

## **Appendix B**

### **Exploratory Study of Low-Income Couples' Decision Making Processes:**

### **Telephone Survey**

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## INTRODUCTION

HELO Hello, may I please speak with [SAMPLE MEMBER]?

My name is [INTERVIEWER'S FULL NAME], and I'm calling from Mathematica Policy Research about the Couple's Communication Study that we are conducting for the Department of Health and Human Services. (You/she/he) said that it would be ok for us to call and tell (you/her/him) more about this project.

SAMPLE MEMBER AVAILABLE.....01 (GOTO INTR)  
SAMPLE MEMBER NOT AVAILABLE.....00 (GO TO CLB1)

CLB1 When would be a good time to call back and speak with (her/him)?

**INTERVIEWER:** RECORD CALLBACK TIME ON CONTACT SHEET AND THANK SAMPLE MEMBER.  
TERMINATE CALL.

## After Reaching Sample Member

INTR This study is about how couples communicate with each other and make decisions. The information you provide will be kept confidential and will in no way affect any benefits you might be receiving. If you and your partner/spouse are both eligible, you can receive up to \$100 for participating in this study. Let's begin by finding out whether you are eligible.

**PROBE:** Is this a good time to begin?

**PROBE:** The interview itself will take about 20 minutes.

**INTERVIEWER:** REFER TO QUESTION AND ANSWER SHEET IF SAMPLE MEMBER HAS QUESTIONS ABOUT THE STUDY.

YES.....01 (GO TO NAME)  
NO.....00 (GO TO CLB2)

CLB2 When would be a good time to call back?

**INTERVIEWER:** RECORD CALLBACK TIME ON CONTACT SHEET AND THANK SAMPLE MEMBER.  
TERMINATE CALL.

NAME To begin, I would like to make sure we have your name recorded correctly. What is your first and last name?

\_\_\_\_\_

ADDR To verify that I am speaking with the correct person, what is your address?

**PROBE:** Do you live at or have you ever lived at [READ ORIGINAL ADDRESS FROM RECORDS]?

\_\_\_\_\_

\_\_\_\_\_

**INTERVIEWER: DO NAME and ADDRESS MATCH OUR RECORDS?**

YES.....01  
NO.....00 ( GO TO EXT1)

EXT1 I'm sorry, but we can only interview people who were selected for this study. Thank you for your time.

**INTERVIEWER:** END CALL, TERMINATE INTERVIEW.

**Eligibility Screener**

AGE How old are you?

\_\_\_\_|\_\_\_\_ # of years

DON'T KNOW.....d (GO TO EXT2)  
REFUSED.....r (GO TO EXT2)

**INTERVIEWER:** IF SAMPLE MEMBER IS AT LEAST 18 YEARS OF AGE GO TO MARR. IF SAMPLE MEMBER IS YOUNGER THAN 18, GO TO EXT2.

(FF)

MARR What is your relationship with [PARTNER/SPOUSE'S NAME] now? Are you ...

Married.....01  
Not married but romantically involved.....02  
Divorced or separated.....03 (GO TO EXT3)  
Just friends, or.....04 (GO TO EXT3)  
Not in any kind of relationship.....05 (GO TO EXT3)  
PARTNER/SPOUSE DIED.....06 (GO TO SRRY)  
DON'T KNOW.....d (GO TO EXT3)  
REFUSED.....r (GO TO EXT3)

PNAM What is your partner/spouse's name?

\_\_\_\_\_

(BSF)

LIVE Do you currently live with your (partner/spouse) . . .

all of the time.....01  
most of the time.....02  
some of the time, or.....03  
never?.....04 (GO TO EXT3)  
DON'T KNOW.....d (GO TO EXT3)  
REFUSED.....r (GO TO EXT3)

CHID Do any children under 18 years of age live with you in your household?

YES.....01  
NO.....00 (GO TO EXT3)  
DON'T KNOW.....d (GO TO EXT3)

REFUSED.....r (GO TO EXT3)  
NCOW Are any of these children your own, your (partner/spouse)'s own, or both you and your (partner/spouse)'s own?

**PROBE:** Include biological, adopted, step, and foster children that are yours or your (partner/spouse)'s.

YES.....01  
NO.....00 (GO TO EXT3)  
DON'T KNOW.....d (GO TO EXT3)  
REFUSED.....r (GO TO EXT3)

TTOG How long have you and your (partner/spouse) been together as a couple?

\_\_\_\_ # of years \_\_\_\_ # of months

DON'T KNOW.....d  
REFUSED.....r

**INTERVIEWER:** IF COUPLE HAS BEEN TOGETHER LESS THAN 3 MONTHS OR RESPONDENT ANSWERS DON'T KNOW OR REFUSED, GO TO EXT4, OTHERWISE GO TO HHSZ.

HHSZ How many people live in your household?

**PROBE:** Include children and adults whether or not they are related to you.

\_\_\_\_ # people in household

DON'T KNOW.....d  
REFUSED.....r

CENG **INTERVIEWER:** Can the respondent complete this interview in English?

**IF NECESSARY ASK:** Can you complete this interview in English?

YES.....01  
NO.....00 (GO TO EXT6)  
DON'T KNOW.....d (GO TO EXT6)  
REFUSED.....r (GO TO EXT6)

CSER In the past 12 months, have you received couples' counseling, participated in a research study about couples, or received other services designed to help couples with their relationships?

YES.....01 (GO TO EXT7)  
NO.....00  
DON'T KNOW.....d  
REFUSED.....r

**INTERVIEWER:** ASK PUBA IF RESPONDENT IS FEMALE, OTHERWISE GO TO ELIG.

PUBA In the past 12 months, have you received any government assistance for yourself or your children, such as Food Stamps, SSI (Supplemental Security benefits), WIC, , housing assistance, subsidized school lunch, or cash assistance--also know as TANF, public assistance, or Work First?

