UnderStandingAmericaStudy

UAS 551: KNOWLEDGE, OPINIONS AND EXPERIENCES OF SOCIAL SECURITY DISABILITY PROGRAMS



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Contents

1	Introduction 1.1 Topics	
2	Survey Response And Data 2.1 Sample selection and response rate 2.2 Timings	4
3	Standard Variables	6
4	Background Demographics	11
5	Missing Data Conventions	15
6	Routing Syntax	16
7	Survey with Routing Demographics knowledge information self vignettes introductionsection application barriers application disability Closing	17 27 31 36 37 42 68 74 00

1 INTRODUCTION

This UAS panel survey, titled "UAS551: Knowledge, opinions and experiences of Social Security disability programs", asks respondents about their knowledge, opinions and experiences of Social Security disability programs. This survey is currently in the field. Related surveys are UAS 322 (wave 1), UAS 551 (wave 2) and UAS 710 (wave 3)

1.1 Topics

This survey contains questions (among others) on the following topics: Health, Social Attitudes And Values, Social Networks. A complete survey topic categorization for the UAS can be found here.

1.2 Experiments

This survey includes experiment(s) of the following type(s): Auxiliary Randomization, Information Experiments. Please refer to explanatory comments in the Routing section for detailed information. A complete survey experiment categorization for the UAS can be found here.

1.3 Citation

Each publication, press release or other document that cites results from this survey must include an acknowledgment of UAS as the data source and a disclaimer such as, 'The project described in this paper relies on data from survey(s) administered by the Understanding America Study, which is maintained by the Center for Economic and Social Research (CESR) at the University of Southern California. The content of this paper is solely the responsibility of the authors and does not necessarily represent the official views of USC or UAS.' For any questions or more information about the UAS, contact Tania Gutsche, Project and Panel Manager, Center for Economic and Social Research, University of Southern California, at tgutsche@usc.edu.

2 SURVEY RESPONSE AND DATA

2.1 Sample selection and response rate

The sample selection for this survey was:

All active respondents.

As such, this survey has so far been made available to 15691 UAS participants. Of those 15691 participants, 12375 completed the survey and are counted as respondents. Of those who are not counted as respondents, 283 started the survey without completing and 3033 did not start the survey. The preliminary overall response rate is 78.87%.

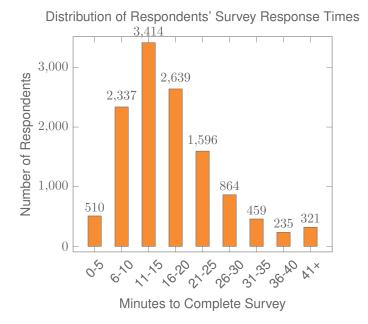
Note: We are unable to provide sample weights for a small number of UAS members (see the Sample and weighting section below for details). If they completed the survey, these members are included in the data set with a weight of zero, but accounted for in the computation of total sample size and survey response rate.%.

The detailed survey response rate is as follows:

UAS551 - Response Overview			
Size of selected sample	15691		
Completed the survey	12375		
Started but did not complete the survey	283		
Did not start the survey	3033		
Response rate	78.87%		

2.2 Timings

All reported timings and response rate statistics are as of June 1, 2025. The survey took respondents an average of 18 minutes, and the full distribution of survey response times is in the figure below. Times per question are available upon request.



2.3 Weighting

Weights are not (yet) available for this survey. Please contact UAS staff with any questions.

3 STANDARD VARIABLES

Each Understanding America Study data contains a series of standard variables, consisting of individual, household and sample identifiers, language indicator, time stamps and a rating by the respondent of how much he or she liked the survey:

- uasid: the identifier of the respondent. This identifier is assigned to a respondent at recruitment and stays with the respondent throughout each and every survey he/she participates in. When analyzing data from multiple surveys, the 'uasid' can be used to merge data sets.
- o uashhid: the household identifier of the respondent. Every member is assigned a household identifier, stored in the variable 'uashhid'. For the primary respondent this identifier equals his or her 'uasid'. All other eligible members of the primary respondent's household (everyone who is 18 or older in the household) who become UAS respondents receive the 'uasid' of the primary respondent as their household identifier. The identifier 'uashhid' remains constant over time for all respondents. Thus it is always possible to find the original UAS household of an UAS panel member (even after they, for example, have moved out to form another household).
- o survhhid: uniquely identifies the household a UAS panel member belongs to in a given survey. For instance, if the primary respondent and his/her spouse are both UAS members at the time of a given survey, they both receive the same 'survhhid' identifier for that survey. If they subsequently split, they receive two different 'survhhid' in subsequent surveys. They, however, always share the same 'uashhid'. The identifier 'survhhid' is set to missing (.) if no other household members are UAS panel members at the time of the survey. Since individuals can answer the same survey at different points in time (which can be relatively far apart if the survey is kept in the field for a prolonged time), it may be possible that, within the same data set, household members have different 'survhhid' reflecting different household compositions at the time they answered the survey. For instance, suppose that the primary respondent and his/her spouse are both UAS members. If the primary respondent answers the survey when he/she is living with the spouse, but the spouse answers the survey when the couple has split, they receive different 'survhhid'. Hence, the variable 'survhhid' identifies household membership of UAS panel members, at the time the respondent answers the survey. Note: in the My Household survey 'survhhid' is set to unknown (.u) for respondents who last participated in the My Household survey prior to January 21, 2015.
- o uasmembers: is the number of other household members who are also UAS panel members at the time of the survey. Since individuals can answer the same survey at different points in time (which can be relatively far apart is the survey is kept in the field for a prolonged time), it may be possible that, within the same data set, the primary respondent of a household has a value of '0', whereas the second UAS household respondent has a value of '1'. Therefore 'uasmembers' should be interpreted as the

number of household and UAS panel members at the time the respondent answers the survey. Note: in the My Household survey 'uasmembers' is set to unknown (.u) for respondents who last participated in the My Household survey prior to January 21, 2015.

- sampleframe: indicates the sampling frame from which the household of the respondent was recruited. All UAS recruitment is done through address based sampling (ABS) in which samples are acquired based on postal records. Currently, the variable 'sampleframe' takes on four values reflecting four distinct sample frames used by the UAS over the year (in future data sets the number of sample frames used for recruitment may increase if additional specific populations are targeted in future recruitment batches):
 - 1. U.S. National Territory: recruited through ABS within the entire U.S.
 - Areas high concentration Nat Ame: recruited through ABS in areas with a high concentration of Native Americans in the zip-code. Within these batches, individuals who are not Native Americans are not invited to join the UAS.
 - 3. Los Angeles County: recruited through ABS within Los Angeles County.
 - 4. California: recruited through ABS within California.

Note: prior to March 6, 2024 this variable was called sampletype and had the following value labels for the above list in UAS data sets:

- 1. Nationally Representative Sample: recruited through ABS within the entire U.S.
- 2. Native Americans: recruited through ABS in areas with a high concentration of Native Americans. Within these batches, individuals who are not Native Americans are not invited to join the UAS.
- 3. LA County: recruited through ABS within Los Angeles County.
- 4. California: recruited through ABS within California.
- **batch**: indicates the batch from which the respondent was recruited. Currently, this variable takes the following values (in future data sets the number of batches may increase as new recruitment batches are added to the UAS):
 - 1. ASDE 2014/01
 - 2. ASDE 2014/01
 - 3. ASDE 2014/01
 - 4. Public records 2015/05
 - 5. MSG 2015/07
 - 6. MSG 2016/01
 - 7. MSG 2016/01
 - 8. MSG 2016/01
 - 9. MSG 2016/02

- 10. MSG 2016/03
- 11. MSG 2016/04
- 12. MSG 2016/05
- 13. MSG 2016/08
- 14. MSG 2017/03
- 15. MSG 2017/11
- 16. MSG 2018/02
- 17. MSG 2018/08
- 18. MSG 2019/04
- 19. MSG 2019/05
- 20. MSG 2019/11
- 21. MSG 2020/08
- 22. MSG 2020/10
- 23. MSG 2021/02
- 24. MSG 2021/08
- 25. MSG 2021/08
- 26. MSG 2022/02
- 27. MSG 2022/02
- 28. MSG 2022/08
- 29. MSG 2022/11
- 30. MSG 2022/11
- 31. MSG 2023/01
- 32. MSG 2023/06
- 33. MSG 2023/09
- 34. MSG 2023/10
- 35. MSG 2025/02

Note: prior to March 6, 2024 this variable had the following value labels for the above list in UAS data sets:

- 1. ASDE 2014/01 Nat.Rep.
- 2. ASDE 2014/01 Native Am.
- 3. ASDE 2014/11 Native Am.
- 4. LA County 2015/05 List Sample
- 5. MSG 2015/07 Nat.Rep.
- 6. MSG 2016/01 Nat.Rep. Batch 2

- 7. MSG 2016/01 Nat.Rep. Batch 3
- 8. MSG 2016/01 Nat.Rep. Batch 4
- 9. MSG 2016/02 Nat.Rep. Batch 5
- 10. MSG 2016/03 Nat.Rep. Batch 6
- 11. MSG 2016/04 Nat.Rep. Batch 7
- 12. MSG 2016/05 Nat.Rep. Batch 8
- 13. MSG 2016/08 LA County Batch 2
- 14. MSG 2017/03 LA County Batch 3
- 15. MSG 2017/11 California Batch 1
- 16. MSG 2018/02 California Batch 2
- 17. MSG 2018/08 Nat.Rep. Batch 9
- 18. MSG 2019/04 LA County Batch 4
- 19. MSG 2019/05 LA County Batch 5
- 20. MSG 2019/11 Nat. Rep. Batch 10
- 21. MSG 2020/08 Nat. Rep. Batch 11
- 22. MSG 2020/10 Nat. Rep. Batch 12
- 23. MSG 2021/02 Nat. Rep. Batch 13
- 24. MSG 2021/08 Nat. Rep. Batch 15
- 25. MSG 2021/08 Nat. Rep. Batch 16
- 26. MSG 2022/02 Nat. Rep. Batch 17 (priority)
- 27. MSG 2022/02 Nat. Rep. Batch 17 (regular)
- 28. MSG 2022/08 Nat. Rep. Batch 18
- 29. MSG 2022/11 LA County Batch 6
- 30. MSG 2022/11 Nat. Rep. Batch 20
- 31. MSG 2023/01 Nat. Rep. Batch 21
- 32. MSG 2023/06 Nat. Rep. Batch 22
- 33. MSG 2023-09 Native Am. Batch 3
- 34. MSG 2023-10 Nat. Rep. Batch 23
- o **primary_respondent**: indicates if the respondent was the first person within the household (i.e. to become a member or whether s/he was added as a subsequent member. A household in this regard is broadly defined as anyone living together with the primary respondent. That is, a household comprises individuals who live together, e.g. as part of a family relationship (like a spouse/child/parent) or in context of some other relationship (like a roommate or tenant).

- hardware: indicates whether the respondent ever received hardware or not. Note: this variable should not be used to determine whether a respondent received hardware at a given point in time and/or whether s/he used the hardware to participate in a survey. Rather, it indicates whether hardware was ever provided:
 - 1. None
 - 2. Tablet (includes Internet)
- **language**: the language in which the survey was conducted. This variable takes a value of 1 for English and a value of 2 for Spanish.
- start_date (start_year, start_month, start_day, start_hour, start_min, start_sec): indicates the time at which the respondent started the survey.
- end_date (end_year, end_month, end_day, end_hour, end_min, end_sec): indicates the time at which the respondent completed the survey.
- o cs_001: indicates how interesting the respondent found the survey.

4 BACKGROUND DEMOGRAPHICS

Every UAS survey data set includes demographic variables, which provide background information about the respondent and his/her household. Demographic information such as age, ethnicity, education, marital status, work status, state of residence, family structure is elicited every quarter through the "My Household" survey. The demographic variables provided with each survey are taken from the most recent 'MyHousehold' survey answered by the respondent. If at the time of a survey, the information in "My Household" is more than three months old, a respondent is required to check and update his or her information before being able to take the survey.

The following variables are available in each survey data set:

- o gender: the gender of the respondent.
- dateofbirth_year: the year of birth of the respondent.
- o age: the age of the respondent at the start of the survey.
- o **agerange**: if the respondent's age cannot be calculate due to missing information, 'agerange' indicates the approximate age. Should a value for both the 'age' and 'agerange' be present, then 'age' takes precedence over 'agerange'.
- o citizenus: indicates whether the respondent is a U.S. citizen.
- o bornus: indicates whether the respondent was born in the U.S.
- **stateborn**: indicates the state in which the respondent was born. This is set to missing (.) if the respondent was not born in the U.S.
- **countryborn**: indicates the country in which the respondent was born. This is set to missing (.) if the respondent was born in the U.S.
- **countryborn_other**: indicates the country of birth if that country is not on the drop down list of countries shown to the respondent'.
- **statereside**: the state in which the respondent is living.
- immigration_status: indicates whether the respondent is an immigrant. It takes one
 of the following values: 0 Non-immigrant, 1 First generation immigrant (immigrant who
 migrated to the U.S), 2 Second generation immigrant (U.S.-born children of at least
 one foreign-born parent), 3 Third generation immigrant (U.S.-born children of at least
 one U.S.-born parent, where at least one grandparent is foreign-born), or 4 Unknown
 immigrant status.
- maritalstatus: the marital status of the respondent.
- **livewithpartner**: indicates whether the respondent lives with a partner.

- education: the highest level of education attained by the respondent.
- hisplatino: indicates whether the respondent identifies him or herself as being Hispanic or Latino. This variable is asked separately from race.
- hisplatinogroup: indicates which Hispanic or Latino group a respondent identifies him or herself with. This is set to missing (.) if the respondent does not identify him or herself as being Hispanic or Latino.
- white: indicates whether the respondent identifies him or herself as white (Caucasian).
- **black**: indicates whether the respondent identifies him or herself as black (African-American).
- nativeamer: indicates whether the respondent identifies him or herself as Native American (American Indian or Alaska Native).
- asian: indicates whether the respondent identifies him or herself as Asian (Asian-American).
- pacific: indicates whether the respondent identifies him or herself as Native Hawaiian or Other Pacific Islander.
- o race: indicates the race of the respondent as singular (e.g., '1 White' or '2 Black') or as mixed (in case the respondent identifies with two or more races). The value '6 Mixed' that the respondent answered 'Yes' to at least two of the single race categories. This variable is generated based on the values of the different race variables (white, black, nativeamer, asian, pacific). This composite measure is not conditional on hisplatino, so an individual may identify as Hispanic or Latino, and also as a member of one or more racial groups.
- working: indicates whether the respondent is working for pay.
- o sick_leave: indicates whether the respondent is not working because sick or on leave.
- unemp_layoff: indicates whether the respondent is unemployed or on lay off.
- unemp_look: indicates whether the respondent is unemployed and looking for a job.
- retired: indicates whether the respondent is retired.
- o disabled: indicates whether the respondent has a disability.
- o If_other: specifies other labor force status.
- laborstatus: indicates the labor force status of the respondent as singular (e.g., '1 Working for pay' or '2 On sick or other leave') or as mixed (in case the respondent selects two or more labor statuses). The value '8 Mixed' indicates that the respondent answered 'Yes' to at least two of the single labor force status variables. This variable is generated based on the values of the different labor status variables (working, sick_leave, unempl_layoff, unempl_look, retired, disabled, lf_other).

- employmenttype: indicates the employment type of the respondent (employed by the government, by a private company, a nonprofit organization, or self-employed).
 This is set to missing (.) if the respondent is not currently working or currently on sick or other leave.
- workfullpart: indicates whether the respondent works full or part-time. This is set to missing (.) if the respondent is not currently working or currently on sick or other leave.
- hourswork: indicates the number of hours the respondent works per week. This is set to missing (.) if the respondent is not currently working or currently on sick or other leave.
- **hhincome**: is the total combined income of all members of the respondent's household (living in their household) during the past 12 months.
- **anyhhmember**: indicates whether there were any members in the respondent's household at the time he/she answered the survey as reported by the respondent.
- hhmembernumber: indicates the number of household members in the respondent's household at the time of the survey as reported by the respondent. It may be that 'anythmember' is 'Yes', but 'hhmembernumber' is missing if the respondent did not provide the number of household members at the time of the survey.
- hhmemberin_#: indicates whether a household member is currently in the household as reported by the respondent. Household members are never removed from the stored household roster and their information is always included in survey data sets. The order of the roster is the same order in which household members were specified by the respondent in the 'MyHousehold' survey. The order is identified by the suffix _# (e.g., _1 indicates the first household member, _2 the second household member, etc.).

As an example, if the first household member is in the household at the time of the survey, 'hhmemberin_1' is set to '1 HH Member 1 is in the HH'; if he/she has moved out, 'hhmemberin_1' is set to '0 HH member 1 is no longer in the HH'. Since information of other household members (stored in the variables listed below) is always included in survey data sets, information about 'hhmemberin_1' is available whether this person is still in the household or has moved out.

