OMB No.: 0970-0403

Expiration Date: 10/31/2015

PACT

Responsible Fatherhood

Baseline Survey

October 19, 2012

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| According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0970-0403. The time required to complete this information collection is estimated to average 30 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. |

**CONTENTS**

**Section Page**

 i. INTRODUCTION i

 A. CONTACT INFORMATION 1 1

 B. DEMOGRAPHIC AND SOCIOECONOMIC CHARACTERISTICS 3

 C. biological child roster 6

 D. RELATIONSHIPS 17

 E. NON-BIOLOGICAL, RESIDENTIAL CHILDREN 25

 F. ECONOMIC STABILITY 26

 G. FATHER BACKGROUND AND WELL BEING 29

 H. Motivation to participate in program 34

 i. contact information 2 35

**i. INTRODUCTION**

INTERVIEWER SELECT STAFF NAME AND SITE NAME FROM DROP DOWN MENU.

PROGRAMMER: PRELOAD STAFF NAMES AND SITE NAMES.

 INTERVIEWER: ASK PROGRAM STAFF: Does he have at least one living biological child under 18 years of age? IF YES, ASK PROGRAM STAFF TO PUT RESPONDENT ON THE PHONE AND START THE INTERVIEW. IF NO, TELL PROGRAM STAFF: He is ineligible for the study because he does not have a living biological child under 18 years old.

1. Hello, my name is [INTERVIEWER NAME], and I work for Mathematica Policy Research. I understand that you are interested in [PROGRAM NAME] and the Parents and Children Together study. Is that correct?

YES 1

NO 0 GO TO 6a

2. Great. Thanks for taking the time to talk to me today. I would like to tell you a little bit more about the study, which is called PACT for short. Please stop me at any time if you have a question.

 The [PROGRAM NAME] program is part of the PACT study, a national study being conducted by the U.S. Department of Health and Human Services. The study is being done to learn more about which services help fathers build better relationships with their children and their families, as well as improve their economic stability. The Department of Health and Human Services asked a research team from Mathematica to assist with the study.

 The [PROGRAM NAME] program is for fathers. If you want to be in the program, you have to agree to be a part of the PACT study. If you decide that you do not want to be a part of the study, you will not be able to participate in [PROGRAM NAME] program. You will be given information about other services that you can receive in the community.

 If you decide to be in the [PROGRAM NAME] program and the study, I will ask you to complete a short survey on the telephone with me today. This will take about 30 minutes. You will receive $10 in appreciation of your time.

 Do you have any questions about what I’ve said so far?

YES 1

NO 0 GO TO 3

2a. What is your question?

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

INTERVIEWER: PRESS F10 TO ACCESS FAQ

3. Because the [PROGRAM NAME] program can only serve a limited number of fathers, a computer will randomly select whether or not you can participate in the program. The computer will place you into one of two groups. One of the groups will receive [PROGRAM NAME] program services at no cost to them. The other group will not receive [PROGRAM NAME] program services. The computer works like a flip of a coin—assignment to a group is completely random. The chance of being able to receive services is not influenced by what you say to program staff or to me. A staff member from [PROGRAM NAME] will let you know if you are assigned to the program group or not after today’s interview.

 If you are not randomly assigned to participate in the [PROGRAM NAME] program, you will be provided with information on other services available to you in the community.

 Do you have any questions at this time?

YES 1

NO 0 GO TO 4

3a. What is your question?

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

INTERVIEWER: PRESS F10 TO ACCESS FAQ

4. Regardless of whether you can participate in services or not, the research team at Mathematica will contact you again by phone in about twelve months. At that time, you will be asked to complete a survey about topics such as your relationships and interactions with your child or children, your relationship with other family members, your employment, and services you receive.

 You may also be asked to participate in focus groups, in-person interviews and to complete check lists about interactions with your child. Researchers may also ask for permission to interview your child. You will receive money as a token of appreciation for the time you spend in these activities.

 The decision to participate in the survey in 12 months, the interviews, and the check lists is voluntary and will have no effect on your participation in the program, and you can decide in 12 months whether to participate in the survey, interviews, and check lists then.

Do you have any questions now?

YES 1

NO 0 GO TO 5

4a. What is your question?

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

INTERVIEWER: PRESS F10 TO ACCESS FAQ

5. If you agree to be part of the study, it means you are giving permission for the [PROGRAM NAME] program to share information with the study team about you and the services you receive from the program. At any time, after you have been randomly assigned, you can call our study helpline to say that you no longer want the program to share information about you with the researchers, and that will have no effect on the services available to you.