YES.....01 (GO TO ELIG)  
NO.....00 (GO TO EXT5)  
DON'T KNOW.....d (GO TO EXT5)  
REFUSED.....r (GO TO EXT5)

SRRY I'm very sorry to hear that. Our condolences for your loss. We do not need to ask you any other questions. Thank you for your time.

**INTERVIEWER:** END CALL, TERMINATE INTERVIEW.

EXT2 I'm sorry, but we can only interview people who are 18 years of age or older.

**INTERVIEWER:** END CALL, TERMINATE INTERVIEW.

EXT3 I'm sorry, but we can only interview people who are currently living with their (partner/spouse) and their child or their (partner/spouse)'s child. Thank you for your time.

**INTERVIEWER:** END CALL, TERMINATE INTERVIEW.

EXT4 I'm sorry, but we can only interview people who have been in a relationship with their current (partner/spouse) for at least 3 months. Thank you for your time.

**INTERVIEWER:** END CALL, TERMINATE INTERVIEW.

EXT5 I'm sorry, but we can only interview people who have recently received some form of public assistance in the past 12 months . Thank you for your time.

**INTERVIEWER:** END CALL, TERMINATE INTERVIEW.

EXT6 I'm sorry, but we can only interview people in English. Thank you for your time.

**INTERVIEWER:** END CALL, TERMINATE INTERVIEW.

EXT7 I'm sorry, but we can only interview people who have not participated in another study, or people who have not received services designed to help couples in the past 12 months. Thank you for your time.

**INTERVIEWER:** END CALL, TERMINATE INTERVIEW.

**IF ELIGIBLE:**

ELIG Have you talked to your (partner/spouse) about the study and is (he/she) interested in participating?

YES.....01 (GO TO BEGN)  
NO.....00 (GO TO EXPL)  
DON'T KNOW.....d (GO TO EXPL)  
REFUSED.....r (GO TO EXPL)

EXPL If you are eligible for this study, we will also need to interview your (partner/spouse) over the telephone in order for you to qualify for the home visit. We would like to start the interview with you now, and if you are eligible, talk to your (partner/spouse) after we finish. We can also talk to him at another time if that is more convenient.

BEGN I would now like to ask you some questions that will take about 20 minutes. The information you provide will be kept confidential and will in no way affect any benefits you may be receiving. Your participation will be important in helping the Department of Health and Human Services improve programs and services for couples.

You and your (partner/spouse) will each receive \$10 for participating in the telephone interview. Based on your responses, we may also ask you to participate in an in-person visit, for which you will receive \$40 each. If you and your partner/spouse complete both components, you will receive \$100 total for participating in this study.

## NUMBER OF CHILDREN/MULTIPLE PARTNER FERTILITY

(ADAPTED FROM BSF)

To begin, I would like to ask you some questions about your children and other relationships you may have had.

CHWP How many children do you have with [PARTNER'S NAME]? Please include all of the biological children you have with your (partner/spouse), even if they are not born yet.

|\_|\_| # OF CHILDREN

NONE.....0 (GO TO CHWO)  
DON'T KNOW.....d  
REFUSED.....f

PCL How many of these children live with you now?

|\_|\_| # OF CHILDREN

NONE.....0  
DON'T KNOW.....d  
REFUSED.....f

CHWO How many children have you had with other partners or spouses? Please include all of the biological children you have with other partners, even if they are not currently living with you or are not born yet.

|\_|\_| # OF CHILDREN WITH OTHER PARTNER(S)

NONE.....0 (GO TO ECOH)  
DON'T KNOW.....d  
REFUSED.....f

NOCL How many of these children live with you now?

|\_|\_| # OF CHILDREN

NONE.....0  
DON'T KNOW.....d  
REFUSED.....r

**MARITAL HISTORY/LIVING ARRANGEMENTS**

(Adapted from FF, NSFH)

ECOH Have you ever lived with someone (besides your current partner/spouse) as a couple?

YES.....01  
NO.....00  
DON'T KNOW.....d  
REFUSED.....r

MABF Have you ever been married (to someone besides your current partner/spouse)?

YES.....01  
NO.....00 (GO TO PEMR)  
DON'T KNOW.....d (GO TO PEMR)  
REFUSED.....r (GO TO PEMR)

EDIV Have you ever been divorced?

YES.....01  
NO.....00  
DON'T KNOW.....d  
REFUSED.....r

**PSYCHOLOGICAL RESOURCES**

**Physical Health**

(TANF and NBS)

OHEA Next I'd like you to think about your health. In general, would you say your overall health is . . .

Excellent.....01  
Very good.....02  
Good.....03  
Fair, or.....04  
Poor?.....05  
DON'T KNOW.....d  
REFUSED.....r

COND Do you have any chronic health or medical conditions?

YES.....01  
NO.....00 (GO TO MNHE)  
DON'T KNOW.....d (GO TO MNHE)



REFUSED.....r (GO TO MNHE)

SCON What are these conditions?

PROBE: Any other conditions?

