

NOTE: WHERE THERE IS MORE THAN ONE JUMP WITHIN A BRANCHPOINT BOX, THE JUMPS ARE TO BE APPLIED IN ORDER FROM THE TOP.

GD1 BRANCHPOINT: IF NEW INTERVIEW R or IF AHEAD COHORT, GO TO SECTION GJ

GD1. Now I want to ask how your health affects paid work activities.

Do you have any impairment or health problem that limits the kind or amount of paid work you can do?

1. YES	5. NO	8. DK	9. RF
GO TO GD1d			

GD1a. What health condition causes this impairment or problem?

[IWER: IF MORE THAN ONE CONDITION, ASK:]

What condition is the main cause of this impairment or problem?

[IWER: RECORD ALL MENTIONS AND PLACE AN M: BEFORE MAIN CAUSE]

DK	RF
----	----

CAUSE

GD1b. Is this a temporary condition that will last for less than three months?

1. YES, TEMPORARY	5. NO, NOT TEMPORARY	8. DK	9. RF
GO TO GD2 BRANCHPOINT			

GD1c. Have you had this condition before?

1. YES	5. NO	8. DK	9. RF
GO TO GD2 BRANCHPOINT			

GD1d. Does any impairment or health problem limit the kind or amount of work you can do around the house?

1. YES	5. NO	8. DK	9. RF
GO TO GD1f			

GD1e. Are you limited in any way in activities because of an impairment or problem?

1. YES	5. NO	8. DK	9. RF
GO TO GD2 BRANCHPOINT			

GD1f. What health condition causes this impairment or problem?

[IWER: IF MORE THAN ONE CONDITION, ASK:]
What condition is the main cause of this impairment or problem?

[IWER: RECORD ALL MENTIONS AND PLACE AN M: BEFORE MAIN CAUSE]

DK	RF
----	----

CAUSE

GD1g(1). When did the impairment or health problem you just mentioned first begin to bother you?

9996. CONDITION PRESENT AT BIRTH	9997. IN YEAR IF AGE GIVEN	DK	RF
----------------------------------	----------------------------	----	----

YEAR

GD1g(2). MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY	06. JUN
07. JUL	08. AUG	09. SEP	10. OCT	11. NOV	12. DEC
96. CONDITION PRESENT AT BIRTH	97. AGE GIVEN	98. DK	99. RF		

GD1g2 BRANCHPOINT: IF R DID NOT GIVE HIS/HER AGE THAT IMPAIRMENT BEGAN TO BOTHER HIM/HER (GD1g(1) NOT 9997 and GD1g(2) NOT 97), GO TO GD1h

GD1g2. [IWER: PROBE IF NECESSARY]

At what age did the impairment or health problem you just mentioned first begin to bother you?

DK	RF
----	----

AGE

GD1h. When did it begin to interfere with the work you can do around the house/your activities?

GD1g: MONTH HEALTH IMPAIRMENT BEGAN

NOTE: MONTH REPORTED IN GD1g IS DISPLAYED TO IWER.

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY	06. JUN
GO TO GD2 BRANCHPOINT					

07. JUL	08. AUG	09. SEP	10. OCT	11. NOV	12. DEC
GO TO GD2 BRANCHPOINT					

97. AGE GIVEN	98. DK	99. RF
GO TO GD2 BRANCHPOINT		

_____	DK	RF
-------	----	----

GD1h1. YEAR

GD1h2. [IWER: ENTER AGE THAT DISABILITY BEGAN TO INTERFERE WITH WORK AROUND HOUSE/ACTIVITIES]

_____	DK	RF
-------	----	----

AGE

GD2 BRANCHPOINT: IF R WAS NOT DISABLED AT R'S LAST IW *and* R DOES NOT REPORT ANY IMPAIRMENT NOW (GD={5 or DK or RF}), GO TO GD131 BRANCHPOINT

IF R DOES NOT REPORT ANY IMPAIRMENT NOW (GD1={5 or DK or RF}), GO TO GD18 BRANCHPOINT

IF R IS CURRENTLY EMPLOYED (G2=1), GO TO GD3

GD2. Does this limitation keep you from working altogether?

1. YES	5. NO	8. DK	9. RF
--------	-------	-------	-------

GD3. When did the impairment or health problem you mentioned first begin to bother you?

[IWER: PROBE IF NECESSARY]
When did it happen?

	9995. HAD CONDITION ALL R'S LIFE	9996. IT DOESN'T BOTHER R	DK	RF
YEAR				
GO TO GD4				

GD3a. MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY
06. JUN	07. JUL	08. AUG	09. SEP	10. OCT
11. NOV	12. DEC	98. DK	99. RF	

GD4. When did it begin to interfere with your work?

	9995. DOESN'T INTERFERE WITH WORK	DK	RF
YEAR			

GD4a. MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY	06. JUN
07. JUL	08. AUG	09. SEP	10. OCT	11. NOV	12. DEC
95. DOESN'T INTERFERE WITH WORK		98. DK	99. RF		

GD6 BRANCHPOINT: IF R'S IMPAIRMENT DOES NOT KEEP HIM/HER FROM WORKING ALTOGETHER (GD2 NOT 1), GO TO GD8 BRANCHPOINT

GD6. When did it begin to prevent you from working altogether?

	DK	RF
YEAR		

GD6a. MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY
06. JUN	07. JUL	08. AUG	09. SEP	10. OCT
11. NOV	12. DEC	98. DK	99. RF	

GD8 BRANCHPOINT: IF PROXY INTERVIEW, GO TO GD10

IF THIS IS A TEMPORARY CONDITION LASTING LESS THAN 3 MONTHS (GD1b=1), GO TO GD9

IF IMPAIRMENT DOES NOT INTERFERE WITH WORK (GD4=9995 or GD4a=95), GO TO GD8a

GD8. Do you expect this condition to improve enough within the next few years so that it will no longer be a problem for your working?

