skip to question **Q134**

***Skip-88.*** Skip to question **Q135**

***Q134.* You reported that you have used e-cigarettes, vapes, or other vaping devices in the past. Which of these types of devices have you used?**

T31B\_V3

You reported that you have used e-cigarettes, vapes, or other vaping devices in the past. Which of these types of devices have you used? 1

**0 - 3** = number of selected items

**9** = skipped

T31B\_V3A

You reported that you have used e-cigarettes, vapes, or other vaping devices in the past. Which of these types of devices have you used?: 1st generation e-cigarette (aka., e-cigarette, cig-a-likes - similar to blu, vuse, MarkTen or NJOY e-cigarettes) 1

**0** = No

**1** = Yes

**9** = skipped

T31B\_V3B

You reported that you have used e-cigarettes, vapes, or other vaping devices in the past. Which of these types of devices have you used?: 2nd generation e-cigarette (aka., Tank-system, eGo-style, vape pen, e-hookah) 1

**0** = No

**1** = Yes

**9** = skipped

T31B\_V3C

You reported that you have used e-cigarettes, vapes, or other vaping devices in the past. Which of these types of devices have you used?: 3rd generation e-cigarette (aka., mod devices, mechanical mod, APV, rebuildable tanks, rebuildable atomizers, rebuildable drip tanks) 1

**0** = No

**1** = Yes

**9** = skipped

***Skip-89.*** Skip to question **Q135**

***Q135.* Which of the following products have you used in the past 30 days? (Click all items that you have used in the past 30 days).**

T33\_V3

Which of the following products have you used in the past 30 days? (Click all items that you have used in the past 30 days). 2

**0 - 10** = number of selected items

T33\_V3A

Which of the following products have you used in the past 30 days? (Click all items that you have used in the past 30 days).: Snus, such as Camel or Marlboro Snus 1

**0** = No

**1** = Yes

T33\_V3B

Which of the following products have you used in the past 30 days? (Click all items that you have used in the past 30 days).: Roll-your-own cigarettes 1

**0** = No

**1** = Yes

T33\_V3C

Which of the following products have you used in the past 30 days? (Click all items that you have used in the past 30 days).: Tobacco from a hookah or a waterpipe 1

**0** = No

**1** = Yes

T33\_V3D

Which of the following products have you used in the past 30 days? (Click all items that you have used in the past 30 days).: Dissolvable tobacco products like Ariva/ Stonewall/Camel/ Camel Orbs/Camel sticks 1

**0** = No

**1** = Yes

T33\_V3E

Which of the following products have you used in the past 30 days? (Click all items that you have used in the past 30 days).: Electronic cigarettes, vapes, or other vaping devices 1

**0** = No

**1** = Yes

T33\_V3F

Which of the following products have you used in the past 30 days? (Click all items that you have used in the past 30 days).: Cigars 1

**0** = No

**1** = Yes

T33\_V3G

Which of the following products have you used in the past 30 days? (Click all items that you have used in the past 30 days).: Little cigars/cigarillos/bidis 1

**0** = No

**1** = Yes

T33\_V3H

Which of the following products have you used in the past 30 days? (Click all items that you have used in the past 30 days).: Chewing tobacco, dip, or snuff 1

**0** = No

**1** = Yes

T33\_V3I

Which of the following products have you used in the past 30 days? (Click all items that you have used in the past 30 days).: Other tobacco product (besides conventional cigarettes) 1

**0** = No

**1** = Yes

T33\_V3J

Which of the following products have you used in the past 30 days? (Click all items that you have used in the past 30 days).: I have not used any of the above tobacco products in the past 30 days 1

**0** = No

**1** = Yes

***Q136.* Do you have a spouse or partner?**

T34\_V3

Do you have a spouse or partner? 1

**0** = No

**1** = Yes

***Skip-90.*** If ( T34\_V3=0 ), Skip to question **Q138**

***Q137.* Does your spouse/partner smoke?**

T35\_V3

Does your spouse/partner smoke? 1

**0** = No

**1** = Yes

**9** = skipped

***Q138.* During an average weekday, how many smokers are you around?**

T36\_V3

During an average weekday, how many smokers are you around? 3

**0 - 100** = smokers

***Q139.* During an average weekend, how many smokers are you around?**

T37\_V3

During an average weekend, how many smokers are you around? 3

**0 - 100** = smokers

***Q140.* How many close friends do you have? It is okay to count family members if you consider them your best friends.**

T38\_V3

How many close friends do you have? It is okay to count family members if you consider them your best friends. 3

**0 - 999** = friend(s)

***Q141.* How many of these close friends smoke?**

T39\_V3

How many of these close friends smoke? 3

**0 - 999** = friend(s)

***Edit-2.*** If ( T39\_V3>T38\_V3 ), Loop back to question **Q140**

*Display message: The number of close friends who smoke cannot be greater than your total number of close friends. Please correct.*

***Q142.* How many of your 5 best friends smoke? It is okay to count family members if you consider them your best friends.**

T40\_V3

How many of your 5 best friends smoke? It is okay to count family members if you consider them your best friends. 1

**0 - 5** = friend(s)

***Skip-91.*** Skip to **Skip-92**

Sect-12. \*\*\*\*\* Heaviness of Smoking Index\*\*\*\*\*

***Skip-92.*** If ( T2\_V3=0 OR T1\_V3=0 ), Skip **HSI1\_V3, HSI2\_V13**

***Q143.* How many cigarettes per day do you smoke?**

HSI1\_V3

How many cigarettes per day do you smoke? 1

**0** = 10 or fewer

**1** = 11 to 20 per day

**2** = 21 to 30 per day

**3** = 31 or more per day

**9** = skipped

***Q144.* How soon after you wake up do you smoke your first cigarette?**

HSI2\_V13

hsi\_2

How soon after you wake up do you smoke your first cigarette? 1

**0** = After 60 minutes

**1** = 31 to 60 minutes

**2** = 6 to 30 minutes

**3** = Within 5 minutes

**9** = skipped

Sect-13. \*\*\*\*\*BRFSS - Inadequate Sleep\*\*\*\*\*

***Info-5.*** (For Respondent) **We would like to ask you a few questions about your sleep patterns. Please press "next question" to continue...**

***Q145.* During the past 30 days, for how many days have you felt you did not get enough rest or sleep?**

BRS1\_V3

During the past 30 days, for how many days have you felt you did not get enough rest or sleep? 2

**0 - 30** = days

***Q146.* On average, how many hours of sleep do you get in a 24-hour period? Think about the time you actually spend sleeping or napping, not just the amount of sleep you think you should get.**

BRS2\_V3

On average, how many hours of sleep do you get in a 24-hour period? Think about the time you actually spend sleeping or napping, not just the amount of sleep you think you should get. 5

**0 - 24** = hours

***Q147.* Do you snore? (If your spouse or someone told you that you snore, then the answer to the question is 'yes')**

BRS3\_V3

Do you snore? (If your spouse or someone told you that you snore, then the answer to the question is 'yes') 1

**0** = No

**1** = Yes

***Q148.***

**During the past 30 days, for about how many days did you find yourself unintentionally falling asleep during the day?**

BRS4\_V3

During the past 30 days, for about how many days did you find yourself unintentionally falling asleep during the day? 2

**0 - 30** = days

***Q149.* During the past 30 days, have you ever nodded off or fallen asleep, even just for a brief moment while driving?**

BRS5\_V3

During the past 30 days, have you ever nodded off or fallen asleep, even just for a brief moment while driving? 1

**1** = Yes

**2** = No

**3** = Don't drive

**4** = Don't have driver's license

**7** = Don't Know

**8** = Refuse to Answer

**9** = Not Applicable

Sect-14. \*\*\*\*\*Alcohol Quantity, Frequency and Binge Drinking Questionnaire\*\*\*\*\*