 The research team may also contact federal and state agencies for information about your employment and earnings, child support agreements, and criminal background.

 Everything you tell the program staff or the researchers will be kept strictly private and will not be shared with anyone, except as required by law. However, if a person on the study team observes child abuse, it must be reported as required by law.

 Only the researchers will be able to access information you give them and nothing will ever be said about you as an individual. Instead, information about you will be combined with information about everybody else in the study, so the researchers can say things like “30 percent of fathers in the program have two children.”

 Your participation in the study could help in providing services in the future to other fathers like you.

 There are no known risks of participating in this study, except that you may feel uncomfortable answering some questions in the interviews. You can refuse to answer those questions if you wish, and it will not change your participation in the program.

 Your participation in the program and the study is strictly voluntary.

 Do you have any questions now?

YES 1

NO 0 GO TO 6

5a. What is your question?

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

INTERVIEWER: PRESS F10 TO ACCESS FAQ

6. Do you agree to be in the PACT study?

YES 1 GO TO A1

NO 0

6a. Please tell me why you are not interested in participating in the PACT study.

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

6b. Your participation is important because it will help us learn about services for fathers like you in the future. All information we collect will be kept strictly private, and you will receive $10 for completing the survey today. Will you reconsider and agree to participate in the PACT study?

YES, I WILL PARTICIPATE 1 GO TO A1

NO, I WILL NOT PARTICIPATE 0

7. Thank you very much for your time. Can you please hand the phone back to the staff person at [PROGRAM NAME]?

 INTERVIEWER: INFORM PROGRAM STAFF THAT RESPONDENT WILL NOT BE PART OF THE PACT STUDY AND WILL NOT BE IN THE PROGRAM BUT WILL RECEIVE INFORMATION ABOUT OTHER SERVICES IN THE COMMUNITY.

**A. CONTACT INFORMATION 1**

Thank you for agreeing to participate in the study. I would like to start by asking you some questions about yourself.

A1. What is your full name? Please spell that for me.

 INSTRUCTION: CONFIRM LAST NAME GIVEN IS THEIR FULL LEGAL NAME (i.e. ARE THERE TWO LAST NAMES OR HYPHENATED LAST NAME).

FIRST NAME

MIDDLE INITIAL/NAME

LAST NAME

A1a. I want to make sure that we call you by the correct name. Do you go by another name?

YES 1

NO 0 GO TO A2

DON’T KNOW d GO TO A2

REFUSED r GO TO A2

A1b. Please spell that name for me.

NAME

DON’T KNOW d

REFUSED r

A2. What is your date of birth?

 | | | / | | | / | | | | |

MONTH DAY YEAR

A3. What is your Social Security Number?

 | | | | - | | | -| | | | |

A4. What is your address?

STREET 1

STREET 2

APT. #

CITY

STATE

ZIP

A5. What is your home telephone number?

 | | | | - | | | | -| | | | | TELEPHONE

NO LANDLINE AT HOME, ONLY CELL PHONE 0

DON’T KNOW d

REFUSED r

A6a. Do you have a cell phone?

YES 1

NO 0 GO TO B1

DON’T KNOW d GO TO B1

REFUSED r GO TO B1

A6b. What is your cell phone number?

 | | | | - | | | | -| | | | | TELEPHONE

DON’T KNOW d

REFUSED r

A7. I am going to ask you about the kind of cell phone service plan you have with your cell phone provider.

Youthbuild

|  |  |
| --- | --- |
|  | CODE ONE PER ROW |
|  | **YES** | **NO** | **DK** | **REF** |
| a. **Do you have a contract?**  | 1 | 0 | d | r |
| b. **Do you have a ‘pay as you go’ plan?**  | 1 | 0 | d | r |
| c. **Do you have unlimited calling?**  | 1 | 0 | d | r |
| d. **Do you have unlimited texting?**  | 1 | 0 | d | r |
| e. OTHER (SPECIFY)  | 1 | 0 | d | r |
|   |  |  |  |  |

ASK IF A7d=0

A8. Is it okay for us to text you at this number?

YES 1

PACT developed

NO 0

DON’T KNOW d

REFUSED r

**B. DEMOGRAPHIC AND SOCIOECONOMIC CHARACTERISTICS**

Next, I would like to ask you some questions about your background.