- **hhmembergen**_#: indicates the gender of another household member as reported by the respondent.
- hhmemberage_#: indicates the age of another household member. The age is derived from the month and year of birth of the household member as reported by the respondent.
- **hhmemberrel**_#: indicates the relationship of the respondent to the other household member as reported by the respondent.

- o hhmemberuasid_#: is the 'uasid' of the other household member if this person is also a UAS panel member. It is set to missing (.) if this person is not a UAS panel member at the time of the survey. Since this identifier is directly reported by the respondent (chosen from a preloaded list), it may differ from the actual (correct) 'uasid' of the UAS member it refers to because of reporting error. Also, this variable should not be used to identify UAS members in a given household at the time of the survey. This is because the variables 'hhmemberuasid_#' are taken from the most recent 'My Household' and changes in household composition involving UAS members may have occurred between the time of the respondent answered 'My Household' and the time the respondent answers the survey. To follow UAS members of a given household, it is advised to use the identifiers 'uashhid' and 'survhhid'.
- **lastmyhh**_date: the date on which the demographics variables were collected through the 'My Household' survey.

In addition, data sets created after May 8, 2025 include an urbanicity variable. It is based on panel members' current census tract of residence and the 2010 Rural-Urban Commuting Area (RUCA) codes released by the US Department of Agriculture's Economic Research Service. To preserve confidentiality, the UAS collapses the 10 primary RUCA codes to 4 levels: Metropolitan, Micropolitan, Small/Rural, and Unknown. The Metropolitan level corresponds to primary RUCA codes 1-3, the Micropolitian level corresponds to RUCA codes 4-6, and the Small/Rural UAS classification corresponds to RUCA codes 7-10.

For detailed information and definitions of the 10 primary RUCA codes, please visit the USDA ERS Rural-Urban Commuting Area Codes site. Surveys conducted completely prior to May 8, 2025 will have an urbanicity data set available on request.

5 MISSING DATA CONVENTIONS

Data files provide so-called clean data, that is, answers given to questions that are not applicable anymore at survey completion (for example because a respondent went back in the survey and skipped over a previously answered question) are treated as if the questions were never asked. In the data files all questions that were asked, but not answered by the respondent are marked with (.e). All questions never seen by the respondent (or any dirty data) are marked with (.a). The latter may mean that a respondent did not view the question because s/he skipped over it; or alternatively that s/he never reached that question due to a break off. If a respondent did not complete a survey, the variables representing survey end date and time are marked with (.c). Household member variables are marked with (.m) if the respondent has less household members (e.g. if the number of household members is 2, any variables for household member 3 and up are marked with (.m).

UAS provides data in STATA and CSV format. Stata data sets come with include variable labels that are not available in the CSV files. Value labels are provided for single-response answer option. In STATA these labels will include the labels 'Not asked' and 'Not answered' for (.a) and (.e), and will show in tabulations such as 'tab q1, missing'. For multiple-response questions a binary variable is created for each answer option indicating whether the option was selected or not. A summary variable is also provided in string format reflecting which options were selected and in which order. For example, if a question asked about favorite animals with options cat, dog, and horse, then if a respondent selected horse and then cat, the binary variables for horse and cat will be set to yes, while the overall variable would have a string value of '3-1'. If no answer was given, all binary variables and the summary variable will be marked with '.e'.

Questions that are asked multiple times are often implemented as so-called array questions. Supposing the name of such question was Q1 and it was asked in 6 different instances, your data set would contain the variables Q1_1_ to Q1_6_. To illustrate, if a survey asked the names of all children, then child_1_ would contain the name of the first child the respondent named and so on.

More information about the UAS data in general can be found on the UAS Data Pages web site.

6 ROUTING SYNTAX

The survey with routing presented in the next section includes all of the questions that make up this survey, the question answers when choices were provided, and the question routing. The routing includes descriptions of when questions are grouped, conditional logic that determines when questions are presented to the respondent, randomization of questions and answers, and fills of answers from one question to another.

If you are unfamiliar with conditional logic statements, they are typically formatted so that *if* the respondent fulfills some condition (e.g. they have a cellphone or a checking account), *then* they are presented with some other question or the value of some variable is changed. If the respondent does not fulfill the condition (e.g. they are not a cellphone adopter or they do not have a checking account), something *else* happens such as skipping the next question or changing the variable to some other value. Some of the logic involved in the randomization of questions or answers being presented to the respondent is quite complex, and in these instances there is documentation to clarify the process being represented by the routing.

Because logic syntax standards vary, here is a brief introduction to our syntax standards. The syntax used in the conditional statements is as follows: '=' is equal to, '<' is less than, '>' is greater than, and '!=' is used for does not equal. When a variable is set to some number N, the statement looks like 'variable := N'.

The formatting of the questions and routing are designed to make it easier to interpret what is occurring at any given point in the survey. Question ID is the bold text at the top of a question block, followed by the question text and the answer selections. When a question or variable has associated data, the name links to the appropriate data page, so you can easily get directly to the data. Text color is used to indicate the routing: red is conditional logic, gold is question grouping, green is looping, and orange is used to document randomization and other complex conditional logic processes. The routing is written for a computer to parse rather than a human to read, so when the routing diverges significantly from what is displayed to the respondent, a screenshot of what the respondent saw is included.

The name of the randomization variables are defined in proximity to where they are put into play, and like the question ID the names of the randomization variables can be used to link directly to the associated data page.

7 SURVEY WITH ROUTING

reward := 9

FLCurrentYear := date("Y")

main_begintime := date("Y-m-d H:i:s")

intro1 (intro in section Base)

Thank for your interest in this study. In this survey, we are interested in your **views** and **knowledge** about the Social Security disability program.

Start of section **Demographics**

currentage := calcAge(dateofbirth_year, dateofbirth_month, dateofbirth_day)

IF currentage = EMPTY THEN

currentage (current calculated age in section Demographics) What is your current age?

RANGE 0..120

END OF IF

End of section **Demographics**

Start of section Knowledge

mod1_intro (Section Knowledge)

We now want to ask you some general questions. Please use the text boxes and write as much as you feel like. Your opinions and thoughts are important to us! There is no right or wrong answer.

open1 (goal of a good disability program in section Knowledge)

In your view, what would be a "good" social security program for individuals with a **disability**? What would be the goal of a good disability program? STRING

open2 (which programs can help people with work-limiting disability in section Knowledge) Which programs do you know of that can help people with a work-limiting disability? Please write the names of programs that you know of. STRING

/* The answer options in pu001 are presented in random order per variables pur1_order with values:

o 1 Public insurance program

- o 2 Pension plan/annuity
- 3 Assistance program for individuals in need
- o 4 Welfare program
- o 5 Other

Note: 'Other' is always presented last. */

IF sizeof(pur1_order) = 0 THEN

```
pur1_order := shuffleArray(array(1 \rightarrow1, 2 \rightarrow2, 3 \rightarrow3, 4 \rightarrow4)) pur1_order(5) := 5
```

END OF IF

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

pur1 (characterize Social Security disability programs in section Knowledge)

The Social Security Administration administers programs that provide support for disabled individuals.

How would you characterize the Social Security disability programs? Please select all that apply.

- 1 Public insurance program
- 2 Pension plan/annuity
- 3 Assistance program for individuals in need
- 4 Welfare program
- 5 Other, please specify:

pur1_other (other characterize Social Security disability programs in section Knowledge)
STRING

END OF GROUP

```
pur2_questions := array(1 \rightarrow"pur2a", 2 \rightarrow"pur2b", 3 \rightarrow"pur2c", 4 \rightarrow"pur2d", 5 \rightarrow"pur2e")
```

/* The pur2 questions are presented in random order per variables pur2_order with values:

- 1 Social Security disability benefits are important help for people who need it
- o 2 Too many people receive Social Security disability benefits who do not need it
- 3 There are many people with disabilities in the U.S. who need Social Security disability benefits but do not currently receive them
- 4 I would definitely apply for disability benefits if I had a health problem that prevented me from working

o 5 There is a stigma attached to receiving disability benefits

*/

IF sizeof(pur2_order) = 0 THEN

pur2_order := shuffleArray(array(1 \rightarrow 1, 2 \rightarrow 2, 3 \rightarrow 3, 4 \rightarrow 4, 5 \rightarrow 5))

END OF IF

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

pur2_intro (Section Knowledge)

To what extent do you agree or disagree with the following statements?

SUBGROUP OF QUESTIONS

LOOP FROM 1 TO 5

/* Questions pur2a to pur2e are asked in random order per variables pur2_order. */

END OF LOOP

END OF SUBGROUP

END OF GROUP

pur3 (funds that pay for Social Security Disability benefits in section Knowledge)
To the best of your knowledge, where do the funds that pay for Social Security Disability benefits come from? Please select all that apply.

- 1 Federal Income taxes
- 2 State and local sales taxes
- 3 Government assets
- 4 National debt
- 5 Social Security payroll taxes paid by employers and employees

/* The answer options in sc01 are presented in random order per variables sco1_order with values:

- o 1 Mental health disorders (e.g. depression)
- o 2 Cancer
- o 3 Musculoskeletal conditions (e.g. rheumatoid arthritis)
- o 4 Neurological disorders (e.g. Alzheimer's disease; multiple sclerosis)
- o 5 Non-communicable chronic diseases (e.g. diabetes, heart disease)

- o 6 Short-term work-related injury or illness
- o 7 Short-term non-work injury or illness
- o 8 Pregnancy
- o 9 Fraud (i.e. people making false claims about having a disability)
- o 10 Others

Note: 'Others' is always presented last. */

IF sizeof(sco1_order) = 0 THEN

```
sco1_order := shuffleArray(array(1 \rightarrow1, 2 \rightarrow2, 3 \rightarrow3, 4 \rightarrow4, 5 \rightarrow5, 6 \rightarrow6, 7 \rightarrow7, 8 \rightarrow8, 9 \rightarrow9)) sco1_order(10) := 10
```

END OF IF

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

sco1 (main causes of disability benefits in section Knowledge)

What do you think are some of the main causes of disability among disability program beneficiaries? Please select **three** that you think are the main cause of disability benefits in the United States.

- 1 Mental health disorders (e.g. depression)
- 2 Cancer
- 3 Musculoskeletal conditions (e.g. rheumatoid arthritis)
- 4 Neurological disorders (e.g. Alzheimer's disease; multiple sclerosis)
- 5 Non-communicable chronic diseases (e.g. diabetes, heart disease)
- 6 Short-term work-related injury or illness
- 7 Short-term non-work injury or illness
- 8 Pregnancy
- 9 Fraud (i.e. people making false claims about having a disability)
- 10 Others, please specify:

sco1_other (other main causes of disability benefits in section Knowledge) STRING

END OF GROUP

IF cardinal(sco1) > 1 THEN

```
sco1a_order := sco1_order
```

LOOP FROM 1 TO 10

IF not(sco1_order(cnt) IN sco1) THEN

sco1a_order(cnt) := empty

END OF IF

END OF LOOP

sco1a (main cause of disability benefits in section Knowledge)

Among these, which do you think is the most common cause of disability?

- 1 Mental health disorders (e.g. depression)
- 2 Cancer
- 3 Musculoskeletal conditions (e.g. rheumatoid arthritis)
- 4 Neurological disorders (e.g. Alzheimer's disease; multiple sclerosis)
- 5 Non-communicable chronic diseases (e.g. diabetes, heart disease)
- 6 Short-term work-related injury or illness
- 7 Short-term non-work injury or illness
- 8 Pregnancy
- 9 Fraud (i.e. people making false claims about having a disability)
- 10 Others ((other main causes of disability benefits()))

END OF IF

/* The questions about Social Security retirement, Social Security disability, and SNAP/food stamp benefits presented in random order per variable sco3_randomizer with values:

- o 1 Social Security retirement, Social Security disability, SNAP/food stamp benefits
- 2 Social Security retirement, SNAP/food stamp benefits, Social Security disability
- 3 SNAP/food stamp benefits, Social Security retirement, Social Security disability
- o 4 SNAP/food stamp benefits, Social Security disability, Social Security retirement
- o 5 Social Security disability, Social Security retirement, SNAP/food stamp benefits
- o 6 Social Security disability, SNAP/food stamp benefits, Social Security retirement

*/

IF sco3_randomizer = EMPTY THEN

sco3_randomizer := mt_rand(1,6)

END OF IF

IF sco3_randomizer = 1 THEN

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

sco3a (percentage of adults receive Social Security retirement in section Knowledge) What percentage of adults in the US do you think currently receive **Social Security retirement** benefits? If you don't know, please give us your best estimate.

sco3b (percentage of adults receive Social Security disability in section Knowledge)

What percentage of adults in the US do you think currently receive **Social Security disability** benefits? If you don't know, please give us your best estimate.

sco3c (percentage of adults receive SNAP/food stamp benefits in section Knowledge)

What percentage of adults in the US do you think currently receive **SNAP/food stamp** benefits benefits? If you don't know, please give us your best estimate.

slider_script_group (Section Knowledge)

Please enter a number between 0% and 100% for all sliders.

END OF GROUP

ELSEIF sco3_randomizer = 2 THEN

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

sco3a (percentage of adults receive Social Security retirement in section Knowledge) What percentage of adults in the US do you think currently receive **Social Security retirement** benefits? If you don't know, please give us your best estimate.

sco3c (percentage of adults receive SNAP/food stamp benefits in section Knowledge)

What percentage of adults in the US do you think currently receive **SNAP/food stamp benefits** benefits? If you don't know, please give us your best estimate.

sco3b (percentage of adults receive Social Security disability in section Knowledge)

What percentage of adults in the US do you think currently receive **Social Security disability** benefits? If you don't know, please give us your best estimate.

slider_script_group (Section Knowledge)

Please enter a number between 0% and 100% for all sliders.

END OF GROUP

ELSEIF sco3_randomizer = 3 THEN

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

sco3c (percentage of adults receive SNAP/food stamp benefits in section Knowledge) What percentage of adults in the US do you think currently receive **SNAP/food stamp benefits** benefits? If you don't know, please give us your best estimate.

sco3a (percentage of adults receive Social Security retirement in section Knowledge)

What percentage of adults in the US do you think currently receive **Social Security retirement** benefits? If you don't know, please give us your best estimate.

sco3b (percentage of adults receive Social Security disability in section Knowledge)

What percentage of adults in the US do you think currently receive **Social Security disability** benefits? If you don't know, please give us your best estimate.

slider_script_group (Section Knowledge)

Please enter a number between 0% and 100% for all sliders.

END OF GROUP

ELSEIF sco3_randomizer = 4 THEN

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

sco3c (percentage of adults receive SNAP/food stamp benefits in section Knowledge) What percentage of adults in the US do you think currently receive **SNAP/food stamp benefits** benefits? If you don't know, please give us your best estimate.

sco3b (percentage of adults receive Social Security disability in section Knowledge)

What percentage of adults in the US do you think currently receive **Social Security disability** benefits? If you don't know, please give us your best estimate.

sco3a (percentage of adults receive Social Security retirement in section Knowledge)

What percentage of adults in the US do you think currently receive **Social Security retirement** benefits? If you don't know, please give us your best estimate.

slider_script_group (Section Knowledge)

Please enter a number between 0% and 100% for all sliders.

END OF GROUP

ELSEIF sco3_randomizer = 5 THEN

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

sco3c (percentage of adults receive SNAP/food stamp benefits in section Knowledge) What percentage of adults in the US do you think currently receive **SNAP/food stamp benefits** benefits? If you don't know, please give us your best estimate.

sco3a (percentage of adults receive Social Security retirement in section Knowledge)

What percentage of adults in the US do you think currently receive **Social Security retirement** benefits? If you don't know, please give us your best estimate.

sco3b (percentage of adults receive Social Security disability in section Knowledge)

What percentage of adults in the US do you think currently receive **Social Security disability** benefits? If you don't know, please give us your best estimate.

slider_script_group (Section Knowledge)

Please enter a number between 0% and 100% for all sliders.

END OF GROUP

ELSEIF sco3_randomizer = 6 THEN

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

sco3c (percentage of adults receive SNAP/food stamp benefits in section Knowledge) What percentage of adults in the US do you think currently receive **SNAP/food stamp benefits** benefits? If you don't know, please give us your best estimate.

sco3b (percentage of adults receive Social Security disability in section Knowledge)

What percentage of adults in the US do you think currently receive **Social Security disability** benefits? If you don't know, please give us your best estimate.

sco3a (percentage of adults receive Social Security retirement in section Knowledge)

What percentage of adults in the US do you think currently receive **Social Security retirement** benefits? If you don't know, please give us your best estimate.

slider_script_group (Section Knowledge)

Please enter a number between 0% and 100% for all sliders.

END OF GROUP

END OF IF

LOOP FROM 1 TO 10

sco5 (how much beneficiaries receive from Social Security disability in section Knowledge)

On average, how much money do you think beneficiaries receive from Social Security disability? Please give us your best guess.