***Q150.* Have you consumed alcohol (including beer and wine) in past 3 years?**

AF1\_V3

Have you consumed alcohol (including beer and wine) in past 3 years? 1

**0** = No

**1** = Yes

***Skip-93.*** If ( AF1\_V3=0 ), Skip to **Sect-15**

***Info-6.*** (For Respondent) **The next questions focus on the usual amount of alcohol you consume on each day of the week. A STANDARD DRINK is equal to: ONE 12 ounce beer, or ONE 12 ounce wine cooler, or ONE 5 ounce glass of wine, or ONE 1.5 ounce shot, or ONE mixed drink containing 1.5 ounces of liquor. Please press "next question" to continue...**

***Info-7.*** (For Respondent) ***For example:* You will be asked how many STANDARD DRINKS you consume on an average Monday for the past 30 days. If on an average Monday, you drink one 24 ounce beer (equal to two 12 ounce beers) and two 5 ounce glasses of wine, you would mark 4 as your average consumption for that day. Please press "next question" to continue...**

***Q151.* How many STANDARD DRINKS do you consume on an average Monday?**

AF2M\_V3

How many STANDARD DRINKS do you consume on an average Monday? 2

**0** = 0

**1** = 1

**2** = 2

**3** = 3

**4** = 4

**5** = 5

**6** = 6

**7** = 7

**8** = 8

**9** = 9

**10** = 10

**11** = 11 or more

**99** = skipped

***Q152.* How many STANDARD DRINKS do you consume on an average Tuesday?**

AF3TU\_V3

How many STANDARD DRINKS do you consume on an average Tuesday? 2

**0** = 0

**1** = 1

**2** = 2

**3** = 3

**4** = 4

**5** = 5

**6** = 6

**7** = 7

**8** = 8

**9** = 9

**10** = 10

**11** = 11 or more

**99** = skipped

***Q153.* How many STANDARD DRINKS do you consume on an average Wednesday?**

AF4W\_V3

How many STANDARD DRINKS do you consume on an average Wednesday? 2

**0** = 0

**1** = 1

**2** = 2

**3** = 3

**4** = 4

**5** = 5

**6** = 6

**7** = 7

**8** = 8

**9** = 9

**10** = 10

**11** = 11 or more

**99** = skipped

***Q154.* How many STANDARD DRINKS do you consume on an average Thursday?**

AF5TH\_V3

How many STANDARD DRINKS do you consume on an average Thursday? 2

**0** = 0

**1** = 1

**2** = 2

**3** = 3

**4** = 4

**5** = 5

**6** = 6

**7** = 7

**8** = 8

**9** = 9

**10** = 10

**11** = 11 or more

**99** = skipped

***Q155.* How many STANDARD DRINKS do you consume on an average Friday?**

AF6F\_V3

How many STANDARD DRINKS do you consume on an average Friday? 2

**0** = 0

**1** = 1

**2** = 2

**3** = 3

**4** = 4

**5** = 5

**6** = 6

**7** = 7

**8** = 8

**9** = 9

**10** = 10

**11** = 11 or more

**99** = skipped

***Q156.* How many STANDARD DRINKS do you consume on an average Saturday?**

AF6SA\_V3

How many STANDARD DRINKS do you consume on an average Saturday? 2

**0** = 0

**1** = 1

**2** = 2

**3** = 3

**4** = 4

**5** = 5

**6** = 6

**7** = 7

**8** = 8

**9** = 9

**10** = 10

**11** = 11 or more

**99** = skipped

***Q157.* How many STANDARD DRINKS do you consume on an average Sunday?**

AF8SU\_V3

How many STANDARD DRINKS do you consume on an average Sunday? 2

**0** = 0

**1** = 1

**2** = 2

**3** = 3

**4** = 4

**5** = 5

**6** = 6

**7** = 7

**8** = 8

**9** = 9

**10** = 10

**11** = 11 or more

**99** = skipped

**Calculated Variable**

DRINKS

Number of drinks based on gender 128

DRINKS = if(GENDER^=1, "5", if (GENDER=1, "4", "4"))

***Q158.* How often in the past 30 days have you consumed [DRINKS] or more STANDARD DRINKS?**

AF9\_V3

How often in the past 30 days have you consumed (4 if female; 5 if male) or more STANDARD DRINKS? 1

**0** = 0 - 10 days

**1** = 11 - 20 days

**2** = 21 - 30 days

**9** = skipped

***Skip-94.*** Skip to **Skip-95**

***Skip-95.*** If ( AF9\_V3 = 0 ), Skip to question **Q159**

***Skip-96.*** Skip to **Skip-98**

***Q159.* You reported that you consumed [DRINKS] or more STANDARD DRINKS on 0 to 10 days over the past 30 days. On how many days did you consume [DRINKS] or more STANDARD DRINKS?**

AF9A\_V3

You reported that you consumed '5 for men/4 for women' or more STANDARD DRINKS in the past 0 to 10 days, on how many days did you consume '5 for men/ 4 for women' or more STANDARD DRINKS? 1

**0** = 0 days

**1** = 1 day

**2** = 2 days

**3** = 3 days

**4** = 4 days

**5** = 5 days

**6** = 6 days

**7** = 7 days

**8** = 8 days

**9** = 9 days

**10** = 10 days

**99** = skipped

***Skip-97.*** Skip to **Skip-98**

***Skip-98.*** If ( AF9\_V3 = 1 ), Skip to question **Q160**

***Skip-99.*** Skip to **Skip-101**

***Q160.* You reported that you consumed [DRINKS] or more STANDARD DRINKS on 11 to 20 days over the past 30 days. On how many days did you consume [DRINKS] or more STANDARD DRINKS?**

AF9B\_V3

You reported that you consumed '5 for men/4 for women' or more STANDARD DRINKS in the past 11 to 20 days, on how many days did you consume '5 for men/ 4 for women' or more STANDARD DRINKS? 2

**11** = 11 days

**12** = 12 days

**13** = 13 days

**14** = 14 days

**15** = 15 days

**16** = 16 days

**17** = 17 days

**18** = 18 days

**19** = 19 days

**20** = 20 days

**99** = skipped

***Skip-100.*** Skip to **Skip-101**

***Skip-101.*** If ( AF9\_V3 = 2 ), Skip to question **Q161**

***Skip-102.*** Skip to **Sect-15**

***Q161.* You reported that you consumed [DRINKS] or more STANDARD DRINKS on 21 to 30 days over the past 30 days. On how many days did you consume [DRINKS] or more STANDARD DRINKS?**

AF9C\_V3

You reported that you consumed '5 for men/4 for women' or more STANDARD DRINKS in the past 21 to 30 days, on how many days did you consume '5 for men/ 4 for women' or more STANDARD DRINKS? 2

**21** = 21 days

**22** = 22 days

**23** = 23 days

**24** = 24 days

**25** = 25 days

**26** = 26 days

**27** = 27 days

**28** = 28 days

**29** = 29 days

**30** = 30 days

**99** = skipped

Sect-15. \*\*\*\*\*Food Security\*\*\*\*\*

***Info-8.*** (For Respondent) **The next several statements ask about your food situation. Press "next question" to continue...**

***Q162.* In the last month, "the food that you bought just didn't last, and you didn't have money to get more."**

FSS1\_V3

In the last month, the food that you bought just didn’t last, and you didn’t have money to get more. 1

**0** = Often true

**1** = Sometimes true

**2** = Never true

**99** = Don't know or Refused

***Q163.* In the last month, you couldn't afford to eat balanced meals.**

FSS2\_V3

In the last month, you couldn’t afford to eat balanced meals. 1

**0** = Often true

**1** = Sometimes true

**2** = Never true

**99** = Don't know or Refused

***Q164.* In the last month, did you ever cut the size of your meals or skip meals because there wasnt enough money for food?**

FSS3\_V3

In the last month, did you ever cut the size of your meals or skip meals because there wasn’t enough money for food? 1

**0** = No

**1** = Yes

**9** = Don't Know

***Skip-103.*** If ( FSS3\_V3=0 OR FSS3\_V3=9 ), Skip **FSS3A\_V3**

***Q165.* How often did this happen?**

FSS3A\_V3

How often did this happen? 1

**0** = Almost every day

**1** = Some days but not every day

**2** = Only 1 or 2 days

**9** = Don't know

**99** = skipped

***Q166.* In the last month, did you ever eat less than you felt you should because there wasn't enough money for food?**

