

Fall 2025 Survey Instrument

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This document contains the survey questions from The Shift Project's Fall 2025 web-based National survey instrument. This document displays the content of the survey, but the actual survey will be formatted for desktop/mobile devices and the skip patterns, display logic, and "piped-in" text (such as employer name) will be automated.

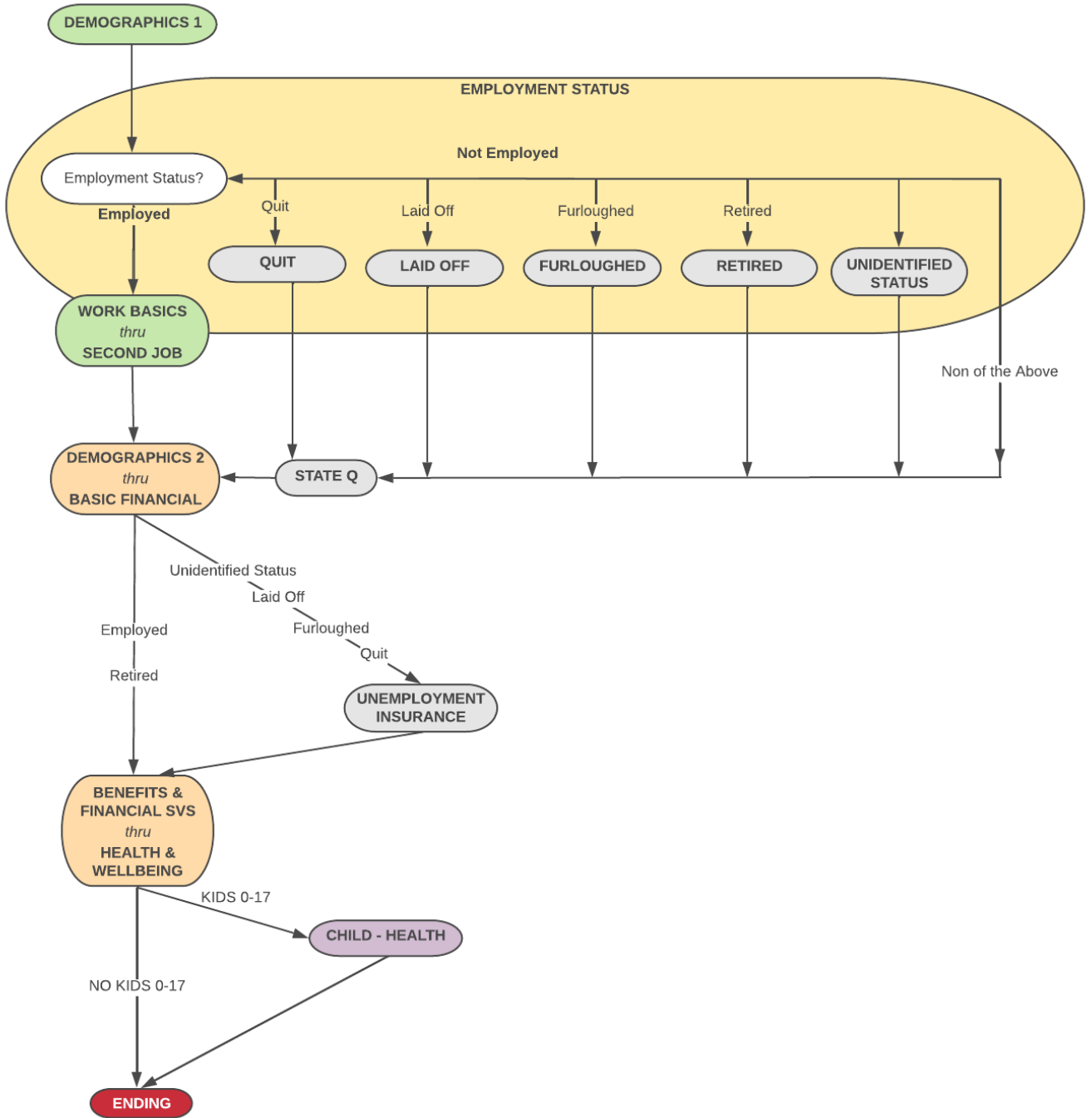
The Shift Project's Fall 2025 National survey will be self-administered on computers, tablets, or smart phones. Using the Facebook advertising platform, we will recruit workers affiliated with large chain service-sector companies. The target respondents are currently or were recently employed as frontline workers in retail and food-service industries in the United States.

***Note for data users:** *Internal data users should note that this document functions as a reference for question wording, response options, display/skip logic, and survey flow. This document is not a data codebook, and the recode values listed here are not reliable.*

Key:

- § Branched module
- ∅ Exclusive response option (multiple-selection question)
- ⌘ Choice randomization
- ℛ Question Block Randomization

Fall 2025 National Instrument – Survey Flow



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Embedded Variables:

Name	Description
EMPLOYERNAME	Targeted employer name that appears in question 1.1. After the Employment Status module, these variable changes based on answers to questions 1.1 or 1.3 and then piped in throughout the remainder of the survey
EMPLOYERNAME 1	Preprogrammed employer name option that appears in question 1.3
EMPLOYERNAME 2	Preprogrammed employer name option that appears in question 1.3
EMPLOYERNAME 3	Preprogrammed employer name option that appears in question 1.3
EMPLOYERNAME 4	Preprogrammed employer name option that appears in question 1.3
Employed	Programmed embedded variable based on answers to Employment Status questions
Laid off	Programmed embedded variable based on answers to Employment Status questions
Retired	Programmed embedded variable based on answers to Employment Status questions
Quit	Programmed embedded variable based on answers to Employment Status questions
Furloughed	Programmed embedded variable based on answers to Employment Status questions
Fired	Programmed embedded variable based on answers to Employment Status questions
Single	Preprogrammed embedded variable that activates logic in Employment Status that assumes the respondent works at one specific target firm
Multi	Preprogrammed embedded variable that activates logic in Employment Status that shows the respondent multiple firms
Kids	Embedded variable based on the respondent's answer to H14
Kids17	Embedded variable that reflects respondents with kids 17 or under, based on the respondent's answer to H15, H17, H19
Incentives	Embedded variable used to pipe into landing and ending pages, that reflects the incentives given to respondents to participate in the survey.

MODULE H1: DEMOGRAPHICS 1

First, we would like to ask you a few questions about yourself.

AGE_TEXT

- H4.** How old are you? (Enter your age in years).
[Text Box: Number required]

AGE

*Display This Question:**If H4 = Empty**Or H4 < 18**Or H4 > 100*

- H5.** Choose your age group:
- 1 18-19 years old
 - 2 20-29 years old
 - 3 30-39 years old
 - 4 40-49 years old
 - 5 50-59 years old
 - 6 60-69 years old
 - 7 70+ years old
 - 8 Don't know/refuse

WHITE | HISP | BLACK | API | AIAN | OTH | RACE_DKR

- H3.** How would you describe your race or ethnicity? **Mark all that apply.**
- 1 White
 - 2 Hispanic or Latino/Latina
 - 3 Black or African American
 - 4 Asian or Pacific Islander
 - 5 American Indian or Alaskan Native
 - 6 Other (specify) [Text Box]
 - 7 Prefer not to answer

GENDER | GENDER_TEXT

- H1.** How would you describe your gender identity?
- 1 Man
 - 2 Woman
 - 3 Non-binary
 - 4 Prefer to self-describe: [Text Box]
 - 5 Prefer not to answer

MODULE 1: EMPLOYMENT STATUS

Next, we would like to ask you some questions about your employment situation.

EMP_STATUS

Display This Question:

If single = 1 And multi = 0 Or multi = empty

- 1.1** What is your employment status?
- 1 I am employed at [EMPLOYERNAME]
 - 2 I am employed at a different company
 - 3 I am unemployed
 - 4 I am retired (no longer working)
 - 5 None of the above

EMP_STATUS

Display This Question:

If multi = 1 Or multi = 0 And single = 0 Or single = empty And multi = empty

- 1.2** What is your employment status?
- 1 I am employed
 - 2 I am unemployed
 - 3 I am retired (no longer working)
 - 4 None of the above

Q1_EMPLOYER_TEXT

Display This Question:

If 1.1 = 2 Or 1.2 = 1

- 1.3** What is the name of your current employer?
- 1 EMPLOYERNAME1
 - 2 EMPLOYERNAME2
 - 3 EMPLOYERNAME3
 - 4 EMPLOYERNAME4
 - 5 EMPLOYERNAME5
 - 6 Other (please specify): [Text Box]
 - 7 Don't know/refuse

EMP_STATUS_UNEMP

Display This Question:

If 1.2 = 2 Or 1.1 = 3

- 1.4** Choose the option that best describes your situation.
- 1 I was furloughed
 - 2 I was laid off
 - 3 I quit
 - 4 None of these

UF_DID_LAST_WEEK

*Display This Question:**If 1.2 = 4 Or 1.1 = 4*

- 1.5** Which of these options best describes what you did last week?
- 1 Worked for pay at a job/business
 - 2 Worked without pay at a job/business
 - 3 Employed but not working
 - 4 Was on temporary leave from my job
 - 5 On vacation from my job
 - 6 Did gig work
 - 7 Was self-employed
 - 8 None of these

UF_STATUS_TEXT

*Display This Question:**If 1.4 = 4*

- 1.6** Do any of the following apply to your situation?
- 1 I was fired
 - 2 I was at a temporary job that ended
 - 3 On a temporary leave (parental leave, health leave, etc)
 - 4 Other (please specify): [Text Box]

Q1_EMPLOYER_QUIT | Q1_EMPLOYER_QUIT_TEXT

*Display This Question:**If 1.4 = 3*

- 1.7** What is the name of the company where you were working before you quit your job?
- 1 EMPLOYERNAME
 - 2 EMPLOYERNAME1
 - 3 EMPLOYERNAME2
 - 4 EMPLOYERNAME3

*Display This Choice:**If EMPLOYER4 is not Empty*

- 5 EMPLOYERNAME4
- 6 Other (please specify): [Text Box]
- 7 Don't know/refuse

Q1_EMPLOYER_LAIDOFF | Q1_EMPLOYER_LAIDOFF_TEXT

*Display This Question:**If 1.4 = 2*

- 1.8** What is the name of the company where you were working before you were laid off?
- 1 EMPLOYERNAME
 - 2 EMPLOYERNAME1
 - 3 EMPLOYERNAME2
 - 4 EMPLOYERNAME3

*Display This Choice:**If EMPLOYER4 is not Empty*

- 5 EMPLOYERNAME4
- 6 Other (please specify): [Text Box]
- 7 Don't know/refuse

Q1_EMPLOYER_FURLOUGHED | Q1_EMPLOYER_FURLOUGHED_TEXT

*Display This Question:**If 1.4 = 1***1.9** What is the name of the company that furloughed you?

- 1 EMPLOYERNAME
- 2 EMPLOYERNAME1
- 3 EMPLOYERNAME2
- 4 EMPLOYERNAME3

*Display This Choice:**If EMPLOYER4 is not Empty*

- 5 EMPLOYERNAME4 (Display Logic)
- 6 Other (please specify): [Text Box]
- 7 Don't know/refuse

Q1_EMPLOYER_RETIRE | Q1_EMPLOYER_RETIRE_TEXT

*Display This Question:**If 1.1 = 4 OR 1.2 = 3***1.10** What is the name of the company where you were working before you retired?

- 1 EMPLOYERNAME
- 2 EMPLOYERNAME1
- 3 EMPLOYERNAME2
- 4 EMPLOYERNAME3

*Display This Choice:**If EMPLOYER4 is not Empty*

- 5 EMPLOYERNAME4
- 6 Other (please specify): [Text Box]
- 7 Don't know/refuse

Q1_EMPLOYER_UF | Q1_EMPLOYER_UF_TEXT

*Display This Question:**If 1.6 = 1 OR 1.6=2 OR 1.6=3 OR 1.6=4***1.11** What is the name of the company where you last worked?

- 1 EMPLOYERNAME
- 2 EMPLOYERNAME1
- 3 EMPLOYERNAME2
- 4 EMPLOYERNAME3

*Display This Choice:**If EMPLOYER4 is not Empty*

- 5 EMPLOYERNAME4
- 6 Other (please specify: [Text Box]_
- 7 Don't know/refuse

Q1_EMPLOYER_TEXT

*Display This Question:**If 1.5 = 1***1.12** What is the name of your current employer?

- 1 EMPLOYERNAME
- 2 EMPLOYERNAME1
- 3 EMPLOYERNAME2
- 4 EMPLOYERNAME3
- 5 EMPLOYERNAME4
- 6 Other (please specify): [Text Box]
- 7 Don't know/refuse

MODULE 4: QUIT^s

QUIT_DATE

- 4.2.** When did you quit your job?
- 1 Less than 1 month ago
 - 2 1 month ago
 - 3 2 months ago
 - 4 3 months ago
 - 5 4 months ago
 - 6 5 months ago
 - 7 6-11 months ago
 - 8 1 year or more ago

LONGWORK_QUIT

- 4.3.** How long had you been working at [EMPLOYER NAME] when you quit?
- 1 Less than 1 year
 - 2 1 year
 - 3 2 years
 - 4 3 years
 - 5 4 years
 - 6 5 years
 - 7 6 years
 - 8 7 years
 - 9 8 years
 - 10 9 years
 - 11 10 years or more
 - 12 Don't know/refuse

QUIT_COVID_RISKHIGH | QUIT_UNSAFECOND | QUIT_PROVIDECARE | QUIT_DISLIKESCHED | QUIT_DISLIKEMANAGER |
 QUIT_DISLIKework | QUIT_DIFFJOB | QUIT_OTHER | QUIT_OTHER_TEXT

- 4.5.** Why did you quit your job at [EMPLOYER NAME]? **Mark all that apply.**
- 1 A health condition or injury
 - 2 Unsafe working conditions
 - 3 To provide care for a child or family member
 - 4 I didn't like my schedule/found schedule unmanageable
 - 5 Not enough hours
 - 6 Problems with management
 - 7 I didn't like the work
 - 8 I got a different job
 - 9 I moved away
 - 10 Other: _____

QUIT_JOB_SEARCH

- 4.6** Are you currently looking for work?
- 1 Yes
 - 2 No

QUIT_JOB_SEARCH_MONEY | QUIT_JOB_SEARCH_HEALTH_INS | QUIT_JOB_SEARCH_FILL_TIME | QUIT_JOB_SEARCH_OTHER

Display this question if 4.6=1

- 4.7** What are the reasons you are looking for work? **Mark all that apply.**
- 1 I need the money
 - 2 I need health insurance
 - 3 I need something to do with my time
 - 4 Other

QUIT_JOB_NOSEARCH_HEALTH_ISSUE | QUIT_JOB_NOSEARCH_FIN_STABLE | QUIT_JOB_NOSEARCH_CARE | QUIT_JOB_NOSEARCH_OTHER

Display this question if 4.6=2

- 4.8** Why are you not looking for work? **Mark all that apply**
- 1 I have a health condition that limits my ability to work
 - 2 I have enough income from other sources
 - 3 I have caregiving responsibilities that limit my ability to work
 - 4 Other reasons

QUIT_WORK_HOURS_LASTMONTH

- 4.9** Unemployed people sometimes do some work for pay. About how many hours per week did you work in the past month?
[Text Box: Number Required]

QUIT_WORK_LASTMONTH_MONEY | QUIT_WORK_LASTMONTH_HEALTH_INS | QUIT_WORK_LASTMONTH_FILL_TIME | QUIT_WORK_LASTMONTH_OTHER

Display this question if 4.9>0

- 4.10** Why did you work last month? **Mark all that apply.**
- 1 I need the money
 - 2 I need health insurance
 - 3 I need something to do with my time
 - 4 Other

MODULE 2: LAID OFF^s

LAIDOFF_DATE

2.2. When did you lose your job at [EMPLOYER NAME]?

- 1 Less than 1 month ago
- 2 1 month ago
- 3 2 months ago
- 4 3 months ago
- 5 4 months ago
- 6 5 months ago
- 7 6-11 months ago
- 8 1 year or more ago

LONGWORK_LAIDOFF

2.3. How long had you been working at [EMPLOYER NAME] when you lost your job?

- 1 Less than 1 year
- 2 1 year
- 3 2 years
- 4 3 years
- 5 4 years
- 6 5 years
- 7 6 years
- 8 7 years
- 9 8 years
- 10 9 years
- 11 10 years or more
- 12 Don't know/refuse

WHY_LAIDOFF | WHY_LAIDOFF_TEXT

2.5. Did you lose your job at [EMPLOYER NAME] for any of the following reasons?

- 1 My workplace closed temporarily
- 2 My workplace closed permanently
- 3 My workplace stayed open, but business was down
- 4 Temporary job that ended
- 5 Other reason: [Text Box]