B1. Are you Hispanic, Latino, or of Spanish origin?

 INSTRUCTION: IF RESPONDENT ONLY SAYS “YES”, PROBE: Are you Mexican, Mexican American, Chicano, Puerto Rican, Cuban, or of other Hispanic, Latino or Spanish origin?

OMB

 CODE ALL THAT APPLY

NO, NOT OF HISPANIC, LATINO OR SPANISH ORIGIN 0

YES, MEXICAN, MEXICAN AMERICAN, CHICANO 1

YES, PUERTO RICAN 2

YES, CUBAN 3

YES, ANOTHER HISPANIC, LATINO OR SPANISH ORIGIN 4

DON’T KNOW d

REFUSED r

B2. What is your race?

OMB

 CODE ALL THAT APPLY

AMERICAN INDIAN OR ALASKA NATIVE 1

ASIAN 2

BLACK OR AFRICAN AMERICAN 3

NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER 4

WHITE 5

OTHER (SPECIFY) 99

DON’T KNOW d

REFUSED r

B3. What country were you born in?

 CODE ONE ONLY

UNITED STATES 1 GO TO B5

BSF

PUERTO RICO 2

CANADA 3

MEXICO 4

CUBA 5

DOMINICAN REPUBLIC 6

EL SALVADOR 7

HAITI 8

JAMAICA 9

GUATEMALA 10

NICARAGUA 11

OTHER COUNTRY (SPECIFY) 99

DON’T KNOW d

REFUSED r

B4. When did you first come to live in the United States?

INSTRUCTION: FIRST CODE IF ANSWER IS ‘SPECIFIC YEAR’ OR ‘NUMBER OF YEARS AGO’. YOU WILL BE ABLE TO ENTER SPECIFIC YEAR OR NUMBER OF YEARS ON THE NEXT SCREEN.

BSF

SPECIFY YEAR 1

SPECIFY NUMBER OF YEARS AGO 2

 | | | | | YEAR

OR

 | | | NUMBER OF YEARS AGO

DON’T KNOW d

REFUSED r

B5. What is the highest level of education you have completed?

COBRA tailored for PACT

 INSTRUCTION: IF RESPONDENT SAYS “HIGH SCHOOL,” PROBE: Did you receive a diploma or GED?

 CODE ONE ONLY

DID NOT COMPLETE HIGH SCHOOL OR GED 1

HIGH SCHOOL: DIPLOMA 2

HIGH SCHOOL: GENERAL EDUCATION DEVELOPMENT OR GED 3

SOME COLLEGE/SOME POSTSECONDARY VOCATIONAL COURSES 4

2-YEAR OR 3-YEAR COLLEGE DEGREE (ASSOCIATE’S DEGREE) 5

VOCATIONAL SCHOOL DIPLOMA 6

4-YEAR COLLEGE DEGREE (BACHELOR’S DEGREE) 7

SOME GRADUATE WORK/NO GRADUATE DEGREE 8

GRADUATE OR PROFESSIONAL DEGREE (e.g., MA, MBA, Ph.D., JD, MD) 9

NEVER ATTENDED SCHOOL 10

DON’T KNOW d

REFUSED r

ASK B5a IF B3 (COUNTRY YOU WERE BORN IN) ≠1

B5a. Did you complete this education in the United States?

YES 1

PACT developed

NO 0

DON’T KNOW d

REFUSED r

**C. BIOLOGICAL CHILD ROSTER**

Now I’d like to start by asking you some questions about your biological children. We are interested in all of your living children under the age of 18, whether they live with you or not.

C1. Do you have any living biological children under the age of 18? Please do not include any current pregnancies.

PACT developed

YES 1

NO 0 GO TO END2

DON’T KNOW d

REFUSED r

C2. How many living biological children under the age of 18 do you have? Please do not include any current pregnancies.