FSS4\_V3

In the last month, did you ever eat less than you felt you should because there wasn’t enough money for food? 1

**0** = No

**1** = Yes

**9** = Don't Know

***Q167.* In the last month, were you ever hungry but didn't eat because there wasn't enough money for food?**

FSS5\_V3

In the last month, were you ever hungry but didn’t eat because there wasn’t enough money for food. 1

**0** = No

**1** = Yes

**9** = Don't Know

Sect-16. \*\*\*\*\*Meal Survey\*\*\*\*\*

***Q168.* How many meals did you eat yesterday?**

MS1\_V3

How many meals did you eat yesterday? 1

**0** = 0

**1** = 1

**2** = 2

**3** = 3

**4** = 4

**5** = 5

**6** = 6 or more

***Q169.* How many times in the past 24 hours have you eaten food from: The shelter cafeteria?**

MS2\_V3

How many times in the past 24 hours have you eaten food from: The shelter cafeteria? 1

**0** = 0

**1** = 1

**2** = 2

**3** = 3

**4** = 4

**5** = 5 or more

***Q170.* How many servings of fruits and vegetables did you eat YESTERDAY? (A serving is 1 half cup [4 ounces] of cooked vegetables, 1 cup [8 ounces] of salad, a piece of fruit, three-fourths cup [6 ounces] of 100% fruit juice)**

MS3\_V3

How many servings of fruits and vegetables did you eat YESTERDAY? 1

**0** = 0

**1** = 1

**2** = 2

**3** = 3

**4** = 4

**5** = 5

**6** = 6

**7** = 7

**8** = 8 or more

***Q171.* How many meals have you missed in the PAST WEEK because you were unable to find food?**

MS4\_V3

How many meals have you missed in the PAST WEEK because you were unable to find food? 1

**0** = 0

**1** = 1 or 2

**2** = 3 or 4

**3** = 5 or 6

**4** = 7 or 8

**5** = 9 or 10

**6** = 11 or more

***Sect-17.*** **\*\*\*\*\*STRESS\*\*\*\*\***

Sect-18. \*\*\*\* Detroit Day Discrimination\*\*\*\*\*

***Info-9.*** (For Respondent) **Select the most accurate answer for the following questions. Please press "next question" to continue...**

***Q172.* In your day-to-day life how often are you treated with less courtesy than other people because of your race, ethnicity, gender, age, religion, physical appearance, sexual orientation, homelessness status, or other characteristics?**

DD1\_V3

In your day-to-day life how often are you treated with less courtesy than other people because of your race, ethnicity, gender, age, religion, physical appearance, sexual orientation, homelessness status, or other characteristics? 1

**1** = Almost every day

**2** = At least once a week

**3** = A few times a month

**4** = A few times a year

**5** = Less than once a year

**6** = Never

***Q173.* In your day-to-day life how often are you treated with less respect than other people because of your race, ethnicity, gender, age, religion, physical appearance, sexual orientation, homelessness status, or other characteristics?**

DD2\_V3

In your day-to-day life how often are you treated with less respect than other people because of your race, ethnicity, gender, age, religion, physical appearance, sexual orientation, homelessness status, or other characteristics? 1

**1** = Almost every day

**2** = At least once a week

**3** = A few times a month

**4** = A few times a year

**5** = Less than once a year

**6** = Never

***Q174.* In your day-to-day life how often do you receive poorer service than other people at restaurants or stores because of your race, ethnicity, gender, age, religion, physical appearance, sexual orientation, homelessness status, or other characteristics?**

DD3\_V3

In your day-to-day life how often do you receive poorer service than other people at restaurants or stores because of your race, ethnicity, gender, age, religion, physical appearance, sexual orientation, homelessness status, or other characteristics? 1

**1** = Almost every day

**2** = At least once a week

**3** = A few times a month

**4** = A few times a year

**5** = Less than once a year

**6** = Never

***Q175.* In your day-to-day life how often do people act as if they think you are not smart because of your race, ethnicity, gender, age, religion, physical appearance, sexual orientation, homelessness status, or other characteristics?**

DD4\_V3

In your day-to-day life how often do people act as if they think you are not smart because of your race, ethnicity, gender, age, religion, physical appearance, sexual orientation, homelessness status, or other characteristics? 1

**1** = Almost every day

**2** = At least once a week

**3** = A few times a month

**4** = A few times a year

**5** = Less than once a year

**6** = Never

***Q176.* In your day-to-day life how often do people act as if they are afraid of you because of your race, ethnicity, gender, age, religion, physical appearance, sexual orientation, homelessness status, or other characteristics?**

DD5\_V3

In your day-to-day life how often do people act as if they are afraid of you because of your race, ethnicity, gender, age, religion, physical appearance, sexual orientation, homelessness status, or other characteristics? 1

**1** = Almost every day

**2** = At least once a week

**3** = A few times a month

**4** = A few times a year

**5** = Less than once a year

**6** = Never

***Q177.* In your day-to-day life how often do people act as if they think you are dishonest because of your race, ethnicity, gender, age, religion, physical appearance, sexual orientation, homelessness status, or other characteristics?**

DD6\_V3

In your day-to-day life how often do people act as if they think you are dishonest because of your race, ethnicity, gender, age, religion, physical appearance, sexual orientation, homelessness status, or other characteristics? 1

**1** = Almost every day

**2** = At least once a week

**3** = A few times a month

**4** = A few times a year

**5** = Less than once a year

**6** = Never

***Q178.* In your day-to-day life how often do people act as if they're better than you are because of your race, ethnicity, gender, age, religion, physical appearance, sexual orientation, homelessness status, or other characteristics?**

DD7\_V3

In your day-to-day life how often do people act as if they're better than you are because of your race, ethnicity, gender, age, religion, physical appearance, sexual orientation, homelessness status, or other characteristics? 1

**1** = Almost every day

**2** = At least once a week

**3** = A few times a month

**4** = A few times a year

**5** = Less than once a year

**6** = Never

***Q179.* In your day-to-day life how often are you called names or insulted because of your race, ethnicity, gender, age, religion, physical appearance, sexual orientation, homelessness status, or other characteristics?**

DD8\_V3

In your day-to-day life how often are you called names or insulted because of your race, ethnicity, gender, age, religion, physical appearance, sexual orientation, homelessness status, or other characteristics? 1

**1** = Almost every day

**2** = At least once a week

**3** = A few times a month

**4** = A few times a year

**5** = Less than once a year

**6** = Never

***Q180.* In your day-to-day life how often are you threatened or harassed because of your race, ethnicity, gender, age, religion, physical appearance, sexual orientation, homelessness status, or other characteristics?**

DD9\_V3

In your day-to-day life how often are you threatened or harassed because of your race, ethnicity, gender, age, religion, physical appearance, sexual orientation, homelessness status, or other characteristics? 1

**1** = Almost every day

**2** = At least once a week

**3** = A few times a month

**4** = A few times a year

**5** = Less than once a year

**6** = Never

***Skip-104.*** If ( DD1\_V3 = 6 AND DD2\_V3 = 6 AND DD3\_V3 = 6 AND DD8\_V3 = 6 AND DD6\_V3 = 6 AND DD4\_V3 = 6 AND DD7\_V3 = 6 AND DD5\_V3 = 6 AND DD9\_V3 = 6 ), Skip **DD10\_V3**

