Introduction
This questionnaire asks you about how you are feeling generally and yesterday in particular. We will not reveal your answers to anyone outside of the research team unless we need to protect you or others from harm. For example, if you tell us that you intend to hurt yourself or others, or that a child or old person is being abused, we will give your information to a supervisor who may report it to the authorities. This questionnaire will take approximately 30 minutes to complete.

ratesatisfy  HOW SATISFIED
First, we have some general questions about your life. Taking all things together, how satisfied are you with your life as a whole these days? Are you...
1 not at all satisfied
2 not very satisfied
3 satisfied
4 very satisfied

ideal  CLOSE TO IDEAL
Next, we present five statements with which you may agree or disagree. How much do you agree or disagree with the following statement? 'In most ways my life is close to my ideal.'
1 strongly disagree
2 disagree
3 slightly disagree
4 neither agree nor disagree
5 slightly agree
6 agree
7 strongly agree

excellent  CONDITIONS ARE EXCELLENT
How much do you agree or disagree with the following statement? 'The conditions of my life are excellent.'
1 strongly disagree
2 disagree
3 slightly disagree
4 neither agree nor disagree
5 slightly agree
6 agree
7 strongly agree

lifesatisfy  SATISFIED WITH LIFE
How much do you agree or disagree with the following statement? 'I am satisfied with my life.'
gotthings  GOTTEN IMPORTANT THINGS
How much do you agree or disagree with the following statement? 'So far I have gotten the important things I want in life.'
1 strongly disagree
2 disagree
3 slightly disagree
4 neither agree nor disagree
5 slightly agree
6 agree
7 strongly agree

nochanges  CHANGE ALMOST NOTHING
How much do you agree or disagree with the following statement? 'If I could live my life over, I would change almost nothing.'
1 strongly disagree
2 disagree
3 slightly disagree
4 neither agree nor disagree
5 slightly agree
6 agree
7 strongly agree

drmintro  DRM INTRODUCTION
We would like to learn what you did and how you felt yesterday. Not all days are the same - some are better, some are worse and others are pretty typical. Here we are only asking you about yesterday. Because some people find it difficult to remember what exactly they did and experienced, we will try to help you reconstruct your day by breaking it down into episodes, and then we will ask you questions about each episode. Unlike normal survey questions, you must provide an answer for each question about the episodes of your day. If you don't want to answer these questions, just close the survey and contact our helpdesk.

timewake  TIME WAKE UP
Yesterday was: [weekday, month, day, year]
Log of Yesterday
About what time did you wake up yesterday?
(example: '7:15' and check 'am')
timesleep  TIME GO TO SLEEP
Yesterday was: [weekday, month, day, year]
Log of Yesterday
When did you go to sleep last night?
[enter time]
1 am
2 pm

eatlunch  EAT LUNCH
Yesterday was: [weekday, month, day, year]
Log of Yesterday
Did you eat lunch yesterday?
1 yes
2 no

timelunch  TIME EAT LUNCH
Yesterday was: [weekday, month, day, year]
Log of Yesterday
[About what time did you eat lunch yesterday?/
About what time do you normally have lunch? If you never have lunch, at what time do you consider your morning to be over?]
[enter time]
1 am
2 pm

eatdinner  EAT Dinner
Yesterday was: [weekday, month, day, year]
Log of Yesterday
Did you eat dinner yesterday?
1 yes
2 no

timedinner  EAT DINNER
Yesterday was: [weekday, month, day, year]
Log of Yesterday
[About what time did you eat dinner yesterday?/ About what time do you normally have dinner? If you never have dinner, at what time do you consider your afternoon to be over?]

Please look at the list of events below. If the data are displayed correctly, choose 'Next' to continue. You can also choose 'Back' to make changes.

**event time**
- *wakeup* [TIME WAKE UP]
- *lunch* [TIME EAT LUNCH]
- *dinner* [EAT DINNER]
- *sleep* [TIME GO TO SLEEP]

Think of yesterday as a continuous series of scenes or episodes in a movie. An episode should last at least 20 minutes but probably not more than 2 hours. A new episode begins when there is a significant change, like in what you're doing or who you're with, or where you are, or because something happened that changed your mood. Sequences of short routine activities like showering and dressing should be grouped as a single episode. Use the breakdown of yesterday that makes the most sense to you and best captures what you did and how you felt. Starting on the next screen, we will ask you to describe the episodes. Try to remember the episodes in detail. For each one, enter a label of a few words that will remind you of exactly what was going on and what you felt (for example, 'commuting to work', or 'at lunch with friends').