RANGE 0..99999

IF sco5 = RESPONSE AND (sco5 < 100 OR sco5 > 9999) THEN

```
FL_sco5 := number_format(str_replace(",", "", sco5), 0)

sco5_fol (confirmation average beneficiaries receive in section Knowledge)
You said that, on average, beneficiaries receive $(()) per month. Is that your best guess?
1 Yes
2 No, I made a mistake
3 I prefer not to answer this question

IF sco5_fol IN (1,3) THEN

I

END OF IF

ELSE
I

END OF IF
```

END OF LOOP

sco6 (statements correct about disability benefits in section Knowledge)

Which of the following statements do you think are correct? Please select all that apply.

- 1 A very small percentage of disabled worker beneficiaries are younger than 35 (less than 5 out of 100)
- 2 A majority (more than half) of disabled worker beneficiaries start receiving benefits when young and remain on the program for the rest of their lives
- 3 A majority (more than half) of disabled worker beneficiaries are older than 50.
- 4 A small percentage (less than 5 out of 100) of disabled worker beneficiaries have difficulty conducting an activity of daily living, such as getting around inside the house or getting into or out of bed.
- 5 Most disabled worker beneficiaries live in households with income levels below \$25,000 per year
- 6 None of the above
- /* Question sc07 on veterans on disability is asked in the survey at one of two places per variable sco7_position with values:
 - o 1 After sco6
 - o 2 After val2

*/

IF sco7_position = EMPTY THEN

 $sco7_position := mt_rand(1,2)$

END OF IF

IF sco7_position = 1 THEN

sco7 (percentage of disability beneficiaries are veterans in section Knowledge) Some of the Social Security disability recipients are veterans. What percentage of people who get disability benefits from Social Security do you think are veterans?

END OF IF

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

rul1_intro (Section Knowledge)

Please answer the following True/False questions about the Social Security disability programs:

SUBGROUP OF QUESTIONS

rul1a (20-year-old very unlikely to ever have disability in section Knowledge)
A 20-year-old in the United States today is very unlikely (less than a 10% chance) to ever have a disability that prevents them from working

rul1b (Social Security disability programs provide beneficiaries with access to Medicare or Medicaid in section Knowledge)

The Social Security disability programs provide access to Medicare or Medicaid

END OF SUBGROUP

END OF GROUP

rul2 (how easy to obtain disability benefits in section Knowledge)

How easy or hard do you think it is to obtain disability benefits from Social Security?

- 1 Very easy
- 2 Easy
- 3 Neither easy nor hard
- 4 Hard
- 5 Very hard

rul3 (how long takes from apply to receie in section Knowledge)

On average, how long do you think it takes from the time an individual applies for disability until they start receiving benefits? Your best guess is ok.

- 1 Less than 1 month
- 2 1-6 months
- 3 6 to 12 months
- 4 1 to 2 years

5 More than 2 years

End of section **Knowledge**

Start of section Information

is001 (Section Information)

Social Security Disability Insurance (SSDI) is a federal insurance program of the United States government. It is managed by the Social Security Administration and designed to provide income support to people who have a disability that restricts their ability to be employed.

Social Security Disability Insurance pays benefits to a disabled person and certain members of this person's family if the person is "insured," meaning that the person worked long enough throughout his or her life and paid Social Security taxes.

awa1 (aware that Social Security Disability Insurance (SSDI) program existed in section Information)

Were you aware that the Social Security Disability Insurance (SSDI) program existed?

sco2_a (percentage of applicants ultimately approved for SSDI in section Knowledge) What percentage of applicants do you believe are ultimately approved for **Social Security Disability Insurance** benefits? If you don't know, please give us your best estimate.

```
rul4_questions := array(1 \rightarrow"rul4a", 2 \rightarrow"rul4b", 3 \rightarrow"rul4c", 4 \rightarrow"rul4d", 5 \rightarrow"rul4e", 6 \rightarrow"rul4f", 7 \rightarrow"rul4g", 8 \rightarrow"rul4h", 9\rightarrow"rul4i", 10 \rightarrow"rul4j", 11 \rightarrow"rul4k", 12 \rightarrow"rul4l", 13 \rightarrow"rul4m", 14 \rightarrow"rul4n")
```

/* The rul4 questions are presented in random order per variables rul4_order with values:

- 1 Anyone with a Social Security number is eligible for Social Security Disability Insurance (SSDI) benefits
- 2 A person receiving Social Security Disability Insurance (SSDI) benefits will continue to receive benefits forever, even if their condition improves to the point they are no longer considered as having a disability
- 3 People with short-term disability (a disability that is expected to last less than 12 months) are not eligible for Social Security Disability Insurance (SSDI)
- 4 Individuals must submit a claim for review by Social Security before they can receive SSDI benefits
- 5 Spouses and children of a person with disabilities may also receive SSDI benefits based on the person's earnings record
- 6 Individuals need to have been employed and paid sufficient Social Security taxes for at least 60 quarters (fifteen years) in order to be eligible for SSDI benefits

- o 7 People who receive Social Security retirement benefits may still be eligible for SSDI
- 8 A claim will be denied if, based on the person's age, education, work experience, and skills, the Social Security Administration decides that they can do other work
- 9 Social Security Disability Insurance (SSDI) beneficiaries are insured by Medicare immediately after the start date for their benefit
- 10 To qualify for Social Security Disability Insurance (SSDI), an individual must have worked in jobs covered by Social Security in the last ten years and have a medical condition that meets Social Security definition of disability
- 11 An individual who is able to perform work that she has done in the past may still be able to receive Social Security Disability Insurance benefits
- 12 The children of an individual receiving Social Security Disability income (SSDI) can receive a benefit check themselves" [T/F]
- 13 To qualify for Social Security Disability Insurance (SSDI), an individual must have worked in jobs that pay into Social Security in nine of the last ten years
- 14 Social Security rules allow an individual who receives disability benefits to work as long as their income is below a certain amount

*/

IF sizeof(rul4_order) = 0 THEN

```
rul4_order := shuffleArray(array(1 \rightarrow1, 2 \rightarrow2, 3 \rightarrow3, 4 \rightarrow4, 5 \rightarrow5, 6 \rightarrow6, 7 \rightarrow7, 8 \rightarrow8, 9 \rightarrow9, 10 \rightarrow10, 11 \rightarrow11, 12 \rightarrow12, 13 \rightarrow13, 14 \rightarrow14))
```

END OF IF

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

rul4_intro (Section Information)

Please answer the following True/False questions about the Social Security Disability Insurance (SSDI) program:

SUBGROUP OF QUESTIONS

LOOP FROM 1 TO 5

/* The first five random questions in rul4 to rul4n are asked in random order per variables rul4_order. */

END OF LOOP

END OF SUBGROUP

END OF GROUP

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

rul4_intro (Section Information)

Please answer the following True/False questions about the Social Security Disability Insurance (SSDI) program:

SUBGROUP OF QUESTIONS

LOOP FROM 6 TO 10

/* The second five random questions in rul4 to rul4n are asked in random order per variables rul4_order. */

END OF LOOP

END OF SUBGROUP

END OF GROUP

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

rul4_intro (Section Information)

Please answer the following True/False questions about the Social Security Disability Insurance (SSDI) program:

SUBGROUP OF QUESTIONS

LOOP FROM 11 TO 14

 $/^{\star}$ The third five random questions in rul4 to rul4n are asked in random order per variables rul4_order. $^{\star}/$

END OF LOOP

END OF SUBGROUP

END OF GROUP

is002 (Section Information)

Supplemental Security Income (SSI) is a federal benefit program administered by the Social Security Administration. The program provides safety-net financial support for people

in need. Someone may qualify for monthly SSI payments if they are 65 or older, blind, or otherwise disabled and have very limited income and financial resources.

Supplemental Security Income benefits are paid out of general U.S. Treasury funds, not from Social Security taxes. A person does not need to have worked a certain amount, or paid Social Security payroll taxes, to be eligible.

awa2 (aware that Supplemental Security Income program existed in section Information) Were you aware that the Supplemental Security Income program existed?

sco2_b (percentage of applicants ultimately approved for SSI in section Knowledge) What percentage of applicants do you believe are ultimately approved for **Supplemental Security Income (SSI)** benefits? If you don't know, please give us your best estimate.

```
rul5_questions := array(1 \rightarrow"rul5a", 2 \rightarrow"rul5b", 3 \rightarrow"rul5c", 4 \rightarrow"rul5d", 5 \rightarrow"rul5e", 6 \rightarrow"rul5f", 7 \rightarrow"rul5g")
```

/* The rul5 questions are presented in random order per variables rul5_order with values:

- 1 Supplemental Security Income (SSI) pays benefits to aged, blind or disabled people who have little or no income
- 2 Supplemental Security Income (SSI) beneficiaries are eligible for Medicaid coverage
- 3 An individual who is able to perform work that she has done in the past may still be considered disabled and receive Supplemental Security Income benefits
- 4 Only those who are blind, disabled, or over 65 are eligible for SSI
- 5 Supplemental Security Income (SSI) is only for those with limited income and assets
- 6 Supplemental Security Income (SSI) pays benefits for children with disabilities from families with limited income and assets
- o 7 Supplemental Security Income (SSI) provides financial help to people no matter how much money they earn

*/

```
IF sizeof(rul5_order) = 0 THEN rul5_order := shuffleArray(array(1 \rightarrow1, 2 \rightarrow2, 3 \rightarrow3, 4 \rightarrow4, 5 \rightarrow5, 6 \rightarrow6, 7 \rightarrow7)) END OF IF
```

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

rul5_intro (Section Information)

Please answer the following True/False questions about the Supplemental Security Income (SSI) program:

SUBGROUP OF QUESTIONS

LOOP FROM 1 TO 7

/* Questions rul5a to rul5g are asked in random order per variables pur2_order. */

END OF LOOP

END OF SUBGROUP

END OF GROUP

End of section Information

Start of section Self

IF currentage < 65 THEN

self0 (currently working in section Self) Are you currently working?

IF self0 = 1 THEN

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

self1 (actions if long term health care problem in section Self)

In the next 5-10 years, if you were to get a long-term health problem and not be able to do your current job, what do you think you would do? Please select all that apply.

- 1 Apply for disability benefits in the first instance
- 6 Apply for workers' compensation, if I was ill/injured on the job
- 2 Look for another job that I could do in spite of my health problem
- 3 I would stop working and rely on savings and/or other income
- 7 I would retire and claim Social Security retirement benefits
- 4 Not applicable / I am not eligible for disability benefits
- 5 Other, please specify:

self1_other (other actions if long term health care problem in section Self) STRING

END OF GROUP

IF 2 IN self1 AND not(1 IN self1) THEN

self2 (unable to find job would apply for disability benefits in section Self)

If you were unable to find another job you could do with your disability, would you apply for Social Security disability benefits?

- 1 Yes, I would apply for Social Security disability benefits
- 2 No, I would never apply for Social Security disability benefits

END OF IF

IF 3 IN self1 AND not(1 IN self1) THEN

self3 (savings or income insufficient would apply for disability benefits in section Self) If your savings or other income became insufficient, would you apply for Social Security disability benefits?

- 1 Yes, I would apply for Social Security disability benefits
- 2 No, I would never apply for Social Security disability benefits

END OF IF

IF 6 IN self1 AND not(1 IN self1) THEN

self3a (not approved Workers Compensation would apply for disability benefits in section Self)

If you were not approved for workers' compensation, would you apply for Social Security disability benefits?

- 1 Yes, I would apply for Social Security disability benefits
- 2 No, I would never apply for Social Security disability benefits

FND OF IF

END OF IF

END OF IF

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

self4 (information sources about disability benefits in section Self)

Have you ever sought or received information about Social Security disability benefits from the following sources? Please select all that apply.

- 1 Family, friends and/or colleagues
- 2 Healthcare provider (doctor, nurse, physical therapist, etc.)
- 3 Television, radio, newspaper and other media
- 4 Social Security Administration
- 5 Community organizations (such as churches, libraries and community centers)
- 9 Disability advocacy or assistance organizations
- 6 Lawyers
- 10 Online (e.g. Google, social media, etc.)
- 7 Other, please specify:
- 8 I have never sought information about Social Security disability benefits

self4_other (other information sources about disability benefits in section Self)

STRING

END OF GROUP

IF 4 IN self4 THEN

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

self5 (information sources from Social Security Administration in section Self)

In the previous question you said you have sought or received information about disability benefits from the Social Security Administration. How did you go about seeking this information? Please select all that apply.

- 1 Social Security Administration website
- 2 my Social Security portal
- 3 Social Security phone line
- 4 In person at a Social Security office;
- 5 Social Security social media (Facebook, Twitter, etc.)
- 6 Other, please specify:

self5_other (other information sources from Social Security Administration in section Self)

STRING

END OF GROUP

END OF IF

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

self6_intro (Section Self)

Please tell us how strongly you agree or disagree with the following statements:

SUBGROUP OF QUESTIONS

self6a (I am interested in learning more about Social Security disability benefits in section Self)

I am interested in learning more about Social Security disability benefits

self6b (I know what the best sources of information are for learning about Social Security disability benefits in section Self)

I know what the best sources of information are for learning about Social Security disability benefits

self6c (I can easily find the information I want/need about the Social Security disability program and benefits in section Self)

I can easily find the information I want/need about the Social Security disability program

and benefits

END OF SUBGROUP

END OF GROUP

IF currentage < 65 THEN

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

self7a (chance have disability prevent working in section Self)

What is the chance that you will, at some point, have a disability that will prevent you from working? Answer on a scale from 0 to 100, where 0 means you are sure you will never have such a disability, and 100 means you are certain that you will have a disability at some point.

self7b (chance have to rely on disability insurance in section Self)

What is the chance that you will need to rely on disability insurance in the near future? Answer on a scale from 0 to 100, where 0 means you are certain that you will never need disability benefits, and 100 means you are certain that you will need them at some point.

slider_script_group_self (Section Knowledge)

Please enter a number between 0% and 100% for all sliders.

END OF GROUP

END OF IF

self8 (preference to change system in section Self)

Social Security retirement benefits and disability insurance programs are paid by a 6.2% tax rate on employers and employees. Of these, approximately 5.3% go to the fund that pays retirement benefits and 0.9% go to the fund that pays disability insurance.

If you were given a choice, would you rather:

- 1 Reduce the Social Security tax rate paid and lose your disability insurance
- 2 Keep the system as it is currently
- 3 Increase the total Social Security tax and increase the benefit amount you would receive should you become disabled

IF currentage = EMPTY THEN

currentage (current calculated age in section Demographics) What is your current age?

RANGE 0..120

END OF IF

IF currentage < 65 THEN

self9 (enough credits to quality for Social Security Disability Insurance in section Self) Do you have enough work credits to qualify for Social Security Disability Insurance (SSDI)? (That is, have you worked enough quarters in a covered job to be eligible for benefits)

- 1 Yes
- 2 No
- 3 I do not know
- 4 Not applicable

IF currentage > 30 THEN

self9b (worked five of the last ten years in a job that pays into Social Security in section Self)

Have you worked five of the last ten years in a job that pays into Social Security?

ELSEIF currentage < 31 THEN

self9c (worked five of the last three years in a job that pays into Social Security in section Self)

Have you worked half of the last three years in a job that pays into Social Security?

END OF IF

IF self9 = 1 THEN

self10 (know monthly payment amount entitled to in section Self)

Do you know (approximately) the monthly Social Security payment amount you would be entitled to if you were to become disabled?

IF self10 = 1 THEN

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

self11 (monthly payment amount entitled to in section Self)

About how much would that be?

RANGE 0..9999

self11_rf (refuse monthly payment amount entitled to in section Self)

1 I prefer not to answer

END OF GROUP

END OF IF

END OF IF

END OF IF

self12 (ever checked Social Security statement in section Self) Have you ever seen your Social Security Statement?

self13 (know can check Social Security statement through MySocialSecurity in section Self)

Did you know you can check your Social Security Statement through *my* Social Security (an online platform on the Social Security website that provides you with all your Social Security information)?

End of section Self

Start of section Vignettes

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

val1_intro (Section Vignettes)
Do you agree with the following statements?

SUBGROUP OF QUESTIONS

val1a (The amount that disabled workers get from Social Security should be increased (even if that means raising taxes) in section Vignettes)

The amount that disabled workers get from Social Security should be increased (even if that means raising taxes)

val1b (It should be easier for disabled individuals to get benefits from Social Security (even if that means raising taxes) in section Vignettes)

It should be easier for disabled individuals to get benefits from Social Security (even if that means raising taxes)

val1c (The work requirements for Social Security disability insurance should be reduced (even if that means raising taxes) in section Vignettes)

The work requirements for Social Security disability insurance should be reduced (even if that means raising taxes)

val1d (The amount that disabled individuals living in low-income households receive from Social Security should be increased (even if that means raising taxes) in section Vignettes)

The amount that disabled individuals living in low-income households receive from Social Security should be increased (even if that means raising taxes)

END OF SUBGROUP

END OF GROUP

IF sco7_position = 2 THEN

sco7 (percentage of disability beneficiaries are veterans in section Knowledge) Some of the Social Security disability recipients are veterans. What percentage of people who get disability benefits from Social Security do you think are veterans?