***Q181.* What was the main reason for the discrimination you experienced?**

DD10\_V3

What was the main reason for the discrimination you experienced? 2

**1** = Your age

**2** = Your gender

**3** = Your race

**4** = Your ethnicity or nationality

**5** = Your religion

**6** = Your height or weight

**7** = Some other aspect of your appearence

**8** = A physical disability

**9** = Your sexual orientation

**10** = Your being homeless

**11** = Other

**97** = Don't Know

**98** = Refuse to Answer

**99** = Not Applicable

Sect-19. \*\*\*\*Urban Life Stressor Scale\*\*\*\*\*

***Q182.* In your day to day life, how much stress do you generally experience related to money or finances?**

ULS1\_V3

how much stress do you generally experience related to money or finances. 1

**1** = No Stress

**2** = Little Stress

**3** = Some Stress

**4** = A Lot of Stress

**5** = Extreme Stress

***Q183.* In your day to day life, how much stress do you generally experience related to your job satisfaction?**

ULS2\_V3

how much stress do you generally experience related to your job satisfaction. 1

**1** = No Stress

**2** = Little Stress

**3** = Some Stress

**4** = A Lot of Stress

**5** = Extreme Stress

***Q184.* In your day to day life, how much stress do you generally experience related to raising children/being a parent?**

ULS3\_V3

how much stress do you generally experience related to raising children/being a parent. 1

**1** = No Stress

**2** = Little Stress

**3** = Some Stress

**4** = A Lot of Stress

**5** = Extreme Stress

***Q185.* In your day to day life, how much stress do you generally experience related to death, injury, or illness of someone close?**

ULS4\_V3

how much stress do you generally experience related to death, injury, or illness of someone close? 1

**1** = No Stress

**2** = Little Stress

**3** = Some Stress

**4** = A Lot of Stress

**5** = Extreme Stress

***Q186.* In your day to day life, how much stress do you generally experience related to your housing, or living situation?**

ULS5\_V3

how much stress do you generally experience related to your housing, or living situation? 1

**1** = No Stress

**2** = Little Stress

**3** = Some Stress

**4** = A Lot of Stress

**5** = Extreme Stress

***Q187.* In your day to day life, how much stress do you generally experience related to your physical health?**

ULS6\_V3

how much stress do you generally experience related to your physical health? 1

**1** = No Stress

**2** = Little Stress

**3** = Some Stress

**4** = A Lot of Stress

**5** = Extreme Stress

***Q188.* In your day to day life, how much stress do you generally experience related to your neighborhood environment?**

ULS7\_V3

how much stress do you generally experience related to your neighborhood environment? 1

**1** = No Stress

**2** = Little Stress

**3** = Some Stress

**4** = A Lot of Stress

**5** = Extreme Stress

***Q189.* In your day to day life, how much stress do you generally experience related to transportation?**

ULS8\_V3

how much stress do you generally experience related to transportation? 1

**1** = No Stress

**2** = Little Stress

**3** = Some Stress

**4** = A Lot of Stress

**5** = Extreme Stress

***Q190.* In your day to day life, how much stress do you generally experience related to your education?**

ULS9\_V3

how much stress do you generally experience related to your education? 1

**1** = No Stress

**2** = Little Stress

**3** = Some Stress

**4** = A Lot of Stress

**5** = Extreme Stress

***Q191.* In your day to day life, how much stress do you generally experience related to marriage or romantic relationships?**

ULS10\_V3

how much stress do you generally experience related to marriage or romantic relationships. 1

**1** = No Stress

**2** = Little Stress

**3** = Some Stress

**4** = A Lot of Stress

**5** = Extreme Stress

***Q192.* In your day to day life, how much stress do you generally experience related to other family problems?**

ULS11\_V3

how much stress do you generally experience related to other family problem? 1

**1** = No Stress

**2** = Little Stress

**3** = Some Stress

**4** = A Lot of Stress

**5** = Extreme Stress

***Q193.* In your day to day life, how much stress do you generally experience related to using public services?**

ULS12\_V3

how much stress do you generally experience related to using public services. 1

**1** = No Stress

**2** = Little Stress

**3** = Some Stress

**4** = A Lot of Stress

**5** = Extreme Stress

***Q194.* In your day to day life, how much stress do you generally experience related to crime and violence?**

ULS13\_V3

how much stress do you generally experience related to crime and violence. 1

**1** = No Stress

**2** = Little Stress

**3** = Some Stress

**4** = A Lot of Stress

**5** = Extreme Stress

***Q195.* In your day to day life, how much stress do you generally experience related to gang activity?**

ULS14\_V3

how much stress do you generally experience related to gang activity. 1

**1** = No Stress

**2** = Little Stress

**3** = Some Stress

**4** = A Lot of Stress

**5** = Extreme Stress

***Q196.* In your day to day life, how much stress do you generally experience related to experiences involving racism or discrimination?**

ULS15\_V3

how much stress do you generally experience related to experiences involving racism or discrimination. 1

**1** = No Stress

**2** = Little Stress

**3** = Some Stress

**4** = A Lot of Stress

**5** = Extreme Stress

***Q197.* In your day to day life, how much stress do you generally experience related to social life, social activities?**

ULS16\_V3

how much stress do you generally experience related to social life, social activities. 1

**1** = No Stress

**2** = Little Stress

**3** = Some Stress

**4** = A Lot of Stress

**5** = Extreme Stress

***Q198.* In your day to day life, how much stress do you generally experience related to drugs or alcohol?**

ULS17\_V3

how much stress do you generally experience related to drugs or alcohol. 1

**1** = No Stress

**2** = Little Stress

**3** = Some Stress

**4** = A Lot of Stress

**5** = Extreme Stress

***Q199.* In your day to day life, how much stress do you generally experience related to communication or cultural conflicts?**

ULS18\_V3

how much stress do you generally experience related to communication or cultural conflicts. 1

**1** = No Stress

**2** = Little Stress

**3** = Some Stress

**4** = A Lot of Stress

**5** = Extreme Stress

***Q200.* In your day to day life, how much stress do you generally experience related to family violence?**

ULS19\_V3

how much stress do you generally experience related to family violence. 1

**1** = No Stress

**2** = Little Stress

**3** = Some Stress

**4** = A Lot of Stress

**5** = Extreme Stress

***Q201.* In your day to day life, how much stress do you generally experience related to relations with racial groups not your own?**

ULS20\_V3

how much stress do you generally experience related to relations with racial groups not your own. 1

**1** = No Stress

**2** = Little Stress

**3** = Some Stress

**4** = A Lot of Stress

**5** = Extreme Stress

***Q202.* In your day to day life, how much stress do you generally experience related to relations with police?**

ULS21\_V3

how much stress do you generally experience related to relations with police. 1

**1** = No Stress

**2** = Little Stress

**3** = Some Stress

**4** = A Lot of Stress

**5** = Extreme Stress

Sect-20. \*\*\*\*Personal Victimization\*\*\*\*\*

***Q203.* In the past 30 days, has anyone used violence, such as in a mugging, fight, or sexual assault, against you?**

PV1\_V3

In the past 30 days, has anyone used violence, such as in a mugging, fight, or sexual assault, against you? 1

**0** = No

**1** = Yes

***Q204.* In the past 30 days, how many times have you been a witness to acts of violence?**

PV2\_V3

In the past 30 days, how many times have you been a witness to acts of violence? 2

**0** = 0

**1** = 1

**2** = 2

**3** = 3

**4** = 4

**5** = 5

**6** = 6

**7** = 7

**8** = 8

**9** = 9

**10** = 10

**11** = 11 or more

Sect-21. \*\*\*\*Percieved Sress Scale\*\*\*\*\*

***Info-10.*** (For Respondent) **The questions in this scale ask you about your feelings and thoughts during the last week. In each case, please choose the response that corresponds to how often you felt or thought that certain way. Press "next question" to continue...**

***Q205.* In the last week, how often have you felt that you were unable to control the important things in your life?**

PS1\_V3

In the last week, how often have you felt that you were unable to control the important things in your life? 1

**0** = Never

**1** = Almost never

**2** = Sometimes

**3** = Fairly often

**4** = Very often

***Q206.* In the last week, how often have you felt confident about your ability to handle your personal problems?**

PS2\_V3

In the last week, how often have you felt confident about your ability to handle your personal problems? 1