1. YES	5. NO	8. DK	9. RF
<div style="border: 1px solid black; padding: 2px; display: inline-block;">GO TO GD9</div>			

GD8a. Do you expect this condition to get worse within the next few years?

1. YES	5. NO	8. DK	9. RF
--------	-------	-------	-------

GD9. Was the impairment or health problem you just mentioned the result of an accident or injury?

1. YES	5. NO	8. DK	9. RF
<div style="border: 1px solid black; padding: 2px; display: inline-block;">GO TO GD10</div>			

GD9a. Did the accident or injury occur at work, at home, or somewhere else?

1. WORK	2. HOME	3. SOMEWHERE ELSE	8. DK	9. RF
---------	---------	-------------------	-------	-------

GD9b. Was it the result of an automobile accident?

1. YES	5. NO	8. DK	9. RF
--------	-------	-------	-------

GD10. Was this impairment or health problem in any way caused by the nature of your work?

1. YES	5. NO	8. DK	9. RF
--------	-------	-------	-------

GD12 BRANCHPOINT: IF R WAS DISABLED AT R'S LAST IW, GO TO GD15 BRANCHPOINT

GD12. Were you employed at the time your health began to limit your ability to work?

1. YES	5. NO	8. DK	9. RF
GO TO GD15 BRANCHPOINT			

GD12a. Did you tell me about the details of that job earlier?

1. YES	5. NO	8. DK	9. RF
GO TO GD12c BRANCHPOINT			

GD12b. Which company or organization was that?

1. R'S LAST INTERVIEW EMPLOYER	2. R'S LAST EMPLOYER (Q GG49)	3. R'S LAST EMPLOYER (Q GH3a)
6. SELF-EMPLOYMENT	7. OTHER (SPECIFY) _____	8. DK 9. RF

GD12c BRANCHPOINT: IF R TOLD US ABOUT THE JOB HE HAD WHEN HEALTH LIMITS BEGAN (GD12a=1) and EMPLOYER WAS NOT "OTHER" AT GD12b (NOT 7), GO TO GD13

GD12c. Before your health began to limit your ability to work, were you working for someone else, were you self-employed, or what?

[IWER: IF R SAYS "I RAN MY OWN BUSINESS" CHOOSE SELF-EMPLOYED]

1. SOMEONE ELSE	2. SELF-EMPLOYED	8. DK	9. RF
-----------------	------------------	-------	-------

GD12d. What sort of work did you do on that job?

[IWER: PROBE]
Tell me a little more about what you did.

_____	DK	RF
TYPE OF WORK		

GD12e. What kind of business or industry did you work in — that is, what did they make or do at the place where you worked?

_____	DK	RF
BUSINESS		

GD12f. About how many employees work for that company or organization at all locations?

NUMBER

DK

RF

GO TO GD12h

GD12g. Is it fewer than 5, 5 to 14, 15 to 24, 25 to 99, 100 to 499, or 500 or more?

1. FEWER THAN 5

2. 5 TO 14

3. 15 TO 24

4. 25 TO 99

5. 100 TO 499

6. 500 OR MORE

8. DK

9. RF

GD12h. What were you earning, before deductions, when you left that employer?

[IWER: IF PER HOUR BE SURE TO ADD .00 FOR CENTS IF THERE ARE NONE]

[IWER: PROBE IF NECESSARY]

Was that per hour, week, month, or year?

AMOUNT

DK

RF

GO TO GD12j

GD12i. PER:

01. HOUR

02. WEEK

03. EVERY TWO WEEKS/BI-WEEKLY

04. MONTH

06. YEAR

97. OTHER (SPECIFY)

98. DK

99. RF

GD12j. How many hours a week did you usually work for that employer?

HOURS

DK

RF

GD12k. READ SLOWLY:

Counting paid vacations as weeks of work, how many weeks per year did you usually work for this employer?

[IWER: COUNT PAID SICK TIME AS WORK TIME]

WEEKS

DK

RF

GD121. Were you covered by a union or employee-association contract?

1. YES

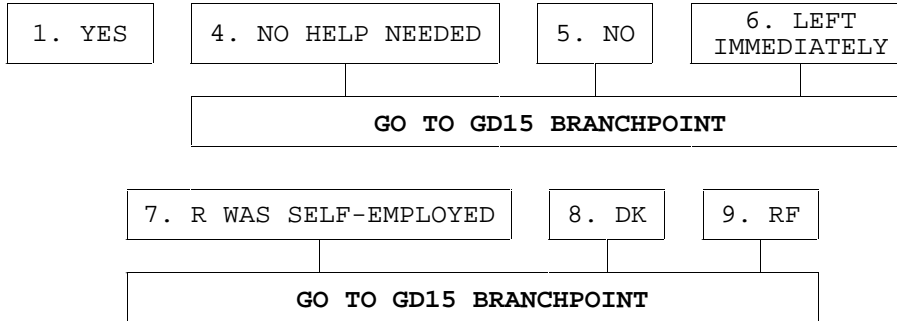
5. NO

8. DK

9. RF

GD13 BRANCHPOINT: IF R {WAS SELF-EMPLOYED or DID NOT GIVE NAME OF {COMPANY OR ORGANIZATION} (GD12b={6 or DK or RF})}, GO TO GD15 BRANCHPOINT

GD13. At the time your health started to limit your ability to work, did your employer do anything special to help you out so that you could stay at work?



