

(MS605) OMNIBUS SURVEY [WAVE 14 FEB 2023]

Survey_intro

Thank you for participating in the ALP Omnibus Survey Wave 14. This short survey will ask you questions about a variety of topics. You will be paid \$3 for completing this survey.

Please note: You can complete this survey on a computer, tablet, or smartphone. If you are using a device with a small screen, please use the horizontal view so you can see the entire question and all response options, as shown below. We recommend using a laptop or tablet if one is available to you.

K1

[Not required ♦ Columns=50]

When you think about a typical military veteran in the U.S., who comes to mind? How would you describe the characteristics, or the features that define them?

A1

[Numeric ♦ Not required ♦ Lower limit=0 ♦ Lower limit type=GreaterOrEqual ♦ Upper limit type=SmallerOrEqual ♦ Total Digits=5]

How many people over the course of your life do you personally know who have died by overdose? (If you have not known anyone who died by overdose, please enter 0.)

CONDITION	f('A1').toNumber()>0	
	true	false
	Question A2()	

A2

[Not required]

Thinking about the effect of the overdose death(s) on your life, please select the most appropriate answer below:

- ☐ The death had little effect on my life (1)
- ☐ The death had somewhat of an effect on me but did not disrupt my life (2)
- ☐ The death disrupted my life for a short time (3)
- ☐ The death disrupted my life in a significant or devastating way, but I no longer feel that way (4)
- ☐ The death had a significant or devastating effect on me that I still feel (5)

END	Condition f('A1').toNumber()>0
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KR1

[Randomized answerlist ♦ Not required]

What do you know about the following military careers?

	Never heard of it (1)	Heard of it, but not familiar (2)	Familiar		
			I’ve heard mostly bad things (3)	I’ve heard some good and some bad things (4)	I’ve heard mostly good things (5)
Navy SEALs (1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Army Special Forces (SF; “Green Berets”) (2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marine Critical Skills Operators (CSO; “Raiders”) (3)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air Force Special Warfare (AFSPECWAR) (4)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air Force Pararescue (PJ) (5)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air Force Combat Control (CCT) (6)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air Force Special Reconnaissance (SR) (7)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air Force Tactical Air Control Party (TACP) (8)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air Force Survival, Evasion, Resistance & Escape (SERE) (9)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air Force Explosive Ordnance Disposal (EOD) (10)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

U_intro

The next few questions ask about healthcare visits you have had for your mental health or emotional wellbeing. Visits can be in-person or by telehealth. Telehealth refers to visits by video (for example, Zoom or FaceTime) or audio-only (telephone).

U1

In the past year, have you had any visits for individual therapy? Individual therapy visits are provided by therapists, counselors, social workers, psychologists, and psychiatrists.

Check all that apply.

- ☐ Yes, I have had one or more telehealth visits (1)
- ☐ Yes, I have had one or more in-person visits (2)
- ☐ No, I have not had any visits for individual therapy in the past year (3) [Exclusive]

CONDITION	f('U1').any('1','2')	
	true	false
	Question U2()	

U2

[Not required]

For individual therapy in the past year, did your provider (for example, therapist, psychologist) offer both telehealth and in-person visits? If you had more than one provider for individual therapy, consider the provider you saw most often.

- ☐ Yes, they offered both telehealth and in-person visits (1)
- ☐ No, they only offered telehealth visits (2)
- ☐ No, they only offered in-person visits (3)
- ☐ I don't know (4)
- ☐ Other, please describe (5) _____ [Other]

CONDITION	f('U2').any('1','4','5')	
	true	false
	Question U3()	

U3

[Not required]

For your last visit for individual therapy, how did you or your provider decide whether the visit would be in-person or by telehealth?

- ☐ My provider decided the type of visit (1)
- ☐ I decided the type of visit (2)
- ☐ My provider and I decided the type of visit together (3)
- ☐ Other, please describe (4) _____ [Other]

END	Condition f('U2').any('1','4','5')
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END	Condition f('U1').any('1','2')
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U4

In the past year, have you had any visits to get medication for your mental health or emotional wellbeing? Visits for these kinds of medications are provided by primary care providers and by providers who specialize in mental health (for example, psychiatrists, nurse practitioners).

Check all that apply.

- ☐ Yes, I have had one or more telehealth visits to get medication (1)
 - ☐ Yes, I have had one or more in-person visits to get medication (2)
 - ☐ No, I have not had any visits for medication for my mental health or emotional wellbeing in the past year (3)
- [Exclusive]

CONDITI	f('U4').any('1','2')	
	true	false

Question U5()

U5

[Not required]

For medication in the past year, did your provider (for example, psychiatrist, primary care doctor) offer both telehealth and in-person visits? If you had more than one provider for medication, consider the provider you saw most often.

- ☐ Yes, they offered both telehealth and in-person visits (1)
- ☐ No, they only offered telehealth visits (2)
- ☐ No, they only offered in-person visits (3)
- ☐ I don't know (4)
- ☐ Other, please describe (5) _____ [Other]

CONDITION

f('U5').any('1','4','5')

true

false

Question U6()

U6

[Not required]

For your last visit for medication, how did you or your provider decide whether the visit would be in-person or by telehealth?