**0** = Never

**1** = Almost never

**2** = Sometimes

**3** = Fairly often

**4** = Very often

***Q207.* In the last week, how often have you felt that things were going your way?**

PS3\_V3

In the last week, how often have you felt that things were going your way? 1

**0** = Never

**1** = Almost never

**2** = Sometimes

**3** = Fairly often

**4** = Very often

***Q208.* In the last week, how often have you felt difficulties were piling up so high that you could not overcome them?**

PS4\_V3

In the last week, how often have you felt difficulties were piling up so high that you could not overcome them? 1

**0** = Never

**1** = Almost never

**2** = Sometimes

**3** = Fairly often

**4** = Very often

***Sect-22.*** **\*\*\*\*\*NEGATIVE/POSITIVE AFFECT\*\*\*\*\***

Sect-23. \*\*\*\*\*Agression Questionniare\*\*\*\*\*

***Info-11.*** (For Respondent) **For the following items please rate how characteristic each is of you. Please press "next question" to continue..**

***Q209.* Given enough provocation, I may hit another person.**

AQ1\_V3

Given enough provocation, I may hit another person. 1

**1** = Extremely uncharacteristic of me

**2** = Somewhat uncharacteristic of me

**3** = Only slightly characteristic of me

**4** = Somewhat characteristic of me

**5** = Extremely characteristic of me

***Q210.* There are people who pushed me so far that we came to blows.**

AQ2\_V3

There are people who pushed me so far that we came to blows. 1

**1** = Extremely uncharacteristic of me

**2** = Somewhat uncharacteristic of me

**3** = Only slightly characteristic of me

**4** = Somewhat characteristic of me

**5** = Extremely characteristic of me

***Q211.* I have threatened people I know.**

AQ3\_V3

I have threatened people I know. 1

**1** = Extremely uncharacteristic of me

**2** = Somewhat uncharacteristic of me

**3** = Only slightly characteristic of me

**4** = Somewhat characteristic of me

**5** = Extremely characteristic of me

***Q212.* I often find myself disagreeing with people.**

AQ4\_V3

I often find myself disagreeing with people. 1

**1** = Extremely uncharacteristic of me

**2** = Somewhat uncharacteristic of me

**3** = Only slightly characteristic of me

**4** = Somewhat characteristic of me

**5** = Extremely characteristic of me

***Q213.* I can't help getting into arguments when people disagree with me.**

AQ5\_V3

I can't help getting into arguments when people disagree with me. 1

**1** = Extremely uncharacteristic of me

**2** = Somewhat uncharacteristic of me

**3** = Only slightly characteristic of me

**4** = Somewhat characteristic of me

**5** = Extremely characteristic of me

***Q214.* My friends say that I'm somewhat argumentative.**

AQ6\_V3

My friends say that I'm somewhat argumentative. 1

**1** = Extremely uncharacteristic of me

**2** = Somewhat uncharacteristic of me

**3** = Only slightly characteristic of me

**4** = Somewhat characteristic of me

**5** = Extremely characteristic of me

***Q215.* I flare up quickly but get over it quickly.**

AQ7\_V3

I flare up quickly but get over it quickly. 1

**1** = Extremely uncharacteristic of me

**2** = Somewhat uncharacteristic of me

**3** = Only slightly characteristic of me

**4** = Somewhat characteristic of me

**5** = Extremely characteristic of me

***Q216.* Sometimes I fly off the handle for no good reason.**

AQ8\_V3

Sometimes I fly off the handle for no good reason. 1

**1** = Extremely uncharacteristic of me

**2** = Somewhat uncharacteristic of me

**3** = Only slightly characteristic of me

**4** = Somewhat characteristic of me

**5** = Extremely characteristic of me

***Q217.* I have trouble controlling my temper.**

AQ9\_V3

I have trouble controlling my temper. 1

**1** = Extremely uncharacteristic of me

**2** = Somewhat uncharacteristic of me

**3** = Only slightly characteristic of me

**4** = Somewhat characteristic of me

**5** = Extremely characteristic of me

***Q218.* At times I feel I have gotten a raw deal out of life.**

AQ10\_V3

At times I feel I have gotten a raw deal out of life. 1

**1** = Extremely uncharacteristic of me

**2** = Somewhat uncharacteristic of me

**3** = Only slightly characteristic of me

**4** = Somewhat characteristic of me

**5** = Extremely characteristic of me

***Q219.* Other people always seem to get the breaks.**

AQ11\_V3

Other people always seem to get the breaks. 1

**1** = Extremely uncharacteristic of me

**2** = Somewhat uncharacteristic of me

**3** = Only slightly characteristic of me

**4** = Somewhat characteristic of me

**5** = Extremely characteristic of me

***Q220.* I wonder why sometimes I feel so bitter about things.**

AQ12\_V3

I wonder why sometimes I feel so bitter about things. 1

**1** = Extremely uncharacteristic of me

**2** = Somewhat uncharacteristic of me

**3** = Only slightly characteristic of me

**4** = Somewhat characteristic of me

**5** = Extremely characteristic of me

Sect-24. \*\*\*\*\*CES-D\*\*\*\*\*

***Info-12.*** (For Respondent) **As you read each statement, ask yourself how many times during THE LAST WEEK you felt that way. Please press "next question" to continue...**

***Q221.* During the past week, I was bothered by things that don't usually bother me.**

CES1\_V3

During the past week, I was bothered by things that don't usually bother me 1

**0** = rarely (less than one day)

**1** = some of the time (1 - 2 days)

**2** = occasionally (3 - 4 days)

**3** = most of the time (5 - 7 days)

***Q222.* During the past week, I had trouble keeping my mind on what I was doing.**

CES2\_V3

During the past week, I had trouble keeping my mind on what I was doing. 1

**0** = rarely (less than one day)

**1** = some of the time (1 - 2 days)

**2** = occasionally (3 - 4 days)

**3** = most of the time (5 - 7 days)

***Q223.* During the past week, I felt depressed.**

CES3\_V3

During the past week, I felt depressed. 1

**0** = rarely (less than one day)

**1** = some of the time (1 - 2 days)

**2** = occasionally (3 - 4 days)

**3** = most of the time (5 - 7 days)

***Q224.* During the past week, I felt that everything I did was an effort.**

CES4\_V3

During the past week, I felt that everything I did was an effort. 1

**0** = rarely (less than one day)

**1** = some of the time (1 - 2 days)

**2** = occasionally (3 - 4 days)

**3** = most of the time (5 - 7 days)

***Q225.* During the past week, I felt hopeful about the future.**

CES5\_V3

During the past week, I felt hopeful about the future. 1

**0** = rarely (less than one day)

**1** = some of the time (1 - 2 days)

**2** = occasionally (3 - 4 days)

**3** = most of the time (5 - 7 days)

***Q226.* During the past week, I felt fearful.**

CES6\_V3

During the past week, I felt fearful. 1

**0** = rarely (less than one day)

**1** = some of the time (1 - 2 days)

**2** = occasionally (3 - 4 days)

**3** = most of the time (5 - 7 days)

***Q227.* During the past week, my sleep was restless.**

CES7\_V3

During the past week, my sleep was restless. 1

**0** = rarely (less than one day)

**1** = some of the time (1 - 2 days)

**2** = occasionally (3 - 4 days)

**3** = most of the time (5 - 7 days)

***Q228.* During the past week, I was happy.**

CES8\_V3

During the past week, I was happy. 1

**0** = rarely (less than one day)

**1** = some of the time (1 - 2 days)

**2** = occasionally (3 - 4 days)

**3** = most of the time (5 - 7 days)

***Q229.* During the past week, I felt lonely.**

CES9\_V3

During the past week, I felt lonely. 1

**0** = rarely (less than one day)

**1** = some of the time (1 - 2 days)

**2** = occasionally (3 - 4 days)

**3** = most of the time (5 - 7 days)

***Q230.* During the past week, I could not get "going."**

CES10\_V3

During the past week, I could not get "going." 1

**0** = rarely (less than one day)

**1** = some of the time (1 - 2 days)

**2** = occasionally (3 - 4 days)

**3** = most of the time (5 - 7 days)

***Sect-25.*** **\*\*\*\*\*INTER/INTRAPERSONAL RESOURCES\*\*\*\*\***

Sect-26. \*\*\*\* Interpersonal Support Evaluation List\*\*\*\*\*

***Info-13.*** (For Respondent) **The following items ask about your relationships. Please press "next question" to continue...**