	1. YES	5. NO	8. DK	9. RF
GD13a. Did your employer get someone to help you?				
GD13b. Did your employer shorten your work days?				
GD13c. Did your employer allow you to change the time you came to and left work?				
GD13d. (Did your employer) allow you more breaks and rest periods?				
GD13e. (Did your employer) arrange for special transportation?				
GD13f. (Did your employer) change the job to something you could do?				
GD13g. (Did your employer) help you learn new job skills?				
GD13h. (Did your employer) get you special equipment for the job?				
GD13i. (Did your employer) assist you in receiving rehabilitative services from an external provider?				

GD13j. Did your employer do any other things to help you out?

1. YES	5. NO	8. DK	9. RF
GO TO GD15 BRANCHPOINT			

GD13k. What other things?

DK	RF
----	----

OTHER THINGS

GD15 BRANCHPOINT: IF PROXY INTERVIEW, GO TO GDASSIST
IF R IS NOT WORKING NOW (G2 NOT 1) or R IS SELF-EMPLOYED (G3=2), GO TO GD18 BRANCHPOINT

GD15. Does your employer currently do anything special to make it easier for you to stay at work?

1. YES	4. NO HELP NEEDED	5. NO	8. DK	9. RF
GO TO GD18 BRANCHPOINT				

	1. YES	5. NO	8. DK	9. RF
GD15a. Does your employer get someone to help you?				
GD15b. Does your employer shorten your work day?				
GD15c. (Does your employer) allow you to change the time you come to and leave work?				
GD15d. (Does your employer) allow you more breaks and rest periods?				
GD15e. (Does your employer) arrange for special transportation?				
GD15f. Has your employer changed the job to something you can do?				
GD15g. Has your employer helped you learn new job skills?				
GD15h. (Does your employer) get you special equipment for the job?				
GD15i. (Does your employer) assist you in receiving rehabilitative services from an external provider?				

GD15j. Does your employer do any other things to help you out?

1. YES	5. NO	8. DK	9. RF
GO TO GD18 BRANCHPOINT			

GD15k. What other help does your employer give you?

OTHER HELP

GD18 BRANCHPOINT: IF R DID NOT REPORT AT R'S LAST IW THAT HAS ANY OF THE FOLLOWING BENEFITS: SSDI/SSI, VETERAN'S OR WORKERS' COMPENSATION, GO TO GD23

IF SSDI/SSI BENEFITS HAD NOT STARTED AT R'S LAST IW, GO TO GD18c

IF R DID NOT REPORT AT R'S LAST IW THAT HAD SSDI/SSI BENEFITS *and* DID NOT SAY THAT SSDI/SSI BENEFITS HAD NOT STARTED YET, GO TO GD20 BRANCHPOINT

GD18. According to our records, in R's LAST IW MONTH, YEAR you were receiving benefits from the Social Security Disability program or the Supplemental Security Income program.

Are you still receiving these benefits?

1. YES	5. NO	7. DENIES GETTING BENEFITS AT PREV WAVE	8. DK	9. RF
GO TO GD20 BRANCHPOINT	GO TO GD20 BRANCHPOINT			

GD18a. In what month and year did these benefits stop?

SOCIAL SECURITY DISABILITY OR SUPPLEMENTAL SECURITY INCOME

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY
06. JUN	07. JUL	08. AUG	09. SEP	10. OCT
11. NOV	12. DEC	98. DK	99. RF	

GD18b. YEAR

GD18c BRANCHPOINT: IF R DID NOT REPORT AT R'S LAST IW THAT SSDI/SSI BENEFITS HAD NOT STARTED YET, GO TO GD20 BRANCHPOINT

GD18c. According to our records, in *R's LAST IW MONTH, YEAR* you had applied for benefits from the Social Security Disability program or the Supplemental Security Income program.

Was your application approved?

1. YES	3. STILL HAVEN'T HEARD	5. NO	7. DENIES HAVING APPLIED AT PREV WAVE	8. DK	9. RF
GO TO GD20 BRANCHPOINT					

GD18d. In what month and year did you start receiving benefits?

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY
06. JUN	07. JUL	08. AUG	09. SEP	10. OCT
11. NOV	12. DEC	98. DK	99. RF	
		DK	RF	

GD18d.1. YEAR

GD18e. Were you offered rehabilitative services?

1. YES	5. NO	8. DK	9. RF
GO TO GD18g			

GD18f. When were you offered rehabilitation services?

SOCIAL SECURITY DISABILITY OR SUPPLEMENTAL SECURITY INCOME

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY
06. JUN	07. JUL	08. AUG	09. SEP	10. OCT
11. NOV	12. DEC	98. DK	99. RF	
		DK	RF	

GD18f.1. YEAR

GD18g. Are you still receiving benefits?

1. YES	5. NO	8. DK	9. RF
GO TO GD20 BRANCHPOINT		GO TO GD20 BRANCHPOINT	

GD18h. In what month and year did the benefits stop?

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY
06. JUN	07. JUL	08. AUG	09. SEP	10. OCT
11. NOV	12. DEC	98. DK	99. RF	
		DK	RF	

GD18h.1. YEAR

GD20 BRANCHPOINT: IF VETERAN'S BENEFITS HAD NOT STARTED AT R'S LAST IW, GO TO GD20c BRANCHPOINT

IF R DID NOT REPORT AT R'S LAST IW THAT HAD VA BENEFITS *and* DID NOT SAY THAT VA BENEFITS HAD NOT STARTED YET, GO TO GD22 BRANCHPOINT

GD20. According to our records, in *R'S LAST IW MONTH, YEAR* you were receiving benefits from the Veterans Administration.