LO_JOB_SEARCH

2.6 Are you currently looking for work?

- 1 Yes
- 2 No

LO_JOB_SEARCH_MONEY | LO_JOB_SEARCH_HEALTH_INS | LO_JOB_SEARCH_FILL_TIME | LO_JOB_SEARCH_OTHER

*Display this question if 2.6=1***2.7** What are the reasons you are looking for work? **Mark all that apply.**

- 1 I need the money
- 2 I need health insurance
- 3 I need something to do with my time
- 4 Other

LO_JOB_NOSEARCH_HEALTH_ISSUE | LO_JOB_NOSEARCH_FIN_STABLE | LO_JOB_NOSEARCH_CARE | LO_JOB_NOSEARCH_OTHER

*Display this question if 2.6=2***2.8** Why are you not looking for work? **Mark all that apply.**

- 1 I have a health condition that limits my ability to work
- 2 I have enough income from other sources
- 3 I have caregiving responsibilities that limit my ability to work
- 4 Other reasons

LO_WORK_HOURS_LASTMONTH

2.9 Unemployed people sometimes do some work for pay. About how many hours per week did you work in the past month?

[Text Box: Number Required]

LO_WORK_LASTMONTH_MONEY | LO_WORK_LASTMONTH_HEALTH_INS | LO_WORK_LASTMONTH_FILL_TIME |

LO_WORK_LASTMONTH_OTHER

*Display this question if 2.9>0***2.10** Why did you work last month? **Mark all that apply.**

- 1 I need the money
- 2 I need health insurance
- 3 I need something to do with my time
- 4 Other

MODULE 3: FURLOUGHED[§]

FURLOUGHED_DATE

3.2. When were you furloughed from [EMPLOYERNAME]?

- 1 Less than 1 month ago
- 2 1 month ago
- 3 2 months ago
- 4 3 months ago
- 5 4 months ago
- 6 5 months ago
- 7 6-11 months ago
- 8 1 year or more ago

LONGWORK_FURLOUGHED

3.3. Before you were furloughed, how long had you been working at [EMPLOYERNAME]?

- 1 Less than 1 year
- 2 1 year
- 3 2 years
- 4 3 years
- 5 4 years
- 6 5 years
- 7 6 years
- 8 7 years
- 9 8 years
- 10 9 years
- 11 10 years or more
- 12 Don't know/refuse

WHY_FURLOUGHED | WHY_FURLOUGHED_TEXT

3.5. Why were you furloughed from your job at [EMPLOYER NAME]?

- 1 My workplace closed temporarily
- 2 My workplace closed permanently
- 3 My workplace stayed open, but business was down
- 4 Temporary job that ended
- 5 Other reason: [Text Box]

FURLOUGHED_JOB_SEARCH

3.6. Are you currently looking for work?

- 1 Yes
- 2 No

FUR_JOB_SEARCH_MONEY | FUR_JOB_SEARCH_HEALTH_INS | FUR_JOB_SEARCH_FILL_TIME | FUR_JOB_SEARCH_OTHER

*Display this question if 3.6=1***3.7.** What are the reasons you are looking for work? **Mark all that apply.**

- 1 I need the money
- 2 I need health insurance
- 3 I need something to do with my time
- 4 Other

FUR_JOB_NOSEARCH_HEALTH_ISSUE | FUR_JOB_NOSEARCH_FIN_STABLE | FUR_JOB_NOSEARCH_CARE |
FUR_JOB_NOSEARCH_OTHER

Display this question if 3.6=2

3.8 Why are you not looking for work? **Mark all that apply.**

- 1 I have a health condition that limits my ability to work
- 2 I have enough income from other sources
- 3 I have caregiving responsibilities that limit my ability to work
- 4 Other reasons

FUR_WORK_HOURS_LASTMONTH

3.9 Unemployed people sometimes do some work for pay. About how many hours per week did you work in the past month?

[Text Box: Number required]

FUR_WORK_LASTMONTH_MONEY | FUR_WORK_LASTMONTH_HEALTH_INS | FUR_WORK_LASTMONTH_FILL_TIME |
FUR_WORK_LASTMONTH_OTHER

Display this question if 3.9>0

3.10 Why did you work last month? **Mark all that apply.**

- 1 I need the money
- 2 I need health insurance
- 3 I need something to do with my time
- 4 Other

MODULE 5: RETIRED^s

RETIRE_DATE

5.2. When did you retire from your last employer?

Month	Year
1 January	1 2020 or before
2 February	2 2021
3 March	3 2022
4 April	4 2023
5 May	5 2024
6 June	6 2025
7 July	
8 August	
9 September	
10 October	
11 November	
12 December	

RETIRE_PLAN

Display This Question:
 If 5.2 = January to December
 And 5.2=2020 to 2025

5.3. You indicated that you retired in [Piped Month] [Piped Year]. At that time, was it your plan to retire that year?

- 1 Yes
- 2 No
- 3 Don't know/refuse

RETIRE_COVID_RISKHIGH | RETIRE_UNSAFE | RETIRE_PROVIDECARE | RETIRE_STRESSFUL | RETIRE_UNMANAGESCHED |
 RETIRE_FINANCES | RETIRE_OTHER | RETIRE_OTHER_TEXT

Display This Question:
 If 5.2 = 2020, 2021, 2022, 2023, 2024, or 2025

5.4. Why did you retire from your job at [Piped in 5.2]? **Mark all that apply.**

- 1 I was financially ready to stop working
- 2 I had been planning to retire this year
- 3 I became eligible for Medicare or Social Security
- 4 To provide unpaid care for a child/children (my own child or another person's child)
- 5 To provide unpaid care for an adult family member or a close friend
- 6 Health reasons
- 7 Disability/Injury
- 8 I didn't like my schedule/found schedule unmanageable
- 9 I didn't like my manager
- 10 I didn't like the work
- 11 My financial situation changed and I was able to retire early
- 12 I felt risk of getting COVID-19 was too high
- 13 I was concerned about unsafe working conditions — other than COVID-19
- 14 Other: [Text Box]

RETIRE_LONGWORK

5.5. How long had you been working at your last employer when you retired?

- 1 Less than 1 year
- 2 1 year
- 3 2 years
- 4 3 years
- 5 4 years
- 6 5 years
- 7 6 years
- 8 7 years
- 9 8 years
- 10 9 years
- 11 10 years or more
- 12 Don't know/refuse

RETIRE_INCOME_SS | RETIRE_INCOME_SSI | RETIRE_INCOME_ODDJOB | RETIRE_INCOME_WELFARE | RETIRE_INCOME_VETBENEFITS
 | RETIRE_INCOME_PROPERTY | RETIRE_INCOME_OTHER | RETIRE_INCOME_NONE

5.7 In the past year, did you receive any income from these sources? **Mark all that apply.**

- 1 Social Security
- 2 Supplemental Security Income, also called SSI
- 3 Odd jobs
- 4 Welfare
- 5 Pension from Prior Employment
- 6 Veteran Benefits or a Military Pension
- 7 Rent paid to you for a property you own
- 8 Other income sources. Please specify: [Text Box]
- 9 None

RETIRE_INCOME_SS_AMOUNT

Display this question:

If 5.7=1

5.8 About how much income did you receive from Social Security last month? (For example: if the amount is \$600, please enter 600 without any spaces or dollar signs)
 \$ _____ [Number Format Required]

RETIRE_INCOME_SSI_AMOUNT

Display this question:

If 5.7=2

5.9 About how much income did you receive from Supplemental Security Income last month? (For example: if the amount is \$600, please enter 600 without any spaces or dollar signs)
 \$ _____ [Number Format Required]

RETIRE_INCOME_ODDJOB_AMOUNT

Display this question:

If 5.7=3

5.10 About how much income did you receive from odd jobs last month? (For example: if the amount is \$600, please enter 600 without any spaces or dollar signs)
 \$ _____ [Number Format Required]

RETIRE_INCOME_WELFARE_AMOUNT

Display this question:

If 5.7=4

- 5.11** About how much income did you receive from welfare last month? (For example: if the amount is \$600, please enter 600 without any spaces or dollar signs)
\$ _____ [Number Format Required]

RETIRE_INCOME_WELFARE_AMOUNT

Display this question:

If 5.7=5

- 5.11.1** About how much income did you receive from your former employer's pension last month? (For example: if the amount is \$600, please enter 600 without any spaces or dollar signs)
\$ _____ [Number Format Required]

RETIRE_INCOME_VETBENEFITS_AMOUNT

Display this question:

If 5.7=6

- 5.12** About how much income did you receive from Veteran Benefits or a Military Pension last month? (For example: if the amount is \$600, please enter 600 without any spaces or dollar signs)
\$ _____ [Number Format Required]

RETIRE_INCOME_PROPERTY_AMOUNT

Display this question:

If 5.7=7

- 5.13** About how much income did you receive from rent paid to you for a property you own last month? (For example: if the amount is \$600, please enter 600 without any spaces or dollar signs)
\$ _____ [Number Format Required]

RETIRE_INCOME_OTHER_AMOUNT

Display this question:

If 5.7=8

- 5.14** About how much income did you receive from other income sources last month? (For example: if the amount is \$600, please enter 600 without any spaces or dollar signs)
\$ _____ [Number Format Required]

RETIRE_SAVINGS_401K | RETIRE_SAVINGS_IRA | RETIRE_SAVINGS_BANK | RETIRE_SAVINGS_OTHER

- 5.15** Do you have any of these forms of retirement savings? **Mark all that apply.**
- 1 401K pre-tax retirement account
 - 2 IRA
 - 3 Checking, savings, or money market account
 - 4 Other: [Text Box]
 - 5 None

RETIRE_SAVINGS_401K_AMOUNT

Display this question if 5.15=1

- 5.16** In total, about how much do you have saved in a 401k pre-tax retirement account? (For example: if the amount is \$600, please enter 600 without any spaces or dollar signs)
\$ _____ [Number Format Required]

RETIRE_SAVINGS_IRA_AMOUNT

Display this question if 5.15=2

- 5.17** In total, about how much do you have saved in an IRA? (For example: if the amount is \$600, please enter 600 without any spaces or dollar signs)
\$ _____ [Number Format Required]

RETIRE_SAVINGS_BANK_AMOUNT

Display this question if 5.15=3

- 5.18** In total, about how much do you have saved in a checking, savings, or money market account? (For example: if the amount is \$600, please enter 600 without any spaces or dollar signs)
\$ _____ [Number Format Required]

RETIRE_SAVINGS_BANK_AMOUNT

Display this question if 5.15=4

- 5.19** In total, about how much do you have in your other retirement savings? (For example: if the amount is \$600, please enter 600 without any spaces or dollar signs)
\$ _____ [Number Format Required]

RETIRE_WORK_LASTMONTH

- 5.19.1** Retired people sometimes do some work for pay. Did you work for pay last month?
1 Yes
2 No

RETIRE_WORK_HOURS_LASTMONTH

Display this question if 5.19.1=1

- 5.19.2** Retired people sometimes do some work for pay. About how many hours per week did you working the past month?
[Text Entry: Number Required]

RETIRE_WORK_LASTMONTH_MONEY | RETIRE_WORK_LASTMONTH_HEALTH_INS | RETIRE_WORK_LASTMONTH_FILL_TIME |

RETIRE_WORK_LASTMONTH_OTHER

Display this question if 5.19.1>1

- 5.19.3** Why did you work last month? **Mark all that apply.**
1 I need the money
1 I need health insurance
2 I need something to do with my time
3 Other

RETIRE_JOB_SEARCH

Display this question if 5.19.1=2

- 5.20** Are you currently looking for work?
1 Yes
2 No

RETIRE_JOB_SEARCH_MONEY | RETIRE_JOB_SEARCH_HEALTH_INS | RETIRE_JOB_SEARCH_FILL_TIME |
RETIRE_JOB_SEARCH_OTHER

Display this question if 5.20=1

5.21 What are the reasons you are looking for work? **Mark all that apply.**

- 1 I need the money
- 2 I need health insurance
- 3 I need something to do with my time
- 4 Other

RETIRE_JOB_NOSEARCH_HEALTH_ISSUE | RETIRE_JOB_NOSEARCH_FIN_STABLE | RETIRE_JOB_NOSEARCH_CARE |
RETIRE_JOB_NOSEARCH_OTHER

Display this question if 5.20=2

5.22 Why are you not looking for work? **Mark all that apply.**

- 1 I have a health condition that limits my ability to work
- 2 I have enough income from other sources
- 3 I have caregiving responsibilities that limit my ability to work
- 4 Other reasons

MODULE 6: UNIDENTIFIED FOLKS

LONGWORK_UF

6.2. How long did you work at [EMPLOYER NAME]?

- 1 Less than one year
- 2 1 year
- 3 2 years
- 4 3 years
- 5 4 years
- 6 5 years
- 7 6 years
- 8 7 years
- 9 8 years
- 10 9 years
- 11 10 years or more
- 12 Don't know/refuse

UF_WHY_FIRED

*Display This Question:**If 1.6 = 1***6.4.** What was the reason you were fired from your job?

- 1 [Open Ended Box] _____

UF_JOB_SEARCH

6.5. Are you currently looking for work?

- 1 Yes
- 2 No

UF_JOB_SEARCH_MONEY | UF_JOB_SEARCH_HEALTH_INS | UF_JOB_SEARCH_FILL_TIME | UF_JOB_SEARCH_OTHER

*Display this question if 6.5=1***6.6.** What are the reasons you are looking for work? **Mark all that apply.**

- 1 I need the money
- 2 I need health insurance
- 3 I need something to do with my time
- 4 Other

UF_JOB_NOSEARCH_HEALTH_ISSUE | UF_JOB_NOSEARCH_FIN_STABLE | UF_JOB_NOSEARCH_CARE | UF_JOB_NOSEARCH_OTHER

*Display this question if 6.5=2***6.7.** Why are you not looking for work? **Mark all that apply.**

- 1 I have a health condition that limits my ability to work
- 2 I have enough income from other sources
- 3 I have caregiving responsibilities that limit my ability to work
- 4 Other reasons

UF_WORK_HOURS_LASTMONTH

6.8. Unemployed people sometimes do some work for pay. About how many hours per week did you working the past month?

[Text Entry: Number Required]

UF_WORK_LASTMONTH_MONEY | UF_WORK_LASTMONTH_HEALTH_INS | UF_WORK_LASTMONTH_FILL_TIME |
UF_WORK_LASTMONTH_OTHER

Display this question if 6.8>0

6.9. Why did you work last month? **Mark all that apply.**

- 1 I need the money
- 2 I need health insurance
- 3 I need something to do with my time
- 4 Other

MODULE P: STATE FOR UNEMPLOYED§

STATELIST_QUIT | STATELIST_UF | STATELIST_UF | STATELIST_RETIRED | STATELIST_FURLOGHED | STATELIST_LAIDOFF

P.1. Please select the state where your former [EMPLOYER NAME] workplace is located.

- 1 Alabama
- 2 Alaska
- 3 Arizona
- 4 Arkansas
- 5 California
- 6 Colorado
- 7 Connecticut
- 8 Delaware
- 51 District of Columbia
- 9 Florida
- 10 Georgia
- 11 Hawaii
- 12 Idaho
- 13 Illinois
- 14 Indiana
- 15 Iowa
- 16 Kansas
- 17 Kentucky
- 18 Louisiana
- 19 Maine
- 20 Maryland
- 21 Massachusetts
- 22 Michigan
- 23 Minnesota
- 24 Mississippi
- 25 Missouri
- 26 Montana
- 27 Nebraska
- 28 Nevada
- 29 New Hampshire
- 30 New Jersey
- 31 New Mexico
- 32 New York
- 33 North Carolina
- 34 North Dakota
- 35 Ohio
- 36 Oklahoma
- 37 Oregon
- 38 Pennsylvania
- 39 Rhode Island
- 40 South Carolina
- 41 South Dakota
- 42 Tennessee
- 43 Texas
- 44 Utah
- 45 Vermont
- 46 Virginia

- 47 Washington
- 48 West Virginia
- 49 Wisconsin
- 50 Wyoming
- 52 I do not work in the United States

MODULE A: WORK BASICS[§]

LONGWORK_YRS

A2. How long have you been working at [EMPLOYER NAME]?

- 1 less than 1 year
- 2 1 year
- 3 2 years
- 4 3 years
- 5 4 years
- 6 5 years
- 7 6 years
- 8 7 years
- 9 8 years
- 10 9 years
- 11 10 or more years
- 12 Don't know/refuse

LONGWORK_M

*Display This Question:**If A2 = 1***A3.** How many months have you worked at [EMPLOYER NAME]?

- 1 Less than 1 month
- 2 1 month
- 3 2 months
- 4 3 months
- 5 4 months
- 6 5 months
- 7 6 months
- 8 7 months
- 9 8 months
- 10 9 months
- 11 10 months
- 12 11 months
- 13 Don't know/refuse

MANAGER

A4. Are you a manager at [EMPLOYER NAME]?