**INTERVIEWER:** Circle all that apply

- ARTHRITIS/BONE PAIN.....01
- ASTHMA/EMPHYSEMA.....02
- BACK PROBLEM; "BAD BACK".....03
- CANCER.....04
- DIABETES; "SUGAR".....05
- FATIGUE/TIRED.....06
- LEARNING DISABILITY.....07
- HEADACHES.....08
- HEART CONDITION.....09
- HEPATITIS/CIRRHOSIS (LIVER PROBLEMS).....10
- HIGH BLOOD PRESSURE.....11
- NERVES/ANXIETY/STRESS.....12
- OBESITY.....13
- SEIZURES.....14
- ULCERS; "STOMACH PROBLEMS".....15
- OTHER (SPECIFY).....16
- .....
- DON'T KNOW.....d
- REFUSED.....r

## Mental Health

(12 item CES-D; Ross 1983)

MNHE Now I am going to read a list of ways you might have felt or behaved during the past week. For each item I will ask how often you felt this way. Please tell me if you felt this way rarely or none of the time, some of the time, a moderate amount of time, or most or all of the time.

“Rarely or none of the time” would mean less than 1 day in the past week; “some of the time” would mean 1 or 2 days in the past week; “a moderate amount of time” would mean 3 to 4 days in the past week; and “most or all of the time” would mean 5 to 7 days in the past week.

During the PAST WEEK...

|    |   | Rarely or<br>None of<br>the Time<br>(less than<br>1 day in<br>the past<br>week) | Some of<br>the Time<br>(1 to 2<br>days in<br>the past<br>week) | A Moderate<br>Amount of<br>Time (3 to 4<br>days in the<br>past week) | Most or all<br>of the time<br>(5 to 7 days<br>in the past<br>week) | DON'<br>T<br>KNO<br>W | REFUSED |
|----|---|---|--|--|--|-----------------------|---------|
| a. | How often did you feel bothered by things that usually don't bother you.                                  | 01  | 02   | 03   | 04   | d                     | r       |
| b. | How often did you not feel like eating; your appetite was poor.   | 01  | 02   | 03   | 04   | d                     | r       |
| c. | How often did you feel that you could not shake off the blues even with help from your family or friends. | 01  | 02   | 03   | 04   | d                     | r       |
| d. | How often did you have trouble keeping your mind on what you were doing.                                  | 01  | 02   | 03   | 04   | d                     | r       |
| e. | How often did you feel depressed.   | 01  | 02   | 03   | 04   | d                     | r       |
| f. | How often did you feel that everything was difficult.   | 01  | 02   | 03   | 04   | d                     | r       |
| g. | How often did you feel fearful.   | 01  | 02   | 03   | 04   | d                     | r       |
| h. | How often was your sleep restless.  | 01  | 02   | 03   | 04   | d                     | r       |
| i. | How often did you talk less than usual.   | 01  | 02   | 03   | 04   | d                     | r       |
| j. | How often did you feel lonely.  | 01  | 02   | 03   | 04   | d                     | r       |
| k. | How often did you feel sad.   | 01  | 02   | 03   | 04   | d                     | r       |
| l. | How often did you feel that you could not get “going”.  | 01  | 02   | 03   | 04   | d                     | r       |

(NSFH)

OVHP Taking things all together, on a scale of 1 to 7, where 1 is very unhappy and 7 is very happy, how would you say things are these days?

---

| Very Unhappy |    |    |    |    | Very Happy |    | DON'T KNOW | REFUSED |
|--------------|----|----|----|----|------------|----|------------|---------|
| 01           | 02 | 03 | 04 | 05 | 06         | 07 | d          | r       |

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How often do you worry that your total (family) income will not be enough to meet your (family's) expenses and bills? Would you say almost all the time, often, once in a while, hardly ever, or never?

---

| Almost all the time | Often | Once in a While | Hardly Ever | Never | DON'T KNOW | REFUSED |
|---------------------|-------|-----------------|-------------|-------|------------|---------|
| 01                  | 02    | 03              | 04          | 05    | d          | r       |

---

## Kin Support

Now I would like to ask you about help and support you may receive from people other than your (partner/spouse).

(Adapted from FF, BSF, and NSFH)

SSUP During the next year, if you needed help, could you count on someone in your family to ...

a. Loan you \$100?

YES.....01  
NO.....00  
DON'T KNOW.....d  
REFUSED.....r

b. Provide advice, encouragement, moral or emotional support?

YES.....01  
NO.....00  
DON'T KNOW.....d  
REFUSED.....r

c. Help with babysitting or child care?

YES.....01  
NO.....00  
DON'T KNOW.....d  
REFUSED.....r

d. Provide transportation?

YES.....01  
NO.....00  
DON'T KNOW.....d  
REFUSED.....r

e. Provide a place to live?

YES.....01  
 NO.....00  
 DON'T KNOW.....d  
 REFUSED.....r

## AGREEABLENESS

(Goldberg IPIP)

Now I am going to read you some phrases that describe people's behaviors. Please tell me how true each statement is about **you**. Please answer as you generally are now, not as you wish to be in the future. Answer as you honestly see yourself, in relation to other people you know of the same sex as you are, and roughly your same age.

For each statement, please tell if this is very true of you, somewhat true, neither true or untrue, somewhat untrue, or very untrue.

|   | Very True | Somewhat True | Neither True or Untrue | Somewhat Untrue | Very Untrue | DON'T KNOW | REFUSED |
|---|-----------|---------------|------------------------|-----------------|-------------|------------|---------|
| a. You make people feel at ease.                      | 01        | 02            | 03                     | 04              | 05          | D          | R       |
| b. You are not interested in other people's problems. | 01        | 02            | 03                     | 04              | 05          | D          | R       |
| c. You take time out for others.                      | 01        | 02            | 03                     | 04              | 05          | D          | R       |
| d. You are interested in people.                      | 01        | 02            | 03                     | 04              | 05          | D          | R       |
| e. You feels others' emotions.                        | 01        | 02            | 03                     | 04              | 05          | D          | R       |
| f. You are not really interested in others.           | 01        | 02            | 03                     | 04              | 05          | D          | R       |
| g. You sympathize with others' feelings.              | 01        | 02            | 03                     | 04              | 05          | D          | R       |
| h. You have a soft heart.                             | 01        | 02            | 03                     | 04              | 05          | D          | R       |
| i. You insult people.                                 | 01        | 02            | 03                     | 04              | 05          | D          | R       |
| j. You feel little concern for others.                | 01        | 02            | 03                     | 04              | 05          | D          | R       |

## PERCEIVED RELATIONSHIP ALTERNATIVES

Now I would like to ask you some questions about your relationship with [PARTNER NAME].