PACT developed

 IF NUMBER OF CHILDREN=0, GO TO END2.

 | | | CHILDREN

DON’T KNOW d

REFUSED r

|  | CHILD 1 | CHILD 2 | CHILD 3 |
| --- | --- | --- | --- |
| C3a. [Starting with the youngest child under the age of 18/Now thinking of the next youngest child under the age of 18,] please spell this child’s first and last name for me.  |  FIRST NAME LAST NAMEDON’T KNOW dREFUSED r |  FIRST NAME LAST NAMEDON’T KNOW dREFUSED r |  FIRST NAME LAST NAMEDON’T KNOW dREFUSED r |
| C3b.[CHILD 1 ONLY: I want to make sure that we use [CHILD]’s correct first name.] Do you call [CHILD] by a different name? BSF | YES 1NO 0 GO TO C4DON’T KNOW d GO TO C4REFUSED r GO TO C4 | YES 1NO 0 GO TO C4DON’T KNOW d GO TO C4REFUSED r GO TO C4 | YES 1NO 0 GO TO C4DON’T KNOW d GO TO C4REFUSED r GO TO C4 |
| C3c. Please spell that name for me.  | NOTE: IF NICKNAME, USE AS FILL FOR [CHILD FIRST NAME] IN REMAINDER OF SURVEY NICKNAMEDON’T KNOW dREFUSED r | NOTE: IF NICKNAME, USE AS FILL FOR [CHILD FIRST NAME] IN REMAINDER OF SURVEY NICKNAMEDON’T KNOW dREFUSED r | NOTE: IF NICKNAME, USE AS FILL FOR [CHILD FIRST NAME] IN REMAINDER OF SURVEY NICKNAMEDON’T KNOW dREFUSED r |
| C4. Do you have another child under the age of 18?  | YES 1 GO TO C3a, CHILD 2NO 0 DON’T KNOW d REFUSED r  | YES 1 GO TO C3a, CHILD 3NO 0 GO TO C5, CHILD 1DON’T KNOW d REFUSED r  | YES 1 GO TO C3a, CHILD 4NO 0 GO TO C5, CHILD 1DON’T KNOW d REFUSED r  |
| Now that you’ve told me the names of all of your children, I’d like to ask you questions about each one.CODE SEX. IF NECESSARY ASK:C5. **Is [CHILD FIRST NAME] a boy or girl?**  | BOY 1GIRL 2DON’T KNOW dREFUSED r | BOY 1GIRL 2DON’T KNOW dREFUSED r | BOY 1GIRL 2DON’T KNOW dREFUSED r |
| C6. **What is [CHILD FIRST NAME]’s date of birth?**  | PROGRAMMER NOTE: ALLOW REFUSAL IN MM/DD/YYYY | | |/| | |/| | | | | GO TO C8MONTH DAY YEARDECEASED 1 GO TO C5, CHILD 2, IF C4, CHILD 1 =1, OR GO TO END2 IF C4, CHILD 1=0INTERVIEWER: IF C6=1, THEN SAY**: I’m very sorry to hear that. Our condolences for your loss.**DON’T KNOW dREFUSED r | PROGRAMMER NOTE: ALLOW REFUSAL IN MM/DD/YYYY | | |/| | |/| | | | | GO TO C8MONTH DAY YEARDECEASED 1 GO TO D5, CHILD 3, IF C4, CHILD 2 =1INTERVIEWER: IF C6=1, THEN SAY**: I’m very sorry to hear that. Our condolences for your loss.**DON’T KNOW dREFUSED r | PROGRAMMER NOTE: ALLOW REFUSAL IN MM/DD/YYYY | | |/| | |/| | | | | GO TO C8MONTH DAY YEARDECEASED 1 GO TO C5, CHILD 4, IF C4, CHILD 3 =1INTERVIEWER: IF C6=1, THEN SAY**: I’m very sorry to hear that. Our condolences for your loss.**DON’T KNOW dREFUSED r |
| C7. **How old is [CHILD FIRST NAME]?** **Is that weeks, months or years?**  | | | | | WEEKS 1MONTHS 2YEARS 3DECEASED 4 GO TO C5, CHILD 2, IF C4, CHILD 1 =1 OR GO TO END2 IF C4, CHILD 1=0INTERVIEWER: IF C7=4, THEN SAY**: I’m very sorry to hear that. Our condolences for your loss.**DON’T KNOW dREFUSED r | | | | | WEEKS 1MONTHS 2YEARS 3DECEASED 4 GO TO C5, CHILD 3, IF C4, CHILD 2 =1 INTERVIEWER: IF C7=4, THEN SAY**: I’m very sorry to hear that. Our condolences for your loss.**DON’T KNOW dREFUSED r | | | | | WEEKS 1MONTHS 2YEARS 3DECEASED 4 GO TO C5, CHILD 4, IF C4, CHILD 3 =1 INTERVIEWER: IF C7=4, THEN SAY**: I’m very sorry to hear that. Our condolences for your loss.**DON’T KNOW dREFUSED r |