END OF IF

End of section Vignettes

Start of section Introductionsection

Fill code of question FLSSDI executed Fill code of question FLSSI executed Fill code of question FLSSDI2 executed Fill code of question FLSSI2 executed

intro1a (currently receive SSDI or SSI in section Introductionsection)

Do you currently receive (Social Security Disability Insurance (SSDI)/Social Security Disability Insurance (or SSDI) is a federal insurance program of the United States government. It is managed by the Social Security Administration and designed to provide income support to people who have a disability that restricts their ability to be employed.

Social Security Disability Insurance pays benefits to a disabled person and certain members of this person's family if the person is "insured," meaning that the person worked long enough throughout his or her life and paid Social Security taxes./) or (Supplemental Security Income (SSI)/Supplemental Security Income (SSI) is a federal benefit program administered by the Social Security Administration. The program provides safety-net financial support for people in need. Someone may qualify for monthly SSI payments if they are 65 or older, blind or disabled and have very limited income and financial resources.

Supplemental Security Income benefits are paid out of general U.S. Treasury funds, not from Social Security taxes. One need not have worked a certain amount, or paid FICA taxes, to be eligible.//)?

ask_application := 2

IF intro1a = 1 THEN

ask_application := 1

intro1a_2 (what receive SSDI or SSI in section Introductionsection)

Do you receive (Social Security Disability Insurance (SSDI)/Social Security Disability Insurance (or SSDI) is a federal insurance program of the United States government. It is managed by the Social Security Administration and designed to provide income support to people who have a disability that restricts their ability to be employed.

Social Security Disability Insurance pays benefits to a disabled person and certain members of this person's family if the person is "insured," meaning that the person worked long enough throughout his or her life and paid Social Security taxes./) or (Supplemental Security Income (SSI)/Supplemental Security Income (SSI) is a federal benefit

program administered by the Social Security Administration. The program provides safety-net financial support for people in need. Someone may qualify for monthly SSI payments if they are 65 or older, blind or disabled and have very limited income and financial resources.

Supplemental Security Income benefits are paid out of general U.S. Treasury funds, not from Social Security taxes. One need not have worked a certain amount, or paid FICA taxes, to be eligible.//)?

- 1 I receive SSDI
- 2 I receive SSI
- 3 I receive benefits from one of the programs but I am not sure which one.
- 4 I receive benefits from both SSDI and SSI

ELSE

intro1b (received SSDI or SSI in section Introductionsection)

Have you received (Social Security Disability Insurance (SSDI)/Social Security Disability Insurance (or SSDI) is a federal insurance program of the United States government. It is managed by the Social Security Administration and designed to provide income support to people who have a disability that restricts their ability to be employed.

Social Security Disability Insurance pays benefits to a disabled person and certain members of this person's family if the person is "insured," meaning that the person worked long enough throughout his or her life and paid Social Security taxes./) or (Supplemental Security Income (SSI)/Supplemental Security Income (SSI) is a federal benefit program administered by the Social Security Administration. The program provides safety-net financial support for people in need. Someone may qualify for monthly SSI payments if they are 65 or older, blind or disabled and have very limited income and financial resources.

Supplemental Security Income benefits are paid out of general U.S. Treasury funds, not from Social Security taxes. One need not have worked a certain amount, or paid FICA taxes, to be eligible.//) in the past?

IF intro1b = 1 THEN

ask_application := 1

ELSE

intro3 (ever applied for SSDI or SSI in section Introductionsection)

Have you ever applied for Social Security Disability Insurance (SSDI) or Supplemental Security Income (SSI) in the past?

IF intro3 = 1 THEN

ask_application := 1

END OF IF

END OF IF

END OF IF

intro2a (married or partner in section Introductionsection)
Are you married, or do you have a partner who you live with?

IF intro2a = 1 THEN

intro2b (spouse receiving or received SSDI or SSI in section Introductionsection) Is your spouse/domestic partner currently receiving, or has ever received, Social Security Disability Benefits (SSDI) or Supplemental Security Income (SSI)?

- 1 Yes, my spouse/domestic partner is currently receiving SSDI
- 2 Yes, my spouse/domestic partner is currently receiving SSI
- 3 My spouse/domestic partner has received SSDI or SSI in the past but is no longer receiving benefits
- 4 No, my spouse/domestic partner is not receiving disability benefits

END OF IF

intro3b (currently have health condition prevents from working or reduces in section Introductionsection)

Do you currently have a health condition that prevents you from working or that significantly reduces the amount of work you can do?

IF intro3b != 1 THEN

intro4a (ever had health condition prevented from working or reduced work in section Introductionsection)

Have you ever had a health condition that prevented you from working or that reduced the amount of work you could do?

END OF IF

IF intro1a = 1 OR (intro1a != 1 AND intro1b = 1) OR intro3b = 1 OR (intro3b != 1 AND intro4a = 1) THEN

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

intro4b (what health condition prevented from working or reduced work in section Introductionsection)

What was the condition you had that prevented you from working/reduced how much you could work?

- 1 Musculoskeletal problems, such as back injuries; limb amputation
- 2 Cardiovascular conditions, such as heart failure; stroke
- 3 Respiratory illnesses, such as COPD; asthma
- 4 Senses and speech issues, such as vision and hearing loss
- 5 Neurological disorders, such as multiple sclerosis, Parkinson's Disease or epilepsy
- 6 Mental health disorders, such as depression; schizophrenia
- 7 Cancer

8 Other, please specify:

intro4b_other (other what health condition prevented from working or reduced work in section Introductionsection) STRING

END OF GROUP

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

intro4c_month (month when stop working, or reduce how much work, due to health condition/s in section Introductionsection)

When did you stop working, or reduce how much you work, due to your health condition/s?

- 1 January
- 2 February
- 3 March
- 4 April
- 5 May
- 6 June
- 7 1 1
- 7 July
- 8 August
- 9 September
- 10 October
- 11 November
- 12 December

intro4c_year (year when stop working, or reduce how much work, due to health condition/s in section Introductionsection)

RANGE 1910..(())

END OF GROUP

IF intro3b = 1 THEN

intro4d (expect to be able to work normally in 12 months or less in section Introduction-section)

Do you expect to be able to work normally in 12 months or less?

ELSEIF intro3b != 1 AND intro4a = 1 THEN

intro4e (long did condition prevent from working or significantly reduce the amount of work could do in section Introductionsection)

For how long did this condition prevent you from working or significantly reduce the amount of work you could do?

- 1 Less than one month
- 2 More than one month but less than one year

3 1-2 years

4 3-5 years

5 More than 5 years

END OF IF

END OF IF

intro5a (any friends or family members who have health problem in section Introduction-section)

Do you have any friends or family members who have a health problem that negatively affects whether and how much they can work?

IF intro5a = 1 THEN

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

intro5b (who know has health problem in section Introductionsection)

Who do you know that has a health problem that prevents them from working? Please select all that apply.

- 1 Spouse/partner
- 2 Parent
- 3 Child
- 4 Other family member
- 5 Friend
- 6 Co-worker or former co-worker
- 7 Neighbor
- 9 Former spouse/former partner
- 8 Other, please specify:

intro5b_other (other who know has health problem in section Introductionsection)

STRING

END OF GROUP

END OF IF

intro6a (any friends or family members who receive SSID or SSI in section Introduction-section)

Do you have any friends or family members who receive Social Security disability benefits ((SSDI/Social Security Disability Insurance (or SSDI) is a federal insurance program of the United States government. It is managed by the Social Security Administration and designed to provide income support to people who have a disability that restricts their ability to be employed.

Social Security Disability Insurance pays benefits to a disabled person and certain members of this person's family if the person is "insured," meaning that the person worked long

enough throughout his or her life and paid Social Security taxes./) or (SSI/Supplemental Security Income (SSI) is a federal benefit program administered by the Social Security Administration. The program provides safety-net financial support for people in need. Someone may qualify for monthly SSI payments if they are 65 or older, blind or disabled and have very limited income and financial resources.

Supplemental Security Income benefits are paid out of general U.S. Treasury funds, not from Social Security taxes. One need not have worked a certain amount, or paid FICA taxes, to be eligible.//))?

IF intro6a = 1 THEN

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

intro6b (who know receives SSI or SSDI in section Introductionsection) Who do you know that receives Social Security disability benefits (SSI or SSDI)? Please select all that apply.

- 1 Spouse/partner
- 2 Parent
- 3 Child
- 4 Other family member
- 5 Friend
- 6 Co-worker or former co-worker
- 7 Neighbor
- 9 Former spouse/former partner
- 8 Other, please specify:

intro6b_other (other any friends or family members who receive SSDI or SSI in section Introductionsection)
STRING

END OF GROUP

END OF IF

End of section Introductionsection

```
main_endtime := date("Y-m-d H:i:s")
main_time := strtotime(main_endtime) - strtotime(main_begintime)
```

Start of section **Application**

IF ask_application = 1 THEN

```
appl_begintime := date("Y-m-d H:i:s")
reward := 13
application_status := empty
```

IF intro1a = 1 OR (intro1a != 1 AND intro1b = 1) THEN

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

serv1a (which programs receive benefits in section Application)

You told us in a previous question that you receive or have received Social Security Disability Insurance ((SSDI/Social Security Disability Insurance (or SSDI) is a federal insurance program of the United States government. It is managed by the Social Security Administration and designed to provide income support to people who have a disability that restricts their ability to be employed.

Social Security Disability Insurance pays benefits to a disabled person and certain members of this person's family if the person is "insured," meaning that the person worked long enough throughout his or her life and paid Social Security taxes./)) and/or Supplemental Security Income ((SSI/Supplemental Security Income (SSI) is a federal benefit program administered by the Social Security Administration. The program provides safety-net financial support for people in need. Someone may qualify for monthly SSI payments if they are 65 or older, blind or disabled and have very limited income and financial resources.

Supplemental Security Income benefits are paid out of general U.S. Treasury funds, not from Social Security taxes. One need not have worked a certain amount, or paid FICA taxes, to be eligible.//)). From which programs do you receive or have received benefits?

- 1 Social Security Disability Insurance (SSDI) only
- 2 Supplemental Security Income (SSI) only
- 3 Both Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI)
- 4 At least one of these programs but I am not sure which one
- 5 Other, please explain:

serv1a_other (other which programs receive benefits in section Application) STRING

END OF GROUP

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

serv1b_years (years ago started receiving beneifts in section Application)
How long ago did you first start receiving these benefits? (Your best guess is ok)
RANGE 0..120

serv1b_months (months ago started receiving beneifts in section Application) RANGE 0..12

END OF GROUP

IF serv1b_years = EMPTY AND serv1b_months = EMPTY THEN

serv1b_fwp (follow up how long ago received benefits in section Application)

Approximately how long ago did you first receive benefits?

- 1 Less than one year
- 2 Between one and three years ago
- 3 Between three and five years ago
- 4 Between five and ten years ago
- 5 Between ten and twenty years ago
- 6 More than twenty years ago

END OF IF

END OF IF

IF intro1a != 1 AND intro1b != 1 AND intro3 = 1 THEN

application_status := 1

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

serv1c (which programs applied benefits in section Application)

You told us in a previous question that you applied for Social Security Disability Insurance ((SSDI/Social Security Disability Insurance (or SSDI) is a federal insurance program of the United States government. It is managed by the Social Security Administration and designed to provide income support to people who have a disability that restricts their ability to be employed.

Social Security Disability Insurance pays benefits to a disabled person and certain members of this person's family if the person is "insured," meaning that the person worked long enough throughout his or her life and paid Social Security taxes./) or Supplemental Security Income ((SSI/Supplemental Security Income (SSI) is a federal benefit program administered by the Social Security Administration. The program provides safety-net financial support for people in need. Someone may qualify for monthly SSI payments if they are 65 or older, blind or disabled and have very limited income and financial resources.

Supplemental Security Income benefits are paid out of general U.S. Treasury funds, not from Social Security taxes. One need not have worked a certain amount, or paid FICA taxes, to be eligible.//)) in the past. Which program/s did you apply for?

- 1 Social Security Disability Insurance (SSDI) only
- 2 Supplemental Security Income (SSI) only
- 3 Both Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI)
- 4 At least one of these programs but I am not sure which one
- 5 Other, please explain:

serv1c_other (other which programs applied benefits in section Application) STRING

END OF GROUP

END OF IF

IF intro1a = 1 OR (intro1a != 1 AND intro1b = 1) = 1 OR (intro1a != 1 AND intro1b != 1 AND intro3 = 1) THEN

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

serv2 (how decided to apply for benefits in section Application)

How did you first decide to apply for benefits?

- 1 I knew I was eligible for benefits
- 2 I decided to apply on the advice of my healthcare provider
- 3 I decided to apply on the advice of family/friends/colleagues
- 4 I decided to apply on the advice of my former employer / medical insurance company
- 5 Other, please specify:

serv2_other (other how decided to apply for benefits in section Application) STRING

END OF GROUP

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

serv3 (what condition first applied for in section Application)

What is the condition for which you **FIRST** applied?

- 1 Musculoskeletal problems, such as back injuries; limb amputation
- 2 Cardiovascular conditions, such as heart failure; stroke
- 3 Respiratory illnesses, such as COPD; asthma
- 4 Senses and speech issues, such as vision and hearing loss
- 5 Neurological disorders, such as multiple sclerosis, Parkinson's Disease or epilepsy
- 6 Mental health disorders, such as depression; schizophrenia
- 7 Cancer
- 8 Other, please specify:
- 9 None, applied on the basis of age (65 and older)

serv3_**other** (other what condition first applied for in section Application) STRING

END OF GROUP

serv3a (how long after onset disability applied in section Application)

How long after the onset of your disability did you did you apply for Social Security disability?

- 1 Immediately after the onset of my disability
- 2 Within a year of the onset of my disability
- 3 One to three years after the onset of my disability
- 4 Four or more years after the onset of my disability

serv4 (year impairment or health problem begin to interfere with work in section Application)

In what year did the impairment or health problem begin to interfere with your work? RANGE 1950..(())

appl_2_minimum := serv4

IF appl_2_minimum = EMPTY THEN

appl_2_minimum := 1950

END OF IF

appl2 (first apply for disability benefits in section Application) When did you first apply for disability benefits?

RANGE (minimum year for when first applied benefits())..(())

IF appl2 > 2022 THEN

appl2_followup1 (no of months first apply for disability benefits in section Application) About how many months ago did you submit your application?

11

22

3 3

55

6 6

7 7

8 8

9 9 10 10

11 11

12 12

ELSEIF appl2 = EMPTY THEN

appl2_followup2 (nonresponse first apply for disability benefits in section Application) Approximately how long ago did you **first** apply for benefits?

- 1 Less than one year
- 2 Between one and three years ago
- 3 Between three and five years ago
- 4 Between five and ten years ago

- 5 Between ten and twenty years ago
- 6 More than twenty years ago

END OF IF

IF serv3a < 3 OR (appl2 = RESPONSE AND (appl2 - appl_2_minimum) < 2) THEN

ELSE

/* The answer options in serv_bar1 are presented in random order per variables serv_bar1_order with values:

- o 1 I was still able to work
- o 2 I wanted to try to work again
- o 3 I did not know about the disability programs
- o 4 I did not think my disability would last 12 months or more
- o 5 I did not think I would qualify for benefits
- o 6 I thought the application process would be too difficult
- o 7 I thought that the application process would take too long
- o 8 I heard it was too difficult to get approved for benefits
- o 9 Being on disability benefits felt like I would be giving up
- 10 I felt that people would look down on me if I received disability benefits
- o 11 Other

Note: 'Other' is always presented last. */

IF sizeof(serv_bar1_order) = 0 THEN

```
serv_bar1_order := shuffleArray(array(1 \rightarrow1, 2 \rightarrow2, 3 \rightarrow3, 4 \rightarrow4, 5 \rightarrow5, 6 \rightarrow6, 7 \rightarrow7, 8 \rightarrow8, 9 \rightarrow9, 10 \rightarrow10)) serv_bar1_order(11) := 11
```

END OF IF

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

serv_bar1 (main reasons waited more than one year after onset of disability to apply for benefits in section Application)

What were the main reasons you waited more than one year after the onset of your disability to apply for benefits? Please select all that apply.

- 1 I was still able to work
- 2 I wanted to try to work again

- 3 I did not know about the disability programs
- 4 I did not think my disability would last 12 months or more
- 5 I did not think I would qualify for benefits
- 6 I thought the application process would be too difficult
- 7 I thought that the application process would take too long
- 8 I heard it was too difficult to get approved for benefits
- 9 Being on disability benefits felt like I would be giving up
- 10 I felt that people would look down on me if I received disability benefits
- 11 Other, please specify:

serv_bar1_other (other main reason waited more than one year after onset of disability to apply for benefits in section Application) STRING

END OF GROUP

IF serv_bar1 = RESPONSE THEN

IF cardinal(serv_bar1) > 1 THEN

LOOP FROM 1 TO 11

IF serv_bar1_order(cnt) IN serv_bar1 THEN

serv_bar1a_order(cnt) := serv_bar1_order(cnt)

FLSE

serv_bar1a_order(cnt) := empty

END OF IF

END OF LOOP

serv_bar1a (most important main reason waited more than one year after onset of disability to apply for benefits in section Application)

What was the **most important** main reason you waited more than one year after the onset of your disability to apply for benefits?