(NSFH)

LWOP Even though it may be very unlikely, think for a moment about how various areas of your life might be different if you were to separate from your (partner/spouse). For each of the following areas, please tell me if your life would be much worse, a little worse, the same, a little better, or much better.

|                            | <b>Much<br/>Worse</b> | <b>A Little<br/>Worse</b> | <b>The<br/>Same</b> | <b>A<br/>Little<br/>Better</b> | <b>Much<br/>Better</b> | <b>DON'T<br/>KNOW</b> | <b>REFUSED</b> |
|----------------------------|-----------------------|---------------------------|---------------------|--------------------------------|------------------------|-----------------------|----------------|
| a. Your overall happiness? | 01                    | 02                        | 03                  | 04                             | 05                     | d                     | r              |
| b. Being a parent?         | 01                    | 02                        | 03                  | 04                             | 05                     | d                     | r              |
| c. Your sex life?          | 01                    | 02                        | 03                  | 04                             | 05                     | d                     | r              |
| d. Your economic security? | 01                    | 02                        | 03                  | 04                             | 05                     | d                     | r              |

(Cubbins scale--Cubbins et al. 2007)

RELA Now think about what would happen if you and your (partner/spouse) broke up this month. For each of the following, please tell if it is not at all likely, somewhat likely, very likely, or certain.

If you and your (partner/spouse) broke up this month, how likely is it that during the next year...

|   | <b>Not at all<br/>Likely</b> | <b>Somewhat<br/>Likely</b> | <b>Very<br/>Likely</b> | <b>Certain</b> | <b>DON'T<br/>KNOW</b> | <b>REFUSE<br/>D</b> |
|---|------------------------------|----------------------------|------------------------|----------------|-----------------------|---------------------|
| a. You could get a better partner                         | 01                           | 02                         | 03                     | 04             | d                     | r                   |
| b. You could get a partner as good as your current one.   | 01                           | 02                         | 03                     | 04             | d                     | r                   |
| c. You would be sad but would get over it                 | 01                           | 02                         | 03                     | 04             | d                     | r                   |
| d. There are many other men/women you could be happy with | 01                           | 02                         | 03                     | 04             | d                     | r                   |

## EXPECTATIONS FOR MARRIAGE OR DIVORCE

(BSF)

INTERVIEWER: GO TO WSEP IF RESPONDENT CURRENTLY MARRIED

WMAR What do you think the chances are that you will marry your partner in the future? Would you say...

|                               |    |
|-------------------------------|----|
| No chance.....                | 01 |
| A little chance.....          | 02 |
| A 50-50 chance.....           | 03 |
| A pretty good chance, or..... | 04 |
| An almost certain chance..... | 05 |
| DON'T KNOW.....               | d  |
| REFUSED.....                  | f  |

WSEP What do you think the chances are that you will separate from your (partner/spouse) in the near future?

|                               |    |
|-------------------------------|----|
| No chance.....                | 01 |
| A little chance.....          | 02 |
| A 50-50 chance.....           | 03 |
| A pretty good chance, or..... | 04 |
| An almost certain chance..... | 05 |
| DON'T KNOW.....               | d  |
| REFUSED.....                  | f  |

## COMMITMENT AND TRUST

(BSF—Stanley and Markman, 1992 and Dyadic Trust Scale)

COMM Please tell me whether you strongly agree, agree, disagree or strongly disagree with the following statements.

|    |  | Strongly<br>Agree | Agree | Disagree | Strongly<br>Disagree | DON'T<br>KNOW | REFUSED |
|----|--|-------------------|-------|----------|----------------------|---------------|---------|
| a. | I may not want to be with my (partner/spouse) a few years from now.  | 01                | 02    | 03       | 04                   | d             | r       |
| b. | My (partner/spouse) may not want to be with me a few years from now.   | 01                | 02    | 03       | 04                   | d             | r       |
| c. | My relationship with my (partner/spouse) is more important to me than almost anything else in my life.                 | 01                | 02    | 03       | 04                   | d             | r       |
| d. | My (partner/spouse)'s relationship with me is more important to (him/her) than almost anything else in (his/her) life. | 01                | 02    | 03       | 04                   | d             | r       |
| e. | I want this relationship to stay strong no matter what rough times we may have.  | 01                | 02    | 03       | 04                   | d             | r       |
| f. | My (partner/spouse) wants this relationship to stay strong no matter what rough times we may have.                     | 01                | 02    | 03       | 04                   | d             | r       |
| g. | I can trust my (partner/spouse) completely.  | 01                | 02    | 03       | 04                   | d             | r       |
| h. | My (partner/spouse) is honest and truthful with me.  | 01                | 02    | 03       | 04                   | d             | r       |
| i. | My (partner/spouse) can be counted on to help me.  | 01                | 02    | 03       | 04                   | d             | r       |

**FIDELITY**

(BSF)

PFID Sometimes couples are not always faithful to each other. How likely is it that your (partner/spouse) has cheated on you with someone else? Would you say...