|  | CHILD 4 | CHILD 5 | CHILD 6 |
| --- | --- | --- | --- |
| C3a. [Starting with the youngest child under the age of 18/Now thinking of the next youngest child under the age of 18,] please spell this child’s first and last name for me.  |  FIRST NAME LAST NAMEDON’T KNOW dREFUSED r |  FIRST NAME LAST NAMEDON’T KNOW dREFUSED r |  FIRST NAME LAST NAMEDON’T KNOW dREFUSED r |
| C3b. [CHILD 1 ONLY:] I want to make sure that we use [CHILD]’s correct first name.] Do you call [CHILD] by a different name? BSF | YES 1NO 0 GO TO C4DON’T KNOW d GO TO C4REFUSED r GO TO C4 | YES 1NO 0 GO TO C4DON’T KNOW d GO TO C4REFUSED r GO TO C4 | YES 1NO 0 GO TO C4DON’T KNOW d GO TO C4REFUSED r GO TO C4 |
| C3c. Please spell that name for me.  | NOTE: IF NICKNAME, USE AS FILL FOR [CHILD FIRST NAME] IN REMAINDER OF SURVEY NICKNAMEDON’T KNOW dREFUSED r | NOTE: IF NICKNAME, USE AS FILL FOR [CHILD FIRST NAME] IN REMAINDER OF SURVEY NICKNAMEDON’T KNOW dREFUSED r | NOTE: IF NICKNAME, USE AS FILL FOR [CHILD FIRST NAME] IN REMAINDER OF SURVEY NICKNAMEDON’T KNOW dREFUSED r |
| C4. Do you have another child under the age of 18?  | YES 1 GO TO C3a, CHILD 5NO 0 GO TO C5, CHILD 1DON’T KNOW d REFUSED r  | YES 1 GO TO C3a, CHILD 6NO 0 GO TO C5, CHILD 1DON’T KNOW d REFUSED r  | YES 1 GO TO C3a, CHILD 7NO 0 GO TO C5, CHILD 1DON’T KNOW d REFUSED r  |
| Now that you’ve told me the names of all of your children, I’d like to ask you questions about each one.CODE SEX. IF NECESSARY ASK:C5. **Is [CHILD FIRST NAME] a boy or girl?**  | BOY 1GIRL 2DON’T KNOW dREFUSED r | BOY 1GIRL 2DON’T KNOW dREFUSED r | BOY 1GIRL 2DON’T KNOW dREFUSED r |
| C6. **What is [CHILD FIRST NAME]’s date of birth?**  | PROGRAMMER NOTE: ALLOW REFUSAL IN MM/DD/YYYY | | |/| | |/| | | | | GO TO C8MONTH DAY YEARDECEASED 1 GO TO C5, CHILD 5, IF C4, CHILD 4 =1 , INTERVIEWER: IF C6=1, THEN SAY**: I’m very sorry to hear that. Our condolences for your loss.**DON’T KNOW dREFUSED r | PROGRAMMER NOTE: ALLOW REFUSAL IN MM/DD/YYYY | | |/| | |/| | | | | GO TO C8MONTH DAY YEARDECEASED 1 GO TO C5, CHILD 6, IF C4, CHILD 5 =1 , INTERVIEWER: IF C6=1, THEN SAY**: I’m very sorry to hear that. Our condolences for your loss.**DON’T KNOW dREFUSED r | PROGRAMMER NOTE: ALLOW REFUSAL IN MM/DD/YYYY | | |/| | |/| | | | | GO TOC8MONTH DAY YEARDECEASED 1 GO TO C5, CHILD 7, IF C4, CHILD 6 =1 , INTERVIEWER: IF C6=1, THEN SAY**: I’m very sorry to hear that. Our condolences for your loss.**DON’T KNOW dREFUSED r |
| C7. **How old is [CHILD FIRST NAME]?** **Is that weeks, months or years?**  | | | | | WEEKS 1MONTHS 2YEARS 3DECEASED 4 GO TOC5, CHILD 5, IF C4, CHILD 4 =1 INTERVIEWER: IF C7=4, THEN SAY**: I’m very sorry to hear that. Our condolences for your loss.**DON’T KNOW dREFUSED r | | | | | WEEKS 1MONTHS 2YEARS 3DECEASED 4 GO TO C5, CHILD 6, IF C4, CHILD 5 =1 , INTERVIEWER: IF C7=4, THEN SAY**: I’m very sorry to hear that. Our condolences for your loss.**DON’T KNOW dREFUSED r | | | | | WEEKS 1MONTHS 2YEARS 3DECEASED 4 GO TO C5, CHILD 7, IF C4, CHILD 6 =1 , INTERVIEWER: IF C7=4, THEN SAY**: I’m very sorry to hear that. Our condolences for your loss.**DON’T KNOW dREFUSED r |