- 1 Yes
- 2 No
- 3 Don't know/refuse

JOBTITLE

*Display This Question:**If A4 = 1***A5.** What is your job title at [EMPLOYER NAME]?

[Text Box]

WORKPLACE_SIMPLIFIED | WORKPLACE_SIMPLIFIED_TEXT

- A6.1** Which of the following best describes your [EMPLOYER NAME] workplace? I work in a...
- 1 Store (Big-box, retail, grocery, etc.)
 - 2 Restaurant
 - 3 Fast food place
 - 4 Coffee shop
 - 5 Warehouse or fulfillment center
 - 6 Office
 - 7 Delivery vehicle
 - 8 Pharmacy
 - 9 Other (specify) [Text Box]

Skip To: End of survey If A6.1 = 6

JOBTITLELIST_STORE | JOBTITLELIST_STORE_TEXT

Display This Question:

If A4 !=1

And A6.1 = 1

- A6.2** Which job description most closely resembles your primary day-to-day responsibilities at your current job?
- 1 Cashier
 - 2 Customer service
 - 3 Food prep
 - 4 Salesperson
 - 5 Stocking/unloading
 - 6 Other (specify) [Text Box]

JOBTITLELIST_DINING | JOBTITLELIST_DINING_TEXT

Display This Question:

If A4 !=1

And A6.1 = 2, 3 or 4

- A6.2** Which job description most closely resembles your primary day-to-day responsibilities at your current job?
- 1 Barista
 - 2 Cashier
 - 3 Cook
 - 4 Other food prep
 - 5 Customer service
 - 6 Delivery person
 - 7 Waiter/server
 - 8 Other (specify) [Text Box]

JOBTITLELIST_WAREHOUSE | JOBTITLELIST_WAREHOUSE_TEXT

*Display This Question:**If A4 != 1**And A6.1 = 5*

A6.3 Which job description most closely resembles your primary day-to-day responsibilities at your current job?

- 1 Cashier
- 2 Customer service
- 3 Driver
- 4 Package handling
- 5 Picker
- 6 Stocking/unloading
- 7 Other (specify) [Text Box]

JOBTITLELIST_DELIVERY_OTH | JOBTITLELIST_DELIVERY_OTH_TEXT

*Display This Question:**If A4 != 1**And**If A6.1 = 6, 7 or 8*

A6.4 Which job description most closely resembles your primary day-to-day responsibilities at your current job?

- 1 Cashier or clerk
- 2 Customer service
- 3 Delivery person
- 4 Driver
- 5 Other (specify) [Text Box]

PAIDHOUR

A8. Are you paid by the hour at [EMPLOYER NAME]?

- 1 Yes
- 2 No
- 3 Don't know/refuse

HOURWAGE

*Display This Question:**If A8 = 1*

A9. How much are you paid per hour at [EMPLOYER NAME]? **Please enter dollars per hour (for example, if you earn \$10 per hour, enter 10.00). DO NOT include any tips you may earn.**

[Text Entry: Number Required]

PAIDTIPS

*Display This Question:**If A8 = 1*

A10. In addition to your hourly wage, do you receive tips?

- 1 Yes, I receive tips in addition to my hourly wage
- 2 No, I don't get tips

WEEKTIPS

Display This Question:

If A10 = 1

- A11.** Please enter the amount you usually earn in tips **per week** at [EMPLOYER NAME].
Please enter a dollar amount (for example, if you earn \$100 in tips per week, enter 100).
 [Text Entry: Number Required]

SALARY

Display This Question:

If A8 != 1

- A12.** What is your **annual** salary at [EMPLOYER NAME]? **Please enter a dollar amount.**
 [Text Entry: Number Required]

FAIR_HOURWAGE

Display This Question:

If A8 = 1

- A13.** Do you think you are paid a fair hourly wage at your job at [EMPLOYER NAME]?
- 1 Very fair
 - 2 Somewhat fair
 - 3 Neither Fair nor unfair
 - 4 Somewhat unfair
 - 5 Very unfair

CREDIT_WAGE_EMPLOYER | CREDIT_WAGE_BOSS | CREDIT_WAGE_SELF | CREDIT_WAGE_GOVT | CREDIT_WAGE_UNION |
 CREDIT_WAGE_OTHER

Display This Question:

If A13 = 1 or 2

- A14** Who should get credit for how much you are paid at work? **Mark all that apply.**
- 1 [EMPLOYER NAME]
 - 2 My manager/boss at [EMPLOYER NAME]
 - 3 Myself
 - 4 Government regulations/laws
 - 5 Unions
 - 6 Other

BLAME_WAGE_EMPLOYER | BLAME_WAGE_BOSS | BLAME_WAGE_SELF | BLAME_WAGE_GOVT | BLAME_WAGE_UNION |
 BLAME_WAGE_OTHER

Display This Question:

If A13 = 4 or 5

- A15** Who is it to blame for how much you are paid at work? **Mark all that apply.**
- 1 [EMPLOYER NAME]
 - 2 My manager/boss at [EMPLOYER NAME]
 - 3 Myself
 - 4 Government regulations/laws
 - 5 Unions
 - 6 Other

LOCALE_MIN_WAGE | LOCALE_MIN_WAGE_AMOUNT

Display This Question:

If A8 = 1

- A16** To the best of your knowledge, what is the minimum hourly wage that employers in your city/state are allowed to pay workers? (Please enter the amount without spaces or dollar signs).

[Text Entry: Number Required]

Don't know

STATELIST

- A13.** Please select the state where your [EMPLOYER NAME] workplace is located.

- 1 Alabama
- 2 Alaska
- 3 Arizona
- 4 Arkansas
- 5 California
- 6 Colorado
- 7 Connecticut
- 8 Delaware
- 51 District of Columbia
- 9 Florida
- 10 Georgia
- 11 Hawaii
- 12 Idaho
- 13 Illinois
- 14 Indiana
- 15 Iowa
- 16 Kansas
- 17 Kentucky
- 18 Louisiana
- 19 Maine
- 20 Maryland
- 21 Massachusetts
- 22 Michigan
- 23 Minnesota
- 24 Mississippi
- 25 Missouri
- 26 Montana
- 27 Nebraska
- 28 Nevada
- 29 New Hampshire
- 30 New Jersey
- 31 New Mexico
- 32 New York
- 33 North Carolina
- 34 North Dakota
- 35 Ohio
- 36 Oklahoma
- 37 Oregon
- 38 Pennsylvania
- 39 Rhode Island
- 40 South Carolina

- 41 South Dakota
- 42 Tennessee
- 43 Texas
- 44 Utah
- 45 Vermont
- 46 Virginia
- 47 Washington
- 48 West Virginia
- 49 Wisconsin
- 50 Wyoming
- 52 I do not work in the United States

CHICAGO

*Display This Question:**If A13 = 13*

A15. Is your [EMPLOYER NAME] workplace located in Chicago city limits?

- 1 Yes
- 2 No
- 3 Don't know/refuse

Skip To: A22 If A15 = 1

LOSANGELES

*Display This Question:**If A13 = 5*

A16. Is your [EMPLOYER NAME] workplace located in Los Angeles city limits?

- 1 Yes
- 2 No
- 3 Don't know/refuse

Skip To: A22 If A16 = 1

PHILADELPHIA

*Display This Question:**If A13 = 38*

A17. Is your [EMPLOYER NAME] workplace located in Philadelphia city limits?

- 1 Yes
- 2 No
- 3 Don't know/refuse

Skip To: A22 If A17 = 1

WASHINGTON

*Display This Question:**If A13 = 47*

A19. Is your [EMPLOYER NAME] workplace located in Seattle city limits?

- 1 Yes
- 2 No
- 3 Don't know/refuse

Skip To: A22 If A18 = 1

NYCFIVE

*Display This Question:**If A13 = 32*

- A21.** Is your [EMPLOYER NAME] workplace located in one of the five boroughs of New York City (Manhattan, Brooklyn, Queens, Staten Island, or the Bronx)?
- 1 Yes
 - 2 No
 - 3 Don't know/refuse

WORKPLACE_OWNER

- A22.** Who is the owner of the [EMPLOYER NAME] where you work?
- 1 My workplace is owned by [EMPLOYER NAME] directly
 - 2 My workplace is owned by a franchisee
 - 3 Don't know/refuse

FRANCHISED_OWNER_MULTIPLE_EST

*Display This Question:**If A22 = 2*

- A22.1.** Does the owner of your franchised [EMPLOYER NAME] own more than one store/establishment?
- 1 Yes
 - 2 No
 - 3 Don't know/refuse

FRANCHISED_OWNER_NUM_EST

*Display This Question:**If A22.1 = 1*

- A22.2.** As far as you know, how many stores/establishments does the owner of your franchised [EMPLOYER NAME] own?
- 1 2 – 5
 - 2 6 – 10
 - 3 11 – 20
 - 4 21+
 - 5 Don't know/refuse

HONEYPOT1

*Display This Question:**If A8 != 1**And A8 != 2**And A8 != 3*

- A24.** What is your job title at [EMPLOYER NAME]?
- 1 I primarily am in charge of preparing food
 - 2 I primarily am in charge of serving customers and taking orders
 - 3 None of the above

CHECK

- A25.** For this question, please select "A little of the time."
- 1 All of the time
 - 2 Most of the time
 - 3 Some of the time
 - 4 A little of the time
 - 5 None of the time

MODULE B: WORK SCHEDULING[§]

The next questions ask about your work schedule.

SCHEDULE4 | SCHEDULE4_TEXT

- B1.** Which of the following best describes your work schedule at [EMPLOYER NAME]?
- 1 Variable schedule (one that changes from day to day)
 - 2 Regular daytime schedule
 - 3 Regular evening shift
 - 4 Regular night shift
 - 5 Rotating shift (one that changes regularly from days to evenings or nights)
 - 6 Split shift (one consisting of two distinct periods each day)
 - 7 Other (specify) [Text Box]
 - 8 Don't know/refuse

USUALHOURS

- B2.** How many **hours per week** do you usually work at [EMPLOYER NAME]? **Please enter a number between 0 and 80 hours per week.**
[Text Entry: Number Required]

GREATESTHR

- B3.** In the last month, what is the **greatest** number of hours you've worked **in a week** at [EMPLOYER NAME]? (Please consider all hours, including any extra hours, overtime, work you did at home, and so forth). **Please enter a number between 0 and 80 hours per week.**
[Text Entry: Number Required]

LEASTHR

- B4.** In the last month, what is the **fewest** hours you've worked **in a week** at [EMPLOYER NAME]? (Please do not include weeks in which you missed work because of illness or days off.) **Please enter a number between 0 and 80 hours per week.**
[Text Entry: Number Required]

NOTICE

- B5.** How far in advance do you usually know what days and hours you will need to work at [EMPLOYER NAME]?
- 1 Less than 1 week
 - 2 At least 1 week but less than 2 weeks
 - 3 At least 2 weeks but less than 3 weeks
 - 4 At least 3 weeks but less than 4 weeks
 - 5 4 weeks or more
 - 6 Don't know/refuse

DAYSNOTICE

Display This Question:
If B5 = 1

B6. How many days in advance do you usually know your work schedule at [EMPLOYER NAME]?

- 1 Less than 1 day
- 2 1 day
- 3 2 days
- 4 3 days
- 5 4 days
- 6 5 days
- 7 6 days
- 8 Don't know/refuse

KEEPSCHEDOPEN

B7. Some employees may feel they have to keep their schedule open to be available for their job. Do you keep your schedule open and available for your job at [EMPLOYER NAME]?

- 1 Yes
- 2 No
- 3 Don't know/refuse

MODULE C: SECURE SCHEDULING^s

ONCALL

C1. In the past month or so, have you ever been asked to be “on-call” for work at [EMPLOYER NAME]? By “on-call,” we mean you have to be available to work, and you find out if you are needed to work just a few hours before your shift.

- 1 Yes
- 2 No
- 3 Don't know/refuse

CANCELSHIFT

C3. In the past month or so, did your employer ever cancel one of your scheduled shifts at [EMPLOYER NAME]?

- 1 Yes
- 2 No
- 3 Don't know/refuse

TIMING

C5. In the past month or so, did your employer ever change the timing or the length of your scheduled shift at [EMPLOYER NAME]? For example, your employer asked you to come in early or late, or asked you to leave early or to stay later than the hours you were originally scheduled for.

- 1 Yes
- 2 No
- 3 Don't know/refuse

CLOPENING

C7. In the past month or so, have you ever worked a closing shift and then worked the very next opening shift with less than 11 hours off in between your shifts at [EMPLOYER NAME]? This is sometimes called “clopening.”

- 1 Yes
- 2 No
- 3 Don't know/refuse

MODULE X: BULLYING

We have some questions about your interactions at work.

BULLYFREQ_SUPERVISOR | BULLYFREQ_COWORKERS | BULLYFREQ_CUSTOMERS

X1. How often are you **bullied**, including things like being humiliated, constantly criticized, or excessively teased, at work by:

	Never (1)	Rarely (2)	Sometimes (3)	Often (4)	Always (5)	Not applicable
your supervisor? (1)	1	2	3	4	5	6
your coworkers? (2)	1	2	3	4	5	6
<i>Display This option: If workplace!= warehouse</i>	1	2	3	4	5	6
your customers? (3)						

RESPECTFREQ_SUPERVISOR | RESPECTFREQ_COWORKERS | RESPECTFREQ_CUSTOMERS

X2. How often do you feel **respected** by:

	Never (1)	Rarely (2)	Sometimes (3)	Often (4)	Always (5)	Not applicable
your supervisor? (1)	1	2	3	4	5	6
your coworkers? (2)	1	2	3	4	5	6
<i>Display This option: If workplace!= warehouse</i>	1	2	3	4	5	6
your customers? (3)						

EXP_CUST_YELLED_LT1 | EXP_CUST_SWEAR_LT1 | EXP_CUST_THREAT_LT1 | EXP_CUST_THROWN_LT1 | EXP_STORE_SECURITY_LT1
 | EXP_CUST_SEXUAL_HARRAS_LT1 | EXP_CUST_TRIED_HIT_LT1 | EXP_CUST_ACTUALLY_HIT_LT1 | EXP_CUST_INJURED_LT1 |
 EXP_NONE_LT1

Display This Question:

If longwork_yrs = less than 1 year

And If workplace!= warehouse

X2.1 Please tell us if you have experienced any of the following since you started working at your job at [EMPLOYER NAME]. **Mark all that apply.**

- 1 A customer has raised their voice or yelled at me
- 2 A customer has sworn at or verbally abused me
- 3 A customer has threatened me
- 4 A customer has thrown things or intentionally made a mess to express anger at me
- 5 You have had to involve store security or call the police on a customer
- 6 A customer has sexually harassed me
- 7 A customer has tried to hit me with their hands, an object, or a weapon
- 8 A customer has actually hit me with their hands an object or weapon
- 9 A customer has injured me
- 10 ∅ None of these
- 11 Not applicable

EXP_CUST_YELLED | EXP_CUST_SWEAR | EXP_CUST_THREAT | EXP_CUST_THROWN | EXP_STORE_SECURITY |
 EXP_CUST_SEXUAL_HARRAS | EXP_CUST_TRIED_HIT | EXP_CUST_ACTUALLY_HIT | EXP_CUST_INJURED | EXP_NONE

Display This Question:

If longwork_yrs! = less than 1 year,

And longwork_yrs = is displayed

And If workplace!= warehouse

X2.2 Please tell us if you have experienced any of the following in the past 12 months at your job at [EMPLOYER NAME]. **Mark all that apply.**

- 1 A customer has raised their voice or yelled at me
- 2 A customer has sworn at or verbally abused me
- 3 A customer has threatened me
- 4 A customer has thrown things or intentionally made a mess to express anger at me
- 5 You have had to involve store security or call the police on a customer
- 6 A customer has sexually harassed me
- 7 A customer has tried to hit me with their hands, an object, or a weapon
- 8 A customer has actually hit me with their hands an object or weapon
- 9 A customer has injured me
- 10 ∅ None of these
- 11 Not applicable

SUPERVISOR_FAIR | SUPERVISOR_CARE | SUPERVISOR_CARE | SUPERVISOR_GOAL | SUPERVISOR_HELP | SUPERVISOR_FORGIVE | SUPERVISOR_GROWTH | SUPERVISOR_FEEDBACK

X2.3 Below is a series of statements that represent possible feelings you might have about your supervisor. Please indicate the degree to which you agree or disagree with each statement.

	strongly agree (1)	agree (2)	disagree (4)	strongly disagree (5)
My supervisor cares about my goals and wants to help me achieve them	1	2	4	5
My supervisor provides opportunities for growth and development at work	1	2	4	5

JOB_AUTONOMY

X3. How much do you agree with the following statement: “At [EMPLOYER NAME], I am allowed to decide how to go about getting my job done.”