- Definitely yes.....01
- Probably yes.....02
- Probably no.....03
- Definitely no.....04
- DON'T KNOW.....d
- REFUSED.....f

RFID Have you cheated on your( partner/spouse) with someone else?

- YES.....01
- NO.....00
- DON'T KNOW.....d
- REFUSED.....f

PFFI How likely is it that your (partner/spouse) will cheat on you in the future? Would you say...

- Definitely yes.....01
- Probably yes.....02
- Probably no.....03
- Definitely no.....04
- DON'T KNOW.....d
- REFUSED.....f

RFFI How likely is it that you will cheat on your (partner/spouse) in the future? Would you say...

- Definitely yes.....01
- Probably yes.....02
- Probably no.....03
- Definitely no.....04
- DON'T KNOW.....d
- REFUSED.....f

**HAPPINESS**

(BSF)

RSAT Now I would like to ask about your relationship with your current (partner/spouse). Taking all things together, on a scale from 0 to 10, where 0 is not at all happy and 10 is completely happy, how happy would you say your relationship with your partner/spouse is? You can pick any number from 0 to 10.

|\_|\_|

- DON'T KNOW.....d
- REFUSED.....f



## CONFLICT MANAGEMENT

(BSF)

CONF Now, I am going to read you some statements about things couples may experiences when they are together. Tell me if this happens often, sometimes, rarely, or never.

|    |  | Often | Sometimes | Rarely | Never | DON'T KNOW | REFUSED |
|----|--|-------|-----------|--------|-------|------------|---------|
| a. | When I have problems, my (partner/spouse) really understands what I'm going through.                         | 01    | 02        | 03     | 04    | d          | r       |
| b. | My (partner/spouse) blames me for things that go wrong.  | 01    | 02        | 03     | 04    | d          | r       |
| c. | I feel appreciated by my (partner/spouse).   | 01    | 02        | 03     | 04    | d          | r       |
| d. | I feel respected even when we disagree.  | 01    | 02        | 03     | 04    | d          | r       |
| e. | Even when arguing we can keep a sense of humor.  | 01    | 02        | 03     | 04    | d          | r       |
| f. | When we discuss something, my (partner/spouse) acts as if I am totally wrong.                                | 01    | 02        | 03     | 04    | d          | r       |
| g. | We are good at solving our differences.  | 01    | 02        | 03     | 04    | d          | r       |
| h. | When we argue, one of us is going to say something we will regret.   | 01    | 02        | 03     | 04    | d          | r       |
| i. | When we argue, I feel personally attacked by my (partner/spouse).  | 01    | 02        | 03     | 04    | d          | r       |
| j. | During arguments, we are good at taking breaks when we need them.  | 01    | 02        | 03     | 04    | d          | r       |
| k. | When we argue, I get very upset.   | 01    | 02        | 03     | 04    | d          | r       |
| l. | We are pretty good listeners, even when we have different positions on things.                               | 01    | 02        | 03     | 04    | d          | r       |
| m. | My (partner/spouse) is good at calming me when I get upset.  | 01    | 02        | 03     | 04    | d          | r       |
| n. | Little arguments turn into ugly fights with accusations, criticisms, name calling or bringing up past hurts. | 01    | 02        | 03     | 04    | d          | r       |
| o. | My (partner/spouse) puts down my opinions, feelings or desires.  | 01    | 02        | 03     | 04    | d          | r       |
| p. | My (partner/spouse) seems to view my words or actions more negatively than I mean them to be.                | 01    | 02        | 03     | 04    | d          | r       |
| q. | When we argue, one of us withdraws and refuses to talk about it any more.                                    | 01    | 02        | 03     | 04    | d          | r       |

**INTERVIEWER:** IF RESPONDENT IS FEMALE, CONTINUE WITH r AND s. IF MALE, GO TO COMM.

- |    |  |    |    |    |    |   |   |
|----|--|----|----|----|----|---|---|
| r. | I am afraid of my partner.   | 01 | 02 | 03 | 04 | d | r |
| s. | I am uncomfortable talking in front of my partner because of what he may do to me. | 01 | 02 | 03 | 04 | d | r |
- 

**INTERVIEWER:** IF RESPONDENT ANSWERED "OFTEN" OR "SOMETIMES" TO EITHER r. OR s., GO TO EXT9. OTHERWISE GO TO COMM.

EXT9 Thank you, those are all the questions I have for you today. I appreciate your time and willingness to talk to me. So that we can mail you a check for \$10 for participating in the telephone interview, what is your current address?

INTERVIEWER: RECORD ADDRESS FOR PAYMENT

\_\_\_\_\_  
\_\_\_\_\_

Based on your answers to some of the questions I asked, it seems that you may have a high level of conflict in your relationship. I would like to provide you with a few resources. The first is the National Domestic Violence Hotline which is staffed 24 hours a day and can provide support and resources. Their number is 1-800-799-7233. I also have the number for the Washington State Domestic Violence Hotline. That number is 1-800-562-6025. If you are concerned for your safety right now or at any time, it is important that you call 911 or either of the Hotline numbers I just provided you. Thank-you again for your help today.