- ☐ My provider decided the type of visit (1)
- ☐ I decided the type of visit (2)
- ☐ My provider and I decided the type of visit together (3)
- ☐ Other, please describe (4) _____ [Other]

END

Condition f('U5').any('1','4','5')

END

Condition f('U4').any('1','2')

CONDITION

f('U1').any('1','2') || f('U4').any('1','2')

true

false

Question U7()

U7

[Not required]

Think about the provider that you saw most often in the past year for your mental health or emotional wellbeing. This provider could be a therapist, psychologist, social worker, counselor, psychiatrist, primary care doctor, nurse practitioner, or physician's assistant. Rate how much you agree with the following statements about the care you have received over the past year:

When deciding whether visits would be in-person or by telehealth, my provider considered my preference...

- ☐ 1 Strongly Disagree (1)
- ☐ 2 (2)
- ☐ 3 (3)
- ☐ 4 (4)
- ☐ 5 Strongly Agree (5)

U8

[Not required]

Think about the provider that you saw most often in the past year for your mental health or emotional wellbeing. This provider could be a therapist, psychologist, social worker, counselor, psychiatrist, primary care doctor, nurse practitioner, or physician's assistant. Rate how much you agree with the following statements about the care you have received over the past year:

Most of the time, I was able to get the type of visit (telehealth vs. in-person) that I preferred...

- ☐ 1 Strongly Disagree (1)
- ☐ 2 (2)
- ☐ 3 (3)
- ☐ 4 (4)
- ☐ 5 Strongly Agree (5)

END || Condition f('U1').any('1','2') || f('U4').any('1','2')

MA1

[Not required]

Would you strongly encourage, encourage, discourage, or strongly discourage a 17 year-old family member (child, grandchild, niece/nephew) to enlist in the military?

- ☐ Strongly encourage (1)
- ☐ Encourage (2)
- ☐ Neither encourage nor discourage (3)
- ☐ Discourage (4)
- ☐ Strongly Discourage (5)
- ☐ Other, please describe: (6)_____ [Other]

MA2

[Not required]

What is the primary reason you believe Americans join the military?

- ☐ Sense of duty (1)
- ☐ Love of country (2)
- ☐ Pay & benefits (3)
- ☐ They have no other options (4)

☐ Other, please specify: (5)_____ [Other]

MA3

[Not required]

What is the primary reason you believe otherwise-eligible Americans would not join the military?

- ☐ Too high risk of physical injury or death (1)
- ☐ Too high risk of sexual assault or harassment (2)
- ☐ Too high risk of PTSD or suicide (3)
- ☐ COVID vaccine requirement (4)
- ☐ Pay & benefits are not good enough (5)
- ☐ The military is too political (6)
- ☐ Other, please specify: (7)_____ [Other]

militaryservice

[Not required]

Have you ever served on active duty in the U.S. Armed Forces, Reserves, or National Guard?

- ☐ Never served in the military (1)
- ☐ Only on active duty for training in the Reserves or National Guard (2)
- ☐ Now on active duty (3)
- ☐ On active duty in the past, but not now (4)

CONDITION	f('militaryservice').any('2','3','4')	
	true	false
	Question MA5()	

MA5

[Not required]

When did you most recently serve on active duty in the US Armed Forces?

- ☐ January 2016-present (1)
- ☐ September 2001-December 2015 (2)
- ☐ June 1975-August 2001 (3)
- ☐ August 1964-May 1975 (4)
- ☐ July 1950-July 1964 (5)
- ☐ December 1941-June 1950 (6)
- ☐ Earlier than December 1941 (7)

END	Condition f('militaryservice').any('2','3','4')
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MA6

[Not required]

Do you have any of the following family members who are currently serving or have ever served in the US military on active duty, as a Reservist, or in the National Guard?

Check all that apply.

- ☐ Spouse or partner (1)
- ☐ Child (2)
- ☐ Parent (3)
- ☐ Sibling (4)
- ☐ Niece or nephew (5)
- ☐ Grandparent (6)
- ☐ Aunt or uncle (7)
- ☐ Other, please describe: (8)_____ [Other]
- ☐ I do not have any family members who have served in the military (9) [Exclusive]

CONDITION	f('MA6').any('1','2','3','4','5','6','7')	
	true	false
	Question MA7()	

MA7

[Not required]

Does your family member’s experience in military service make you more or less likely to serve in the military?

- ☐ Much less likely (1)
- ☐ Somewhat less likely (2)
- ☐ Neither more nor less likely (3)
- ☐ Somewhat more likely (4)
- ☐ Much more likely (5)

MA8

To your knowledge, did any of your military family members experience any of the following in relation to their military service?

Check all that apply.

- ☐ Death (1)
- ☐ Inadequate treatment for injury (2)
- ☐ Racial or ethnic discrimination/harassment (3)
- ☐ Sexual discrimination/harassment/assault (4)
- ☐ Religious discrimination (5)
- ☐ Another form of discrimination (6)
- ☐ Unfair disciplinary action (7)
- ☐ None of these experiences (8) [Exclusive]

END	Condition f('MA6').any('1','2','3','4','5','6','7')
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Could you tell us how interesting or uninteresting you found the questions in this interview?

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