- 1 Strongly Agree
- 2 Agree
- 3 Disagree
- 4 Strongly Disagree

RESOLVEPROB_COWORKERS | RESOLVEPROB_SUPERVISOR | RESOLVEPROB_MANAGEMENT | RESOLVEPROB_GRIEVANCE | RESOLVEPROB_UNION | RESOLVEPROB_HR | RESOLVEPROB_QUIT | RESOLVEPROB_NONPROF | RESOLVEPROB_CITY_COUNTY_GOV | RESOLVEPROB_STATE_GOV | RESOLVEPROB_FED_GOV | RESOLVEPROB_OTHER | RESOLVEPROB_NONE | RESOLVEPROB_OTHER_TEXT

X6. If you had a serious problem at [EMPLOYERNAME], what would you do to resolve this issue? **Mark all that apply.**

[X Choice randomization]

- 1 Discuss with coworkers
- 2 Discuss with supervisor
- 3 Talk to higher-up management
- 4 Use a company grievance procedure
- 5 Speak to a union rep or union organizer
- 6 Speak to HR (Human Resources)
- 7 Quit
- 8 Talk to someone at a nonprofit, community organization, worker center, or labor union
- 9 File a complaint with a City or County Labor Regulator such as an Office of Labor Standards
- 10 File a complaint with a State Labor Regulator
- 11 File a complaint with a Federal Labor Regulator such as OSHA or the Department of Labor
- 12 Other (specify): [Text Box]
- 13 None of these

HYPOTH_RETALIATION_WORSE_SCHEDULE | HYPOTH_RETALIATION_WORSE_TASKS | HYPOTH_RETALIATION_DISCIPLINED |
 HYPOTH_RETALIATION_THREATS | HYPOTH_RETALIATION_DENIED_PROMO | HYPOTH_RETALIATION_JOB_LOSS

X7. To what extent do you agree with the following: Workers at [EMPLOYERNAME] who raise issues/problems at work will face retaliation in the form of:...

	strongly agree (1)	agree (2)	nor agree/nor disagree (3)	disagree (4)	strongly disagree (5)
1. Worse hours/schedule	1	2	3	4	5
2. Worse job duties	1	2	3	4	5
3. Discipline/points	1	2	3	4	5
4. Threats	1	2	3	4	5
5. Demotion/Denied promotion or raise	1	2	3	4	5
6. Loss of job	1	2	3	4	5

MODULE F: WORK RELATIONSHIPS

The following questions ask for a little more information about your workplace.

UNION

- F1.** Do you belong to a labor union at [EMPLOYER NAME]?
- 1 Yes
 - 2 No

UNION_VOTE

Display This Question:

If F1 = 2

- F2.** If an election were held today to decide whether employees like you should be represented by a union, would you vote for the union or against the union?
- 1 I would vote for the union
 - 2 I would vote against the union
 - 3 Don't know/not sure

SUPER_GENDER

- F14.** What is the gender of your immediate supervisor at [EMPLOYER NAME]?
- 1 Man
 - 2 Woman
 - 3 Non-binary
 - 4 Other
 - 5 I do not have an immediate supervisor or do not have just one immediate supervisor

Skip To end of module if F14= 5

SUPER_WHITE | SUPER_HISP | SUPER_BLACK | SUPER_API | SUPER_AIAN | SUPER_OTHER | SUPER_OTHER_TEXT

Display This Question:

If F14 != 5

- F15.** How would you describe the race/ethnicity of your immediate supervisor at [EMPLOYER NAME]? **Mark all that apply.**
- 1 White
 - 2 Hispanic or Latino/Latina
 - 3 Black or African American
 - 4 Asian or Pacific Islander
 - 5 American Indian or Alaskan Native
 - 6 Other (specify) [Text Box]

MODULE ET: EDUCATION & TRAINING §

Next, we have some questions related to education and training opportunities.

FIVE_YEAR_PLAN

- ET1.** Over the next 5 years, would you **like to...**
- 1 Remain in the job you have
 - 2 Stay with your current employer but advance to a new position
 - 3 Work for a new employer in the same industry
 - 4 Work for a new employer in a different industry
 - 5 Be out of the labor force

LIKELY_ACHIEVE_FIVE_YEARS

Display This Question:

If ET1!=empty

- ET2.** How likely is it that you will be able to [Selected choices from question ET1] over the next 5
- 1 Very likely
 - 2 Somewhat likely
 - 3 Not very likely

EDUC_ACHIEVE_FIVE_YEARS

Display This Question:

If ET1!=empty

- ET3.** How important do you think that additional education and training would be for allowing you to [Selected choices from question ET1] in the next 5 years?
- 1 Very important
 - 2 Somewhat important
 - 3 Not important

MENTORING_SUPERVISOR | MENTORING_COWORKER | MENTORING_FAMILY | MENTORING_TEACHER | MENTORING_FRIEND |

MENTORING_COMMUNITY_ORG | MENTORING_APP | MENTORING_OTHER | MENTORING_NONE | MENTORING_OTHER_TEXT

- ET4.** Who do you receive mentoring and support from to help you advance in your career? **Mark all that apply.**
- 1 A supervisor
 - 2 A co-worker
 - 3 A parent or another family member
 - 4 A teacher or faculty member
 - 5 A friend
 - 6 A community organization
 - 7 An App or a website
 - 8 Other (specify): [Text Box]
 - 9 I do not receive any career mentoring or support

PAST_YEAR_EDUC_SKILLS | PAST_YEAR_EDUC_VOCATIONAL | PAST_YEAR_EDUC_GED | PAST_YEAR_EDUC_CMTY_COLLEGE |
 PAST_YEAR_EDUC_COLLEGE | PAST_YEAR_EDUC_OTHER | PAST_YEAR_EDUC_NONE | PAST_YEAR_EDUC_OTHER_TEXT

ET5. In the past year have you engaged in any of the following educational or training activities outside of work? **Mark all that apply.**

- 1 Skill-building workshops or classes
- 2 Vocational training
- 3 High school or GED classes
- 4 Community college classes
- 5 4-year college or university classes
- 6 Other (specify): [Text Box]
- 7 None of these

Skip to ET5.X if ET5= 7

EDUC_ONLINE_INPERSON

Display This Question:

If ET5!=empty

ET5.A Did you attend these educational or training activities online or in-person?

- 1 Online/app/website only
- 2 In-person
- 3 Some online/app/website and some in-person

WORKING_TOWARDS_CERT | WORKING_TOWARDS_GED | WORKING_TOWARDS_ASSOCIATES | WORKING_TOWARDS_BACHELORS
 WORKING_TOWARDS_MASTERS | WORKING_TOWARDS_OTHER | WORKING_TOWARDS_NONE
 | WORKING_TOWARDS_OTHER_TEXT

ET5.B Are you working toward any of the following degrees or credentials? **Mark all that apply.**

- 1 Certification in a professional field
- 2 High school diploma or GED
- 3 Associates degree
- 4 College degree
- 5 Masters degree
- 6 Other degree or credential (specify): [Text Box]
- 7 I am not working toward a degree or credential

FIELD_OF_STUDY_TEXT

Display This Question:

If ET5.B=1, 3, 4, 5 or 6

ET5B.2 Please share your field of study or your major in your educational or training program:

[Text Box]

NOT_PARTICIPATE_UNINTERESTED | NOT_PARTICIPATE_NOTIME | NOT_PARTICIPATE_SCHEDULE | NOT_PARTICIPATE_COST | NOT_PARTICIPATE_DKHOW | NOT_PARTICIPATE_HAVE_ENOUGH | NOT_PARTICIPATE_OTHER | NOT_PARTICIPATE_OTHER_TEXT

Display This Question:

If ET5=7

ET5.X What are the main reasons you have not participated in education or training outside of work in the past year? **Mark all that apply.**

- 1 I am not interested in getting more education and training
- 2 I don't have enough time for education and training
- 3 My work schedule is too unpredictable
- 4 I cannot afford the type of education and training I want
- 5 I don't know how to access education or training outside of work
- 6 I have enough training opportunities at work
- 7 Other (specify): [Text Box]

WORK_OPPT_TUITION | WORK_OPPT_SKILLS_DURING | WORK_OPPT_SKILLS_OUTSIDE | WORK_OPPT_SKILLS_APP | WORK_OPPT_APPRENTICE | WORK_OPPT_LEADERSHIP | WORK_OPPT_OTHER | WORK_OPPT_OTHER_TEXT

ET6. Some employers offer their employees opportunities for education and training to build skills or advance in their careers.

Have you participated in any of the following opportunities that may have been offered by your [EMPLOYER NAME] employer?

	Employer does not offer (1)	Yes, I did (2)	No, I didn't (3)
1. Tuition for education programs outside of work	1	2	3
2. Training opportunities to build skills during work hours	1	2	3
3. Training opportunities to build skills outside of work hours	1	2	3
4. Access to an App or on-line skill-building program	1	2	3
5. Apprenticeships	1	2	3
6. Leadership/management training programs	1	2	3
7. Other (specify): [Text Box]	1	2	3

IGNORE_WORK_OPPT_NONEED

IGNORE_WORK_OPPT_WASTE | IGNORE_WORK_OPPT_UNAVAILABLE | IGNORE_WORK_OPPT_QUALIFY |
 IGNORE_WORK_OPPT_MANAGER_DENY | IGNORE_WORK_OPPT_DKHOW | IGNORE_WORK_OPPT_NOTIME |
 IGNORE_WORK_OPPT_SCHEDULE | IGNORE_WORK_OPPT_CANTAFFORD | IGNORE_WORK_OPPT_OTHER |
 IGNORE_WORK_OPPT_OTHER_TEXT

Display This Question:

If ET6= "Yes I did" count is equal to zero

And if ET6="No I didn't" count is greater than zero

ET6.A What are the main reasons you have not participated in the education or training opportunities offered by your [EMPLOYER NAME] employer? **Mark all that apply.**

- 1 I do not need any more education or training
- 2 I don't think these education or training opportunities are worth the time
- 3 The kind of education and training I want is not available
- 4 I don't qualify
- 5 My manager won't let me
- 6 I don't know how to access them
- 7 I don't have enough time for extra education and training
- 8 My work schedule is too unpredictable
- 9 I cannot afford the type of education and training I want
- 10 Other (specify): [Text Box]

SATISFIED_EMP_OPPT

ET7. How satisfied are you with your [EMPLOYER NAME] employer's educational and training opportunities?

- 1 Very satisfied
- 2 Somewhat satisfied
- 3 Somewhat unsatisfied
- 4 Very unsatisfied

FUTURE_PLAN_DEGREE | FUTURE_PLAN_CERT | FUTURE_PLAN_SKILLS_WORK | FUTURE_PLAN_SKILLS_OUTSIDE |
 FUTURE_PLAN_APPRENTICE | FUTURE_PLAN_LEADERSHIP

ET8. In the future, would you like to:

(Mark all that apply)

- 1 Earn a higher educational degree
- 2 Earn a professional certificate or credential
- 3 Learn new skills at work
- 4 Learn new skills outside of work
- 5 Participate in an internships/apprenticeships
- 6 Participate in a leadership/management program

MODULE F2: LABOR VIOLATIONS

Next, we are interested in learning more about your experiences at your job at [EMPLOYERNAME] with pay and other labor practices.

VIOLATION_OFFCLOCK, VIOLATION_UNPAIDCLOCKED, VIOLATION_CLOCKEDOUT, VIOLATION_CLOCKEDIT, VIOLATION_TIPS, VIOLATION_COMMBONUS, VIOLATION_PTO, VIOLATION_NONE

Display This Question:

If longwork_yrs = less than 1 year

F2.1A Please tell us if you have experienced any of the following **<since you started working>** at your job at [EMPLOYERNAME]. **Mark all that apply.**

[X Choice randomization]

- 1 Have been required to perform tasks before clocking in, or after clocking out
- 2 Have not been paid for all hours that I worked on the clock
- 3 Timekeeping system automatically clocks me out, not paid for work time after that
- 4 Manager changes the time records to shave time from my paycheck.
- 5 Have not received the full and correct amount of money for tips
- 6 Have not been paid commissions or bonuses I was owed
- 7 Have not received pay for paid time off
- 8 None of these

VIOLATION_OFFCLOCK, VIOLATION_UNPAIDCLOCKED, VIOLATION_CLOCKEDOUT, VIOLATION_CLOCKEDIT, VIOLATION_TIPS, VIOLATION_COMMBONUS, VIOLATION_PTO, VIOLATION_NONE

Display This Question:

If longwork_yrs! = less than 1 year,

And longwork_yrs = is displayed

F2.1B Please tell us if you have experienced any of the following **<in the past 12 months>** at your job at [EMPLOYERNAME]. **Mark all that apply.**

[X Choice randomization]

- 1 Have been required to perform tasks before clocking in, or after clocking out
- 2 Have not been paid for all hours that I worked on the clock
- 3 Timekeeping system automatically clocks me out, not paid for work time after that
- 4 Manager changes the time records to shave time from my paycheck.
- 5 Have not received the full and correct amount of money for tips
- 6 Have not been paid commissions or bonuses I was owed
- 7 Have not received pay for paid time off
- 8 None of these

PURCHASE, VIOLATION_TRAINING, VIOLATION_MEALS, VIOLATION_DELIVERY, VIOLATION_THEFT, VIOLATION_NONE

Display This Question:

If longwork_yrs = less than 1 year

F2.2A Please tell us if you have experienced any of the following **<since you started working>** at your job at [EMPLOYERNAME]. **Mark all that apply.**

[X Choice randomization]

- 1 Required to buy uniform, special shoes or equipment without reimbursement
- 2 Have not been paid for time spent completing employer-required training
- 3 Have had meals that I have not eaten deducted from paycheck
- 4 Have not been reimbursed for gas or insurance while making deliveries
- 5 Had to pay or had pay deducted because of register shortages, walk-outs, or theft
- 6 None of these

PURCHASE, VIOLATION_TRAINING, VIOLATION_MEALS,VIOLATION_DELIVERY,VIOLATION_THEFT, VIOLATION_NONE

*Display This Question:**If longwork_yrs! = less than 1 year,**And longwork_yrs = is displayed*

F2.2B Please tell us if you have experienced any of the following **<in the past 12 months>** at your job at [EMPLOYERNAME]. **Mark all that apply.**

[X Choice randomization]

- 1 Required to buy uniform, special shoes or equipment without reimbursement
- 2 Have not been paid for time spent completing employer-required training
- 3 Have had meals that I have not eaten deducted from paycheck
- 4 Have not been reimbursed for gas or insurance while making deliveries
- 5 Had to pay or had pay deducted because of register shortages, walk-outs, or theft
- 6 None of these

VIOLATION_PAYLATE, VIOLATION_PAYMODE,

VIOLATION_PAYWAIT,VIOLATION__PAYNOSTUB,VIOLATION_PAYCASH,VIOLATION_KIDS,VIOLATION_ANYOT,VIOLATION_NONE

*Display This Question:**If longwork_yrs = less than 1 year*

F2.3A Please tell us if you have experienced any of the following **<since you started working>** at your job at [EMPLOYERNAME]. **Mark all that apply.**

[X Choice randomization]

- 1 Paid late by employer
- 2 Paid by voucher / required to go to check cashing company named by my employer
- 3 Asked by my employer to wait to cash paycheck
- 4 Paid by cash with no record or pay stub
- 5 Children under the age of 16 working at your worksite
- 6 None of these

VIOLATION_PAYLATE, VIOLATION_PAYMODE,

VIOLATION_PAYWAIT,VIOLATION__PAYNOSTUB,VIOLATION_PAYCASH,VIOLATION_KIDS,VIOLATION_ANYOT,VIOLATION_NONE

*Display This Question:**If longwork_yrs! = less than 1 year,**And longwork_yrs = is displayed*

F2.3B Please tell us if you have experienced any of the following **<in the past 12 months>** at your job at [EMPLOYERNAME]. **Mark all that apply.**

[X Choice randomization]

- 1 Paid late by employer
- 2 Paid by voucher / required to go to check cashing company named by my employer
- 3 Asked by my employer to wait to cash paycheck
- 4 Paid by cash with no record or pay stub
- 5 Children under the age of 16 working at your worksite
- 6 None of these

VIOLATION_OTUNPAID

*Display This Question:**If longwork_yrs = less than 1 year*

F2.4A **<Since you started working>** at your job at [EMPLOYERNAME], has there been a week when you worked more than 40 hours and were not paid time-and-a-half for the hours you worked beyond 40 hours?

- 1 Yes
- 2 No
- 3 Don't know/refuse

VIOLATION_OTUNPAID

Display This Question:

If longwork_yrs! = less than 1 year,

And longwork_yrs = is displayed

F2.4B **<In the past 12 months>** at your job at [EMPLOYERNAME], has there been a week when you worked more than 40 hours and were not paid time-and-a-half for the hours you worked beyond 40 hours?