***Q231.* If I wanted to go on a trip for a day (for example, to the country or mountains), I would have a hard time finding someone to go with me.**

IS1\_V3

If I wanted to go on a trip for a day (for example, to the country or mountains), I would have a hard time finding someone to go with me. 1

**1** = Definitely false

**2** = Probably false

**3** = Probably true

**4** = Definitely true

***Q232.* I feel that there is no one I can share my most private worries and fears with.**

IS2\_V3

I feel that there is no one I can share my most private worries and fears with. 1

**1** = Definitely false

**2** = Probably false

**3** = Probably true

**4** = Definitely true

***Q233.* If I were sick, I could easily find someone to help me with my daily chores.**

IS3\_V3

If I were sick, I could easily find someone to help me with my daily chores. 1

**1** = Definitely false

**2** = Probably false

**3** = Probably true

**4** = Definitely true

***Q234.* There is someone I can turn to for advice about handling problems with my family.**

IS4\_V3

There is someone I can turn to for advice about handling problems with my family. 1

**1** = Definitely false

**2** = Probably false

**3** = Probably true

**4** = Definitely true

***Q235.* If I decide one afternoon that I would like to go to a movie that evening, I could easily find someone to go with me.**

IS5\_V3

If I decide one afternoon that I would like to go to a movie that evening, I could easily find someone to go with me. 1

**1** = Definitely false

**2** = Probably false

**3** = Probably true

**4** = Definitely true

***Q236.* When I need suggestions on how to deal with a personal problem, I know someone I can turn to.**

IS6\_V3

When I need suggestions on how to deal with a personal problem, I know someone I can turn to. 1

**1** = Definitely false

**2** = Probably false

**3** = Probably true

**4** = Definitely true

***Q237.* I don't often get invited to do things with others.**

IS7\_V3

I don't often get invited to do things with others. 1

**1** = Definitely false

**2** = Probably false

**3** = Probably true

**4** = Definitely true

***Q238.* If I had to go out of town for a few weeks, it would be difficult to find someone who would look after my things.**

IS8\_V3

If I had to go out of town for a few weeks, it would be difficult to find someone who would look after my things. 1

**1** = Definitely false

**2** = Probably false

**3** = Probably true

**4** = Definitely true

***Q239.* If I wanted to have lunch with someone, I could easily find someone to join me.**

IS9\_V3

If I wanted to have lunch with someone, I could easily find someone to join me. 1

**1** = Definitely false

**2** = Probably false

**3** = Probably true

**4** = Definitely true

***Q240.* If I was stranded 10 miles from home, there is someone I could call who could come and get me.**

IS10\_V3

If I was stranded 10 miles from home, there is someone I could call who could come and get me. 1

**1** = Definitely false

**2** = Probably false

**3** = Probably true

**4** = Definitely true

***Q241.* If a family crisis arose, it would be difficult to find someone who could give me good advice about how to handle it.**

IS11\_V3

If a family crisis arose, it would be difficult to find someone who could give me good advice about how to handle it. 1

**1** = Definitely false

**2** = Probably false

**3** = Probably true

**4** = Definitely true

***Q242.* If I needed some help in moving to a new house or apartment, I would have a hard time finding someone to help me.**

IS12\_V3

If I needed some help in moving to a new house or apartment, I would have a hard time finding someone to help me. 1

**1** = Definitely false

**2** = Probably false

**3** = Probably true

**4** = Definitely true

Sect-27. \*\*\*\*\*Religious Participation\*\*\*\*\*

***Q243.* Apart from special occasions such as weddings and funerals, how often do you attend religious services?**

RP1\_V3

Apart from special occasions such as weddings and funerals, how often do you attend religious services? 1

**1** = Everyday

**2** = More than once a week

**3** = Once a week

**4** = 2-3 times per month

**5** = Once a month

**6** = Several times a year

**7** = Once or twice a year

**8** = Less than once a year

**9** = Never

***Q244.* During the past week, on how many days did you attend religious services?**

RP2\_V3

During the past week, how often did you attend religious services? 1

**0** = 0 days

**1** = 1 day

**2** = 2 days

**3** = 3 days

**4** = 4 days

**5** = 5 days

**6** = 6 days

**7** = 7 days

Sect-28. \*\*\*\* Lubben Social Network Scale\*\*\*\*\*

***Q245.* Considering the people to who you are related by birth, marriage, adoption etc, how many relatives do you see or hear from at least once a month?**

LSN1\_V3

Considering the people to who you are related by birth, marriage, adoption etc, how many relatives do you see or hear from at least once a month? 1

**0** = None

**1** = One

**2** = Two

**3** = Three or four

**4** = Five to eight

**5** = Nine or more

***Q246.* Considering the people to who you are related by birth, marriage, adoption etc, how many relatives do you feel at ease with that you can talk about private matters?**

LSN2\_V3

Considering the people to who you are related by birth, marriage, adoption etc, how many relatives do you feel at ease with that you can talk about private matters? 1

**0** = None

**1** = One

**2** = Two

**3** = Three or four

**4** = Five to eight

**5** = Nine or more

***Q247.* Considering the people to who you are related by birth, marriage, adoption etc, how many relatives do you feel close to such that you could call on them for help?**

LSN3\_V3

Considering the people to who you are related by birth, marriage, adoption etc, how many relatives do you feel close to such that you could call on them for help? 1

**0** = None

**1** = One

**2** = Two

**3** = Three or four

**4** = Five to eight

**5** = Nine or more

***Q248.* Considering all of your friends including those who live in your neighborhood, how many of your friends do you see or hear from at least once a month?**

LSN4\_V3

Considering all of your friends including those who live in your neighborhood, how many of your friends do you see or hear from at least once a month? 1

**0** = None

**1** = One

**2** = Two

**3** = Three or four

**4** = Five to eight

**5** = Nine or more

***Q249.* Considering all of your friends including those who live in your neighborhood, how many friends do you feel at ease with that you can talk about private matters?**

LSN5\_V3

Considering all of your friends including those who live in your neighborhood, how many friends do you feel at ease with that you can talk about private matters 1

**0** = None

**1** = One

**2** = Two

**3** = Three or four

**4** = Five to eight

**5** = Nine or more

***Q250.* Considering all of your friends including those who live in your neighborhood, how many friends do you feel close to such that you could call on them for help?**

LSN6\_V3

Considering all of your friends including those who live in your neighborhood, how many friends do you feel close to such that you could call on them for help? 1

**0** = None

**1** = One

**2** = Two

**3** = Three or four

**4** = Five to eight

**5** = Nine or more

Sect-29. \*\*\*\* Resource Utilization\*\*\*\*\*

***Q251.* Over the past 30 days, how many days did you receive Mental Health/Behavioral Health Counseling at local shelters?**

R1\_V3

Over the past 30 days, how many days did you receive Mental Health/Behavioral Health Counseling at local shelters? 2

**0 - 30** = days

***Q252.* Over the past 30 days, how many days did you receive Substance Abuse Counseling at local shelters?**

R2\_V3

Over the past 30 days, how many days did you receive Substance Abuse Counseling at local shelters? 2

**0 - 30** = days

***Q253.* Over the past 30 days, how many days did you receive Smoking Cessation Counseling at local shelters?**

R3\_V3

Over the past 30 days, how many days did you receive Smoking Cessation Counseling at local shelters? 2

**0 - 30** = days

***Q254.* Over the past 30 days, how many days did you see a doctor for a medical problem at local shelters?**

R4\_V3

Over the past 30 days, how many days did you see a doctor for a medical problem at local shelters? 2