Are you still receiving these benefits?

1. YES	5. NO	7. DENIES GETTING BENEFITS AT PREV WAVE	8. DK	9. RF
GO TO GD22 BRANCHPOINT		GO TO GD22 BRANCHPOINT		

GD20a. In what month and year did these benefits stop?

VETERANS ADMINISTRATION

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY
06. JUN	07. JUL	08. AUG	09. SEP	10. OCT
11. NOV	12. DEC	98. DK	99. RF	

DK	RF
----	----

GD20b. YEAR

GD20c BRANCHPOINT: IF R DID NOT REPORT AT R'S LAST IW THAT VA BENEFITS HAD NOT STARTED YET, GO TO GD22 BRANCHPOINT

GD20c. According to our records, in R's LAST IW MONTH, YEAR you had applied for benefits from the Veteran's Administration.

Was your application approved?

1. YES	3. STILL HAVEN'T HEARD	5. NO	7. DENIES HAVING APPLIED AT PREV WAVE	8. DK	9. RF
GO TO GD22 BRANCHPOINT					

GD20d. What disability rating did you receive?

VETERANS ADMINISTRATION

100 FULL DISABILITY	DK	RF
---------------------	----	----

PERCENT

GD20e. In what month and year did you start receiving benefits?

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY
06. JUN	07. JUL	08. AUG	09. SEP	10. OCT
11. NOV	12. DEC	98. DK	99. RF	

DK	RF
----	----

GD20e.1. YEAR

GD20f. Are you still receiving benefits?

1. YES	5. NO	8. DK	9. RF
GO TO GD22 BRANCHPOINT		GO TO GD22 BRANCHPOINT	

GD20g. In what month and year did the benefits stop?

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY
06. JUN	07. JUL	08. AUG	09. SEP	10. OCT
11. NOV	12. DEC	98. DK	99. RF	

DK	RF
----	----

GD20g.1. YEAR

GD22 BRANCHPOINT: IF WORKERS' COMPENSATION BENEFITS HAD NOT STARTED AT R's LAST IW, GO TO GD22c

IF R DID NOT REPORT AT R's LAST IW THAT HAD WORKERS' COMPENSATION BENEFITS *and* DID NOT SAY THAT BENEFITS HAD NOT STARTED YET, GO TO GD23

GD22. According to our records, in R's LAST IW MONTH, YEAR you were receiving benefits from Workers' Compensation.

Are you still receiving these benefits?

1. YES	5. NO	7. DENIES GETTING BENEFITS AT PREV WAVE	8. DK	9. RF
GO TO GD23	GO TO GD23			

GD22a. In what month and year did these benefits stop?

WORKERS COMPENSATION

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY
06. JUN	07. JUL	08. AUG	09. SEP	10. OCT
11. NOV	12. DEC	98. DK	99. RF	

_____	DK	RF
-------	----	----

GD22b. YEAR

GD22c BRANCHPOINT: IF R WAS RECEIVING WORKERS' COMPENSATION BENEFITS AT R's LAST IW (GD22a WAS ASKED), GO TO GD23

GD22c. According to our records, in R's LAST IW MONTH, YEAR you had applied for benefits from Worker's Compensation.

Was your application approved?

1. YES	3. STILL HAVEN'T HEARD	5. NO	7. DENIES HAVING APPLIED AT PREV WAVE	8. DK	9. RF
GO TO GD23					

GD22d. What disability rating did you receive?

VETERANS ADMINISTRATION

_____	100 FULL DISABILITY	DK	RF
-------	---------------------	----	----

PERCENT

GD20e/GD22e. In what month and year did you start receiving benefits?

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY
06. JUN	07. JUL	08. AUG	09. SEP	10. OCT
11. NOV	12. DEC	98. DK	99. RF	

DK	RF
----	----

GD22e.1. YEAR

GD22f. Are you still receiving benefits?

1. YES	5. NO	8. DK	9. RF
GO TO GD23	GO TO GD23		

GD22g. In what month and year did the benefits stop?

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY
06. JUN	07. JUL	08. AUG	09. SEP	10. OCT
11. NOV	12. DEC	98. DK	99. RF	

DK	RF
----	----

GD22g.1. YEAR

GD23. IF NEW INTERVIEW R:

Have you ever applied for disability benefits from any (other) government program?

IF REINTERVIEW R:

Since R's LAST IW MONTH, YEAR have you applied for disability benefits from any (other) government program?

1. YES	5. NO	8. DK	9. RF
GO TO GD131 BRANCHPOINT			

GD24. Which programs?

[IWER: CHECK ALL THAT APPLY]

1. SOCIAL SECURITY DISABILITY OR SUPPLEMENTAL SECURITY INCOME PROGRAM (SSD OR SSI)	2. VETERANS ADMINISTRATION PROGRAM	3. WORKERS' COMPENSATION PROGRAM
GO TO GD28a BRANCHPOINT		
4. PUBLIC WELFARE DISABILITY PROGRAM	7. OTHER (SPECIFY) _____	8. DK
GO TO GD28a BRANCHPOINT		

GD26a. In what month and year did you first apply for disability benefits from the Social Security Disability program or the Supplemental Security Income Program?