- 1 Yes
- 2 No
- 3 Don't know/refuse

MODULE F2: LABOR VIOLATIONS (Continuation)[§]

LT1_FREQ_RECEIVE_LESS_PAY

*Display This Question:**If F2.1A!=8 and is displayed**Or F2.4A=yes*

F2.5A How often did you receive less pay than you were owed or had to wait longer than you should to be paid at work **<since you started working>** at [EMPLOYERNAME]?

- 1 More than once per week
- 2 Once per week
- 3 Every other week
- 4 Monthly
- 5 Several times per year
- 6 Once per year

FREQ_RECEIVE_LESS_PAY

*Display This Question:**If F2.1B!=8 and is displayed**Or F2.4B=yes*

F2.5B How often did you receive less pay than you were owed or had to wait longer than you should to be paid at work **<in the past 12 months>** at [EMPLOYERNAME]?

- 1 More than once per week
- 2 Once per week
- 3 Every other week
- 4 Monthly
- 5 Several times per year
- 6 Once per year

LT1_MONEY_OWED, LT1_MONEY_OWED_AMOUNT

*Display This Question:**If F2.1A!=8 and is displayed**Or F2.4A=yes*

F2.6.A What is your best estimate of the total amount of money you did not receive from your employer **<since you started working>** at [EMPLOYERNAME] because you were paid less than you were owed? (Please enter the amount without spaces or dollar signs).

Text entry for \$ _____

Don't know

MONEY_OWED, MONEY_OWED_AMOUNT

*Display This Question:**If F2.1B!=8 and is displayed**Or F2.4B=yes*

F2.6.B What is your best estimate of the total amount of money you did not receive from your employer **<in the past 12 months>** at [EMPLOYERNAME] because you were paid less than you were owed? (Please enter the amount without spaces or dollar signs).

Text entry for \$ _____

Don't know

LT1_MONEY_OWED_ESTIMATE

*Display This Question:**If F2.6A=Empty and is displayed*

F2.7A It may be difficult to recall the precise amount. What is your best estimate of the total amount of money you did not receive from your employer **<since you started working>** at [EMPLOYERNAME] because you were paid less than you were owed?

- 1 \$1-50 per week
- 2 \$51-\$100
- 3 \$101 -\$150
- 4 \$151-\$200
- 5 \$201-\$250
- 6 More than \$250

MONEY_OWED_ESTIMATE

*Display This Question:**If F2.6B= Empty and is displayed*

F2.7B It may be difficult to recall the precise amount. What is your best estimate of the total amount of money you did not receive from your employer **<in the past 12 months>** at [EMPLOYERNAME] because you were paid less than you were owed?

- 1 \$1-50 per week
- 2 \$51-\$100
- 3 \$101 -\$150
- 4 \$151-\$200
- 5 \$201-\$250
- 6 More than \$250

MODULE F3: COMPLAINTS^s

COMPLAINT_MAKE

*Display This Question:**If has_only_child_labor_violation!=1**And has_only_child_labor_violation_lt1year!=1**And**If has_any_labor_violation=1**Or If has_any_labor_violation_lt1year =1*

F3.1. Did you make a report or complaint (or attempt to do so) about this/any of these problems to your manager, supervisor, employer, or to a government agency?

- 1 Yes
- 2 No
- 3 Don't know/refuse

Skip To: F2.9 If F3.1= 3

COMPLAIN_COWORKER | COMPLAIN_SUPERVISOR | COMPLAIN_MANAGER | COMPLAIN_COMPANY_GRIEVANCE |

COMPLAIN_UNION | COMPLAIN_HR | COMPLAIN_NONPROFIT | COMPLAIN_CITYCOUNTY | COMPLAIN_STATE |

COMPLAIN_FEDERAL | COMPLAIN_OTHER | COMPLAIN_OTH_TEXT |

*Display This Question:**If F3.1 = 1*

F3.2 When you made a report or complaint about this/any of these problems, who did you make it to? **Mark all that apply.**

[X Choice randomization]

- 1 Coworker(s)
- 2 Supervisor
- 3 A manager above my supervisor
- 4 Company grievance procedure
- 5 Union rep or union organizer
- 6 HR (Human Resources)
- 7 Someone at a nonprofit, community organization, or worker center
- 8 City or County Labor Regulator such as an Office of Labor Standards
- 9 State Labor Regulator
- 10 Federal Labor Regulator such as OSHA or the Department of Labor
- 11 Other (specify): [Text Box]

COMPLAINT_RETALIATE

Display This Question:

If F3.1 = 1

F3.3. Did you experience any form of retaliation from your manager/supervisor/employer because you made a report or complaint? **Mark all that apply.**

Choice randomization]

- 1 I was assigned to a worse work schedule
- 2 I was assigned to worse work duties
- 3 My hours or pay were reduced
- 4 I was disciplined or given a warning
- 5 I was demoted
- 6 My manager/supervisor reported me to an immigration authority
- 7 My manager/supervisor threatened me with negative job consequences
- 8 My manager/supervisor threatened me about my immigration status
- 9 I was denied a promotion or raise
- 10 Other (specify): [Text Box]
- 11 None of these

COMPLAINT_WHYNOT

Display This Question:

If F3.1= 2

F3.4. Why didn't you make a report or complaint?
(Please check the **top three reasons** that apply to you).

Choice randomization]

- 1 I did not know how to make a report or complaint
- 2 I didn't think that making a report or complaint would be effective/worth the trouble
- 3 At the time, I didn't know that my employer's actions were illegal
- 4 I was worried that I would be assigned to a worse work schedule
- 5 I was worried that I would be assigned to worse work duties
- 6 I was worried I my hours or pay would be reduced
- 7 I was worried that I would be disciplined or given a warning
- 8 I was worried that I would be demoted
- 9 I was worried that I would be fired
- 10 I was worried my employer would report me to an immigration authority
- 11 I was worried I would be denied a promotion or raise
- 12 Other (specify): [Text Box]
- 13 None of these

INSPECTION_GRADE

Display This Question:

If A6.1=2, 3 or 4

F3.5. What restaurant inspection grade/score does your current workplace have displayed on the front window of the place where you work?

- 1 A
- 2 B
- 3 C
- 4 Less than a C
- 5 There is not a grade on the window of my workplace.
- 6 I don't know

MODULE D: CONTROL AND PTO^s

Next, we would like to learn more about your schedule and benefits.

HOURLYDECIDE

- D1.** Which of the following statements best describes how the times you start and finish work are decided at [EMPLOYER NAME]?
- 1 Starting and finishing times are decided by my employer and I cannot change them on my own.
 - 2 Starting and finishing times are decided by my employer but with my input.
 - 3 I can decide the time I start and finish work, within certain limits.
 - 4 I am entirely free to decide when I start and finish work.
 - 5 When I start and finish work depends on things outside of my control and outside of my employer's control.
 - 6 Don't know/refuse

CHOICETOTALHR

- D2.** How much choice do you have over the **total number** of hours you work each week?
- 1 None
 - 2 Very little
 - 3 A little
 - 4 A moderate amount
 - 5 A lot
 - 6 Don't know/refuse

BENEFITS_PAIDSICK | BENEFITS_PAIDVACATION | BENEFITS_HEALTH | BENEFITS_DENTAL | BENEFITS_PAIDLEAVE | BENEFITS_UNPAIDLEAVE | BENEFITS_RETIREMENTPLAN | BENEFITS_TUITION | BENEFITS_CHILDCARE | BENEFITS_NONE

- D3.** Please look at the following list of benefits that employers sometimes make available to their employees. Which of the benefits on this list can you receive as part of your job at [EMPLOYER NAME]? **Mark all that apply.**
- 1 Paid sick days
 - 2 Paid vacation days
 - 3 Health plan or medical insurance
 - 4 Dental benefits
 - 5 Paid maternity or paternity leave
 - 6 Unpaid maternity or paternity leave which would allow you to return to the same job, or one similar to it
 - 7 A retirement plan other than Social Security
 - 8 Tuition reimbursement for certain types of schooling
 - 9 Company provided or subsidized childcare
 - 10 \emptyset None of these

SICKWORK_YN

- D4.** In the past month, did you ever work at [EMPLOYER NAME] even though you were feeling sick?
- 1 Yes
 - 2 No, I was sick, but I stayed home
 - 3 No, I haven't been sick in the past month

SICKWORK_WHY | SICKWORK_WHY_TEXT

*Display This Question:**If D4 = 1*

- D5.** What were the main reasons you went to work while sick? **Mark all that apply.**
- 1 I didn't have paid sick leave
 - 2 I was afraid I'd get in trouble for calling out sick
 - 3 I couldn't get medical documentation
 - 4 My supervisor pressured me
 - 5 I wanted to save my sick days
 - 6 I couldn't get anyone to cover my shift
 - 7 I needed the pay
 - 8 I didn't want to let down my co-workers
 - 9 Other (specify): [Text Box]

ENCOURAGE_STAYHOME

- A1.6.** Does your [EMPLOYER NAME] workplace encourage workers to stay home if they are feeling sick?
- 1 Always
 - 2 Often
 - 3 Sometimes
 - 4 Rarely
 - 5 Never

CREDIT_PSL_EMPLOYER, CREDIT_PSL_BOSS, CREDIT_PSL_SELF, CREDIT_PSL_GOV, CREDIT_PSL_UNIONS, CREDIT_PSL_OTHER

*Display This Question:**If D3 = 1*

- D.6** Who should get credit for the paid sick leave you have at your job? **Mark all that apply.**
- 1 [EMPLOYER NAME]
 - 2 My manager/boss at [EMPLOYER NAME]
 - 3 Myself
 - 4 Government regulations/laws
 - 5 Unions
 - 6 Other

BLAME_PSL_EMPLOYER, BLAME_PSL_BOSS, BLAME_PSL_SELF, BLAME_PSL_GOV, BLAME_PSL_UNION, BLAME_PSL_OTHER

*Display This Question:**If D3! = 1 and is displayed*

- D.7** Who is to blame for you not having paid sick leave at your job? **Mark all that apply.**
- 1 [EMPLOYER NAME]
 - 2 My manager/boss at [EMPLOYER NAME]
 - 3 Myself
 - 4 Government regulations/laws
 - 5 Unions
 - 6 Other

MODULE O: PAID SAFE AND SICK LEAVE§

LT1_MENTAL_PHYSICAL_ILLNESS

*Display This Question:**If longwork_yrs = less than 1 year*

O1.A **<Since you started working>** at [EMPLOYERNAME], was there a time when you were experiencing mental or physical illness or were injured at the same time you were scheduled to work?

- 1 Yes
- 2 No
- 3 Don't know

MENTAL_PHYSICAL_ILLNESS

*Display This Question:**If longwork_yrs! = less than 1 year,**And longwork_yrs = is displayed*

O1.B **<In the past 12 months>** at [EMPLOYERNAME], was there a time when you were experiencing mental or physical illness or were injured at the same time you were scheduled to work?

- 1 Yes
- 2 No
- 3 Don't know

SYMPTOMS_NAUSEA, SYMPTOMS_HEADACHE, SYMPTOMS_VOMITING, SYMPTOMS_DIARRHEA, SYMPTOMS_COUGH, SYMPTOMS_THROAT, SYMPTOMS_RUNNY_NOSE, SYMPTOMS_BREATHING, SYMPTOMS_FEVER, SYMPTOMS_MUSCLE, SYMPTOMS_SWELLING, SYMPTOMS_RASH, SYMPTOMS_PAIN, SYMPTOMS_MENTAL_HEALTH, SYMPTOMS_CHRONIC, SYMPTOMS_OTHER, SYMPTOMS_NONE, SYMPTOMS_OTHER_TEXT

*Display This Question:**O1.A=Yes**Or**O1.B=Yes*

O2.1 Thinking about the **most recent time that happened**, were you experiencing any of the following on the day you were scheduled to work? **Mark all that apply.**

[X Choice randomization]

- 1 Nausea or cramps
- 2 Headache or migraine
- 3 Vomiting
- 4 Diarrhea
- 5 Cough
- 6 Sore throat
- 7 Runny nose
- 8 Shortness of breath or wheezing
- 9 Fever or chills/sweats
- 10 Muscle or body aches
- 11 Swelling
- 12 Rash
- 13 New or increased pain
- 14 New or increased mental health concern
- 15 Flare-up of chronic condition
- 16 Other (specify): [Text Box]
- 17 None of these

ILL_TIME_OFF

Display This Question:

O1.A=Yes

Or

O1.B=Yes

- O.3** Still thinking about that most recent time that happened, did you take time off from work/call out/miss work?
- 1 Yes
 - 2 No
 - 3 Don't know

ILL_PTO

Display This Question:

O.3=Yes

- O3.1** Were you paid for all or some of the time you took off?
- 1 Yes
 - 2 No

ILL_NOT_PAID_NO_PTO, ILL_NOT_PAID_PTO_BALANCE, ILL_NOT_PAID_MED_DOC, ILL_NOT_PAID_NO_PAY, ILL_NOT_PAID_OTHER, ILL_NOT_PAID_OTHER_TEXT

Display This Question:

O3.1=No

- O3.1A** What were the main reasons you were not paid for all or some of the time you took off from work? **Mark all that apply.**
- 1 I do not get paid sick leave at my job
 - 2 I have paid sick leave, but did not have enough paid sick time
 - 3 I couldn't get required medical documentation
 - 4 I should have been paid but I wasn't
 - 5 Other (specify): [Text Box]

WHYNOT_ILLNESS_COULD_WORK, WHYNOT_ILLNESS_NO_PTO, WHYNOT_ILLNESS_PTO_BALANCE, WHYNOT_ILLNESS_SAVE_PTO, WHYNOT_ILLNESS_TROUBLE, WHYNOT_ILLNESS_SUP_PRESSURE, WHYNOT_ILLNESS_COVER_SHIFT, WHYNOT_ILLNESS_LETDOWN_COWORK, WHYNOT_ILLNESS_MONEY, WHYNOT_ILLNESS_OTHER, WHYNOT_ILLNESS_OTHER_TEXT

Display This Question:

O.3=No

- O3.2** Why didn't you take time off from work the last time you were sick or injured? **Mark all that apply.**
- 1 I felt like I could work anyway
 - 2 I don't get paid sick leave at my job
 - 3 I have paid sick leave, but did not have enough paid sick time
 - 4 I have paid sick leave, but I wanted to save my sick days
 - 5 I was afraid I'd get in trouble for calling out
 - 6 My supervisor pressured me to work
 - 7 I couldn't get anyone to cover my shift
 - 8 I didn't want to let down my co-workers
 - 9 I needed the pay
 - 10 Other (specify): [Text Box]

LT1_APPT_WORK_HOURS

Display This Question:

If longwork_yrs = less than 1 year

- O.4A** <Since you started working> at [EMPLOYERNAME], was there a time when you had an appointment for medical care at the same time you were scheduled to work?
- 1 Yes
 - 2 No
 - 3 Don't know

APPT_WORK_HOURS

Display This Question:

If longwork_yrs! = less than 1 year,

And longwork_yrs = is displayed

- O.4B** <In the past 12 months> at [EMPLOYERNAME], was there a time when you had an appointment for medical care at the same time you were scheduled to work?
- 1 Yes
 - 2 No
 - 3 Don't know

APPT_WORK_HOURS_TIME_OFF

Display This Question:

O.4A=Yes

Or

O.4B=Yes

- O.5** Thinking about that **most recent time** you had an appointment like that, did you take time off from work/call out/miss work?
- 1 Yes
 - 2 No
 - 3 Don't know

LT1_CARETAKER_ILLNESS

Display This Question:

If longwork_yrs = less than 1 year

- O.6A** <Since you started working> at [EMPLOYERNAME], was there a time when you needed to care for a family member who was experiencing mental or physical illness, injury or health condition at the same time you were scheduled to work?
- 1 Yes
 - 2 No
 - 3 Don't know

CARETAKER_ILLNESS

Display This Question:

If longwork_yrs! = less than 1 year,

And longwork_yrs = is displayed

- O.6B** <In the past 12 months> at [EMPLOYERNAME], was there a time when you needed to care for a family member who was experiencing mental or physical illness, injury or health condition at the same time you were scheduled to work?
- 1 Yes
 - 2 No
 - 3 Don't know

CARETAKER_TIME_OFF

Display This Question:

O.6A=Yes

Or

O.6B=Yes

- O.7** Thinking about that **most recent time** you to provide that kind of care, did you take time off from work/call out/miss work?
- 1 Yes
 - 2 No
 - 3 Don't know

LT1_CARETAKER_APPT_WORK_HOURS

Display This Question:

If longwork_yrs = less than 1 year

- O.7A** **<Since you started working>** at [EMPLOYERNAME], was there a time when you needed to accompany a family member to an appointment for medical care at the same time you were scheduled to work?
- 1 Yes
 - 2 No
 - 3 Don't know

CARETAKER_APPT_WORK_HOURS

Display This Question:

If longwork_yrs! = less than 1 year,

And longwork_yrs = is displayed

- O.7B** **<In the past 12 months>** at [EMPLOYERNAME], was there a time when you needed to accompany a family member to an appointment for medical care at the same time you were scheduled to work?
- 1 Yes
 - 2 No
 - 3 Don't know

CARETAKER_WORK_HOURS_TIME_OFF

Display This Question:

O.7A=Yes

Or

O.7B=Yes

- O.8** Thinking about that **most recent time you needed to do that**, did you take time off from work/call out/miss work?
- 1 Yes
 - 2 No
 - 3 Don't know

MODULE RP: RIGHTS & PROTECTIONS§

ENTITLED_PSL, ENTITLED_UNPAID_SICK_LEAVE, ENTITLED_PAID_CARETAKING, ENTITLED_UNPAID_CARETAKING, ENTITLED_PTO
 ENTITLED_PAID_HOLIDAYS, ENTITLED_NOTICE, ENTITLED_OVERTIME, ENTITLED_PAID_MEAL_BREAKS,
 ENTITLED_PAID_REST_BREAKS, ENTITLED_NIGHT_SHIFT_PAY, ENTITLED_SUNDAY_PAY

RP.1A The federal government, states, and some cities and counties have passed laws that set basic labor standards. To the best of your knowledge, are you **entitled by law** to the following in the place where you work?