- 1 I was still able to work
- 2 I wanted to try to work again
- 3 I did not know about the disability programs
- 4 I did not think my disability would last 12 months or more
- 5 I did not think I would qualify for benefits
- 6 I thought the application process would be too difficult
- 7 I thought that the application process would take too long
- 8 I heard it was too difficult to get approved for benefits
- 9 Being on disability benefits felt like I would be giving up

10 I felt that people would look down on me if I received disability benefits
11 (other main reason waited more than one year after onset of disability to apply

for benefits())

IF serv_bar1a = RESPONSE THEN

LOOP FROM 1 TO 11

IF serv_bar1_order(cnt) IN serv_bar1 AND serv_bar1_order(cnt) != serv_bar1a THEN

serv_bar1b_order(cnt) := serv_bar1_order(cnt)

ELSE

serv_bar1b_order(cnt) := empty

END OF IF

END OF LOOP

IF cardinal(serv_bar1) > 2 THEN

serv_bar1b (second most important main reason waited more than one year after onset of disability to apply for benefits in section Application)

What was the **second most important** main reason you waited more than one year after the onset of your disability to apply for benefits?

- 1 I was still able to work
- 2 I wanted to try to work again
- 3 I did not know about the disability programs
- 4 I did not think my disability would last 12 months or more
- 5 I did not think I would qualify for benefits
- 6 I thought the application process would be too difficult
- 7 I thought that the application process would take too long
- 8 I heard it was too difficult to get approved for benefits
- 9 Being on disability benefits felt like I would be giving up
- 10 I felt that people would look down on me if I received disability benefits
- 11 (other main reason waited more than one year after onset of disability to apply for benefits())

ELSE

serv_bar1b := reset(serv_bar1b_order)

END OF IF

ELSE

serv_bar1b := empty

END OF IF

```
ELSE
```

serv_bar1a := serv_bar1

END OF IF

ELSE

serv_bar1a := empty

END OF IF

END OF IF

/* The answer options in serv_bar3 are presented in random order per variables serv_bar3_order with values:

- o 1 Yes, a family member, friend, or colleague
- 2 Yes, a healthcare provider (e.g. doctor, nurse)
- o 3 Yes, a social worker
- 4 Yes, my employer or former employer;
- o 5 Yes, other
- o 6 No, no one ever suggested it

Note: 'Yes, other' and 'No, no one ever suggested it' are always presented last. */

IF sizeof(serv_bar3_order) = 0 THEN

```
serv_bar3_order := shuffleArray(array(1 \rightarrow1, 2 \rightarrow2, 3 \rightarrow3, 4 \rightarrow4)) serv_bar3_order(5) := 5
```

serv_bar3_order(6) := 6

END OF IF

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

serv_bar3 (anyone suggest that could/should apply for disability benefits in section Application)

Before you applied, did anyone suggest that you could/should apply for disability benefits?

- 1 Yes, a family member, friend, or colleague
- 2 Yes, a healthcare provider (e.g. doctor, nurse)
- 3 Yes, a social worker
- 4 Yes, my employer or former employer;
- 5 Yes, other:
- 6 No, no one ever suggested it

serv_bar3_other (other anyone suggest that could/should apply for disability benefits in section Application)

STRING

END OF GROUP

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl3 (receive assistance with application in section Application)

Did you receive any assistance in preparing and submitting your application? Please select all that apply.

- 1 I did not receive any assistance
- 2 I received assistance from a lawyer
- 3 I received assistance from family/friends
- 4 I received assistance from a social worker/insurance company/employer
- 6 I received assistance from an SSA representative by phone or at a field office
- 5 I received assistance from someone else, please specify:

appl3_other (other receive assistance with claim in section Application)
STRING

END OF GROUP

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl4 (how submitted application in section Application)

How was your application submitted?

- 1 Online
- 2 Application form sent by mail
- 3 Application filled out in the SSA office
- 5 By telephone, with an SSA office
- 4 Other, please specify:

appl4_other (other how submitted application in section Application)
STRING

END OF GROUP

appl5 (rate process of making claim in section Application)

How would you rate the process of preparing and submitting your claim?

- 1 Very easy
- 2 Easy
- 3 Neither easy nor difficult
- 4 Difficult
- 5 Very difficult

appl6 (provide medical information in section Application)

For this application, were you able to provide medical information (medical records, doctor contact information, other documentation)?

IF appl6 = 2 THEN

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl6a (why unable to provide medical information in section Application)

Why were you unable to provide medical information? Please select all that apply.

- 1 Couldn't pay for a doctor's visit, medical tests, or other services
- 2 Did not have transportation to a doctor's office
- 3 Did not have a doctor or medical provider to obtain a diagnosis or records
- 4 Did not have the assistance needed to interact with the medical provider (language, understanding)
- 5 Doctor or medical provider did not diagnose a medical condition or provide other evidence
- 6 Other reason, please specify:

appl6a_other (other why unable to provide medical records in section Application)

STRING

END OF GROUP

END OF IF

appl7 (asked by SSA to visit doctor in section Application)

For this application, were you asked by SSA/the office of Disability Determination Services to visit a doctor?

appl8 (outcome first application in section Application)

What was the outcome of the first application?

- 1 It was approved
- 2 It was rejected
- 3 It is currently under review

IF appl8 IN (1,2) THEN

application_status := 2

appl9 (how long to hear back from application in section Application)

How long did it take to hear back whether your application was approved or denied? RANGE 1..99

END OF IF

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl9b (how support while waiting for disability decision in section Application) How did you support yourself while you waited for your disability decision? Please select all that apply.

- 1 Worked full-time
- 2 Worked part-time
- 3 Government assistance (e.g., Food Stamps/SNAP/EBT , workers' compensation, unemployment insurance)
- 4 Spouse's earnings
- 5 Personal savings
- 6 Took on credit card debt or debt from other commercial sources
- 7 Changed living arrangements (e.g., moved in with family members, moved into lower cost housing)
- 8 Sold assets (e.g. home, car, investments)
- 9 Assistance or loans from friends and/or family (other than spouse)
- 10 Other, please specify:

appl9b_other (other how support while waiting for disability decision in section Application) STRING

END OF GROUP

IF appl8 = 2 THEN

application_status := 2

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl10 (why application rejected in section Application)

What reason did SSA give for denying your application?

- 1 Insufficient work credits
- 2 Insufficient medical evidence
- 3 Insufficient non-medical documentation
- 6 I did not attend the necessary medical exams
- 7 I was found to be able to work
- 11 My impairment was not considered severe
- 12 My impairment lasted or will last less than 12 months
- 13 My impairment was not considered to be disabling
- 8 I was making too much money to qualify for benefits
- 9 Other, please specify:

appl10_other (other why application rejected in section Application) STRING

END OF GROUP

appl11 (action after application was rejected in section Application)

What did you do after your disability application was rejected?

- 1 I appealed the decision
- 2 I submitted a new application
- 3 Neither

IF appl11 = 1 THEN

application_status := 1

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl12 (any assistance with appeal in section Application)

Did you receive any assistance in preparing the appeal?

- 1 I did not receive any assistance
- 2 I received assistance from a lawyer
- 3 I received assistance from family/friends
- 4 I received assistance from a social worker/insurance company/employer
- 6 I received assistance from an SSA representative by phone or at a field office
- 5 I received assistance from someone else, please specify:

appl12_other (other any assistance with appeal in section Application) STRING

END OF GROUP

appl13 (final outcome of appeal in section Application)

What was the final outcome for this application?

- 1 It was approved
- 2 It was rejected
- 3 It is currently under review

IF appl13 IN (1,2) THEN

application_status := 2

appl14 (how long to hear back between first appeal and final decision in section Application)

How long did it take between the first appeal and the final decision on your application?

RANGE 1..99

END OF IF

IF appl13 = 2 THEN

appl15 (submit new application in section Application) Did you submit a new application?

IF appl15 = 1 THEN

application_status := 1

END OF IF

END OF IF

ELSEIF appl11 = 2 THEN

application_status := 1

END OF IF

IF appl11 = 2 OR (appl11 = 1 AND appl13 = 2 AND appl15 = 1) THEN

application_status := 1

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl_b1_year (year how long waited after first application apply again in section Application)

The following questions are about the **second time** you applied for disability benefits.

How long did you wait after your first application was rejected before you applied again?

RANGE 0..120

appl_b1_month (month how long waited after first application apply again in section Application)

RANGE 0..12

END OF GROUP

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl_b2_year (year how long ago second application in section Application) About how long ago was this?

RANGE 0..120

appl_b2_month (month how long ago second application in section Application)

RANGE 0..12

END OF GROUP

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl_b3 (receive assistance with second application in section Application) Did you receive any assistance in preparing and submitting your application? Please select all that apply.

- 1 I did not receive any assistance
- 2 I received assistance from a lawyer
- 3 I received assistance from family/friends
- 4 I received assistance from a social worker/insurance company/employer
- 6 I received assistance from an SSA representative by phone or at a field office
- 5 I received assistance from someone else, please specify:

appl_b3_other (other receive assistance with second application in section
Application)
STRING

END OF GROUP

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl_b4 (how submitted second application in section Application) How was the second application submitted?

- 1 Online
- 2 Application form sent by mail
- 3 Application filled out in the SSA office
- 5 By telephone, with an SSA office
- 4 Other, please specify:

appl_b4_other (other how submitted second application in section Application)

STRING

END OF GROUP

appl_b5 (rate process of making second application in section Application) How would you rate the process of preparing and submitting your application?

- 1 Very easy
- 2 Easy
- 3 Neither easy nor difficult
- 4 Difficult
- 5 Very difficult

appl_**b6** (provide medical information second application in section Application)

For this application, were you able to provide medical information (medical records,

doctor contact information, other documentation)?

IF appl6 = 2 THEN

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl_b6a (why unable to provide medical information second application in section Application)

Why were you unable to provide medical information? Please select all that apply.

- 1 Couldn't pay for a doctor's visit, medical tests, or other services
- 2 Did not have transportation to a doctor's office
- 3 Did not have a doctor or medical provider to obtain a diagnosis or records
- 4 Did not have the assistance needed to interact with the medical provider (language, understanding)
- 5 Doctor or medical provider did not diagnose a medical condition or provide other evidence
- 6 Other reason, please specify:

appl_b6a_other (other why unable to provide medical records second application in section Application) STRING

END OF GROUP

END OF IF

appl_**b7** (asked by SSA to visit doctor second application in section Application)

For this application, were you asked by SSA/the office of Disability Determination Services to visit a doctor?

appl_b8 (outcome second application in section Application)

What was the outcome of the second application?

- 1 It was approved
- 2 It was rejected
- 3 It is currently under review

IF appl_b8 IN (1,2) THEN

application_status := 2

appl_b9 (how long to hear back from second application in section Application)

How long did it take to hear back on your application?

RANGE 1..99

END OF IF

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl_b9b (how support while waiting for disability decision second application in section Application)

How did you support yourself while you waited for your disability decision? Please select all that apply.

- 1 Worked full-time
- 2 Worked part-time
- 3 Government assistance (e.g., Food Stamps/SNAP/EBT , workers' compensation, unemployment insurance)
- 4 Spouse's earnings
- 5 Personal savings
- 6 Took on credit card debt or debt from other commercial sources
- 7 Changed living arrangements (e.g., moved in with family members, moved into lower cost housing)
- 8 Sold assets (e.g. home, car, investments)
- 9 Assistance or loans from friends and/or family (other than spouse)
- 10 Other, please specify:

appl_b9b_other (other how support while waiting for disability decision second application in section Application)
STRING

END OF GROUP

IF $appl_b8 = 2 THEN$

application_status := 2

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl_b10 (why application rejected second application in section Application) What reason did SSA give for denying your application?

- 1 Insufficient work credits
- 2 Insufficient medical evidence
- 3 Insufficient non-medical documentation
- 6 I did not attend the necessary medical exams
- 7 I was found to be able to work
- 11 My impairment was not considered severe
- 12 My impairment lasted or will last less than 12 months
- 13 My impairment was not considered to be disabling
- 8 I was making too much money to qualify for benefits
- 9 Other, please specify:

appl_b10_other (other why application rejected second application in section Application) STRING

END OF GROUP

appl_b11 (action after second application was rejected in section Application)

What did you do after your disability application was rejected?

- 1 I appealed the decision
- 2 I submitted a new application
- 3 Neither

IF $appl_b11 = 1$ THEN

application_status := 1

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl_b12 (any assistance with appeal second application in section Application)

Did you receive any assistance in preparing the appeal?

- 1 I did not receive any assistance
- 2 I received assistance from a lawyer
- 3 I received assistance from family/friends
- 4 I received assistance from a social worker/insurance company/employer
- 6 I received assistance from an SSA representative by phone or at a field office
- 5 I received assistance from someone else, please specify:

appl_b12_other (other any assistance with appeal second application in section Application)
STRING

END OF GROUP

appl_b13 (final outcome of appeal second application in section Application)

What was the final outcome for this application?

- 1 It was approved
- 2 It was rejected
- 3 It is currently under review

IF appl_b13 IN (1,2) THEN

```
application_status := 2
  appl_b14 (how long to hear back between first appeal and final decision
  second application in section Application)
  How long did it take between the first appeal and the final decision on your
  application?
  RANGE 1..99
 END OF IF
 IF appl_b13 = 2 THEN
  appl_b15 (submit new application in section Application)
  Did you submit a new application?
  IF appl_b15 = 1 THEN
   application_status := 1
  END OF IF
 END OF IF
ELSEIF appl11 = 2 THEN
 application_status := 1
END OF IF
IF \ appl_b11 = 2 \ OR \ (appl_b11 = 1 \ AND \ appl_b13 = 2 \ AND \ appl_b15 = 1)
THEN
 application_status := 1
 appl_c1 (how many applications in total in section Application)
 In total, how many times have you applied for disability benefits?
 13
 24
 3 5 or more
 appl_c2_year (year how long ago most recent application in section Appli-
 The following questions are about your most recent application.
 When did you submit your most recent application?
 Please enter the year:
 RANGE 1950..(())
 GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN
```

appl_c3 (receive assistance with most recent application in section Application)

Did you receive any assistance in preparing and submitting your claim? Please select all that apply.

- 1 I did not receive any assistance
- 2 I received assistance from a lawyer
- 3 I received assistance from family/friends
- 4 I received assistance from a social worker/insurance company/employer
- 6 I received assistance from an SSA representative by phone or at a field office
- 5 I received assistance from someone else, please specify:

appl_c3_other (other receive assistance with most recent application in section Application) STRING

END OF GROUP

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl_c4 (how submitted most recent application in section Application)

How was the most recent application submitted?

- 1 Online
- 2 Application form sent by mail
- 3 Application filled out in the SSA office
- 5 By telephone, with an SSA office
- 4 Other, please specify:

appl_c4_other (other how submitted most recent application in section
Application)

STRING

END OF GROUP

appl_c5 (rate process of making most recent application in section Application)

How would you rate the process of preparing and submitting your application?

- 1 Very easy
- 2 Easy
- 3 Neither easy nor difficult
- 4 Difficult
- 5 Very difficult

appl_c6 (provide medical information most recent application in section Application)

For this application, were you able to provide medical information (medical records, doctor contact information, other documentation)?

appl_c7 (asked by SSA to visit doctor most recent application in section Application)

For this application, were you asked by SSA/the office of Disability Determination Services to visit a doctor?

appl_c8 (outcome most recent application in section Application)

What was the outcome of the most recent application?

- 1 It was approved
- 2 It was rejected
- 3 It is currently under review

IF appl_c8 IN (1,2) THEN

application_status := 2

appl_c9 (how long to hear back from most recent application in section Application)

How long did it take to hear back on your application?

RANGE 1..99

END OF IF

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl_c9b (how support while waiting for disability decision most recent application in section Application)

How did you support yourself while you waited for your disability decision? Please select all that apply.

- 1 Worked full-time
- 2 Worked part-time
- 3 Government assistance (e.g., Food Stamps/SNAP/EBT , workers' compensation, unemployment insurance)
- 4 Spouse's earnings
- 5 Personal savings
- 6 Took on credit card debt or debt from other commercial sources
- 7 Changed living arrangements (e.g., moved in with family members, moved into lower cost housing)
- 8 Sold assets (e.g. home, car, investments)
- 9 Assistance or loans from friends and/or family (other than spouse)
- 10 Other, please specify:

appl_c9b_other (other how support while waiting for disability decision most recent application in section Application)

STRING

END OF GROUP

IF appl_c8 = 2 THEN

application_status := 2

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl_**c10** (why application rejected most recent application in section Application)

What reason did SSA give for denying your application?