|  | CHILD 1 | CHILD 2 | CHILD 3 |
| --- | --- | --- | --- |
| C8. **Please tell me [CHILD FIRST NAME]’s mother’s first and last name.**  **PROBE: Please spell that for me.** |  FIRST NAME LAST NAMEDON’T KNOW dREFUSED r |  |  |
| C9. **Is [CHILD FIRST NAME]’s mother the same as . . .** |  | [CHILD 1]?YES 1 GO TO C10NO 0 DON’T KNOW d REFUSED r  | [CHILD 1]?YES 1 GO TO C10NO 0 DON’T KNOW d REFUSED r [CHILD 2]?YES 1 GO TO C10NO 0 DON’T KNOW d REFUSED r  |
| C9a. **Please tell me [CHILD FIRST NAME]’s mother’s first and last name.**  **PROBE: Please spell that for me.** |  |  FIRST NAME LAST NAMEDON’T KNOW dREFUSED r |  FIRST NAME LAST NAMEDON’T KNOW dREFUSED r |
| ASK C10 FOR THE LAST CHILD LISTED AT C3a.C10. **Is there another child?**  | IF C4, CHILD 1=0 AND C10, CHILD 1=1, GO TO C3a, CHILD 2YES 1NO 0DON’T KNOW dREFUSED r | IF C4, CHILD 2=0 AND C10, CHILD 2=1, GO TO C3a, CHILD 3YES 1NO 0DON’T KNOW dREFUSED r | IF C4, CHILD 3=0 AND C10, CHILD 3=1, GO TO C3a, CHILD 4YES 1NO 0DON’T KNOW dREFUSED r |

|  | CHILD 4 | CHILD 5 | CHILD 6 |
| --- | --- | --- | --- |
| C8. **Please tell me [CHILD FIRST NAME]’s mother’s first and last name.**  **PROBE: Please spell that for me.** |  |  |  |
| C9. **Is [CHILD FIRST NAME]’s mother the same as . . .**  | [CHILD 1]?YES 1 GO TO C10NO 0 DON’T KNOW d REFUSED r [CHILD 2]?YES 1 GO TO C10NO 0 DON’T KNOW d REFUSED r [CHILD 3]?YES 1 GO TO C10NO 0 DON’T KNOW d REFUSED r  | [CHILD 1]?YES 1 GO TO C10NO 0 DON’T KNOW d REFUSED r [CHILD 2]?YES 1 GO TO C10NO 0 [DON’T KNOW d REFUSED r [CHILD 3]?YES 1 GO TO C10NO 0 DON’T KNOW d REFUSED r [CHILD 4]?YES 1 GO TO C10NO 0 DON’T KNOW d REFUSED r  | [CHILD 1]?YES 1 GO TO C10NO 0 DON’T KNOW d REFUSED r [CHILD 2]?YES 1 GO TO C10NO 0 ]DON’T KNOW d REFUSED r [CHILD 3]?YES 1 GO TO C10NO 0 DON’T KNOW d REFUSED r [CHILD 4]?YES 1 GO TO C10NO 0 DON’T KNOW d REFUSED r [CHILD 5]?YES 1 GO TO C10NO 0 DON’T KNOW d REFUSED r  |
| C9a. **Please tell me [CHILD FIRST NAME]’s mother’s first and last name.**  **PROBE: Please spell that for me.** |  FIRST NAME LAST NAMEDON’T KNOW dREFUSED r |  FIRST NAME LAST NAMEDON’T KNOW dREFUSED r |  FIRST NAME LAST NAMEDON’T KNOW dREFUSED r |
| ASK C10 FOR THE LAST CHILD LISTED AT C3a.C10. **Is there another child?**  | IF C4, CHILD 4=0 AND C10, CHILD 4=1, GO TO C3a, CHILD 5YES 1NO 0DON’T KNOW dREFUSED r | IF C4, CHILD 5=0 AND C10, CHILD 5=1, GO TO C3a, CHILD 6YES 1NO 0DON’T KNOW dREFUSED r | IF C4, CHILD 6=0 AND C10, CHILD 6=1, GO TO C3a, CHILD 7YES 1NO 0DON’T KNOW dREFUSED r |