	Definitely yes	Probably yes	Probably no	Definitely no	Don't know
Paid Sick Days	1	2	3	4	5
Unpaid Sick Days	1	2	3	4	5
Paid job-protected leave for illness or care for new baby/sick family member	1	2	3	4	5
Unpaid job-protected leave for illness or care for new baby/sick family member	1	2	3	4	5
Paid Vacation	1	2	3	4	5
Paid Holidays	1	2	3	4	5
Two weeks' advance notice of work schedule	1	2	3	4	5
Extra pay for overtime hours	1	2	3	4	5
Paid meal breaks	1	2	3	4	5
Paid rest breaks	1	2	3	4	5
Extra pay for night shifts	1	2	3	4	5
Extra pay for work on Sunday	1	2	3	4	5

UNDERSTAND_PSL, UNDERSTAND_UNPAID_SICK_LEAVE, UNDERSTAND_PAID_CARETAKING, UNDERSTAND_UNPAID_CARETAKING, UNDERSTAND_PTO, UNDERSTAND_PAID_HOLIDAYS, UNDERSTAND_NOTICE, UNDERSTAND_OVERTIME, UNDERSTAND_PAID_MEAL_BREAKS, UNDERSTAND_PAID_REST_BREAKS, UNDERSTAND_NIGHT_SHIFT_PAY, UNDERSTAND_SUNDAY_PAY

Display This Question:
 If RP.1= "Definitely yes" or "probably yes" for each law

RP.2 How well do you think you understand the rights and protections you get under the following laws/labor standards?

	Very well	Somewhat well	Not too well	Not well at all
[Selected choices from RP.1]	1	2	3	4
[Selected choices from RP.1]	1	2	3	4
[Selected choices from RP.1]	1	2	3	4
Etc.,				

ENTITLED_FIRED_CAUSE, ENTITLED_DISCUSS_PAY, ENTITLED_HEALTHY_WORK_ENV, ENTITLED_DISCUSS_WORK_COND, ENTITLED_DISCUSS_UNION, ENTITLED_INJURY_COMPENSATION, ENTITLED_FIRED_COMPENSATION, ENTITLED_PROTECT_GEN_DISCRIM, ENTITLED_PROTECT_RACE_DISCRIM, ENTITLED_PROTECT_AGE_DISCRIM, ENTITLED_ACCOM_DISABILITY

RP1B The federal government, states, and some cities and counties have passed laws that provide workers with rights and protections. To the best of your knowledge, are you **entitled by law** to the following protections in the place where you work?

	Definitely yes	Probably yes	Probably no	Definitely no	Don't know
Protections against being fired except for cause	1	2	3	4	5
Speaking to co-workers about your pay	1	2	3	4	5
A workplace free from health risks (e.g. exposure to risks that could impair your long-term health)	1	2	3	4	5
Speaking to co-workers about conditions and treatment at work	1	2	3	4	5
Speaking to coworkers about joining a labor union	1	2	3	4	5
Compensation if you are injured at work	1	2	3	4	5
Compensation if you are fired	1	2	3	4	5
Protections from discrimination because of your gender	1	2	3	4	5
Protections from discrimination because of your race and/or ethnicity	1	2	3	4	5
Protections from discrimination because of your age	1	2	3	4	5
Accommodations for a disability if have/had one	1	2	3	4	5

UNDERSTAND_FIRED_CAUSE, UNDERSTAND_DISCUSS_PAY, UNDERSTAND_HEALTHY_WORK_ENV,
 UNDERSTAND_DISCUSS_WORK_COND, UNDERSTAND_DISCUSS_UNION, UNDERSTAND_INJURY_COMPENSATION,
 UNDERSTAND_FIRED_COMPENSATION, UNDERSTAND_PROTECT_GEN_DISCRIM, UNDERSTAND_PROTECT_RACE_DISCRIM,
 UNDERSTAND_PROTECT_AGE_DISCRIM, UNDERSTAND_ACCOM_DISABILITY

Display This Question:
 If RP.1= "Definitely yes" or "probably yes" for each law

RP.2B How well do you think you understand the rights and protections you get under the following laws/labor standards?

	Very well	Somewhat well	Not too well	Not well at all
[Selected choices from RP.1]	1	2	3	4
[Selected choices from RP.1]	1	2	3	4
[Selected choices from RP.1]	1	2	3	4
Etc.,				

GET_INFO_COWORKERS, GET_INFO_SUPERVISOR, GET_INFO_MANAGEMENT, GET_INFO_GOV
 GET_INFO_UNION, GET_INFO_FAMILY, GET_INFO_FRIEND, GET_INFO_NONPROFIT, GET_INFO_INTERNET, GET_INFO_AI

RP.3 If you wanted more information about rights and protections, who would be you most likely ask? **Please select up to three options.**

- [Choice randomization]*
- 1 Co-workers
- 2 Your supervisor
- 3 Someone else in management
- 4 A government agency
- 5 A union
- 6 A family member
- 7 A friend outside of work
- 8 Non-profit or community organization
- 9 Internet search/website
- 10 AI program (like ChatGPT, Claude, Grok, etc.)

MODULE C2: AUTOMATION[§]

The next questions ask about technology at your workplace.

TECH_PICKUP | TECH_ORDER | TECH_EEORDER | TECH_SELFCHECKOUT | TECH_EECHECKOUT | TECH_SALESOTHER |
TECH_SALESNONE | TECH_SALESOTHER_TEXT

Display This Question:

If embedded variable Automation = 1

- C2.1.** Does your [EMPLOYER NAME] workplace use any of the following technologies to complete or assist with orders and sales? **Mark all that apply.**
- 1 *Customers* use a website or app to order online and pick up in the store.
 - 2 *Customers* use in-store tablets or computers to place their orders.
 - 3 *Employees* use in-store tablets, handheld devices, or computers to place orders for customers.
 - 4 *Customers* use self-checkout registers or apps in the store.
 - 5 *Employees* use tablets or handheld devices to check out customers.
 - 6 Other (specify) [Text Box]
 - 7 None of these

TECH_STOCK | TECH_INVENTORY | TECH_SERVICE | TECH_MONEY | TECH_OTHER | TECH_NONE | TECH_OTHER_TEXT

- C2.3.** Does your [EMPLOYER NAME] workplace use any other workplace technologies? **Mark all that apply.**
- 1 Robots that stock shelves or move boxes
 - 2 Robots, shelf-scanning cameras, or other technology that take inventory
 - 3 Robots that provide customer service
 - 4 A machine that counts money
 - 5 Robots that cook or prepare food
 - 6 Artificial intelligence (AI) that assists with customer service such as a chat bot
 - 7 AI that helps predict demand for certain items or what the busy periods are going to be
 - 8 AI that optimizes the order of tasks, such as picking items in a certain order or taking a particular delivery route
 - 9 Other: [Text Box]
 - 10 None of these

SPEEDVIDEO | SPEEDBADGE | SPEEDHANDHELD | SPEEDREGISTER | SPEEDOBSERVE | SPEEDOTHER | SPEEDNOTRACK |
SPEEDOTHER_TEXT

- C3.3.** At your [EMPLOYER NAME] workplace, how does your employer keep track of the speed of your work? **Mark all that apply.**
- 1 Using video recordings
 - 2 Using a wristband or a badge that I wear
 - 3 Using a handheld device that I carry
 - 4 Using data recorded by the cash register or other checkout devices
 - 5 By my supervisor(s) directly observing me
 - 6 Other (specify) [Text Box]
 - 7 My employer does not track the speed of my work

TECH_MONITOR_LOCATION | TECH_MONITOR_ACTIONS | TECH_MONITOR_INTERACTIONS | TECH_MONITOR_CONVERSATIONS |
TECH_MONITOR_QUALITY

C3.13. Please indicate how much your [EMPLOYER NAME] employer uses technology to monitor...

	A great deal	Somewhat	A little	Not at all
1. Where you go in your workplace	1	2	3	4
2. What you are doing in your workplace	1	2	3	4
3. Who you are with in your workplace	1	2	3	4
4. What you say in your workplace	1	2	3	4
5. The quality of your work	1	2	3	4

MODULE C3: TECH AND WORKER VOICE §

INFLUENCE_NEW_TECH

C3.1. How much say or influence do you have now over the introduction of new technologies at work that might affect your job?

- 1 None
- 2 Very little
- 3 A little
- 4 A moderate amount
- 5 A lot

SHOULD_INFLUENCE_NEW_TECH

C3.2. How much say or influence do you think **you should have** over the introduction of new technologies at work that might affect your job?

- 1 None
- 2 Very little
- 3 A little
- 4 A moderate amount
- 5 A lot

SIGNIF_TECH_CHANGES

C3.3. Have there been any significant changes in the use of technology at your [EMPLOYER] workplace in the last 12 months?

- 1 Yes
- 2 No
- 3 Don't know/Not sure

TECH_CHANGE_NOTICE

*Display This Question:**If C3.3 = 1*

C3.3a. How far in advance of this change were you told that it was going to happen?

- 1 No advance notice
- 2 Less than 1 month
- 3 1-3 months
- 4 3-6 months
- 5 6-12 months
- 6 1 year or more

TECH_CHANGE_INFORMATION

*Display This Question:**If C3.3 = 1*

C3.3b. How much information have you received from [EMPLOYER] about the purpose, functioning, and/or operation of this newly introduced technology?

- 1 None
- 2 Very little
- 3 A little
- 4 A moderate amount
- 5 A lot

MODULE E: HOUR PREFERENCES AND WORK-FAMILY CONFLICT^s

SATISFYWORK2

- E1.** All in all, how satisfied would you say you are with your job at [EMPLOYER NAME]?
- 1 Very satisfied
 - 2 Somewhat satisfied
 - 3 Not too satisfied
 - 4 Not at all satisfied

JOBBEST

- E.1.A** What are the best parts of your job at [EMPLOYER NAME]?
- [Text Box: Essay]

JOBWORST

- E.1.B** What are the worst parts of your job at [EMPLOYER NAME]?
- [Text Box: Essay]

LIKEMOREHOURS

- E2.** Do you agree or disagree? I would like to work more hours at [EMPLOYER NAME].
- 1 Strongly agree
 - 2 Agree
 - 3 Disagree
 - 4 Strongly disagree

LIKEMOREPREDICT

- E3.** Do you agree or disagree? I would like to have a more stable and predictable schedule at [EMPLOYER NAME].
- 1 Strongly agree
 - 2 Agree
 - 3 Disagree
 - 4 Strongly disagree

GETTIMEOFF

- E4.** Do you agree or disagree? It is easy to get time off from [EMPLOYER NAME] when I need it.
- 1 Strongly agree
 - 2 Agree
 - 3 Disagree
 - 4 Strongly disagree

LOWSTAFF

- E4.1.** At [EMPLOYER NAME], how often are there not enough people or staff to get all the work done?
- 1 Always
 - 2 Often
 - 3 Sometimes
 - 4 Rarely
 - 5 Never

LOWSTAFF_NO_BREAKS | LOWSTAFF_WORK_SICK | LOWSTAFF_FAIL_JOB_DUTIES | LOWSTAFF_STAY_LATE |
 LOWSTAFF_SHORT_NOTICE | LOWSTAFF_ONLY_WORKER | LOWSTAFF_ANGRY_CUSTOMERS | LOWSTAFF_INCREASED_STRESS |
 LOWSTAFF_NONE

E4.1.1 In the past month, has understaffing at your [EMPLOYER NAME] workplace led you to...

Mark all that apply.

- 1 Work a shift without taking any breaks
- 2 Come in to work even when you are sick
- 3 Fall behind on your assigned job duties
- 4 Stay late at work
- 5 Get called in on short notice
- 6 Be the only person working
- 7 Deal with angry customers
- 8 Experience increased stress at work
- 9 Experience injury
- 10 None of these

HANDLPERSATWORK

E5. At [EMPLOYER NAME], it is difficult to deal with family or personal matters during working hours.

- 1 Always true
- 2 Often true
- 3 Sometimes true
- 4 Never true

FLEXHANDLEFAMILY

E6. In my work schedule at [EMPLOYER NAME], I have enough flexibility to handle family needs.

- 1 Always true
- 2 Often true
- 3 Sometimes true
- 4 Never true

MGRCOVERSHIFT | ICOVERSHIFT | TRYCOVERSHIFT

E7. If something happens and I can't make it to my scheduled shift...

	Very true	Somewhat true	Not at all true
1. My manager will find someone to cover my shift	1	2	3
2. I am responsible for finding someone to cover my shift	1	2	3
3. My co-workers will try their best to cover for me	1	2	3

APP_PICKUP_SHIFTS | APP_FIND_COVER_SHIFTS | APP_SWAP_SHIFTS | APP_UPDATE_AVAIL | APP_NONE

E7.1. At my [EMPLOYER NAME] workplace, I have access to an app or another online tool that allows me to...**Mark all that apply.**

- 1 Pick up extra available shifts
- 2 Find someone to cover my shift
- 3 Swap shifts with co-workers
- 4 Update my availability
- 5 ∅ None of these

NEWJOB3M

E10. Taking everything into consideration, how likely is it you will make a genuine effort to find a s within the next 3 months.

- 1 Very likely
- 2 Somewhat likely
- 3 Not at all likely

ADVOPP

E11. Which of the following best describes your career advancement opportunities at [EMPLOYER NAME]?

- 1 It is likely that I will be promoted
- 2 It is unlikely that I will be promoted
- 3 There are no promotion opportunities available
- 4 Don't know/refuse

MODULE E2: JOB INSECURITY§

THINKLOSEJOB | INSECUREJOBCHAR | JOBCHANGE

E2.1. Do you agree with the following statements?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
a. I think I might lose my job in the near future.	1	2	3	4	5
b. I feel insecure about the characteristics and conditions of my job in the future.	1	2	3	4	5
c. Chances are, my job will change in a negative way.	1	2	3	4	5

MODULE G: SECOND JOB^s

SECONDJOB

G1. In addition to your job at [EMPLOYER NAME], do you also have another paid job?

1 Yes

2 No

Skip To: End of Block If G1 != 1

INCOMESECONDJOB

G2. Not counting your income from [EMPLOYER NAME], which of the following statements best describes the income you earn from all of your other jobs?

1 It is essential for meeting my basic needs

2 Is it an important component of my budget, but not essential

3 It is nice to have, but I could live comfortably without it

4 Don't know/refuse

MODULE H: DEMOGRAPHICS 2

The following questions ask for a little more information about you.

ENROLLED

- H6.** Are you currently enrolled in school?
- 1 Yes
 - 2 No

DIFSCHEDSCHOOL

*Display This Question:**If H6 = 1**And**If employed = 1*

- H7.** How much do you agree with the following statement:
My work schedule at my main job makes it difficult for me to attend classes, study, and complete my school work.
- 1 Strongly agree
 - 2 Agree
 - 3 Disagree
 - 4 Strongly disagree

EDUC

- H8.** What is the highest grade of school you completed?
- 1 No degree or diploma earned
 - 2 High school diploma/GED
 - 3 Some college
 - 4 Associate's degree
 - 5 Bachelor's degree
 - 6 Master's degree/Advanced degree
 - 7 Don't know/refuse

ESLHOME

- H9.** Do you speak a language other than English at home?
- 1 Yes
 - 2 No

LANGUAGE_AT_HOME

*Display This Question:**If H9 = 1*

- H10.** What language do you speak at home?
[Text Box]__

COHABSTATUS

- H11.** Are you living with a spouse or a partner?
- 1 Married, living with spouse
 - 2 Living with a partner
 - 3 Not living with a spouse or partner
 - 4 Don't know/refuse

SPOUSEEMPLOYMENT

Display This Question:

If H11 = 1

Or H11 = 2

H12. What is your spouse or partner's employment status? **Mark all that apply.**

- 1 My spouse/partner is employed
- 2 My spouse/partner is unemployed
- 3 My spouse/partner is a student
- 4 My spouse/partner is a parent or homemaker
- 5 My spouse/partner is retired (no longer working)
- 6 Other (specify): [Text Box]

SPOUSEINCOME

Display this Question:

If H12=1

H13. Which of the following statements best describes the income your spouse or partner earns from their job?