- 1 Insufficient work credits
- 2 Insufficient medical evidence
- 3 Insufficient non-medical documentation
- 6 I did not attend the necessary medical exams
- 7 I was found to be able to work
- 11 My impairment was not considered severe
- 12 My impairment lasted or will last less than 12 months
- 13 My impairment was not considered to be disabling
- 8 I was making too much money to qualify for benefits
- 9 Other, please specify:

appl_c10_other (other why application rejected most recent application
in section Application)
STRING

END OF GROUP

appl_c11 (action after most recent application was rejected in section Application)

What did you do after your disability application was rejected?

- 1 I appealed the decision
- 2 I submitted a new application
- 3 Neither

IF appl_c11 = 1 THEN

application_status := 1

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

 $\mbox{\it appl_c12}$ (any assistance with appeal most recent application in section Application)

Did you receive any assistance in preparing the appeal?

1 I did not receive any assistance

- 2 I received assistance from a lawyer
- 3 I received assistance from family/friends
- 4 I received assistance from a social worker/insurance company/employer
- 6 I received assistance from an SSA representative by phone or at a field office
- 5 I received assistance from someone else, please specify:

appl_c12_other (other any assistance with appeal most recent application in section Application)
STRING

END OF GROUP

appl_c13 (final outcome of appeal most recent application in section Application)

What was the final outcome for this application?

- 1 It was approved
- 2 It was rejected
- 3 It is currently under review

IF appl_c13 IN (1,2) THEN

application_status := 2

appl_c14 (how long to hear back between first appeal and final decision most recent application in section Application)

How long did it take between the first appeal and the final decision on your application?

RANGE 1..99

END OF IF

END OF IF

END OF IF

IF intro1a != 1 AND intro1b != 1 AND intro3 = 1 AND application_status = 2 THEN

appl_d1 (plan to submit application for disability in section Application)

Do you intend to submit a new application for disability benefits in the future?

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl_d2 (how support after application rejected in section Application)

How have you supported yourself since your last application was rejected or your benefits ended?

- 1 Worked full-time
- 2 Worked part-time
- 3 Government assistance (e.g., Food Stamps/SNAP/EBT , workers' compensation, unemployment insurance)
- 4 Spouse's earnings
- 5 Personal savings
- 6 Took on credit card debt or debt from other commercial sources
- 7 Changed living arrangements (e.g., moved in with family members, moved into lower cost housing)
- 8 Sold assets (e.g. home, car, investments)
- 9 Assistance or loans from friends and/or family (other than spouse)
- 10 Other, please specify:

appl_d2_other (other how support after application rejected in section Application)

STRING

END OF GROUP

END OF IF

END OF IF

IF ask_application = 1 THEN

IF intro1a = 1 THEN

serv8 (how satisfied with benefits in section Application)

How satisfied are you with the amount of your disability benefit?

- 1 Very satisfied
- 2 Satisfied
- 3 Neither satisfied nor dissatisfied
- 4 Dissatisfied
- 5 Very dissatisfied

serv9a (part of income coming from benefits in section Application)

How much of your household income comes from (SSDI/Social Security Disability Insurance (or SSDI) is a federal insurance program of the United States government. It is managed by the Social Security Administration and designed to provide income support to people who have a disability that restricts their ability to be employed.

Social Security Disability Insurance pays benefits to a disabled person and certain members of this person's family if the person is "insured," meaning that the person worked long enough throughout his or her life and paid Social Security taxes./) / (SSI/Supplemental Security Income (SSI) is a federal benefit program administered by

the Social Security Administration. The program provides safety-net financial support for people in need. Someone may qualify for monthly SSI payments if they are 65 or older, blind or disabled and have very limited income and financial resources.

Supplemental Security Income benefits are paid out of general U.S. Treasury funds, not from Social Security taxes. One need not have worked a certain amount, or paid FICA taxes, to be eligible.//)?

END OF IF

IF intro1a = 1 OR (intro1a != 1 AND intro1b = 1) OR (intro1a != 1 AND intro1b != 1 AND intro3 = 1) THEN

serv10 (how health compared to when first applied for benefits in section Application) Compared to when you first applied for (SSDI/Social Security Disability Insurance (or SSDI) is a federal insurance program of the United States government. It is managed by the Social Security Administration and designed to provide income support to people who have a disability that restricts their ability to be employed.

Social Security Disability Insurance pays benefits to a disabled person and certain members of this person's family if the person is "insured," meaning that the person worked long enough throughout his or her life and paid Social Security taxes./) / (SSI/Supplemental Security Income (SSI) is a federal benefit program administered by the Social Security Administration. The program provides safety-net financial support for people in need. Someone may qualify for monthly SSI payments if they are 65 or older, blind or disabled and have very limited income and financial resources.

Supplemental Security Income benefits are paid out of general U.S. Treasury funds, not from Social Security taxes. One need not have worked a certain amount, or paid FICA taxes, to be eligible.//) benefits, how would you rate your health in general now?

- 1 Much better now
- 2 Somewhat better now
- 3 About the same
- 4 Somewhat worse now
- 5 Much worse now

serv12 (how life compared to when first applied for benefits in section Application)

Compared to when you first applied for (SSDI/Social Security Disability Insurance (or SSDI) is a federal insurance program of the United States government. It is managed by the Social Security Administration and designed to provide income support to people who have a disability that restricts their ability to be employed.

Social Security Disability Insurance pays benefits to a disabled person and certain members of this person's family if the person is "insured," meaning that the

person worked long enough throughout his or her life and paid Social Security taxes./)/(SSI/Supplemental Security Income (SSI) is a federal benefit program administered by the Social Security Administration. The program provides safety-net financial support for people in need. Someone may qualify for monthly SSI payments if they are 65 or older, blind or disabled and have very limited income and financial resources.

Supplemental Security Income benefits are paid out of general U.S. Treasury funds, not from Social Security taxes. One need not have worked a certain amount, or paid FICA taxes, to be eligible.//) benefits, would you say your standard of living now is:

- 1 Much better
- 2 Somewhat better
- 3 About the same
- 4 Somewhat worse
- 5 Much worse

END OF IF

IF intro1a = 1 THEN

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

serv13 (how likely go back to work in section Application)

How likely do you think it is that you will ever go back to work? Enter 0 if you are sure that you will never go back work, and 100 if you are sure you will go back to work at some point.

slider_script (Section Knowledge)

Please enter a number between 0% and 100%.

END OF GROUP

ELSE

serv13_**b1** (currently working in section Application) Are you currently working?

IF serv13_b1 = 2 THEN

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

serv13_**b2** (how likely go back to work in section Application) How likely do you think it is that you will ever go back to work?

slider_script (Section Knowledge)

Please enter a number between 0% and 100%.

END OF GROUP

END OF IF

END OF IF

serv14 (aware of SS rule in section Application)

Did you know that the Social Security rules allow an individual who receives disability benefits to work as long as their income is below an amount set by the Social Security Administration (i.e., the Substantial Gainful Activity amount)?

IF serv14 = 1 THEN

serv14b (if not for Substantial Gainful Activity rule working more in section Application) If it was not for the Substantial Gainful Activity rule, would you be working more?

END OF IF

```
appl_endtime := date("Y-m-d H:i:s")
appl_time := strtotime(appl_endtime) - strtotime(appl_begintime)
```

END OF IF

End of section Application

Start of section Barriers

IF intro1a = 2 AND intro1b = 2 AND intro3 = 2 AND (intro3b = 1 OR (intro4a = 1 AND intro4e > 1)) THEN

bar_begintime := date("Y-m-d H:i:s")

barr_intro (Section Barriers)

You told us in a previous guestion that you experience a health condition that prevents you from working or severely reduces how much you can work. Now, we would like to ask you a few more questions about your experience with this work disability. **bar1** (never applied for Social Security disability benefits in section Barriers)

In a previous question, you told us you have never applied for Social Security disability benefits. Is that correct?

1 Yes, it is correct - I have never applied for Social Security disability benefits

2 Yes, this is correct - I have not yet applied, but I am in the process of preparing my application

3 No. it is not correct - I have applied for Social Security disability benefits

4 I'm not sure JF bar1 != 3 THEN

 $barr1b1_3_flag := 2$

bar2 (likelihood approved Social Security disability benefits in section Barriers) Imagine you decided to apply for Social Security disability benefits. What is the likelihood that you would be approved? Your best guess is ok.

barr1b1_3 (currently earn \$1470 per month or more from work in section Barri-

Do you currently earn \$1,470 or more per month from work?

1 Yes

2 No

3 Sometimes

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

barr3 (programs would apply for in section Barriers)

Imagine you decided to apply for Social Security disability benefits. Which of the programs below would you apply for?

- 1 (Supplemental Security Income (SSI)/Supplemental Security Income (SSI) is a federal benefit program administered by the Social Security Administration. The program provides safety-net financial support for people in need. Someone may qualify for monthly SSI payments if they are 65 or older, blind or disabled and have very limited income and financial resources. Supplemental Security Income benefits are paid out of general U.S. Treasury funds, not from Social Security taxes. One need not have worked a certain amount, or paid FICA taxes, to be eligible.//)
- 2 (Social Security Disability Insurance (SSDI)/Social Security Disability Insurance (or SSDI) is a federal insurance program of the United States government. It is managed by the Social Security Administration and designed to provide income support to people who have a disability that restricts their ability to be employed. Social Security Disability Insurance pays benefits to a disabled person and certain members of this person's family if the person is "insured," meaning that the person worked long enough throughout his or her life and paid Social Security taxes./)
- 3 Both
- 4 Other, please specify:
- 5 I don't know

barr3_**other** (other programs would apply for in section Barriers) STRING

END OF GROUP

bar4 (reasons have not yet applied for Social Security disability benefits in section Barriers)

In your own words, what are the reasons you have not yet applied for Social Security disability benefits?

STRING

- /* The answer options in bar5 are presented in random order per variables bar5_order with values:
 - 1 I am not sure if my disability is severe enough.
 - o 2 I do not have all the necessary medical documents to apply for benefits
 - o 3 I do not think my disability will last 12 months or more
 - 4 I do not think I qualify for benefits

- o 5 I think that the application process is too difficult
- o 6 I would like to go back to work
- o 7 I think that the application process takes too long
- o 8 I heard that it is too difficult to get approved for benefits
- o 9 Being on disability benefits would feel like I've given up
- o 10 I feel that people would look down on me if I received disability benefits
- o 11 Other

Note: 'Other' is always presented last. */

IF sizeof(bar5_order) = 0 THEN

```
bar5_order := shuffleArray(array(1 \rightarrow1, 2 \rightarrow2, 3 \rightarrow3, 4 \rightarrow4, 5 \rightarrow5, 6 \rightarrow6, 7 \rightarrow7, 8 \rightarrow8, 9 \rightarrow9, 10 \rightarrow10)) bar5_order(11) := 11
```

END OF IF

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

bar5 (reasons for not applying for Social Security disability benefits in section Barriers)

Which one of the following most closely reflects your reasons for not applying for Social Security disability benefits? Please select all that apply.

- 1 I am not sure if my disability is severe enough
- 2 I do not have all the necessary medical documents to apply for benefits
- 3 I do not think my disability will last 12 months or more
- 4 I do not think I qualify for benefits
- 5 I think that the application process is too difficult
- 6 I would like to go back to work
- 7 I think that the application process takes too long
- 8 I heard that it is too difficult to get approved for benefits
- 9 Being on disability benefits would feel like I've given up
- 10 I feel that people would look down on me if I received disability benefits
- 11 Other, please specify:

bar5_other (other reasons for not applying for Social Security disability benefits in section Barriers) STRING

END OF GROUP

IF bar5 = RESPONSE THEN

IF cardinal(bar5) > 1 THEN

LOOP FROM 1 TO 11

IF bar5_order(cnt) IN bar5 THEN

bar5a_order(cnt) := bar5_order(cnt)

FLSE

bar5a_order(cnt) := empty

END OF IF

END OF LOOP

bar5a (most important reason for not applying for Social Security disability benefits in section Barriers)

Which one of the following is your **most important** reason for not applying for Social Security disability benefits?

- 1 I am not sure if my disability is severe enough
- 2 I do not have all the necessary medical documents to apply for benefits
- 3 I do not think my disability will last 12 months or more
- 4 I do not think I qualify for benefits
- 5 I think that the application process is too difficult
- 6 I would like to go back to work
- 7 I think that the application process takes too long
- 8 I heard that it is too difficult to get approved for benefits
- 9 Being on disability benefits would feel like I've given up
- 10 I feel that people would look down on me if I received disability benefits
- 11 (other reasons for not applying for Social Security disability benefits())

IF bar5a = RESPONSE THEN

LOOP FROM 1 TO 11

IF bar5_order(cnt) IN bar5 AND bar5_order(cnt) != bar5a THEN

bar5b_order(cnt) := bar5_order(cnt)

ELSE

bar5b_order(cnt) := empty

END OF IF

END OF LOOP

IF cardinal(bar5) > 2 THEN

bar5b (second most important reason for not applying for Social Security disability benefits in section Barriers)

Which one of the following is your **second most important** reason for not applying for Social Security disability benefits?

- 1 I am not sure if my disability is severe enough
- 2 I do not have all the necessary medical documents to apply for benefits
- 3 I do not think my disability will last 12 months or more
- 4 I do not think I qualify for benefits
- 5 I think that the application process is too difficult
- 6 I would like to go back to work
- 7 I think that the application process takes too long
- 8 I heard that it is too difficult to get approved for benefits
- 9 Being on disability benefits would feel like I've given up
- 10 I feel that people would look down on me if I received disability benefits
- 11 (other reasons for not applying for Social Security disability benefits())

ELSE

bar5b := reset(bar5b_order)

END OF IF

ELSE

bar5b := empty

END OF IF

ELSE

bar5a := bar5

END OF IF

ELSE

bar5a := empty

END OF IF

- /* The answer options in barr6_b are presented in random order per variables barr6_b_order with values:
 - o 1 Yes, a family member, friend, or colleague
 - o 2 Yes, a healthcare provider (e.g. doctor, nurse)
 - o 3 Yes, a social worker
 - o 4 Yes, my employer or former employer;
 - o 5 Yes, other

o 6 No, no one ever suggested it

Note: 'Yes, other' and 'No, no one ever suggested it' are always presented last. */

IF sizeof(barr6_b_order) = 0 THEN

```
barr6_b_order := shuffleArray(array(1 \rightarrow1, 2 \rightarrow2, 3 \rightarrow3, 4 \rightarrow4)) barr6_b_order(5) := 5 barr6_b_order(6) := 6
```

END OF IF

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

barr6_b (anyone suggest that could/should apply for disability benefits in section Barriers)

Has anyone ever suggested that you could/should apply for Social Security disability benefits?

- 1 Yes, a family member, friend, or colleague
- 2 Yes, a healthcare provider (e.g. doctor, nurse)
- 3 Yes, a social worker
- 4 Yes, my employer or former employer
- 5 Yes, other:
- 6 No, no one ever suggested it

barr6_b_other (other anyone suggest that could/should apply for disability benefits in section Barriers)

STRING

END OF GROUP

bar7 (apply in next five years in section Barriers)

How likely is it that you will apply for Social Security disability benefits in the next **five years**?

RANGE 0..100

bar7a (apply in next ten years in section Barriers)

How about in the next ten years?

RANGE 0..100

bar8 (what done to make process more accessible in section Barriers)

If you have considered applying for Social Security Disability benefits but decided not to, what could be done to make the process more accessible or appealing to you? STRING

```
bar7_8_asked := 1
bar_endtime := date("Y-m-d H:i:s")
```

```
bar\_time := strtotime(bar\_endtime) - strtotime(bar\_begintime) \\ reward := 11
```

ELSE

intro3 := 1

ask_application := 1

Start of section **Application**

IF ask_application = 1 THEN

appl_begintime := date("Y-m-d H:i:s")
reward := 13
application_status := empty

IF intro1a = 1 OR (intro1a != 1 AND intro1b = 1) THEN

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

serv1a (which programs receive benefits in section Application)

You told us in a previous question that you receive or have received Social Security Disability Insurance ((SSDI/Social Security Disability Insurance (or SSDI) is a federal insurance program of the United States government. It is managed by the Social Security Administration and designed to provide income support to people who have a disability that restricts their ability to be employed.

Social Security Disability Insurance pays benefits to a disabled person and certain members of this person's family if the person is "insured," meaning that the person worked long enough throughout his or her life and paid Social Security taxes./)) and/or Supplemental Security Income ((SSI/Supplemental Security Income (SSI) is a federal benefit program administered by the Social Security Administration. The program provides safety-net financial support for people in need. Someone may qualify for monthly SSI payments if they are 65 or older, blind or disabled and have very limited income and financial resources.