**0 - 30** = days

***Q255.* Over the past 30 days, how many days did you spend the night at a shelter?**

R5\_V3

Over the past 30 days, how many days did you spend the night at a shelter? 2

**0 - 30** = days

***Q256.***

**Over the past 30 days, how many days did you receive meals at local shelters?**

R6\_V3

Over the past 30 days, how many days did you receive meals at local shelters? 2

**0 - 30** = days

***Q257.* Over the past 30 days, how many days did you meet with a case manager at local shelters?**

R7\_V3

Over the past 30 days, how many days did you meet with a case manager at local shelters? 2

**0 - 30** = days

**97** = Don't Know

**98** = Refuse to Answer

**99** = Not Applicable

***Q258.* Over the past 30 days, how many days did you speak over the phone with a case manager from local shelters?**

R8\_V3

Over the past 30 days, how many days did you speak over the phone with a case manager from local shelters? 2

**0 - 30** = days

***Q259.* Over the past 30 days, how many days did you attend group educational meetings at local shelters?**

R9\_V3

Over the past 30 days, how many days did you attended group educational meetings at local shelters? 2

**0 - 30** = days

***Q260.* Over the past 30 days, how many days did you receive employment/job readiness training at local shelters?**

R10\_V3

Over the past 30 days, how many days did you receive employment/job readiness training at local shelters? 2

**0 - 30** = days

***Q261.* Over the past 30 days, did shelter staff refer you to get services that were not available at the shelter?**

R11\_V3

Over the past 30 days, did shelter staff refer you to get services that were not available at the shelter? 1

**0** = No

**1** = Yes

***Skip-105.*** If ( R11\_V3 =0 ), Skip **R11B\_V3**

***Q262.* How often did you use the referrals (For example, visited the provider to which you were referred)?**

R11B\_V3

How often did you use the referrals (For example, visited the provider to which you were referred)? 1

**0** = Never

**1** = Rarely

**2** = Some of the time

**3** = Occasionally

**4** = Most of the time

**7** = Don't Know

**8** = Refuse to Answer

**9** = Not Applicable

***Q263.* Over the past 30 days, how many days did you meet with representatives from Legal Aid at local shelters?**

R12\_V3

Over the past 30 days, how many days did you meet with representatives from Legal Aid at local shelters? 2

**0 - 30** = days

***Q264.* Over the past 30 days, how many days did you receive help with getting vital documents (For example, birth certificates, state identification, social security cards) at local shelters?**

R13\_V3

Over the past 30 days, how many days did you receive help with getting vital documents (For example, birth certificates, state identification, social security cards) at local shelters? 2

**0 - 30** = days

***Q265.* Over the past 30 days, how many days did shelter staff help you to reconnect with family members?**

R14\_V3

Over the past 30 days, how many days did shelter staff help you to reconnect with family members? 2

**0 - 30** = days

***Q266.* What types of services would be most helpful to you right now? (select all that apply)**

R15\_V3

What types of services would be most helpful to you right now? (select all that apply) 2

**0 - 15** = number of selected items

R15\_V3A

What types of services would be most helpful to you right now? (select all that apply): Housing (shelter, transitional housing, rental assistance) 1

**0** = No

**1** = Yes

R15\_V3B

What types of services would be most helpful to you right now? (select all that apply): Job training or job search services 1

**0** = No

**1** = Yes

R15\_V3C

What types of services would be most helpful to you right now? (select all that apply): Health care services (doctor visit, medication) 1

**0** = No

**1** = Yes

R15\_V3D

What types of services would be most helpful to you right now? (select all that apply): Mental health services 1

**0** = No

**1** = Yes

R15\_V3E

What types of services would be most helpful to you right now? (select all that apply): Smoking cessation counseling and/or medication 1

**0** = No

**1** = Yes

R15\_V3F

What types of services would be most helpful to you right now? (select all that apply): Adult basic education (such as reading and math) 1

**0** = No

**1** = Yes

R15\_V3G

What types of services would be most helpful to you right now? (select all that apply): GED program 1

**0** = No

**1** = Yes

R15\_V3H

What types of services would be most helpful to you right now? (select all that apply): Educational opportunities (help to get into college, scholarships) 1

**0** = No

**1** = Yes

R15\_V3I

What types of services would be most helpful to you right now? (select all that apply): Drug and/or alcohol treatment 1

**0** = No

**1** = Yes

R15\_V3J

What types of services would be most helpful to you right now? (select all that apply): Domestic violence program 1

**0** = No

**1** = Yes

R15\_V3K

What types of services would be most helpful to you right now? (select all that apply): Access to exercise equipment 1

**0** = No

**1** = Yes

R15\_V3L

What types of services would be most helpful to you right now? (select all that apply): Child care 1

**0** = No

**1** = Yes

R15\_V3M

What types of services would be most helpful to you right now? (select all that apply): Legal services 1

**0** = No

**1** = Yes

R15\_V3N

What types of services would be most helpful to you right now? (select all that apply): Other 1

**0** = No

**1** = Yes

R15\_V3O

What types of services would be most helpful to you right now? (select all that apply): None of the above 1

**0** = No

**1** = Yes

***Sect-30.*** **\*\*\*\*\*TREATMENT QUALITY AND SATISFACTION\*\*\*\*\***

Sect-31. \*\*\*\* Treatment Quality and Satisfaction Survey\*\*\*\*\*

***Info-14.*** (For Respondent) **We would like your thoughts, feelings, and opinions about the Bridge Homeless Recovery Program and smart phone app you may have received for this study. Please press "next question" to continue and answer the following questions.**

***Skip-106.*** If ( GROUP=1 ), Skip to question **Q267**

***Skip-107.*** If ( GROUP=2 ), Skip to question **Q270**

***Skip-108.*** If ( GROUP=3 ), Skip to question **Q280**

***Q267.* How helpful has the Bridge Homeless Recovery Program been to you?**

TQ1\_1V3

How helpful has the Bridge Homeless Recovery Program been to you? 1

**1** = Not at all helpful

**2** = Slightly helpful

**3** = Moderately helpful

**4** = Very helpful

**5** = Extremely helpful

**9** = skipped

***Q268.* How helpful have Bridge Care Managers been to you?**

TQ2\_1V3

How helpful have Bridge Care Managers been to you? 1

**1** = Not at all helpful

**2** = Slightly helpful

**3** = Moderately helpful

**4** = Very helpful

**5** = Extremely helpful

**9** = skipped

***Q269.* How often did you handle or use a study smart phone that was assigned to another study participant?**

TQ14\_1V3

How often did you handle or use a study smart phone that was assigned to another study participant? 1

**0** = Never

**1** = Almost never

**2** = Sometimes

**3** = Fairly often

**4** = Very often

**9** = skipped

***Skip-109.*** Skip to **Info-17**

***Q270.* How helpful has the Bridge Homeless Recovery Program been to you?**

TQ1\_2V3

How helpful has the Bridge Homeless Recovery Program been to you? 1

**1** = Not at all helpful

**2** = Slightly helpful

**3** = Moderately helpful

**4** = Very helpful

**5** = Extremely helpful

**9** = skipped

***Q271.* How helpful have Bridge Care Managers been to you?**

TQ2\_2V3

How helpful have Bridge Care Managers been to you? 1

**1** = Not at all helpful

**2** = Slightly helpful

**3** = Moderately helpful

**4** = Very helpful

**5** = Extremely helpful

**9** = skipped

***Q272.* Consider the daily assessments that were prompted by the smart phone application, was the number of assessments:**

TQ3\_2V3

Consider the daily assessments that were prompted by the smart phone application, was the number of assessments: 1

**1** = Too high

**2** = About right

**3** = Not enough

**9** = skipped

***Q273.* Did carrying the phone and answering questions make you more aware of your thoughts, feelings, and behavior?**

TQ4\_2V3

Did carrying the phone and answering questions make you more aware of your thoughts, feelings, and behavior? 1

**1** = Definitely No

**2** = Mostly No

**3** = Mostly Yes

**4** = Definitely Yes

**9** = skipped

***Q274.* Overall, how helpful has the smart phone been in helping you to access resources and other services that help to obtain housing?**

TQ9\_2V3

Overall, how helpful has the smart phone been in helping you to access resources and other services that help to obtain housing? 1