- 1 It is essential for meeting our basic needs
- 2 Is it an important component of our budget, but not essential
- 3 It is nice to have, but we could live comfortably without it
- 4 My spouse or partner and I keep our incomes separate
- 5 Don't know/refuse

MODULE PV: POLITICAL VIEWS

The next set of questions will ask a little bit about your political views.

PARTY_ID

- PV1.** Generally speaking, do you think of yourself as a...
- 1 Democrat
 - 2 Republican
 - 3 Independent
 - 4 Other

POLITICAL_IDEOLOGY

- PV2.** In general, how would you describe your own political viewpoint?
- 1 Very liberal
 - 2 Liberal
 - 3 Moderate
 - 4 Conservative
 - 5 Very conservative

GENERAL2024_VOTE

- PV3.** Did you vote in the national presidential election held last year in November of 2024?
- 1 Yes, I voted
 - 2 I usually vote, but did not in this election
 - 3 No, I did not vote in this election
 - 4 I am not eligible to vote
 - 5 Other
 - 6 Don't know/refuse

GENERAL2024_CHOICE

*Display This Question:**If PV3 = 1*

- PV4.** In the 2024 United States Presidential election, which candidate did you vote for?
- 1 Kamala Harris (D)
 - 2 Donald Trump (R)
 - 3 Jill Stein (G)
 - 4 Chase Oliver (L)
 - 5 Robert F Kennedy (I)
 - 6 Other

MAGA_SUPPORTER

- PV5.** "Do you consider yourself a supporter of the Make America Great Again or MAGA movement?"
- 1 Yes
 - 2 No
 - 3 Don't know/refuse

FED_MINWAGE15

PV6. Do you favor or oppose raising the federal minimum wage to \$15.00 an hour?

- 1 Strongly favor
- 2 Somewhat favor
- 3 Somewhat oppose
- 4 Strongly oppose
- 5 No answer

MODULE CH: CHILDREN

KIDS

H14. Do you have any children? These might be your biological children, stepchildren, adopted children, or foster children.

- 1 Yes
- 2 No
- 3 Don't know/refuse

KIDS0TO4

Display This Question:

If H14 = 1

H15. Are any of your children under the age of 5?

- 1 Yes
- 2 No
- 3 Don't know/refuse

KID0TO4_GEN1 | KID0TO4_GEN2 | KID0TO4_GEN3 | KID0TO4_GEN4 | KID0TO4_AGE1 | KID0TO4_AGE2 | KID0TO4_AGE3 | KID0TO4_AGE4

Display This Question:
If H15 = 1

H16. For each of your children **under the age of five**, please tell us the child's gender and age.

			Gender	Age	
a.	Child #1	1	Male	1	<1 year
		2	Female	2	1 year
				3	2 years
				4	3 years
				5	4 years
b.	Child #2	1	Male	1	<1 year
		2	Female	2	1 year
				3	2 years
				4	3 years
				5	4 years
c.	Child #3	1	Male	1	<1 year
		2	Female	2	1 year
				3	2 years
				4	3 years
				5	4 years
d.	Child #4	1	Male	1	<1 year
		2	Female	2	1 year
				3	2 years
				4	3 years
				5	4 years

KIDS5T09

Display This Question:
If H14 = 1

H17. Are any of your children between the ages of 5 and 9?

- 1 Yes
- 2 No
- 3 Don't know/refuse

KID5TO9_GEN1 | KID5TO9_GEN2 | KID5TO9_GEN3 | KID5TO9_GEN4 | KID5TO9_AGE1 | KID5TO9_AGE2 | KID5TO9_AGE3 | KID5TO9_AGE4

Display This Question:

If H17 = 1

H18. For each of your children **between the ages of 5 and 9**, please tell us the child's gender and age.

		Gender		Age	
a.	Child #1	1	Male	1	5
		2	Female		years
				2	6
					years
				3	7
			years		
				4	8
					years
				5	9
					years
b.	Child #2	1	Male	1	5
		2	Female		years
				2	6
					years
				3	7
			years		
				4	8
					years
				5	9
					years
c.	Child #3	1	Male	1	5
		2	Female		years
				2	6
					years
				3	7
			years		
				4	8
					years
				5	9
					years
d.	Child #4	1	Male	1	5
		2	Female		years
				2	6
					years
				3	7
			years		
				4	8
					years
				5	9
					years

KIDS10TO14

Display This Question:

If H14 = 1

- H19.** Are any of your children between the ages of 10 and 14?
- 1 Yes
 - 2 No
 - 3 Don't know/refuse

KID10TO14_AGE4

Display This Question:

If H19 = 1

- H20.** For each of your children **between the ages of 10 and 14**, please tell us the child's gender and age.

Gender	Age
--------	-----

a.	Child #1	1	Male	1	10
		2	Female		years
				2	11
				3	years
				4	12
			years		
		4	13		
			years		
		5	14		
			years		
b.	Child #2	1	Male	1	10
		2	Female		years
				2	11
				3	years
				4	12
			years		
		4	13		
			years		
		5	14		
			years		
c.	Child #3	1	Male	1	10
		2	Female		years
				2	11
				3	years
				4	12
			years		
		4	13		
			years		
		5	14		
			years		
d.	Child #4	1	Male	1	10
		2	Female		years
				2	11
				3	years
				4	12
			years		
		4	13		
			years		
		5	14		
			years		

NUMKIDSLIVE0TO14

Display This Question:

If H15 = 1

Or H17 = 1

Or H19 = 1

H21. Thinking of your children between 0 and 14 years of age: Do you live with all, some, or none of these children?

- 1 I live with all of these children
- 2 I live with some of these children
- 3 I do not live with any of these children

KIDS15MORE

Display This Question:

If H14 = 1

H23. Are any of your children age 15 or older?

- 1 Yes
- 2 No
- 3 Don't know/refuse

KID15MORE_GEN1 | KID15MORE_GEN2 | KID15MORE_GEN3 | KID15MORE_GEN4 | KID15MORE_AGE1 | KID15MORE_AGE2 | KID15MORE_AGE3 | KID15MORE_AGE4

Display This Question:

If H23 = 1

H24. For each of your children **age 15 or older**, please tell us the child's gender and age.

		Gender		Age	
a.	Child #1	1	Male	1	15 years
		2	Female	2	16 years
				3	17 years
				4	18 years
				5	19+ years
b.	Child #2	1	Male	1	15 years
		2	Female	2	16 years
				3	17 years
				4	18 years
				5	19+ years
c.	Child #3	1	Male	1	15 years
		2	Female	2	16 years
				3	17 years
				4	18 years
				5	19+ years
d.	Child #4	1	Male	1	15 years
		2	Female	2	16 years
				3	17 years
				4	18 years
				5	19+ years

MODULE H: DEMOGRAPHICS 3

We have a couple more questions about you.

HHCT

H26. Including yourself, how many people currently live in your household?
 _____ [Text Box: Number Required]

SEXUAL_ORIENTATION

H27. Which of the following best describes you?

- 1 Heterosexual or straight
- 1 Gay, lesbian, or homosexual
- 2 Bisexual
- 3 Prefer not to answer

TRANSGENDER

H28. Do you identify as transgender?

- 1 Yes, I identify as transgender
- 2 No, I do not identify as transgender
- 3 Don't know/refuse

TELL_MANAGER_TRANSNB

Display This Question:

If (H2 = 1 OR H1 = 3) & Employed = 1

H29. How soon into your current job did you first start to tell your **manager** that you were transgender and/or non-binary (even if you did not use those words)?

- 1 Before or during the application process
- 2 As soon as I started on the job
- 3 Sometime after I started
- 4 I have never told my manager that I am transgender and/or non-binary
- 5 Don't know/cannot recall

TELL_MANAGER_TRANSNB_YEARS

Display This Question:

If H2A = 3 & (H2 = 1 OR H1 = 3) & Employed = 1

H30. How long after you started did you first start to tell your **manager** that you were transgender and/or nonbinary (even if you did not use those words)?

- 1 Less than 1 year
- 2 1 year
- 3 2 years
- 4 3 years
- 5 4 years
- 6 5 years
- 7 6 years
- 8 7 years
- 9 8 years
- 10 9 years
- 11 10 years or more
- 12 Don't know/refuse

TELL_MANAGER_TRANSNB_MONTHS

Display This Question:

If $H2A = 3$ & ($H2 = 1$ OR $H1 = 3$) & $Employed = 1$

H31. How many months after you started did you first start to tell your **manager** that you were transgender and/or non-binary (even if you did not use those words)?

- 1 1 month
- 2 2 months
- 3 3 months
- 4 4 months
- 5 5 months
- 6 6 months
- 7 7 months
- 8 8 months
- 9 9 months
- 10 10 months
- 11 11 months

TELL_COWORK_TRANSNB

Display This Question:

If ($H2 = 1$ OR $H1 = 3$) & $Employed = 1$

H32. How soon into your current job did you first tell any of your **co-workers** that you were non-binary and/or transgender (even if you did not use those words)?

- 1 Before or during the application process
- 2 As soon as I started on the job
- 3 Sometime after I started
- 4 I have never told my co-workers that I am non-binary and/or transgender
- 5 Don't know/cannot recall

TELL_COWORK_TRANSNB_YEARS

Display This Question:

If ($H2 = 1$ OR $H1 = 3$) & $H2B = 3$ & $Employed = 1$

H33. How long after you started did you first start to tell your **co-workers** that you were non-binary and/or transgender (even if you did not use those words)?

- 1 Less than 1 year
- 2 1 year
- 3 2 years
- 4 3 years
- 5 4 years
- 6 5 years
- 7 6 years
- 8 7 years
- 9 8 years
- 10 9 years
- 11 10 years or more
- 12 Don't know/refuse

TELL_COWORK_TRANSNB_MONTHS

Display This Question:

If $H2A = 3$ & $(H2 = 1 \text{ OR } H1 = 3)$ & $Employed = 1$

- H34.** How many months after you started did you first start to tell your **co-workers** that you were transgender and/or non-binary (even if you did not use those words)?
- 1 1 month
 - 2 2 months
 - 3 3 months
 - 4 4 months
 - 5 5 months
 - 6 6 months
 - 7 7 months
 - 8 8 months
 - 9 9 months
 - 10 10 months
 - 11 11 months

AGE_TELL_OTHERS_TRANSNB | AGE_TELL_OTHERS_TRANSNB2

Display This Question:

If $(H2 = 1 \text{ OR } H1 = 3)$

- H35.** At about what age did you first start to tell others that you were non-binary and/or transgender (even if you did not use those words)?
- 1 Age in years [Text Box]
 - 2 I have never told others that I am transgender and/or non-binary

AGE_THINK_TRANSNB | AGE_THINK_TRANSNB2

Display This Question:

If $(H2 = 1 \text{ OR } H1 = 3)$

- H36.** At about what age did you first start to think you were non-binary and/or transgender] (even if you did not use those words)?
- 1 Age in years [Text Box]
 - 2 Don't know/cannot recall

HONEYPOT2

Display This Question:

If $H3 = 7$

And

If $H3 = 1$ Or $H3 = 2$ Or $H3 = 3$ Or $H3 = 4$ Or $H3 = 5$ Or $H3 = 6$

- H37.** How would you describe your race or ethnicity?
 _____[Text Response Required; Paragraph]

MODULE I: BASIC FINANCIALS

Next, we would like to ask you a few questions about your finances.

HHINCOME

- I1.** What is your household's approximate annual income, including earnings from a job and any other sources of income? Would you say it is:
- 1 Less than \$15,000 per year
 - 2 At least \$15,000 but less than \$25,000 per year
 - 3 At least \$25,000 but less than \$35,000 per year
 - 4 At least \$35,000 but less than \$50,000 per year
 - 5 At least \$50,000 but less than \$75,000 per year
 - 6 At least 75,000 but less than \$100,000 per year
 - 7 At least \$100,000 but less than \$150,000 per year
 - 8 \$150,000 or more per year
 - 9 Don't know/refuse

DIFFPAY

- I2.** Currently, how difficult is it for you to cover your expenses and pay all your bills?
- 1 Very difficult
 - 2 Somewhat difficult
 - 3 Not at all difficult
 - 4 Don't know/refuse

INCVOLATILE

- I3.** In general, would you say that week-to-week your household income...
- 1 Is basically the same
 - 2 Goes up and down a little
 - 3 Goes up and down a lot
 - 4 Don't know/refuse

MODULE AF: AFFORDABILITY*Display this module:**If employed = 1*

MAKE_ENDS_MEET

I.4 How difficult is it for you to make ends meet these days?

- 1 Very difficult
- 2 Somewhat difficult
- 3 Not too difficult

WHY_MAKE_ENDS_MEET_PRICES, WHY_MAKE_ENDS_MEET_HOURS, WHY_MAKE_ENDS_MEET_WAGE,
 WHY_MAKE_ENDS_MEET_BENEFITS, WHY_MAKE_ENDS_MEET_TAXES, WHY_MAKE_ENDS_MEET_CHILDCARE

*Display This Question:**If I.1.4=1 or 2***I.4.1** What makes it hard to make ends meet? **Mark all that apply**

- 1 Prices are too high
- 2 I don't get enough work hours
- 3 My hourly wage is too low
- 4 Benefits (like SNAP or Medicaid) are too low
- 5 Taxes are too high
- 6 Cost of childcare

DESIRED_HOURS_AMOUNT

I.5 If you could get as many hours as you wanted from your employer, how many hours would you work each week at your current job?

____ [Text Box: Number Required]

HOURLY_WAGE_MAKE_ENDS_MEET

I.6 These days, how much do you think someone working full-time hours needs to earn per hour to be able to make ends meet economically? (Please enter the amount without spaces or dollar signs).

____ [Text Box: Number Required]

MODULE 12: UNEMPLOYMENT INSURANCE^S*Display this module:**If unemployed = 1*

UI_APP

I2.1. Have you completed an application for unemployment insurance?

- 1 Yes
- 2 No

UI_APP_NOTCOMPLETED | UI_APP_NOTCOMPLETED_TEXT

*Display This Question:**If I2.1 = 2***I2.2.** Why haven't you completed an application for unemployment insurance?

- 1 I do not believe I am eligible for unemployment insurance
- 2 I don't know how to apply
- 3 I haven't had time to apply yet
- 4 The application was too complicated
- 5 I tried to apply but experienced technical problems with the application
- 6 Other: [Text Box]

UI_APP_RESPONSE

*Display This Question:**If I2.1 = 1***I2.3.** Have you received a response to your unemployment insurance application?

- 1 Yes
- 2 No

UI_BENEFITS

*Display This Question:**If I2.3 = 1***I2.4.** Were you granted unemployment insurance benefits?

- 1 Yes
- 2 No

UI_DENIED

*Display This Question:**If I2.4 = 2***I2.5.** What was the reason your application for unemployment insurance was denied?

_____ [Text Response; Paragraph]

UI_PAYMENT_RECEIVED

*Display This Question:**If I2.3 = 2**Or I2.4 = 1***I2.6.** Have you received an unemployment insurance payment yet?

- 1 Yes
- 2 No

UI_PAYMENT_LAIPOFF_MONTH | UI_PAYMENT_LAIPOFF_YEAR

Display This Question:

If 12.6 = 1

12.7. When did you receive your first unemployment insurance payment?

	Month		Year	
My first payment arrived in...	1	January	1	2020
	2	February	2	2021
	3	March	3	2022
	4	April	4	2023
	5	May	5	2024
	6	June	6	2025
	7	July		
	8	August		
	9	September		
	10	October		
	11	November		
	12	December		

UI_PAYMENT_AMOUNT

Display This Question:

If 12.6 = 1

12.8. How much do you receive in unemployment insurance per week? (For example, if you receive \$300 per week, enter 300).

_____ [Number Required]

UI_PAYMENT_COMPARE

Display This Question:

If 12.8 = 1

And 1.1 = 2 OR 3 or 4

12.9. How does that compare to what you were earning at [EMPLOYER NAME] before you left?

- 1 Much more than I was making
- 2 More than I was making
- 3 About the same as I was making
- 4 Less than I was making
- 5 Much less than I was making

UI_STILLRECEIVE

Display This Question:

If 12.6 = 1

12.10. Are you still receiving unemployment insurance payments?

- 1 Yes
- 2 No
- 3 Don't know/refuse

UI_STOP_MONTHYEAR

Display This Question:
If I2.10 = 2

I2.11. When did you stop receiving unemployment benefits?