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY
06. JUN	07. JUL	08. AUG	09. SEP	10. OCT
11. NOV	12. DEC	98. DK	99. RF	
	DK	RF		

GD26a1. YEAR

GD26a2 BRANCHPOINT: IF R DID NOT GIVE {MONTH or YEAR} HE/SHE FIRST APPLIED FOR SSDI/SSI BENEFITS ({GD26a or GD26a1}={DK or RF}), GO TO GD28a BRANCHPOINT

IF {MONTH and YEAR} R FIRST APPLIED FOR SSDI/SSI IS {AT OR BEFORE} R's LAST IW (PER GD26a/GD26a1), GO TO GD26b

GD26a2. We are interested in your first application since R's LAST IW MONTH, YEAR.

In what month and year did you first apply for Social Security since that time?

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY	06. JUN
07. JUL	08. AUG	09. SEP	10. OCT	11. NOV	12. DEC
96. NOT APPLIED SINCE R's LAST IW MONTH, YEAR			98. DK	99. RF	

DK	RF
----	----

GD26a3. YEAR

GD26b BRANCHPOINT: IF R HAS NOT APPLIED FOR SSDI/SSI BENEFITS SINCE R's LAST IW (GD26a2=96), GO TO GD28a BRANCHPOINT

IF R DID NOT GIVE {MONTH or YEAR} HE/SHE FIRST APPLIED FOR SSDI/SSI BENEFITS ({GD26a2 or GD26a3}={DK or RF}), GO TO GD28a BRANCHPOINT

GD26b. Was your application accepted, rejected, or is it still being considered?

SOCIAL SECURITY DISABILITY OR SUPPLEMENTAL SECURITY INCOME

1. APPLICATION ACCEPTED	3. APPLICATION STILL BEING CONSIDERED	5. APPLICATION REJECTED	8. DK	9. RF
GO TO GD26f	GO TO GD28a BRANCHPOINT		GO TO GD28a BRANCHPOINT	

GD26c. Did you appeal or apply again later?

SOCIAL SECURITY DISABILITY OR SUPPLEMENTAL SECURITY INCOME

1. YES	5. NO	8. DK	9. RF
GO TO GD28a BRANCHPOINT			

GD26d. When did you last appeal or apply for benefits?

SOCIAL SECURITY DISABILITY OR SUPPLEMENTAL SECURITY INCOME

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY
06. JUN	07. JUL	08. AUG	09. SEP	10. OCT
11. NOV	12. DEC	98. DK	99. RF	

DK	RF
----	----

GD26d1. YEAR

GD26e. Was your application accepted, rejected, or is it still being considered?

SOCIAL SECURITY DISABILITY OR SUPPLEMENTAL SECURITY INCOME

1. APPLICATION ACCEPTED	3. APPLICATION STILL BEING CONSIDERED	5. APPLICATION REJECTED	8. DK	9. RF
GO TO GD28a BRANCHPOINT				

GD26f. In what month and year did you start receiving benefits?

SOCIAL SECURITY DISABILITY OR SUPPLEMENTAL SECURITY INCOME

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY
06. JUN	07. JUL	08. AUG	09. SEP	10. OCT
11. NOV	12. DEC	98. DK	99. RF	

DK	RF
----	----

GD26f1. YEAR

GD26g. Were you offered rehabilitation services?

SOCIAL SECURITY DISABILITY OR SUPPLEMENTAL SECURITY INCOME

1. YES	5. NO	8. DK	9. RF
GO TO GD26j			

GD26h. When were you offered rehabilitation services?

SOCIAL SECURITY DISABILITY OR SUPPLEMENTAL SECURITY INCOME

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY
06. JUN	07. JUL	08. AUG	09. SEP	10. OCT
11. NOV	12. DEC	98. DK	99. RF	
		DK	RF	

GD26h1. YEAR

GD26j. Are you still receiving benefits?

SOCIAL SECURITY DISABILITY OR SUPPLEMENTAL SECURITY INCOME

1. YES	5. NO	8. DK	9. RF
GO TO GD28a BRANCHPOINT		GO TO GD28a BRANCHPOINT	

GD26k. In what month and year did the benefits stop?

SOCIAL SECURITY DISABILITY OR SUPPLEMENTAL SECURITY INCOME

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY
06. JUN	07. JUL	08. AUG	09. SEP	10. OCT
11. NOV	12. DEC	98. DK	99. RF	
		DK	RF	

GD26k1. YEAR

GD28a BRANCHPOINT: IF R HAS NOT APPLIED TO VETERAN'S ADMINISTRATION (GD24 NOT 2), GO TO GD30a BRANCHPOINT

GD28a. In what month and year did you first apply for disability benefits from the Veterans Administration?

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY
06. JUN	07. JUL	08. AUG	09. SEP	10. OCT
11. NOV	12. DEC	98. DK	99. RF	

DK RF

_____ GD28a1. YEAR

GD28a2 BRANCHPOINT: IF R DID NOT GIVE {MONTH or YEAR} HE/SHE FIRST APPLIED FOR VETERANS ADMINISTRATION BENEFITS ({GD28a or GD28a1}={DK or RF}), GO TO GD30a BRANCHPOINT

IF {MONTH and YEAR} R FIRST APPLIED FOR VA BENEFITS IS {AT OR BEFORE} R's LAST IW (PER GD28a/GD28a1), GO TO GD28b

GD28a2. We are interested in your first application since R's LAST IW MONTH, YEAR.

In what month and year did you first apply for Veterans Administration benefits since that time?