**LOOP 3 TIMES: MORNING/AFTERNOON/EVENING**

**LOOP UNTIL NO MORE EPISODES GIVEN**

**e1_II  ENTER EPISODE**

Yesterday [morning/afternoon/evening] (from [waking up/lunchtime/dinnertime] until [lunchtime/dinnertime/going to bed])

Please type a label for an episode and the time it began and ended, and then choose 'Next'. If you have entered something that you later want to change, you will be able to make changes after you have finished entering new episodes. Once you are done entering new episodes, please enter nothing and just choose 'Next'. You will then move on to a review screen where you will just choose 'Next'. You will then move on to a review screen where you will be able to make changes to earlier episodes, if you wish.

Your label

[enter label]

**starttime  START TIME**

Time it began

[enter time]
You indicated that you do not remember any more episodes from Yesterday [morning/afternoon/evening]. Please look at your list of episodes below. You can make changes, split up episodes and delete episodes by choosing the episode you want to alter. You can also choose 'Back' to enter more episodes. [list with episodes and time] If all episodes are entered correctly, please choose 'Next' to continue.

ENDLOOP

Q1 AND Q21

How well rested when yesterday began

How Yesterday Began

Please think about the beginning of the day yesterday, how it began. Were you fully rested when you woke up?

0 Very tired
1
2
3
4
5
6 Completely rested

LOOP 3 TIMES: MORNING/AFTERNOON/EVENING FOR EACH EPISODE GIVEN GROUP A GETS ALL EPISODES, GROUP B ONE OF THE 3 RANDOMLY ASSIGNED

IF RANDOMLY SELECTED FOR CLOSED FOLLOWUP QUESTIONS

WHERE WERE YOU

Please look at your [morning/afternoon/evening] timeline above and think about the [earliest/next] episode ([label] [start time] -
(end time]) you noted. Before answering the questions below take a minute to re-live this episode in detail - everything you were doing, the people you were with and what your feelings were. Where were you?

1. at home
2. at work
3. in a car
4. elsewhere

IF WHERE WERE YOU = 4 elsewhere THEN

q3 WHERE WERE YOU OPEN

Where were you?

OPEN

ENDIF

q4 WERE YOU ALONE

Were you alone?

1. no
2. yes

IF WERE YOU ALONE = 1 no THEN

q5 WERE YOU TALKING OR INTERACTING

Were you talking or interacting with anyone?

1. no
2. one person
3. more than one

IF WERE YOU TALKING OR INTERACTING = 2 one person OR 3 more than one THEN

q6 TALKING OR INTERACTING WITH

Who were you talking or interacting with? [(Please check all that apply)]

1. spouse, significant other
2. children
3. parents
4. other relatives
5. friends
6. co-workers
7. customers, students
8. boss
IF 9 other people not listed in TALKING OR INTERACTING WITH

q7 WHAT OTHER PEOPLE

What other people do you mean?
OPEN
ENDIF

ENDIF

ENDIF

ENDIF

q8 WHAT WERE YOU DOING

What were you doing? (Please read the entire list carefully and check all that apply)
1 commuting, traveling
2 doing housework
3 eating
4 exercising
5 grooming, self care
6 home computer
7 listening to music
8 listening to radio, news
9 making love
10 playing
11 praying/worshipping/meditating
12 preparing food
13 reading
14 relaxing, nothing special
15 rest/sleep
16 shopping, errands
17 taking care of your children
18 talking, conversation
19 walking, taking a walk
20 watching television
21 working
22 other not listed

IF 22 other not listed in WHAT WERE YOU DOING
q9  WHAT OTHER NOT LISTED THINGS WERE YOU DOING

What were you doing?
OPEN
ENDIF

q10  WHICH SEEMED MOST IMPORTANT AT THE TIME

Which one seemed to most important to you at the time?