**INTERVIEWER:** END CALL, TERMINATE INTERVIEW.

**COMMUNICATION, FRIENDSHIP, AND TIME SPENT TOGETHER,  
SUPPORTIVENESS AND INTIMACY**

(BSF)

COMM Please tell me whether you strongly agree, agree, disagree, or strongly disagree with the following statements.

|  | <b>Strongly<br/>Agree</b> | <b>Agree</b> | <b>Disagree</b> | <b>Strongly<br/>Disagree</b> | <b>DON'T<br/>KNOW</b> | <b>REFUSED</b> |
|--|---------------------------|--------------|-----------------|------------------------------|-----------------------|----------------|
| a. My (partner/spouse) and I often talk about things that happen to each of us during the day. | 01                        | 02           | 03              | 04                           | d                     | r              |
| b. My (partner/spouse) and I enjoy doing even ordinary, day-to-day things together.            | 01                        | 02           | 03              | 04                           | d                     | r              |
| c. My (partner/spouse) knows and understands me.   | 01                        | 02           | 03              | 04                           | d                     | r              |
| d. My (partner/spouse) listens to me when I need someone to talk to.                           | 01                        | 02           | 03              | 04                           | d                     | r              |
| e. My (partner/spouse) respects me.  | 01                        | 02           | 03              | 04                           | d                     | r              |
| f. My (partner/spouse) encourages or helps me to do things that are important to me.           | 01                        | 02           | 03              | 04                           | d                     | r              |
| g. My (partner/spouse) shows love and affection for me.  | 01                        | 02           | 03              | 04                           | d                     | r              |
| h. I am satisfied with my sexual relationship with my (partner/spouse).                        | 01                        | 02           | 03              | 04                           | d                     | r              |
| i. My friends and relatives support my relationship with my (partner/spouse).                  | 01                        | 02           | 03              | 04                           | d                     | r              |

## RELATIONSHIP EXPECTATIONS

(MCLI, Sabatelli, 1984)

Now I have some questions about how well you think your expectations are being met in your relationship. By expectations, I mean what you think is realistic to expect from a relationship. For each statement, please say whether your experience is about what you expected, worse than what you expected, or better than what you expected.

How do your current experiences with your (partner/spouse) compare to your expectations about the amount of...

|    |  | A lot worse<br>than you<br>expected | Somewhat<br>worse than<br>you<br>expected | About<br>what you<br>expected | Somewhat<br>better than<br>you<br>expected | A lot<br>better<br>than you<br>expected | Don't<br>Know | Refused |
|----|--|-------------------------------------|---|-------------------------------|--|---|---------------|---------|
| a. | companionship you experience.                                | 01                                  | 02  | 03                            | 04   | 05                                      | D             | R       |
| b. | amount your (partner/spouse) trusts you.                     | 01                                  | 02  | 03                            | 04   | 05                                      | D             | R       |
| c. | confiding that occurs between you and your (partner/spouse). | 01                                  | 02  | 03                            | 04   | 05                                      | D             | R       |
| d. | time you spend together.                                     | 01                                  | 02  | 03                            | 04   | 05                                      | D             | R       |
| e. | affection your (partner/spouse) displays.                    | 01                                  | 02  | 03                            | 04   | 05                                      | D             | R       |
| f. | compatibility you experience.                                | 01                                  | 02  | 03                            | 04   | 05                                      | D             | R       |
| g. | disagreement over friends.                                   | 01                                  | 02  | 03                            | 04   | 05                                      | D             | R       |
| h. | interest in sex your (partner/spouse) expresses.             | 01                                  | 02  | 03                            | 04   | 05                                      | D             | R       |
| i. | criticism your (partner/spouse) expresses.                   | 01                                  | 02  | 03                            | 04   | 05                                      | D             | R       |
| j. | freedom you experience in pursuing other friendships.        | 01                                  | 02  | 03                            | 04   | 05                                      | D             | R       |
| k. | privacy you experience.                                      | 01                                  | 02  | 03                            | 04   | 05                                      | D             | R       |
| l. | The physical attractiveness of your (partner/spouse).        | 01                                  | 02  | 03                            | 04   | 05                                      | D             | R       |
| m. | amount of arguing that you experience.                       | 01                                  | 02  | 03                            | 04   | 05                                      | D             | R       |
| n. | jealousy your (partner/spouse) expresses.                    | 01                                  | 02  | 03                            | 04   | 05                                      | D             | R       |
| o. | commitment you experience from your (partner/spouse).        | 01                                  | 02  | 03                            | 04   | 05                                      | D             | R       |

## PERCEPTIONS OF POWER

(Intergenerational Panel Study)

POWR In most relationships either the man or the woman has the most say about some decisions although they talk it over first. For instance, in your relationship, who usually has the most say...

|    |  | Your<br>Partner/spouse<br>almost always | Your<br>Partner/spouse<br>mostly | Both of you<br>have the<br>same say | You<br>Mostly | You<br>Almost<br>Always | Don't<br>Know | Refused |
|----|--|---|----------------------------------|-------------------------------------|---------------|-------------------------|---------------|---------|
| a. | about which friends or relatives you see most often?                             | 01                                      | 02                               | 03                                  | 04            | 05                      | d             | r       |
| b. | about how much should be spent on major purchases like furniture and appliances? | 01                                      | 02                               | 03                                  | 04            | 05                      | d             | r       |
| c. | in deciding how much money should be spent on things for the (children/baby)?    | 01                                      | 02                               | 03                                  | 04            | 05                      | d             | r       |
| d. | about how much money your family can afford to spend per week on food            | 01                                      | 02                               | 03                                  | 04            | 05                      | d             | r       |
| e. | about how often you and your (partner/spouse) go out for an evening?             | 01                                      | 02                               | 03                                  | 04            | 05                      | d             | r       |
| f. | in deciding to have more children?   | 01                                      | 02                               | 03                                  | 04            | 05                      | d             | r       |
| g. | about who does household chores?   | 01                                      | 02                               | 03                                  | 04            | 05                      | d             | r       |

## RELATIONSHIP INVESTMENTS

Sanderson and Kurdek (1993)

INVE On a scale of 1 to 5 where 1 is not at all true and 5 is very true, how true would you say the following statement is: I've put a lot of energy and effort into my relationship.

| Not at all true |    |    |    |    | Very True | DON'T<br>KNOW | REFUSED |
|-----------------|----|----|----|----|-----------|---------------|---------|
| 01              | 02 | 03 | 04 | 05 |           | d             | r       |

## GENDER ROLE BELIEFS

Now I would like to ask you just a few questions about relationships in general.