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY	06. JUN
07. JUL	08. AUG	09. SEP	10. OCT	11. NOV	12. DEC
96. NOT APPLIED SINCE R's LAST IW MONTH, YEAR			98. DK	99. RF	

DK RF

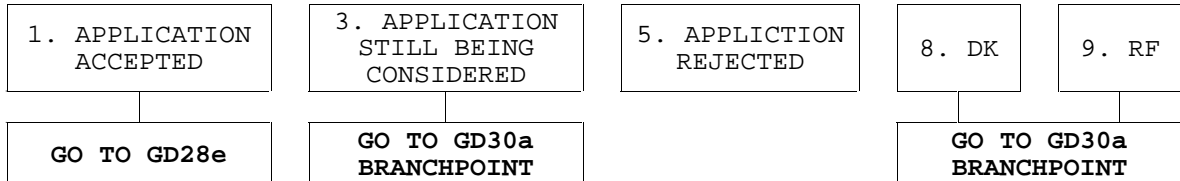
_____ GD28a3. YEAR

GD28b BRANCHPOINT: IF R DID NOT GIVE {MONTH or YEAR} HE/SHE FIRST APPLIED FOR VA BENEFITS ({GD28a2 or GD28a3}={DK or RF}), GO TO GD30a BRANCHPOINT

IF R HAS NOT APPLIED FOR VA BENEFITS SINCE R's LAST IW (GD28a2=96), GO TO GD30a BRANCHPOINT

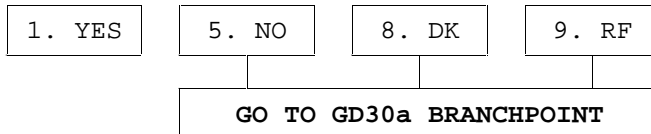
GD28b. Was your application accepted, rejected, or is it still being considered?

VETERANS ADMINISTRATION



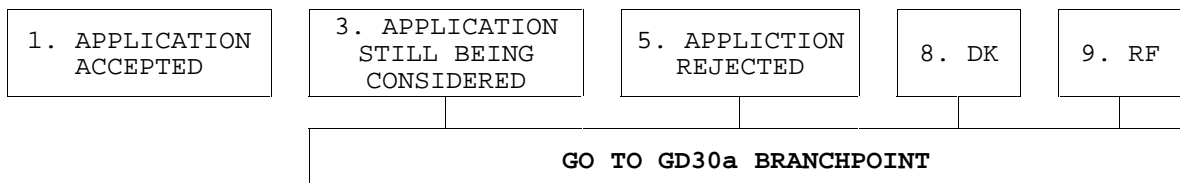
GD28c. Did you appeal or apply again later?

VETERANS ADMINISTRATION



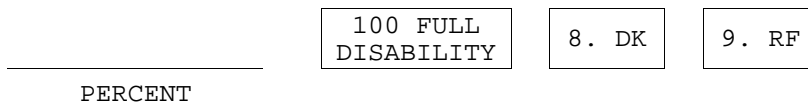
GD28d. Was your application eventually accepted, rejected, or is it still being considered?

VETERANS ADMINISTRATION



GD28e. What disability rating did you receive?

VETERANS ADMINISTRATION



GD28f. In what month and year did you start receiving benefits?

VETERANS ADMINISTRATION

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY
06. JUN	07. JUL	08. AUG	09. SEP	10. OCT
11. NOV	12. DEC	98. DK	99. RF	

DK	RF
----	----

GD28f1. YEAR

GD28g. Are you still receiving benefits?

VETERANS ADMINISTRATION

1. YES	5. NO	8. DK	9. RF
GO TO GD30a BRANCHPOINT		GO TO GD30a BRANCHPOINT	

GD28h. In what month and year did the benefits stop?

VETERANS ADMINISTRATION

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY
06. JUN	07. JUL	08. AUG	09. SEP	10. OCT
11. NOV	12. DEC	98. DK	99. RF	

DK	RF
----	----

GD28h1. YEAR

GD30a BRANCHPOINT: IF R HAS NOT APPLIED TO WORKERS' COMPENSATION PROGRAM (GD24 NOT 3), GO TO GD32a BRANCHPOINT

GD30a. In what month and year did you first apply for disability benefits from the Workers' Compensation Program?

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY
06. JUN	07. JUL	08. AUG	09. SEP	10. OCT
11. NOV	12. DEC	98. DK	99. RF	

_____	DK	RF
-------	----	----

GD30a1. YEAR

GD30a2 BRANCHPOINT: IF R DID NOT GIVE {MONTH or YEAR} HE/SHE FIRST APPLIED FOR WORKERS' COMPENSATION ({GD30a or GD30a1}={DK or RF}), GO TO GD32a BRANCHPOINT

IF {MONTH and YEAR} R FIRST APPLIED FOR WORKERS' COMPENSATION IS {AT OR BEFORE} R's LAST IW (PER GD30a/GD30a1), GO TO GD30b

GD30a2. We are interested in your first application since R's LAST IW MONTH, YEAR.

In what month and year did you first apply for Workers' Compensation since that time?

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY	06. JUN
07. JUL	08. AUG	09. SEP	10. OCT	11. NOV	12. DEC
96. NOT APPLIED SINCE R's LAST IW MONTH, YEAR			98. DK	99. RF	

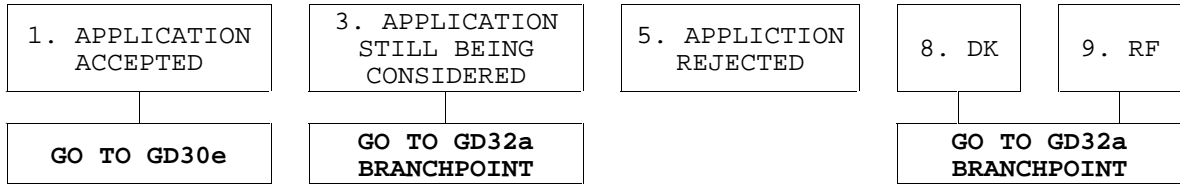
_____	DK	RF
-------	----	----

GD30a3. YEAR

GD30b BRANCHPOINT: IF R DID NOT GIVE {MONTH or YEAR} THAT HE/SHE FIRST APPLIED FOR WORKERS' COMPENSATION BENEFITS ({GD30a2 or GD30a3}={DK or RF}), GO TO GD32a BRANCHPOINT

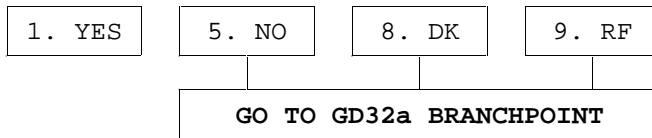
GD30b. Was your application accepted, rejected, or is it still being considered?