|  | CHILD 1 | CHILD 2 | CHILD 3 |
| --- | --- | --- | --- |
| C11. **Were you and [MOTHER FIRST NAME] married when [CHILD FIRST NAME] was born?** BSF | YES 1 GO TO C14, CHILD 1NO 0DON’T KNOW dREFUSED r | YES 1 GO TO C14, CHILD 2NO 0DON’T KNOW dREFUSED r | YES 1 GO TO C14, CHILD 3NO 0DON’T KNOW dREFUSED r |
| C12. **Did you and [MOTHER FIRST NAME] ever sign a birth certificate or document that identifies you as the legal father of [CHILD FIRST NAME]?** BSF | YES 1 GO TO C14, CHILD 1NO 0DON’T KNOW dREFUSED r | YES 1 GO TO C14, CHILD 2NO 0DON’T KNOW dREFUSED r | YES 1 GO TO C14, CHILD 3NO 0DON’T KNOW dREFUSED r |
| C13. **Has a court ruled that you are [CHILD FIRST NAME]’s father?** BSF | YES 1NO 0DON’T KNOW dREFUSED r | YES 1NO 0DON’T KNOW dREFUSED r | YES 1NO 0DON’T KNOW dREFUSED r |
| FFCWS tailored for PACTC14. **Who does [CHILD FIRST NAME] live with? By this we mean who has primary responsibility for [fill his if C5 = 1 or her if C5 = 2] care?**  CODE ALL THAT APPLY | RESPONDENT 1CHILD’S BIOLOGICAL MOTHER 2PATERNAL GRANDPARENTS 3MATERNAL GRANDPARENTS 4AUNT, UNCLE, GREAT AUNT OR GREAT UNCLE 5OTHER ADULT RELATIVE 6SOME OTHER ADULT 7ADOPTIVE PARENT 8FOSTER CARE 9GROUP HOME 10CHILD ON OWN/LIVING WITH A FRIEND 11INCARCERATED 12OTHER (SPECIFY) 99 DON’T KNOW dREFUSED r | RESPONDENT 1CHILD’S BIOLOGICAL MOTHER 2PATERNAL GRANDPARENTS 3MATERNAL GRANDPARENTS 4AUNT, UNCLE, GREAT AUNT OR GREAT UNCLE 5OTHER ADULT RELATIVE 6SOME OTHER ADULT 7ADOPTIVE PARENT 8FOSTER CARE 9GROUP HOME 10CHILD ON OWN/LIVING WITH A FRIEND 11INCARCERATED 12OTHER (SPECIFY) 99 DON’T KNOW dREFUSED r | RESPONDENT 1CHILD’S BIOLOGICAL MOTHER 2PATERNAL GRANDPARENTS 3MATERNAL GRANDPARENTS 4AUNT, UNCLE, GREAT AUNT OR GREAT UNCLE 5OTHER ADULT RELATIVE 6SOME OTHER ADULT 7ADOPTIVE PARENT 8FOSTER CARE 9GROUP HOME 10CHILD ON OWN/LIVING WITH A FRIEND 11INCARCERATED 12OTHER (SPECIFY) 99 DON’T KNOW dREFUSED r |
| FFCWS tailored for PACTC15. **How many nights in the past month did you and [CHILD FIRST NAME] stay in the same place?**  | | | | TIMES GO TO C16DON’T KNOW dREFUSED r | | | | TIMES GO TO C16DON’T KNOW dREFUSED r  | | | | TIMES GO TO C16DON’T KNOW dREFUSED r  |
| WFNJ tailored for PACTC15a. **I just need to know a range, can you tell me if it was…?**  | **1-5 nights, 1****6-10 nights, 2****11-15 nights, 3****16-20 nights, or 4****More than 20 nights** 5DON’T KNOW dREFUSED r | **1-5 nights, 1****6-10 nights, 2****11-15 nights, 3****16-20 nights, or 4****More than 20 nights** 5DON’T KNOW dREFUSED r | **1-5 nights, 1****6-10 nights, 2****11-15 nights, 3****16-20 nights, or 4****More than 20 nights** 5DON’T KNOW dREFUSED r |
| ASK IF C14 ≠ 1FFCWSC16. **Have you ever lived with [CHILD FIRST NAME]?**  | YES 1NO 0DON’T KNOW dREFUSED r | YES 1NO 0DON’T KNOW dREFUSED r | YES 1NO 0DON’T KNOW dREFUSED r |