Supplemental Security Income benefits are paid out of general U.S. Treasury funds, not from Social Security taxes. One need not have worked a certain amount, or paid FICA taxes, to be eligible.//)). From which programs do you receive or have received benefits?

- 1 Social Security Disability Insurance (SSDI) only
- 2 Supplemental Security Income (SSI) only
- 3 Both Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI)
- 4 At least one of these programs but I am not sure which one
- 5 Other, please explain:

serv1a_other (other which programs receive benefits in section Application)

STRING

END OF GROUP

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

serv1b_years (years ago started receiving beneifts in section Application)
How long ago did you first start receiving these benefits? (Your best guess is ok)
RANGE 0..120

serv1b_**months** (months ago started receiving beneifts in section Application)

RANGE 0..12

END OF GROUP

IF serv1b_years = EMPTY AND serv1b_months = EMPTY THEN

serv1b_fwp (follow up how long ago received benefits in section Application) Approximately how long ago did you first receive benefits?

- 1 Less than one year
- 2 Between one and three years ago
- 3 Between three and five years ago
- 4 Between five and ten years ago
- 5 Between ten and twenty years ago
- 6 More than twenty years ago

END OF IF

END OF IF

IF intro1a != 1 AND intro1b != 1 AND intro3 = 1 THEN

application_status := 1

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

serv1c (which programs applied benefits in section Application)

You told us in a previous question that you applied for Social Security Disability Insurance ((SSDI/Social Security Disability Insurance (or SSDI) is a federal insurance program of the United States government. It is managed by the Social Security Administration and designed to provide income support to people who have a disability that restricts their ability to be employed.

Social Security Disability Insurance pays benefits to a disabled person and certain members of this person's family if the person is "insured," meaning that the person worked long enough throughout his or her life and paid Social Security taxes./)) or Supplemental Security Income ((SSI/Supplemental

Security Income (SSI) is a federal benefit program administered by the Social Security Administration. The program provides safety-net financial support for people in need. Someone may qualify for monthly SSI payments if they are 65 or older, blind or disabled and have very limited income and financial resources.

Supplemental Security Income benefits are paid out of general U.S. Treasury funds, not from Social Security taxes. One need not have worked a certain amount, or paid FICA taxes, to be eligible.//)) in the past. Which program/s did you apply for?

- 1 Social Security Disability Insurance (SSDI) only
- 2 Supplemental Security Income (SSI) only
- 3 Both Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI)
- 4 At least one of these programs but I am not sure which one
- 5 Other, please explain:

serv1c_**other** (other which programs applied benefits in section Application) STRING

END OF GROUP

END OF IF

IF intro1a = 1 OR (intro1a != 1 AND intro1b = 1) = 1 OR (intro1a != 1 AND intro1b != 1 AND intro3 = 1) THEN

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

serv2 (how decided to apply for benefits in section Application)

How did you first decide to apply for benefits?

- 1 I knew I was eligible for benefits
- 2 I decided to apply on the advice of my healthcare provider
- 3 I decided to apply on the advice of family/friends/colleagues
- 4 I decided to apply on the advice of my former employer / medical insurance company
- 5 Other, please specify:

serv2_other (other how decided to apply for benefits in section Application)
STRING

END OF GROUP

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

serv3 (what condition first applied for in section Application) What is the condition for which you **FIRST** applied?

1 Musculoskeletal problems, such as back injuries; limb amputation

- 2 Cardiovascular conditions, such as heart failure; stroke
- 3 Respiratory illnesses, such as COPD; asthma
- 4 Senses and speech issues, such as vision and hearing loss
- 5 Neurological disorders, such as multiple sclerosis, Parkinson's Disease or epilepsy
- 6 Mental health disorders, such as depression; schizophrenia
- 7 Cancer
- 8 Other, please specify:
- 9 None, applied on the basis of age (65 and older)

serv3_other (other what condition first applied for in section Application) STRING

END OF GROUP

serv3a (how long after onset disability applied in section Application)

How long after the onset of your disability did you did you apply for Social Security disability?

- 1 Immediately after the onset of my disability
- 2 Within a year of the onset of my disability
- 3 One to three years after the onset of my disability
- 4 Four or more years after the onset of my disability

serv4 (year impairment or health problem begin to interfere with work in section Application)

In what year did the impairment or health problem begin to interfere with your work? RANGE 1950..(())

appl_2_minimum := serv4

IF appl_2_minimum = EMPTY THEN

appl_2_minimum := 1950

END OF IF

appl2 (first apply for disability benefits in section Application)

When did you first apply for disability benefits?

RANGE (minimum year for when first applied benefits())..(())

IF appl2 > 2022 THEN

appl2_followup1 (no of months first apply for disability benefits in section Application)

About how many months ago did you submit your application?

1 1

2 2

33

44

55

66

77

88

99

10

10 10

11 11 12 12

ELSEIF appl2 = EMPTY THEN

appl2_followup2 (nonresponse first apply for disability benefits in section Application)

Approximately how long ago did you first apply for benefits?

- 1 Less than one year
- 2 Between one and three years ago
- 3 Between three and five years ago
- 4 Between five and ten years ago
- 5 Between ten and twenty years ago
- 6 More than twenty years ago

END OF IF

IF serv3a < 3 OR (appl2 = RESPONSE AND (appl2 - appl_2_minimum) < 2) THEN

ELSE

/* The answer options in serv_bar1 are presented in random order per variables serv_bar1_order with values:

- o 1 I was still able to work
- o 2 I wanted to try to work again
- o 3 I did not know about the disability programs
- o 4 I did not think my disability would last 12 months or more
- o 5 I did not think I would qualify for benefits
- o 6 I thought the application process would be too difficult
- o 7 I thought that the application process would take too long
- o 8 I heard it was too difficult to get approved for benefits
- o 9 Being on disability benefits felt like I would be giving up

- o 10 I felt that people would look down on me if I received disability benefits
- o 11 Other

Note: 'Other' is always presented last. */

IF sizeof(serv_bar1_order) = 0 THEN

```
serv_bar1_order := shuffleArray(array(1 \rightarrow1, 2 \rightarrow2, 3 \rightarrow3, 4 \rightarrow4, 5 \rightarrow5, 6 \rightarrow6, 7 \rightarrow7, 8 \rightarrow8, 9 \rightarrow9, 10 \rightarrow10)) serv_bar1_order(11) := 11
```

END OF IF

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

serv_bar1 (main reasons waited more than one year after onset of disability to apply for benefits in section Application)

What were the main reasons you waited more than one year after the onset of your disability to apply for benefits? Please select all that apply.

- 1 I was still able to work
- 2 I wanted to try to work again
- 3 I did not know about the disability programs
- 4 I did not think my disability would last 12 months or more
- 5 I did not think I would qualify for benefits
- 6 I thought the application process would be too difficult
- 7 I thought that the application process would take too long
- 8 I heard it was too difficult to get approved for benefits
- 9 Being on disability benefits felt like I would be giving up
- 10 I felt that people would look down on me if I received disability benefits
- 11 Other, please specify:

serv_bar1_other (other main reason waited more than one year after onset of disability to apply for benefits in section Application) STRING

END OF GROUP

IF serv_bar1 = RESPONSE THEN | IF cardinal(serv_bar1) > 1 THEN

LOOP FROM 1 TO 11

IF serv_bar1_order(cnt) IN serv_bar1 THEN

serv_bar1a_order(cnt) := serv_bar1_order(cnt)

ELSE

serv_bar1a_order(cnt) := empty

END OF IF

END OF LOOP

serv_bar1a (most important main reason waited more than one year after onset of disability to apply for benefits in section Application)

What was the **most important** main reason you waited more than one year after the onset of your disability to apply for benefits?

- 1 I was still able to work
- 2 I wanted to try to work again
- 3 I did not know about the disability programs
- 4 I did not think my disability would last 12 months or more
- 5 I did not think I would qualify for benefits
- 6 I thought the application process would be too difficult
- 7 I thought that the application process would take too long
- 8 I heard it was too difficult to get approved for benefits
- 9 Being on disability benefits felt like I would be giving up
- 10 I felt that people would look down on me if I received disability benefits
- 11 (other main reason waited more than one year after onset of disability to apply for benefits())

IF serv_bar1a = RESPONSE THEN

LOOP FROM 1 TO 11

IF serv_bar1_order(cnt) IN serv_bar1 AND serv_bar1_order(cnt) != serv_bar1a THEN

serv_bar1b_order(cnt) := serv_bar1_order(cnt)

ELSE

serv_bar1b_order(cnt) := empty

END OF IF

END OF LOOP

IF cardinal(serv_bar1) > 2 THEN

serv_bar1b (second most important main reason waited more than one year after onset of disability to apply for benefits in section Application) What was the **second most important** main reason you waited more than

```
1 I was still able to work
       2 I wanted to try to work again
       3 I did not know about the disability programs
       4 I did not think my disability would last 12 months or more
       5 I did not think I would qualify for benefits
       6 I thought the application process would be too difficult
       7 I thought that the application process would take too long
       8 I heard it was too difficult to get approved for benefits
       9 Being on disability benefits felt like I would be giving up
       10 I felt that people would look down on me if I received disability benefits
       11 (other main reason waited more than one year after onset of disability to
       apply for benefits())
      ELSE
       serv_bar1b := reset(serv_bar1b_order)
     END OF IF
    ELSE
     serv_bar1b := empty
    END OF IF
   ELSE
    serv_bar1a := serv_bar1
   END OF IF
 ELSE
  serv_bar1a := empty
 END OF IF
END OF IF
/* The answer options in serv_bar3 are presented in random order per variables
serv_bar3_order with values:
   o 1 Yes, a family member, friend, or colleague
   o 2 Yes, a healthcare provider (e.g. doctor, nurse)
   o 3 Yes, a social worker
   4 Yes, my employer or former employer;
   o 5 Yes, other
   o 6 No, no one ever suggested it
Note: 'Yes, other' and 'No, no one ever suggested it' are always presented last. */
```

one year after the onset of your disability to apply for benefits?

IF sizeof(serv_bar3_order) = 0 THEN

```
serv_bar3_order := shuffleArray(array(1 \rightarrow1, 2 \rightarrow2, 3 \rightarrow3, 4 \rightarrow4)) serv_bar3_order(5) := 5 serv_bar3_order(6) := 6
```

END OF IF

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

serv_bar3 (anyone suggest that could/should apply for disability benefits in section Application)

Before you applied, did anyone suggest that you could/should apply for disability benefits?

- 1 Yes, a family member, friend, or colleague
- 2 Yes, a healthcare provider (e.g. doctor, nurse)
- 3 Yes, a social worker
- 4 Yes, my employer or former employer;
- 5 Yes, other:
- 6 No, no one ever suggested it

serv_bar3_other (other anyone suggest that could/should apply for disability benefits in section Application) STRING

END OF GROUP

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl3 (receive assistance with application in section Application)

Did you receive any assistance in preparing and submitting your application? Please select all that apply.

- 1 I did not receive any assistance
- 2 I received assistance from a lawyer
- 3 I received assistance from family/friends
- 4 I received assistance from a social worker/insurance company/employer
- 6 I received assistance from an SSA representative by phone or at a field office
- 5 I received assistance from someone else, please specify:

appl3_other (other receive assistance with claim in section Application) STRING

END OF GROUP

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl4 (how submitted application in section Application)

How was your application submitted?

- 1 Online
- 2 Application form sent by mail
- 3 Application filled out in the SSA office
- 5 By telephone, with an SSA office
- 4 Other, please specify:

appl4_other (other how submitted application in section Application)
STRING

END OF GROUP

appl5 (rate process of making claim in section Application)

How would you rate the process of preparing and submitting your claim?

- 1 Very easy
- 2 Easy
- 3 Neither easy nor difficult
- 4 Difficult
- 5 Very difficult

appl6 (provide medical information in section Application)

For this application, were you able to provide medical information (medical records, doctor contact information, other documentation)?

IF appl6 = 2 THEN

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl6a (why unable to provide medical information in section Application)

Why were you unable to provide medical information? Please select all that apply.

- 1 Couldn't pay for a doctor's visit, medical tests, or other services
- 2 Did not have transportation to a doctor's office
- 3 Did not have a doctor or medical provider to obtain a diagnosis or records
- 4 Did not have the assistance needed to interact with the medical provider (language, understanding)
- 5 Doctor or medical provider did not diagnose a medical condition or provide other evidence
- 6 Other reason, please specify:

appl6a_other (other why unable to provide medical records in section Application)

STRING

END OF GROUP

END OF IF

appl7 (asked by SSA to visit doctor in section Application)

For this application, were you asked by SSA/the office of Disability Determination Services to visit a doctor?

appl8 (outcome first application in section Application)

What was the outcome of the first application?

- 1 It was approved
- 2 It was rejected
- 3 It is currently under review

IF appl8 IN (1,2) THEN

application_status := 2

appl9 (how long to hear back from application in section Application)

How long did it take to hear back whether your application was approved or denied?

RANGE 1..99

END OF IF

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl9b (how support while waiting for disability decision in section Application) How did you support yourself while you waited for your disability decision? Please select all that apply.

- 1 Worked full-time
- 2 Worked part-time
- 3 Government assistance (e.g., Food Stamps/SNAP/EBT , workers' compensation, unemployment insurance)
- 4 Spouse's earnings
- 5 Personal savings
- 6 Took on credit card debt or debt from other commercial sources
- 7 Changed living arrangements (e.g., moved in with family members, moved into lower cost housing)
- 8 Sold assets (e.g. home, car, investments)
- 9 Assistance or loans from friends and/or family (other than spouse)
- 10 Other, please specify:

appl9b_other (other how support while waiting for disability decision in section Application)

STRING

END OF GROUP

IF appl8 = 2 THEN

application_status := 2

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl10 (why application rejected in section Application)

What reason did SSA give for denying your application?

- 1 Insufficient work credits
- 2 Insufficient medical evidence
- 3 Insufficient non-medical documentation
- 6 I did not attend the necessary medical exams
- 7 I was found to be able to work
- 11 My impairment was not considered severe
- 12 My impairment lasted or will last less than 12 months
- 13 My impairment was not considered to be disabling
- 8 I was making too much money to qualify for benefits
- 9 Other, please specify:

appl10_**other** (other why application rejected in section Application) STRING

END OF GROUP

appl11 (action after application was rejected in section Application) What did you do after your disability application was rejected?

- 1 I appealed the decision
- 2 I submitted a new application
- 3 Neither

IF appl11 = 1 THEN

application_status := 1

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl12 (any assistance with appeal in section Application)

Did you receive any assistance in preparing the appeal?

- 1 I did not receive any assistance
- 2 I received assistance from a lawyer
- 3 I received assistance from family/friends
- 4 I received assistance from a social worker/insurance company/employer
- 6 I received assistance from an SSA representative by phone or at a field office

5 I received assistance from someone else, please specify:

appl12_other (other any assistance with appeal in section Application) STRING

END OF GROUP

appl13 (final outcome of appeal in section Application)

What was the final outcome for this application?

- 1 It was approved
- 2 It was rejected
- 3 It is currently under review

IF appl13 IN (1,2) THEN

application_status := 2

appl14 (how long to hear back between first appeal and final decision in section Application)

How long did it take between the first appeal and the final decision on your application?

RANGE 1..99

END OF IF

IF appl13 = 2 THEN

appl15 (submit new application in section Application) Did you submit a new application?

IF appl15 = 1 THEN

application_status := 1

END OF IF

END OF IF

ELSEIF appl11 = 2 THEN

application_status := 1

END OF IF

IF appl11 = 2 OR (appl11 = 1 AND appl13 = 2 AND appl15 = 1) THEN

application_status := 1

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl_b1_year (year how long waited after first application apply again in section Application)

The following questions are about the second time you applied for disability

benefits.

How long did you wait after your first application was rejected before you applied again?

RANGE 0..120

appl_b1_month (month how long waited after first application apply again in section Application)

RANGE 0..12

END OF GROUP

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl_b2_year (year how long ago second application in section Application) About how long ago was this? RANGE 0..120

appl_b2_month (month how long ago second application in section Application)

RANGE 0..12

END OF GROUP

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl_b3 (receive assistance with second application in section Application) Did you receive any assistance in preparing and submitting your application? Please select all that apply.

- 1 I did not receive any assistance
- 2 I received assistance from a lawyer
- 3 I received assistance from family/friends
- 4 I received assistance from a social worker/insurance company/employer
- 6 I received assistance from an SSA representative by phone or at a field office
- 5 I received assistance from someone else, please specify:

appl_b3_other (other receive assistance with second application in section Application)

END OF GROUP

STRING

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl_b4 (how submitted second application in section Application)

How was the second application submitted?

- 1 Online
- 2 Application form sent by mail
- 3 Application filled out in the SSA office
- 5 By telephone, with an SSA office
- 4 Other, please specify:

appl_b4_other (other how submitted second application in section Application)

STRING

END OF GROUP

appl_b5 (rate process of making second application in section Application)

How would you rate the process of preparing and submitting your application?