WORKERS' COMPENSATION



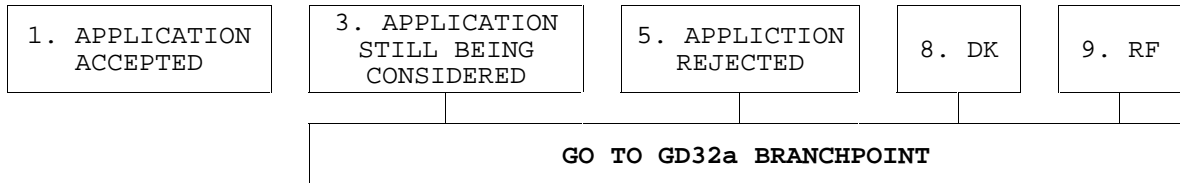
GD30c. Did you appeal or apply again later?

WORKERS' COMPENSATION



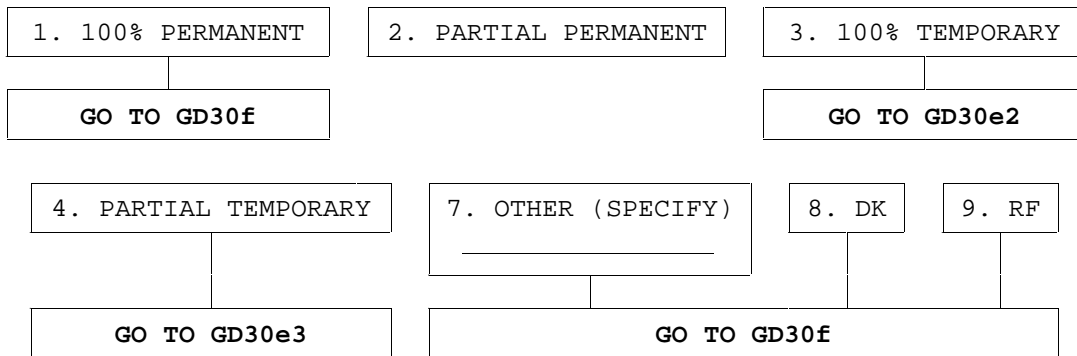
GD30d. Was your application eventually accepted, rejected, or is it still being considered?

WORKERS' COMPENSATION



GD30e. What disability rating did you receive?

WORKERS' COMPENSATION



GD30e1. [IWER: PROBE IF NECESSARY REFERRING TO WORKERS' COMPENSATION]
 What percentage did you receive?

1-100 PERCENT

	DK	RF
PERCENT		
GO TO GD30f		

GD30e2. [IWER: PROBE IF NECESSARY REFERRING TO WORKERS' COMPENSATION:]
 For how many years?

	DK	RF
YEARS		
GO TO GD30f		

GD30e3. [IWER: PROBE IF NECESSARY REFERRING TO WORKERS' COMPENSATION]
 What percentage did you receive?

For how many years?

	DK	RF
PERCENT		

	DK	RF
--	----	----

GD30e4. YEARS

GD30f. In what month and year did you start receiving benefits?

WORKERS' COMPENSATION

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY
---------	---------	---------	---------	---------

06. JUN	07. JUL	08. AUG	09. SEP	10. OCT
---------	---------	---------	---------	---------

11. NOV	12. DEC	98. DK	99. RF
---------	---------	--------	--------

	DK	RF
--	----	----

GD30f1. YEAR

GD30g. Are you still receiving benefits?

WORKERS' COMPENSATION

1. YES	5. NO	8. DK	9. RF
GO TO GD32a BRANCHPOINT		GO TO GD32a BRANCHPOINT	

GD30h. In what month and year did the benefits stop?

WORKERS' COMPENSATION

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY
06. JUN	07. JUL	08. AUG	09. SEP	10. OCT
11. NOV	12. DEC	98. DK	99. RF	
		DK	RF	

GD30h1. YEAR

GD32a BRANCHPOINT: IF R HAS NOT APPLIED TO {A PUBLIC WELFARE DISABILITY PROGRAM or ANOTHER PROGRAM NOT LISTED} (GD24 NOT {4 or 7}), GO TO GD131 BRANCHPOINT

GD32a. (Not including those disability benefits we have already discussed,) In what month and year did you first apply for these disability benefits?

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY
06. JUN	07. JUL	08. AUG	09. SEP	10. OCT
11. NOV	12. DEC	98. DK	99. RF	
		DK	RF	

GD32a1. YEAR

GD32a2 BRANCHPOINT: IF R DID NOT GIVE {MONTH or YEAR} HE/SHE FIRST APPLIED FOR OTHER DISABILITY BENEFITS ({GD32a or GD32a1}={DK or RF}), GO TO GD131 BRANCHPOINT

IF R FIRST APPLIED FOR OTHER DISABILITY BENEFITS {ON OR BEFORE} R's LAST IW {MONTH and YEAR} (PER GD32a/GD32a1), GO TO GD32b

GD32a2. We are interested in your first application since R's LAST IW MONTH, YEAR.