(NSFH, FF)

GENR Please tell me whether you strongly agree, agree, disagree or strongly disagree with the following statements.

|   | Strongly Agree | Agree | Disagree | Strongly Disagree | DON'T KNOW | REFUSED |
|---|----------------|-------|----------|-------------------|------------|---------|
| a. The important decisions in the family should be made by the man of the house.                                    | 01             | 02    | 03       | 04                | d          | r       |
| b. It is much better for everyone if the man earns the main living and the woman takes care of the home and family. | 01             | 02    | 03       | 04                | d          | r       |
| c. Preschool children are likely to suffer if their mother is employed.   | 01             | 02    | 03       | 04                | d          | r       |
| d. It is all right for mothers to work full-time when their youngest child is under age 5.                          | 01             | 02    | 03       | 04                | d          | r       |
| e.. A man whose partner/spouse is working full-time should spend just as many hours doing housework as she does.    | 01             | 02    | 03       | 04                | d          | r       |

## MATERIAL RESOURCES

### Employment

We are almost finished with the interview, I have just a few more questions about you.

(Series adapted from TANF Survey)

First, I would like to ask about your work experience. Please think about paid jobs you may have had, both now and in the past. These can include self employment, babysitting, housekeeping and other temporary jobs.

EVRW Have you ever worked for pay?

YES.....01  
 NO.....02 (GO TO OAWK)  
 DON'T KNOW.....d (GO TO OAWK)  
 REFUSED.....r (GO TO OAWK)

CWRK Are you currently working for pay?

YES.....01  
 NO.....02  
 DON'T KNOW.....d  
 REFUSED.....r

WK12 Did you work at any job for pay in the past 12 months, including self-employment, babysitting, housekeeping, or any other temporary jobs?

YES.....01  
NO.....00  
DON'T KNOW.....d  
REFUSED.....r

Now I'd like to ask you some questions about (your current job/the job you held most recently). If you have more than one job, please think about the job where you worked the most hours.

**INTERVIEWER:** THROUGHOUT SECTION, IF RESP CURRENTLY WORKING, READ FIRST WORD OR PHRASE IN PARENTHESES. IF NOT CURRENTLY WORKING, READ SECOND PHRASE IN PARENTHESES.

HRWK First, including overtime, how many hours per week (do/did) you usually work on this job?

|\_|\_| # OF HOURS PER WEEK (GO TO OCUP)

DON'T KNOW.....d (GO TO DKHR)  
REFUSED.....r (GO TO DKHR)

DKHR (Is/Was) the number of hours per week you usually (work/worked) less than 20 hours, 20 to 34 hours, or 35 hours or more?

LESS THAN 20 HOURS PER WEEK.....01  
20 - 34 HOURS PER WEEK.....02  
35 OR MORE HOURS PER WEEK.....03  
DON'T KNOW.....d  
REFUSED.....r

OCUP And what (do/did) you do there, that is what is your occupation?

**INTERVIEWER:** ENTER VERBATIM RESPONSE

PROBE 1: For example, a child-care provider at a private preschool; geometry teacher in a public high school; sales clerk in a women's shoe store.

PROBE 2: What are your main activities or duties? What else do you do?  
What else? Do you supervise anyone?

<OPEN>\_\_\_\_\_

DON'T KNOW..... d  
REFUSED..... r

## Income

This next set of questions is about income you received last month.

(Adapted from TANF,FF)

LMPY Last month, what was your take home pay from all your jobs combined, including odd jobs?

**PROBE:** Your best estimate is fine.

\$ |\_\_|,|\_\_|\_\_|\_\_|.|\_\_|\_\_| RECORD DOLLAR AMOUNT (GO TO OAWK)

DON'T KNOW.....d (GO TO RANG)

REFUSED.....r (GO TO RANG)

RANG I just need to know a range. Can you tell me if it was....

INTERVIEWER: STOP READING WHEN RESPONDENT PROVIDES RANGE.

|                             |    |
|-----------------------------|----|
| Less than \$500             | 01 |
| Between \$500 and \$750     | 02 |
| Between \$750 and \$1,000   | 03 |
| Between \$1,000 and \$1,250 | 04 |
| Between \$1,250 and \$1,500 | 05 |
| Between \$1,500 and \$1,750 | 06 |
| Between \$1,750 and \$2,000 | 07 |
| Between \$2,000 and \$2,500 | 08 |
| Between \$2,500 and \$3,000 | 09 |
| Between \$3,000 and \$3,500 | 10 |
| Between \$3,500 and \$4,000 | 11 |
| Between \$4,000 and \$4,500 | 12 |
| Between \$4,500 and \$5,000 | 13 |
| Between \$5,000 and \$5,500 | 14 |
| Between \$5,500 and \$6,000 | 15 |
| \$6,000 or more?            | 16 |
| DON'T KNOW                  | D  |
| REFUSED                     | R  |



Now please think about all the money **you yourself** received during the past **month**, not money any other members of your household who live with you received.

OINC During the past month, did you receive . . . (READ EACH ITEM)

PROBE: Please include electronically transferred benefits.

PROBE: Please only include benefits received in your name, not those received separately by other members of your family.

**INTERVIEWER:** READ DOWN LIST FIRST, THEN FOR EACH YES RESPONSE, ASK AMOUNT.

How much money, in total, did you receive from [SOURCE] last month?