	Month	Year
I stopped receiving unemployment benefits in...	1 January	1 2020
	2 February	2 2021
	3 March	3 2022
	4 April	4 2023
	5 May	5 2024
	6 June	6 2025
	7 July	
	8 August	
	9 September	
	10 October	
	11 November	
	12 December	

UI_WHY_STOP_PAYMENTS

Display This Question:
If I2.10 = 2

I2.12 Why did you stop receiving payments?

- 1 I hit the limit
- 2 I did not provide required documentation
- 3 I was flagged as suspected fraud
- 4 I found a job
- 5 I don't know

MODULE J: BENEFITS AND FINANCIAL SERVICES

SNAP_BENEFITS | TANF_BENEFITS | MEDICAID_BENEFITS | SSI_BENEFITS | GOVT_HOUSING_BENEFITS | CHILDCARE_BENEFITS | OTHER_BENEFITS | OTHER_BENEFITS_TEXT

J.1.1 Which of the following benefits have you used at any time in the last 12 months?

Mark all that apply.

- 1 The Supplemental Nutrition Assistance Program (SNAP), formerly known as the Food Stamp Program
- 2 Cash assistance from the Temporary Assistance for Needy Families (TANF) program
- 3 Medicaid, Medical Assistance, the Children's Health Insurance Program (CHIP), or any kind of state or government-sponsored assistance plan based on income or a disability
- 4 Cash from Supplementary Security Income (Social Security/Disability Insurance)
- 5 A federal, state, or local government housing program that lowers your rent, such as a housing voucher or public housing
- 6 Childcare financial assistance (also called vouchers, certificates, or subsidies)
- 7 Other: [Text Box]
- 8 None of the above

Skip To: J2 if J1.1 = 8

SNAP_BENEFITS_LASTMON | TANF_BENEFITS_LASTMON | MEDICAID_BENEFITS_LASTMON | SSI_BENEFITS_LASTMON | GOVT_HOUSING_BENEFITS_LASTMON | CHILDCARE_BENEFITS_LASTMON | OTHER_BENEFITS_LASTMON | NO_BENEFITS_LASTMON | OTHER_BENEFITS_TEXT_LASTMON

Carry forward choices from J.1.1 that are Selected Choices

J.1.2 Which of these have you used in the past month? **Mark all that apply.**

- 1 The Supplemental Nutrition Assistance Program (SNAP), formerly known as the Food Stamp Program
- 2 Cash assistance from the Temporary Assistance for Needy Families (TANF) program
- 3 Medicaid, Medical Assistance, the Children's Health Insurance Program (CHIP), or any kind of state or government-sponsored assistance plan based on income or a disability
- 4 Cash from Supplementary Security Income (Social Security/Disability Insurance)
- 5 A federal, state, or local government housing program that lowers your rent, such as a housing voucher or public housing
- 6 Childcare financial assistance (also called vouchers, certificates, or subsidies)
- 7 Other: [Text Box]
- 8 None of the above

HARDSHIP_FREEFOOD_LASTMONTH

J3. In the past month, did you receive free food or meals because you didn't have enough money?

- 1 Yes
- 2 No

HARDSHIP_HUNGRY_LASTMONTH

J5. In the past month, were you ever hungry, but didn't eat because you couldn't afford enough food?

- 1 Yes
- 2 No

HARDSHIP_CHILD_HUNGRY_LASTMONTH

- J7.** In the past **month**, were children in your household not eating enough because you just couldn't afford enough food?
- 1 Yes
 - 2 No

HARDSHIP_UTILITIES_LASTMONTH

- J9.** In the past **month**, did you not pay the full amount on a gas, oil, and/or electricity bill because you didn't have enough money?
- 1 Yes
 - 2 No

HARDSHIP_INFORMATION_LASTMONTH

- J11.** In the past **month**, did you borrow money from friends or family to help pay bills?
- 1 Yes
 - 2 No

HARDSHIP_MOVEIN_LASTMONTH

- J13.** In the past **month**, did you move in with other people because of financial problems?
- 1 Yes
 - 2 No

HARDSHIP_SHELTER_LASTMONTH

- J15.** In the past **month**, did you stay in a shelter, in an abandoned building, an automobile, or any other place not meant for regular housing, even for one night?
- 1 Yes
 - 2 No

HARDSHIP_DEFERMEDICAL_LASTMONTH

- J17.** In the past **month**, was there anyone in your household who needed to see a doctor or go to the hospital but couldn't go because of the cost?
- 1 Yes
 - 2 No

CONFIDCOPE

- J18.** How confident are you that you could come up with \$400 if an unexpected need arose within the next month?
- 1 I am certain I could come up with the full \$400
 - 2 I could probably come up with \$400
 - 3 I could probably not come up with \$400
 - 4 I am certain I could not come up with \$400
 - 5 Don't know/refuse

MODULE M: MODERATING VARIABLES

M1. The next set of questions asks about help you can receive from people you know.

HELP_LOAN200

M2. Is there someone you could count on if you needed a loan for \$200?

- 1 Definitely yes
- 2 Probably yes
- 3 Maybe
- 4 Probably not
- 5 Definitely not
- 6 Don't know/refuse

HELP_HOUSING

M3. Is there someone you could count on if you needed a place to live?

- 1 Definitely yes
- 2 Probably yes
- 3 Maybe
- 4 Probably not
- 5 Definitely not
- 6 Don't know/refuse

HELP_CHILDCARE

Display This Question:

If H18 = 1

M4. Is there someone you could count on to help with emergency childcare?

- 1 Definitely yes
- 2 Probably yes
- 3 Maybe
- 4 Probably not
- 5 Definitely not
- 6 Don't know/refuse

FRIENDFAMCT

M5. About how many friends or relatives do you have whom you could call on for advice or help if you needed it?

[Number Required]

MODULE K: HEALTH AND WELLBEING

The next questions ask about your health and well-being.

LIFE_LADDER

K1.1 Assume that this ladder is a way of picturing your life. The top of the ladder represents the best possible life for you and the bottom rung of the ladder represents the worst possible life for you.

If the top step is 10 and the bottom step is 1, on **which step of the ladder do you feel you personally stand right now?**



1 Worst 2 3 4 5 6 7 8 9 10 Best

HAPPY

K18. Taken all together, how would you say things are these days? Would you say you are...

- 1 Very happy
- 2 Pretty happy
- 3 Not too happy

HEALTH

K1. In general, how is your health? Would you say it is...

- 1 Excellent
- 2 Very good
- 3 Good
- 4 Fair
- 5 Poor
- 6 Don't know/refuse

HEALTHPLAN

K6. Do you currently have any type of health plan or health coverage?

- 1 Yes
- 2 No
- 3 Don't know/refuse

WHYNOPLANFROMJOB | WHYNOPLAN_TEXT

Display This Question:

If K6 = 2

And Employed = 1

- K7.** What is the main reason you do not have a health plan from your main job?
- 1 I do not work enough hours to qualify
 - 2 I have not worked here long enough to qualify
 - 3 It's too expensive
 - 4 I have a pre-existing condition
 - 5 My employer does not offer a health plan
 - 6 Other (specify): [Text Box]

JOBPLAN | JOBPLAN_TEXT

Display This Question:

If K6 = 1

And Employed = 1

- K8.** Did you get that health coverage through your job, or did you get it some other way?
- 1 I get health coverage through my job
 - 2 I bought a health plan myself
 - 3 I get health coverage through my spouse or parent's health plan
 - 4 I get health coverage from Medicaid or another state or government health plan
 - 5 I get health coverage through my college or university
 - 6 Other (specify): [Text Box]

HEALTHCOVERAGE | HEALTHCOVERAGE_TEXT

Display This Question:

If K6 = 1

And Employed = 0

- K9.** How did you get that health coverage?
- 1 I get health coverage through my previous job/COBRA
 - 2 I bought a health plan myself
 - 3 I get health coverage through my spouse or parent's health plan
 - 4 I get health coverage from Medicaid or another state or government health plan
 - 5 I get health coverage through my college or university
 - 6 Other (specify): [Text Box]

SLEEP

- K10.** During the past month, how would you rate your sleep quality overall?
- 1 Very good
 - 2 Good
 - 3 Fair
 - 4 Poor
 - 5 Don't know/refuse

SOSAD

- K11.** During the past month, how often did you feel so sad that **nothing could cheer you up**?
- 1 All of the time
 - 2 Most of the time
 - 3 Some of the time
 - 4 A little of the time
 - 5 None of the time

NERVOUS

K12. During the past month, how often did you feel **nervous**?

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

RESTLESS

K13. During the past month, how often did you feel **restless**?

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

HOPELESS

K14. During the past month, how often did you feel **hopeless**?

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

EFFORT

K15. During the past month, how often did you feel that **everything was an effort**?

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

WORTHLESS_K6 LONELY

K16. During the past month, how often did you feel **worthless**?

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

LONELY

K16.1. During the past month, how often did you feel **lonely**?

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

MODULE N: EXTREME HEAT^s

The next few questions focus on your home and work temperatures.

KEEP_HOME_COOL
N1 Over the summer, how frequently could you keep the place you live comfortably cool?

- 1 Always
- 2 Often
- 3 Sometimes
- 4 Rarely
- 5 Never

TIME_INDOORS_PCT, TIME_OUTDOORS_PCT, TIME_VEHICLE_PCT
N2 Thinking about a typical shift at [EMPLOYERNAME], about what percent of the time do you spend working:

[Validation: percents should add up to 100%]

- 1 Indoors [Text Box: Number required] %
- 2 Outdoors [Text Box: Number required] %
- 3 In a vehicle [Text Box: Number required] %

FEEL_OVERHEATED
N3 Over the summer, how often did you feel uncomfortably hot or overheated while working at [EMPLOYER NAME]?

- 1 Always
- 2 Often
- 3 Sometimes
- 4 Rarely
- 5 Never

INDOOR_TEMP_GT80

Display This Question:

If N2= indoor greater than 0

N4 Over the summer, how often did the indoor temperature exceed 80 degrees while you were working at [EMPLOYER NAME]?

- 1 Always
- 2 Often
- 3 Sometimes
- 4 Rarely
- 5 Never
- 6 Don't know/refuse

HEAT_CAUSED_FATIGUE, HEAT_CAUSED_NAUSEA, HEAT_CAUSED_HEADACHE, HEAT_CAUSED_RASH, HEAT_CAUSED_FAINING, HEAT_CAUSED_CONFUSION, HEAT_CAUSED_RAPID_PULSE, HEAT_CAUSED_CONVULSIONS, HEAT_CAUSED_OTHER, HEAT_CAUSED_NONE, HEAT_CAUSED_OTHER_TEXT

N5 In the last year, have hot temperatures while working at [EMPLOYER NAME] caused you to experience any of the following symptom? **Mark all that apply.**

- 1 Fatigue, weakness, dizziness, or faintness
- 2 Nausea
- 3 Headache
- 4 Skin rash
- 5 Fainting or loss of consciousness

- 6 Confusion
- 7 Rapid pulse
- 8 Convulsions
- 9 Other (specify): [Text Box]
- 10 None of these

ABLE_INCREASE_AC, ABLE_MANAGER_INCREASE_AC, ABLE_USE_FAN, ABLE_DRINK_WATER, ABLE_COOLER_LOCATION, ABLE_PAID_REST, ABLE_UNPAID_REST, ABLE_UNPAID_END_SHIFT, ABLE_PAID_END_SHIFT, ABLE_OTHER, ABLE_NONE, ABLE_NOT_APPLICABLE, ABLE_OTHER_TEXT

N6 When I feel uncomfortably hot or overheated while working at [EMPLOYER NAME], I am able to... **(Mark all that apply).**

- 1 Turn up the air conditioning (A/C)
- 2 Have my manager turn up the air conditioning (A/C)
- 3 Use a fan or other machine that circulates air
- 4 Get a drink of water
- 5 Move to a cooler location
- 6 Take a paid rest break
- 7 Take an unpaid rest break
- 8 End my shift early (without being paid)
- 9 End my shift early (with full pay for my scheduled hours)
- 10 Other (specify): [Text Box]
- 11 None of these
- 12 Not applicable

HEAT_POLICY

N7 Does [EMPLOYER NAME] have a policy or guidelines about work during periods of extreme heat?

- 1 Yes
- 2 No
- 3 I don't know

POLICY_EXPLANATION

Display This Question:
If N7=1

N7.1 Please tell us about the [EMPLOYERNAME] policy or guidelines about work during periods of extreme heat.
[Text Box]

MODULE L: CHILD - HEALTH§

Now we just have a few questions about your child/children and your experiences as a parent.

HARDARRANGECARE

Display This Question:

If employed = 1

And If kids14 = 1

- L6.** Thinking about the past month, how difficult was it to arrange childcare during your scheduled work hours?
- 1 Very difficult
 - 2 Somewhat difficult
 - 3 A little bit difficult
 - 4 Not at all difficult
 - 5 Don't know/refuse

PARENTHARD

- L9.** Do you agree or disagree? Being a parent is harder than I thought it would be.
- 1 Strongly agree
 - 2 Agree
 - 3 Disagree
 - 4 Strongly disagree

PARENTTRAP

- L10.** Do you agree or disagree? I feel trapped by my responsibilities as a parent.
- 1 Strongly agree
 - 2 Agree
 - 3 Disagree
 - 4 Strongly disagree

CAREMOREWORK

- L11.** Do you agree or disagree? I find that taking care of my child/children is much more work than pleasure.
- 1 Strongly agree
 - 2 Agree
 - 3 Disagree
 - 4 Strongly disagree

TIREDPARENT

- L12.** Do you agree or disagree? I often feel tired, worn out, or exhausted from raising a family.
- 1 Strongly agree
 - 2 Agree
 - 3 Disagree
 - 4 Strongly disagree

Display This Question:

If H19 != 1

- L13.** The next few questions will ask your **youngest child**. Please think about your **youngest child** when you answer these questions.

Skip To: L19 If L13 = Displayed

Display This Question:

If H19 = 1

And H21 != 1

And H23 != 1

And H27 != 1

- L14.** The next few questions will ask about your **oldest child**. Please think about your **oldest child** when you answer these questions.

Skip To: L19 If L14 = Displayed

Display This Question:

If H19 = 1

And

If H21 = 1

And H23 != 1

Or

If H21 != 1

And H23 != 1

And H27 = 1

Or

If H21 = 1

And H23 = 1

- L15.** The next few questions will ask about just one of your children. Thinking about all of your children, please choose the **child closest to 7 years of age**.

Skip To: L19 If L15 = Displayed

Display This Question:

If H19 = 1

And H21 != 1

And H23 = 1

- L16.** Now, the next few questions will ask about just one of your children. Thinking about all of your children, please choose the **child closest to 10 years of age**.

Skip To: L19 If L16 = Displayed

- L17.** We have just a couple more questions about your child.

KIDA_INITIAL

- L19.** Please enter the first letter of the child's first name. We will use this letter to refer to your child in the next question.

_____ [TEXT REQUIRED]

KIDHEALTH

Display This Question:

If L19 != empty

- L21.** In general, would you say [CHILD1]'s health is...
- 1 Excellent
 - 2 Very good
 - 3 Good
 - 4 Fair
 - 5 Poor

Display This Question:

If L19 = empty

- L22.** We'll call your child "A" in the next question.

KIDHEALTH_LASTMONTH

Display This Question:

If L19 = empty

- L24.** In general, would you say A's health is...
- 1 Excellent
 - 2 Very good
 - 3 Good
 - 4 Fair
 - 5 Poor

END: ENDING (Store Number Questions)

Display This Question:
If Employed = 1

We have just three more questions before we enter you into the prize drawing.

Display This Question:
If Employed = 1

END1. Many companies assign each store/establishment an ID number or a name. If your [EMPLOYER NAME] store/establishment has an ID number or name that you know, please enter it here:

Store/establishment ID number: [Text Box]

Store/establishment name: [Text Box]

Display This Question:
If Employed = 1

END2. Please enter the **street address** of the **store/establishment** where you work (If you are not satisfied with the autocomplete option, you can edit the information manually).

Street address autocomplete feature: [Text Box]

END3. Please enter the **phone number** of the **store/establishment** where you work.

Phone Number: [Text Box, phone number validation]

CLOSING SCRIPT**1. You have reached the end of the survey!**

Thank you for taking the time to tell us about how things are going in your life.

Please enter your **email address** below for a chance to win a **[INCENTIVE] gift card!**
[EMAIL ADDRESS]

2. Finally, could you please also enter your **cell phone number?**

We will only use this to notify you if you are a gift card winner or to invite you to participate in our follow-up survey.

Phone Number (XXX-XXX-XXXX):
[PHONE NUMBER]

CUSTOM END-OF-SURVEY MESSAGE

We thank you for your time spent taking this survey. Your response has been recorded.

You can help protect your privacy by clearing your browser's history, cache, cookies, and other browsing data. (Warning: This will also log you out of online services.)