Partial	Full
ID#	Unique identifier
Employed	I am currently employed at least part-time, 1 = yes
Mental Illness	I identify as having a mental illness, 1 = yes
Education	Education
Separate computer	I have my own computer separate from a smart phone, 1 = yes
Hospitalized for mental illness	I have been hospitalized before for my mental illness, 1 = yes
# days hospitalized	How many days were you hospitalized for your mental illness
Disabled	I am legally disabled, 1 = yes
Regular internet access	I have regular access to the internet, 1= yes
Live w/ parents	I live with my parents, 1 = yes
Resume gap	I have a gap in my resume, 1= yes
Gap in months	Total length of any gaps in my resume in months.
Annual income	Annual income (including any social welfare programs) in USD
Unemployed	I am unemployed, 1 = yes
Leisure reading	I read outside of work and school, 1 = yes
Welfare income	Annual income from social welfare programs

Food stamps	I receive food stamps, 1 = yes
Section 8	I am on section 8 housing, 1 = yes
Times hospitalized	How many times were you hospitalized for your mental illness
Lack of concentration	Lack of concentration, 1 = yes
Anxiety	Anxiety, 1 = yes
Depression	Depression, 1 = yes
Obsessive thinking	Obsessive thinking, 1 = yes
Mood swings	Mood swings, 1 = yes
Panic attacks	Panic attacks, 1 = yes
Compulsive behavior	Compulsive behavior, 1 = yes
Tiredness	Tiredness, 1 = yes
Age	Age
Gender	Gender
Household Income	Household Income
Region	Region
Device Type	Device Type