- 1 Very easy
- 2 Easy
- 3 Neither easy nor difficult
- 4 Difficult
- 5 Very difficult

appl_b6 (provide medical information second application in section Application)

For this application, were you able to provide medical information (medical records, doctor contact information, other documentation)?

IF appl6 = 2 THEN

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl_b6a (why unable to provide medical information second application in section Application)

Why were you unable to provide medical information? Please select all that apply.

- 1 Couldn't pay for a doctor's visit, medical tests, or other services
- 2 Did not have transportation to a doctor's office
- 3 Did not have a doctor or medical provider to obtain a diagnosis or records
- 4 Did not have the assistance needed to interact with the medical provider (language, understanding)
- 5 Doctor or medical provider did not diagnose a medical condition or provide other evidence
- 6 Other reason, please specify:

appl_b6a_other (other why unable to provide medical records second

application in section Application) STRING

END OF GROUP

END OF IF

appl_b7 (asked by SSA to visit doctor second application in section Application)

For this application, were you asked by SSA/the office of Disability Determination Services to visit a doctor?

appl_b8 (outcome second application in section Application)

What was the outcome of the second application?

- 1 It was approved
- 2 It was rejected
- 3 It is currently under review

IF appl_b8 IN (1,2) THEN

application_status := 2

appl_b9 (how long to hear back from second application in section Application)

How long did it take to hear back on your application?

RANGE 1..99

END OF IF

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl_b9b (how support while waiting for disability decision second application in section Application)

How did you support yourself while you waited for your disability decision? Please select all that apply.

- 1 Worked full-time
- 2 Worked part-time
- 3 Government assistance (e.g., Food Stamps/SNAP/EBT , workers' compensation, unemployment insurance)
- 4 Spouse's earnings
- 5 Personal savings
- 6 Took on credit card debt or debt from other commercial sources
- 7 Changed living arrangements (e.g., moved in with family members, moved into lower cost housing)
- 8 Sold assets (e.g. home, car, investments)
- 9 Assistance or loans from friends and/or family (other than spouse)
- 10 Other, please specify:

appl_b9b_other (other how support while waiting for disability decision second application in section Application) STRING

END OF GROUP

IF appl_b8 = 2 THEN

application_status := 2

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl_b10 (why application rejected second application in section Application) What reason did SSA give for denying your application?

- 1 Insufficient work credits
- 2 Insufficient medical evidence
- 3 Insufficient non-medical documentation
- 6 I did not attend the necessary medical exams
- 7 I was found to be able to work
- 11 My impairment was not considered severe
- 12 My impairment lasted or will last less than 12 months
- 13 My impairment was not considered to be disabling
- 8 I was making too much money to qualify for benefits
- 9 Other, please specify:

appl_**b10**_**other** (other why application rejected second application in section Application)
STRING

END OF GROUP

appl_b11 (action after second application was rejected in section Application)

What did you do after your disability application was rejected?

- 1 I appealed the decision
- 2 I submitted a new application
- 3 Neither

IF $appl_b11 = 1$ THEN

application_status := 1

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl_b12 (any assistance with appeal second application in section Application)

Did you receive any assistance in preparing the appeal?

- 1 I did not receive any assistance
- 2 I received assistance from a lawyer
- 3 I received assistance from family/friends
- 4 I received assistance from a social worker/insurance company/employer
- 6 I received assistance from an SSA representative by phone or at a field office
- 5 I received assistance from someone else, please specify:

appl_b12_other (other any assistance with appeal second application
in section Application)
STRING

END OF GROUP

appl_b13 (final outcome of appeal second application in section Application)

What was the final outcome for this application?

- 1 It was approved
- 2 It was rejected
- 3 It is currently under review

IF appl_b13 IN (1,2) THEN

application_status := 2

appl_**b14** (how long to hear back between first appeal and final decision second application in section Application)

How long did it take between the first appeal and the final decision on your application?

RANGE 1..99

END OF IF

IF $appl_b13 = 2$ THEN

appl_b15 (submit new application in section Application) Did you submit a new application?

IF appl_b15 = 1 THEN

application_status := 1

END OF IF

END OF IF

ELSEIF appl11 = 2 THEN

application_status := 1

END OF IF

IF appl_b11 = 2 OR (appl_b11 = 1 AND appl_b13 = 2 AND appl_b15 = 1) THEN

application_status := 1

appl_c1 (how many applications in total in section Application) In total, how many times have you applied for disability benefits?

13

24

3 5 or more

appl_c2_year (year how long ago most recent application in section Application)

The following questions are about your **most recent** application.

When did you submit your most recent application?

Please enter the year:

RANGE 1950..(())

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl_**c3** (receive assistance with most recent application in section Application)

Did you receive any assistance in preparing and submitting your claim? Please select all that apply.

- 1 I did not receive any assistance
- 2 I received assistance from a lawyer
- 3 I received assistance from family/friends
- 4 I received assistance from a social worker/insurance company/employer
- 6 I received assistance from an SSA representative by phone or at a field office
- 5 I received assistance from someone else, please specify:

appl_c3_other (other receive assistance with most recent application
in section Application)
STRING

END OF GROUP

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl_c4 (how submitted most recent application in section Application)

How was the most recent application submitted?

- 1 Online
- 2 Application form sent by mail
- 3 Application filled out in the SSA office
- 5 By telephone, with an SSA office
- 4 Other, please specify:

appl_c4_other (other how submitted most recent application in section Application)

STRING

END OF GROUP

appl_**c5** (rate process of making most recent application in section Application)

How would you rate the process of preparing and submitting your application?

- 1 Very easy
- 2 Easy
- 3 Neither easy nor difficult
- 4 Difficult
- 5 Very difficult

appl_**c6** (provide medical information most recent application in section Application)

For this application, were you able to provide medical information (medical records, doctor contact information, other documentation)?

appl_c7 (asked by SSA to visit doctor most recent application in section Application)

For this application, were you asked by SSA/the office of Disability Determination Services to visit a doctor?

appl_c8 (outcome most recent application in section Application)

What was the outcome of the most recent application?

- 1 It was approved
- 2 It was rejected
- 3 It is currently under review

IF appl_c8 IN (1,2) THEN

application_status := 2

appl_c9 (how long to hear back from most recent application in section Application)

How long did it take to hear back on your application? RANGE 1..99

END OF IF

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl_c9b (how support while waiting for disability decision most recent application in section Application)

How did you support yourself while you waited for your disability decision? Please select all that apply.

- 1 Worked full-time
- 2 Worked part-time
- 3 Government assistance (e.g., Food Stamps/SNAP/EBT , workers' compensation, unemployment insurance)
- 4 Spouse's earnings
- 5 Personal savings
- 6 Took on credit card debt or debt from other commercial sources
- 7 Changed living arrangements (e.g., moved in with family members, moved into lower cost housing)
- 8 Sold assets (e.g. home, car, investments)
- 9 Assistance or loans from friends and/or family (other than spouse)
- 10 Other, please specify:

appl_c9b_other (other how support while waiting for disability decision most recent application in section Application) STRING

END OF GROUP

IF appl_c8 = 2 THEN

application_status := 2

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl_c10 (why application rejected most recent application in section Application)

What reason did SSA give for denying your application?

- 1 Insufficient work credits
- 2 Insufficient medical evidence
- 3 Insufficient non-medical documentation
- 6 I did not attend the necessary medical exams
- 7 I was found to be able to work
- 11 My impairment was not considered severe
- 12 My impairment lasted or will last less than 12 months
- 13 My impairment was not considered to be disabling

8 I was making too much money to qualify for benefits

9 Other, please specify:

appl_c10_other (other why application rejected most recent application in section Application)
STRING

END OF GROUP

appl_c11 (action after most recent application was rejected in section Application)

What did you do after your disability application was rejected?

- 1 I appealed the decision
- 2 I submitted a new application
- 3 Neither

IF $appl_c11 = 1$ THEN

application_status := 1

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl_c12 (any assistance with appeal most recent application in section Application)

Did you receive any assistance in preparing the appeal?

- 1 I did not receive any assistance
- 2 I received assistance from a lawyer
- 3 I received assistance from family/friends
- 4 I received assistance from a social worker/insurance company/employer
- 6 I received assistance from an SSA representative by phone or at a field office
- 5 I received assistance from someone else, please specify:

appl_c12_other (other any assistance with appeal most recent application in section Application) STRING

END OF GROUP

appl_c13 (final outcome of appeal most recent application in section Application)

What was the final outcome for this application?

- 1 It was approved
- 2 It was rejected

3 It is currently under review

IF appl_c13 IN (1,2) THEN

application_status := 2

appl_c14 (how long to hear back between first appeal and final decision most recent application in section Application)

How long did it take between the first appeal and the final decision on your application?

RANGE 1..99

END OF IF

END OF IF

END OF IF

END OF IF

END OF IF

END OF IF

END OF IF

LIND OF I

END OF IF

IF intro1a != 1 AND intro1b != 1 AND intro3 = 1 AND application_status = 2 THEN

appl_d1 (plan to submit application for disability in section Application)

Do you intend to submit a new application for disability benefits in the future?

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

appl_d2 (how support after application rejected in section Application)

How have you supported yourself since your last application was rejected or your benefits ended?

- 1 Worked full-time
- 2 Worked part-time
- 3 Government assistance (e.g., Food Stamps/SNAP/EBT , workers' compensation, unemployment insurance) $\,$
- 4 Spouse's earnings
- 5 Personal savings
- 6 Took on credit card debt or debt from other commercial sources
- 7 Changed living arrangements (e.g., moved in with family members, moved into lower cost housing)
- 8 Sold assets (e.g. home, car, investments)
- 9 Assistance or loans from friends and/or family (other than spouse)
- 10 Other, please specify:

appl_d2_other (other how support after application rejected in section Appli-

cation) STRING

END OF GROUP

END OF IF

IF ask_application = 1 THEN

IF intro1a = 1 THEN

serv8 (how satisfied with benefits in section Application)

How satisfied are you with the amount of your disability benefit?

- 1 Very satisfied
- 2 Satisfied
- 3 Neither satisfied nor dissatisfied
- 4 Dissatisfied
- 5 Very dissatisfied

serv9a (part of income coming from benefits in section Application)

How much of your household income comes from (SSDI/Social Security Disability Insurance (or SSDI) is a federal insurance program of the United States government. It is managed by the Social Security Administration and designed to provide income support to people who have a disability that restricts their ability to be employed.

Social Security Disability Insurance pays benefits to a disabled person and certain members of this person's family if the person is "insured," meaning that the person worked long enough throughout his or her life and paid Social Security taxes./) / (SSI/Supplemental Security Income (SSI) is a federal benefit program administered by the Social Security Administration. The program provides safetynet financial support for people in need. Someone may qualify for monthly SSI payments if they are 65 or older, blind or disabled and have very limited income and financial resources.

Supplemental Security Income benefits are paid out of general U.S. Treasury funds, not from Social Security taxes. One need not have worked a certain amount, or paid FICA taxes, to be eligible.//)?

END OF IF

IF intro1a = 1 OR (intro1a != 1 AND intro1b = 1) OR (intro1a != 1 AND intro1b != 1 AND intro3 = 1) THEN

serv10 (how health compared to when first applied for benefits in section Application)

Compared to when you first applied for (SSDI/Social Security Disability Insurance (or SSDI) is a federal insurance program of the United States government. It is

managed by the Social Security Administration and designed to provide income support to people who have a disability that restricts their ability to be employed.

Social Security Disability Insurance pays benefits to a disabled person and certain members of this person's family if the person is "insured," meaning that the person worked long enough throughout his or her life and paid Social Security taxes./) / (SSI/Supplemental Security Income (SSI) is a federal benefit program administered by the Social Security Administration. The program provides safetynet financial support for people in need. Someone may qualify for monthly SSI payments if they are 65 or older, blind or disabled and have very limited income and financial resources.

Supplemental Security Income benefits are paid out of general U.S. Treasury funds, not from Social Security taxes. One need not have worked a certain amount, or paid FICA taxes, to be eligible.//) benefits, how would you rate your health in general now?

- 1 Much better now
- 2 Somewhat better now
- 3 About the same
- 4 Somewhat worse now
- 5 Much worse now

serv12 (how life compared to when first applied for benefits in section Application)

Compared to when you first applied for (SSDI/Social Security Disability Insurance (or SSDI) is a federal insurance program of the United States government. It is managed by the Social Security Administration and designed to provide income support to people who have a disability that restricts their ability to be employed.

Social Security Disability Insurance pays benefits to a disabled person and certain members of this person's family if the person is "insured," meaning that the person worked long enough throughout his or her life and paid Social Security taxes./)/(SSI/Supplemental Security Income (SSI) is a federal benefit program administered by the Social Security Administration. The program provides safetynet financial support for people in need. Someone may qualify for monthly SSI payments if they are 65 or older, blind or disabled and have very limited income and financial resources.

Supplemental Security Income benefits are paid out of general U.S. Treasury funds, not from Social Security taxes. One need not have worked a certain amount, or paid FICA taxes, to be eligible.//) benefits, would you say your standard of living now is:

- 1 Much better
- 2 Somewhat better
- 3 About the same

4 Somewhat worse

5 Much worse

END OF IF

IF intro1a = 1 THEN

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

serv13 (how likely go back to work in section Application)

How likely do you think it is that you will ever go back to work? Enter 0 if you are sure that you will never go back work, and 100 if you are sure you will go back to work at some point.

slider_script (Section Knowledge)

Please enter a number between 0% and 100%.

END OF GROUP

ELSE

serv13_**b1** (currently working in section Application) Are you currently working?

IF serv13_b1 = 2 THEN

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

serv13_**b2** (how likely go back to work in section Application) How likely do you think it is that you will ever go back to work?

slider_script (Section Knowledge)

Please enter a number between 0% and 100%.

END OF GROUP

END OF IF

END OF IF

serv14 (aware of SS rule in section Application)

Did you know that the Social Security rules allow an individual who receives disability benefits to work as long as their income is below an amount set by the Social Security Administration (i.e., the Substantial Gainful Activity amount)?

IF serv14 = 1 THEN

serv14b (if not for Substantial Gainful Activity rule working more in section Application)

If it was not for the Substantial Gainful Activity rule, would you be working more?

END OF IF

appl_endtime := date("Y-m-d H:i:s")
appl_time := strtotime(appl_endtime) - strtotime(appl_begintime)

END OF IF

End of section Application

END OF IF

END OF IF

End of section Barriers

Start of section **Disability**

/* Respondents are asked a series of questions about disabilities they may have. These questions were added in March of 2024, and as such have not been asked of all respondents. All respondents that are asked will have a value of '1' for variable disability_asked. */

disability_asked := 1

dis_intro (Section Disability)

Before concluding, we have a few short questions about disabilities.

diffhear (acs6-disability : deaf or hearing difficulty in section Disability) Are you deaf or do you have serious difficulty hearing?

diffeye (acs6-disability: Vision Difficulty or blind in section Disability)

Are you blind or do you have serious difficulty seeing even when wearing glasses?

diffrem (acs6-disability: Cognitive Difficulty in section Disability)
Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering, or making decisions?

diffwalk (acs6-disability: difficulty walking or climbing in section Disability) Do you have serious difficulty walking or climbing stairs?

diffcare (acs6-disability: selfcare difficulty, dressing or bathing in section Disability) Do you have difficulty dressing or bathing?

differrand (acs6-disability: difficulty doing errands in section Disability)

Because of a physical, mental, or emotional condition, do you have difficulty doing errands alone such as visiting a doctor's office or shopping?

sc006 (consider to be person with disability in section Disability)
Do you consider yourself to be a person with a disability?

1 Yes

2 No 98 I prefer not to respond 99 I don't know

IF sc006 = 1 THEN

GROUP OF QUESTIONS PRESENTED ON THE SAME SCREEN

sc007 (how be person with disability in section Disability)

Please indicate how you self-identify (select all that apply):

- 1 Person living with a physical disability
- 2 Person living with a learning disability
- 3 Person living with a mental and/or psychological disability
- 4 Person living with a vision disability
- 5 Person living with a hearing disability
- 6 Person with an intellectual disability
- 7 Person with a developmental disability
- 8 Person living with a disability not listed above, please describe:
- 9 I prefer not to respond

sc007_other (other how be person with disability in section Disability) STRING

END OF GROUP

END OF IF

End of section Disability

Start of section Closing

CS_001 (HOW PLEASANT INTERVIEW in section Closing)

Could you tell us how interesting or uninteresting you found the questions in this survey?

- 1 Very interesting
- 2 Interesting
- 3 Neither interesting nor uninteresting
- 4 Uninteresting
- 5 Very uninteresting

CS_003 (comments in section Closing)

Do you have any other comments on the survey? Please type these in the box below. (If you have no comments, please click next to complete this survey.) STRING

IF reward > 0 THEN

dummy := doPayout(551, reward)

END OF IF

End of section Closing

 $^{\prime*}$ Please note that although question CS_003 is listed in the routing, the answers are not included in the microdata in the event identifiable information is captured. Cleaned responses are available by request. $^{*}/$