In what month and year did you first apply for these disability benefits since that time?

ANY OTHER

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY	06. JUN
07. JUL	08. AUG	09. SEP	10. OCT	11. NOV	12. DEC
96. NOT APPLIED SINCE R's LAST IW MONTH, YEAR			98. DK	99. RF	

DK	RF
----	----

GD32a3. YEAR

GD32b BRANCHPOINT: IF R DID NOT GIVE {MONTH or YEAR} HE/SHE FIRST APPLIED OTHER DISABILITY BENEFITS ({GD32a2 or GD32a3}={DK or RF}), GO TO GD131 BRANCHPOINT

IF R HAS NOT APPLIED FOR OTHER DISABILITY BENEFITS SINCE R's LAST IW (GD32a2=96), GO TO GD131 BRANCHPOINT

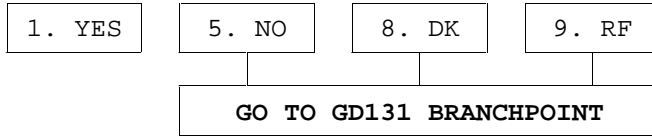
GD32b. Was your application accepted, rejected, or is it still being considered?

ANY OTHER

1. APPLICATION ACCEPTED	3. APPLICATION STILL BEING CONSIDERED	5. APPLICATION REJECTED	8. DK	9. RF
GO TO GD32e	GO TO GD131 BRANCHPOINT		GO TO GD131 BRANCHPOINT	

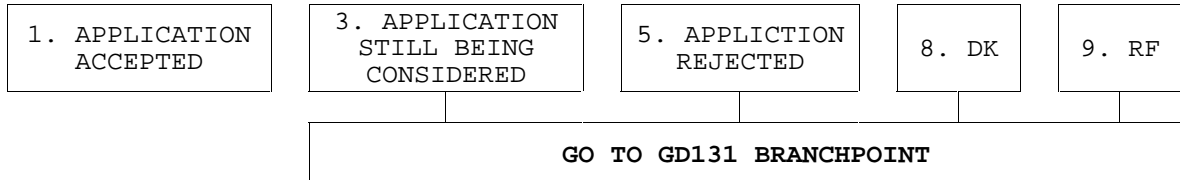
GD32c. Did you appeal or apply again later?

ANY OTHER



GD32d. Was your application eventually accepted, rejected, or is it still being considered?

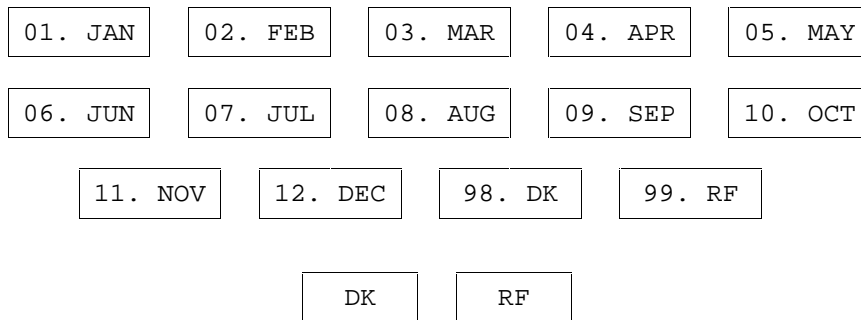
ANY OTHER



GD32e. In what month and year did you start receiving benefits?

ANY OTHER

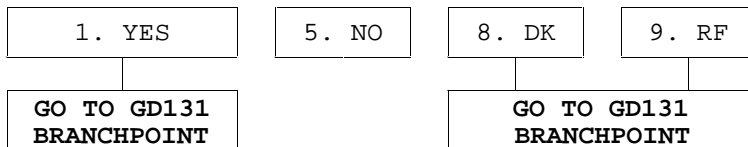
MONTH:



GD32e1. YEAR

GD32f. Are you still receiving benefits?

ANY OTHER



GD32g. In what month and year did the benefits stop?

ANY OTHER

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY
06. JUN	07. JUL	08. AUG	09. SEP	10. OCT
11. NOV	12. DEC	98. DK	99. RF	

DK	RF
----	----

GD32g1. YEAR

GD131 BRANCHPOINT: IF R WAS NOT WORKING AT R's LAST IW *and* IS NOT WORKING NOW (G2 NOT 1), GO TO GDASSIST

GD131. (Since *R's LAST IW MONTH, YEAR,*) Have you (ever) had any injuries at work that required special medical attention or treatment or interfered with your work activities?

1. YES	5. NO	7. NO JOB	8. DK	9. RF
GO TO GDASSIST				

GD131a. How many times have you been injured on the job (since *R's LAST IW MONTH, YEAR*)?

DK	RF
----	----

NUMBER OF TIMES

GD131b. On what date did your (most recent) injury happen?

MONTH:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY
06. JUN	07. JUL	08. AUG	09. SEP	10. OCT
11. NOV	12. DEC	98. DK	99. RF	

_____ DK RF
GD131b1. DAY

_____ DK RF
GD131b2. YEAR

GDASSIST

IWER:

HOW OFTEN DID R RECEIVE ASSISTANCE WITH ANSWERS IN SECTION GD —WORK?

1. NEVER	2. A FEW TIMES	3. MOST OR ALL OF THE TIME
----------	----------------	----------------------------

GO TO SECTION GJ