PROBE: Your best estimate is fine. \_\_\_\_\_

|    |   | YES | NO | AMOUNT                 | DON'T KNOW | REFUSED |
|----|---|-----|----|------------------------|------------|---------|
| a. | Cash assistance, also know as TANF, Public Assistance, or WorkFirst?.....   | 01  | 00 | \$  _ , _ _ _ _ .  _ _ | d          | r       |
| b. | Food Stamp benefits?.....   | 01  | 00 | \$  _ , _ _ _ _ .  _ _ | d          | r       |
| c. | SSI (Supplemental Security Income) or disability insurance?.....  | 01  | 00 | \$  _ , _ _ _ _ .  _ _ | d          | r       |
| d. | Unemployment benefits?  | 01  | 00 | \$  _ , _ _ _ _ .  _ _ | d          | r       |
| e. | Child support?  | 01  | 00 | \$  _ , _ _ _ _ .  _ _ | d          | r       |
| d. | Any other money such as W.I.C., disability benefits, alimony payments, housing or energy assistance, or money from friends or relatives?..... | 01  | 00 | \$  _ , _ _ _ _ .  _ _ | d          | r       |
|    | (SPECIFY) _____   |     |    |                        | d          | r       |

## Assets

(FF, NSFH)

OCAR Do you own a car, truck, or van?

YES.....01  
NO.....00 (GO TO HOME)  
DON'T KNOW.....d (GO TO HOME)  
REFUSED.....r (GO TO HOME)

NCAR Is the car, truck, or van in...

Both you and your partner/spouse's names.....01  
Your partner/spouse's name only.....02  
Your name only, or.....03  
Someone else's name?.....04  
DON'T KNOW.....d  
REFUSED.....r

HOME Do you and your partner/spouse own your own home or are you renting?

OWN HOME.....01  
RENTING.....00 (GO TO BANK)  
DON'T KNOW.....d (GO TO BANK)  
REFUSED.....r (GO TO BANK)

NHOM Is your home in...

Both you and your partner/spouse's names.....01  
Your partner/spouse's name only.....02  
Your name only, or.....03  
Someone else's name?.....04  
DON'T KNOW.....d  
REFUSED.....r

BANK Do you have any bank accounts?

YES.....01  
NO.....00 (GO TO HMON)  
DON'T KNOW.....d (GO TO HMON)  
REFUSED.....r (GO TO HMON)

ACCN Are any of these accounts in...

Both you and your partner/spouse's names.....01  
Your partner/spouse's name only.....02  
Your name only, or.....03  
Someone else's name?.....04  
DON'T KNOW.....d  
REFUSED.....r

HMON People handle money differently. Which of the following best describes how you and your partner/spouse handle money?

- We put all our money together.....01
- We put some of our money together but keep the rest separate, or.....02
- We keep all our money separate.....03
- DON'T KNOW.....d
- REFUSED.....f

## Education

Finally, I have just a few more questions about you and your background.

(FF)

EDUC What is the highest grade or year of regular school that you have completed?

**INTERVIEWER:** READ LIST IF NECESSARY. CIRCLE ONE ANSWER.

- No formal schooling.....1
- 8th grade or less.....2
- Some high school (Grades 9,10,11, & 12).....3
- High school diploma (Completed 12th grade).....4
- G.E.D.....5
- Some college or 2 year degree.....6
- Technical or trade school.....7
- Bachelor's degree.....8
- Graduate or professional school.....9

## RACE AND ETHNICITY

(TANFCaseload Survey, BSF)

ETHN Do you consider yourself to be of Hispanic or Latino origin?

- YES.....01
- NO.....02
- DON'T KNOW.....d
- REFUSED.....f

(TANF, BSF)

RACE What is your race? Do you consider yourself White, Black or African American, Asian, American Indian or Alaska Native, or Native Hawaiian or Other Pacific Islander?

**INTERVIEWER:** CODE ALL THAT APPLY.

**INTERVIEWER:** IF RESPONSE IS "HISPANIC": DO YOU CONSIDER YOURSELF WHITE HISPANIC, BLACK HISPANIC, ETC.

- White.....01
- Black or African American.....02
- Asian.....03
- American Indian or Alaska Native or.....04
- Native Hawaiian or Other Pacific Islander.....05
- DON'T KNOW.....d
- REFUSED.....f

Thank you, those are all the questions I have.

## COLLECT CONTACT INFORMATION

Now I need to make sure we have your correct address and telephone number so that we can call you to schedule your in-home visit.

**INTERVIEWER:** ASK FOR CURRENT ADDRESS OR VERIFY ADDRESS FROM PAGE 1.

**IF NEEDED:** What is your current address?

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**INTERVIEWER:** ASK FOR PHONE NUMBER OR VERIFY FROM CONTACT SHEET.

**IF NEEDED:** What is your home telephone number?

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Is there another phone number where you can be reached?

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Thank you. You will be contacted within the next few days by a staff member at the Relationship Research Institute in Seattle who will set up a time that is convenient for you to visit you and your (partner/spouse) in your home.

## TRANSITION TO PARTNER/SPOUSE INTERVIEW

Now I would like to interview your (partner/spouse). Can (he/she) come to the phone now to start the interview?

YES.....01 (START PARTNER INTERVIEW)  
NO.....02  
DON'T KNOW.....d  
REFUSED.....f

When is a good time for me to call (him/her)?

**INTERVIEWER:** RECORD CALLBACK TIME ON CONTACT SHEET AND THANK SAMPLE MEMBER. TERMINATE CALL.

What is the best telephone number for me to reach (him/her) at?

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