**1** = Not at all useful

**2** = Slightly useful

**3** = Moderately useful

**4** = Very useful

**5** = Extremely useful

**9** = skipped

***Q275.* Do you find the smart phone application to be annoying?**

TQ10\_2V3

Do you find the smart phone application to be annoying? 1

**1** = Not at all

**2** = Slightly

**3** = Moderately

**4** = Very

**5** = Extremely

**9** = skipped

***Q276.* How likely would you be to recommend this smart phone app to a friend?**

YQ11\_2V3

How likely would you be to recommend this smart phone app to a friend? 1

**1** = Extremely unlikely

**2** = Unlikely

**3** = Somewhat unlikely

**4** = Neither likely nor unlikely

**5** = Somewhat likely

**6** = Likely

**7** = Extremely likely

**9** = skipped

***Q277.* Would you be interested in using this smart phone app in the future if needed?**

TQ12\_2V3

Would you be interested in using this smart phone app in the future if needed? 1

**1** = Not at all interested

**2** = Slightly interested

**3** = Moderately interested

**4** = Very interested

**5** = Extremely interested

**9** = skipped

***Q278.* How accurately did you answer the questions on the phone assessments?**

TQ13\_2V3

How accurately did you answer the questions on the phone assessments? 1

**1** = Not at all accurate

**2** = Slightly accurate

**3** = Moderately accurate

**4** = Very accurate

**5** = Extremely accurate

**9** = skipped

***Q279.* How often did you handle or use a study smart phone that was assigned to another study participant?**

TQ14\_2V3

How often did you handle or use a study smart phone that was assigned to another study participant? 1

**0** = Never

**1** = Almost never

**2** = Sometimes

**3** = Fairly often

**4** = Very often

**9** = skipped

***Skip-110.*** Skip to **Info-17**

***Q280.* How helpful has the Bridge Homeless Recovery Program been to you?**

TQ1\_3V3

How helpful has the Bridge Homeless Recovery Program been to you? 1

**1** = Not at all helpful

**2** = Slightly helpful

**3** = Moderately helpful

**4** = Very helpful

**5** = Extremely helpful

**9** = skipped

***Q281.* How helpful have Bridge Care Managers been to you?**

TQ2\_3V3

How helpful have Bridge Care Managers been to you? 1

**1** = Not at all helpful

**2** = Slightly helpful

**3** = Moderately helpful

**4** = Very helpful

**5** = Extremely helpful

**9** = skipped

***Q282.* Consider the daily assessments that were prompted by the smart phone application, was the number of assessments:**

TQ3\_3V3

Consider the daily assessments that were prompted by the smart phone application, was the number of assessments: 1

**1** = Too high

**2** = About right

**3** = Not enough

**9** = skipped

***Q283.* Did carrying the phone and answering questions make you more aware of your thoughts, feelings, and behavior?**

TQ4\_3V3

Did carrying the phone and answering questions make you more aware of your thoughts, feelings, and behavior? 1

**1** = Definitely No

**2** = Mostly No

**3** = Mostly Yes

**4** = Definitely Yes

**9** = skipped

***Q284.* How often did you use the Call My Care Manager feature of the app?**

TQ5\_3V3

How often did you use the “Call My Care Manager” feature of the app? 1

**0** = I did not use this feature at all

**1** = 1 to 3 times a month

**2** = 1 or 2 times a week

**3** = 3 or 4 times a week

**4** = 5 or 6 times a week

**5** = Everyday

**9** = skipped

***Q285.* How helpful was the Call My Care Manager feature?**

TQ6\_3V3

How helpful was the “Call My Care Manager” feature? 1

**1** = Not at all helpful

**2** = Slightly helpful

**3** = Moderately helpful

**4** = Very helpful

**5** = Extremely helpful

**9** = skipped

***Q286.* How often did you use the Call Crisis Line feature of the app?**

TQ7\_3V3

How often did you use the “Call Crisis Line” feature of the app? 1

**0** = I did not use this feature at all

**1** = 1 to 3 times a month

**2** = 1 or 2 times a week

**3** = 3 or 4 times a week

**4** = 5 or 6 times a week

**5** = Everyday

**9** = skipped

***Q287.* How helpful was the Call Crisis Line feature?**

TQ8\_3V3

How helpful was the “Call Crisis Line” feature? 1

**1** = Not at all helpful

**2** = Slightly helpful

**3** = Moderately helpful

**4** = Very helpful

**5** = Extremely helpful

**9** = skipped

***Q288.* Overall, how helpful has the smart phone been in helping you to access resources and other services that help to obtain housing?**

TQ9\_3V3

Overall, how helpful has the smart phone been in helping you to access resources and other services that help to obtain housing? 1

**1** = Not at all useful

**2** = Slightly useful

**3** = Moderately useful

**4** = Very useful

**5** = Extremely useful

**9** = skipped

***Q289.* Do you find the smart phone application to be annoying?**

TQ10\_3V3

Do you find the smart phone application to be annoying? 1

**1** = Not at all

**2** = Slightly

**3** = Moderately

**4** = Very

**5** = Extremely

**9** = skipped

***Q290.* How likely would you be to recommend this smart phone app to a friend?**

TQ11\_3V3

How likely would you be to recommend this smart phone app to a friend? 1

**1** = Extremely unlikely

**2** = Unlikely

**3** = Somewhat unlikely

**4** = Neither likely nor unlikely

**5** = Somewhat likely

**6** = Likely

**7** = Extremely likely

**9** = skipped

***Q291.* Would you be interested in using this smart phone app in the future if needed?**

TQ12\_3V3

Would you be interested in using this smart phone app in the future if needed? 1

**1** = Not at all interested

**2** = Slightly interested

**3** = Moderately interested

**4** = Very interested

**5** = Extremely interested

**9** = skipped

***Q292.* How accurately did you answer the questions on the phone assessments?**

TQ13\_3V3

How accurately did you answer the questions on the phone assessments? 1

**1** = Not at all accurate

**2** = Slightly accurate

**3** = Moderately accurate

**4** = Very accurate

**5** = Extremely accurate

**9** = skipped

***Q293.* How often did you handle or use a study smart phone that was assigned to another study participant?**

TQ14\_3V3

How often did you handle or use a study smart phone that was assigned to another study participant? 1

**0** = Never

**1** = Almost never

**2** = Sometimes

**3** = Fairly often

**4** = Very often

**9** = skipped

***Info-15.*** (For Respondent) **Assessment completed. Please ask for staff to assist you with the next steps.**

***Info-16.*** **Please turn the volume down ask the following questions. Write down the participant's responses. Press "next question" to continue.**

***Q294.* What do you like about the Link2Care smart phone application?**

TQ15\_3V3

What do you like about the Link2Care smart phone application? 1000

**0 - 1000** = length of response

**9997** = Don't Know

**9999** = skipped

***Q295.* What do you not like about the Link2Care smart phone application?**

TQ16\_3V3

What do you not like about the Link2Care smart phone application? 1000

**0 - 1000** = length of response

**9997** = Don't Know

**9999** = skipped

***Q296.* How would you improve the Link2Care smart phone application?**

TQ17\_3V3

How would you improve the Link2Care smart phone application? 1000

**0 - 1000** = length of response

**9997** = Don't Know

**9999** = skipped

***Q297.* What other thoughts and opinions do you have about the Link2Care application?**

TQ18\_3V3

What other thoughts and opinions do you have about the Link2Care application? 1000

**0 - 1000** = length of response

**9997** = Don't Know

**9999** = skipped

**Calculated Variable**

ENDTIME3

endtime

End Time 8

ENDTIME3 = Current time

**Calculated Variable**

ETIME\_V3

4

ETIME\_V3 = Elapsed interview/data entry time

***Skip-111.*** Skip to **Info-17**

***Info-17.*** (For Respondent) **Assessment completed. Please ask the researcher to set up the DDT for you on this tablet.**

**Total variables:** 449

**Identifier variables**

Subject: SUBJECT

Other IDs: VISIT\_V3