[1 commuting, traveling]
[2 doing housework]
[3 eating]
[4 exercising]
[5 grooming, self care]
[6 home computer]
[7 listening to music]
[8 listening to radio, news]
[9 making love]
[10 playing]
[11 praying/worshipping/meditating]
[12 preparing food]
[13 reading]
[14 relaxing, nothing special]
[15 rest/sleep]
[16 shopping, errands]
[17 taking care of your children]
[18 talking, conversation]
[19 walking, taking a walk]
[20 watching television]
[21 working]
[22 other not listed]
ELSE

q22  WHAT WERE YOU DOING OPEN

Please look at your [morning/afternoon/evening] timeline above and think about the [earliest/next] episode ([label] [start time] – [end time]) you noted, right after you woke up. Please tell us a little bit about this episode. For instance, what were you mainly doing? Where were you? Who were you with? Did these things change during the episode?
OPEN
How did you feel during this episode? Please rate each feeling on the scale given. A 0 means that you did not experience that feeling at all. A 6 means that you experienced that feeling very strongly. Please choose the number between 0 and 6 that best describes how you felt.

- Impatient for it to end
  - 0..6

- Competent / Confident
  - 0..6

- Tense / Stressed
  - 0..6

- Happy
  - 0..6

- Depressed / Blue
  - 0..6

- Interested / Focused
  - 0..6

- Affectionate / Friendly
  - 0..6

- Calm / Relaxed
  - 0..6

- Irritated / Angry
  - 0..6
Irritated / Angry
0..6

q11_10 and q23_10 FELT DURING EPISODE - TIRED
Tired
0..6

EPISODE CHANGE PERIOD INTRODUCTION
[Afternoon/Evening]
Please note that the timeline above has changed. We would like you to think about [lunchtime/dinnertime] until [dinnertime/time to go to bed] of yesterday now.

ENDLOOP

yesterday MORE ABOUT YESTERDAY
More about yesterday
Now please think about how you felt overall, in terms of such feelings as those you just described (impatience, confidence, stress, happiness, etc.). Compared to what [weekday]s are usually like, yesterday was...

1 much worse
2 somewhat worse
3 pretty typical
4 somewhat better
5 much better

wonderful event UNUSUALLY WONDERFUL EVENT
Was there a moment yesterday that was unusually wonderful or thrilling?
1 no
2 yes

IF UNUSUALLY WONDERFUL EVENT = 2 yes THEN

| timewonderful TIME WONDERFUL EVENT HAPPENED
About what time did something unusually wonderful or thrilling happened?
[enter time]
1 1 am
2 2 pm

| whywonderful WHAT MADE IT GREAT
What made it so great?
OPEN
awfulevent UNUSUALLY AWFUL EVENT
Was there a moment yesterday that was unusually awful or difficult?
1 no
2 yes

IF UNUSUALLY AWFUL EVENT = 2 yes THEN

timeawful TIME AWFUL EVENT HAPPENED
About what time did something unusually awful or difficult happened?
[enter time]
1 1 am
2 2 pm

whyawful WHAT MADE IT BAD
What made it so bad?
OPEN

ENDIF

morequest ADDITIONAL QUESTIONS
A few additional questions about you. About what time did you wake up today?
[enter time]
1 1 am
2 2 pm

ratehealth RATE HEALTH
Would you say your health is excellent, very good, good, fair, or poor?
1 excellent
2 very good
3 good
4 fair
5 poor

ratesleep SLEEP QUALITY
During the past month, how would you rate your overall sleep quality?
1 excellent
2 very good
3 good
4 fair
5 poor

hrssleep  HOW MANY HOURS OF SLEEP
During the past month, on average how many hours of actual sleep did you get at night?
INTEGER

rateinterview  HOW PLEASANT WAS INTERVIEW
Could you tell us how interesting or uninteresting you found the questions in this interview?
1 Very interesting
2 Interesting
3 Neither interesting nor uninteresting
4 Uninteresting
5 Very uninteresting

phoneinterview  WOULD YOU COMPLETE IF PHONE INTERVIEW
Would you have completed this interview if it had been conducted on the phone?
1 Yes
5 No

e-mail  EMAIL ADDRESS
To contact you in the future we would like to be able to send you email. Please enter your email address below, if you would like us to contact you by email in the future.
STRING: 255

comments  OTHER COMMENTS
Do you have any other comments on the interview? Please type these in the box below.
OPEN

q31  LAST QUESTION
This was the last question. Thank you for your participation. Your answers have been submitted to the server!