|  | CHILD 4 | CHILD 5 | CHILD 6 |
| --- | --- | --- | --- |
| C11. **Were you and [MOTHER FIRST NAME] married when [CHILD FIRST NAME] was born?** BSF | YES 1 GO TO C14,CHILD 4NO 0DON’T KNOW dREFUSED r | YES 1 GO TO C14, CHILD 5NO 0DON’T KNOW dREFUSED r | YES 1 GO TO C14, CHILD 6NO 0DON’T KNOW dREFUSED r |
| C12. **Did you and [MOTHER FIRST NAME] ever sign a birth certificate or document that identifies you as the legal father of [CHILD FIRST NAME]?** BSF | YES 1 GO TO C14, CHILD 4NO 0DON’T KNOW dREFUSED r | YES 1 GO TO C14, CHILD 5NO 0DON’T KNOW dREFUSED r | YES 1 GO TO C14, CHILD 6NO 0DON’T KNOW dREFUSED r |
| C13. **Has a court ruled that you are [CHILD FIRST NAME]’s father?** BSF | YES 1NO 0DON’T KNOW dREFUSED r | YES 1NO 0DON’T KNOW dREFUSED r | YES 1NO 0DON’T KNOW dREFUSED r |
| FFCWS tailored for PACTC14. **Who does [CHILD FIRST NAME] live with? By this we mean who has primary responsibility for [fill his if C5 = 1 or her if C5 = 2] care?**  CODE ALL THAT APPLY | RESPONDENT 1CHILD’S BIOLOGICAL MOTHER 2PATERNAL GRANDPARENTS 3MATERNAL GRANDPARENTS 4AUNT, UNCLE, GREAT AUNT OR GREAT UNCLE 5OTHER ADULT RELATIVE 6SOME OTHER ADULT 7ADOPTIVE PARENT 8FOSTER CARE 9GROUP HOME 10CHILD ON OWN/LIVING WITH A FRIEND 11INCARCERATED 12OTHER (SPECIFY) 99 DON’T KNOW dREFUSED r | RESPONDENT 1CHILD’S BIOLOGICAL MOTHER 2PATERNAL GRANDPARENTS 3MATERNAL GRANDPARENTS 4AUNT, UNCLE, GREAT AUNT OR GREAT UNCLE 5OTHER ADULT RELATIVE 6SOME OTHER ADULT 7ADOPTIVE PARENT 8FOSTER CARE 9GROUP HOME 10CHILD ON OWN/LIVING WITH A FRIEND 11INCARCERATED 12OTHER (SPECIFY) 99 DON’T KNOW dREFUSED r | RESPONDENT 1CHILD’S BIOLOGICAL MOTHER 2PATERNAL GRANDPARENTS 3MATERNAL GRANDPARENTS 4AUNT, UNCLE, GREAT AUNT OR GREAT UNCLE 5OTHER ADULT RELATIVE 6SOME OTHER ADULT 7ADOPTIVE PARENT 8FOSTER CARE 9GROUP HOME 10CHILD ON OWN/LIVING WITH A FRIEND 11INCARCERATED 12OTHER (SPECIFY) 99 DON’T KNOW dREFUSED r |
| FFCWS tailored for PACTC15. **How many nights in the past month did you and [CHILD FIRST NAME] stay in the same place?**  | | | | TIMES GO TO C16DON’T KNOW dREFUSED r | | | | TIMES GO TO C16DON’T KNOW dREFUSED r  | | | | TIMES GO TO C16DON’T KNOW dREFUSED r  |
| WFNJ tailored for PACTC15a. **I just need to know a range, can you tell me if it was…?**  | **1-5 nights, 1****6-10 nights, 2****11-15 nights, 3****16-20 nights, or 4****More than 20 nights** 5DON’T KNOW dREFUSED r | **1-5 nights, 1****6-10 nights, 2****11-15 nights, 3****16-20 nights, or 4****More than 20 nights** 5DON’T KNOW dREFUSED r | **1-5 nights, 1****6-10 nights, 2****11-15 nights, 3****16-20 nights, or 4****More than 20 nights** 5DON’T KNOW dREFUSED r |
| ASK IF C14 ≠ 1FFCWSC16. **Have you ever lived with [CHILD FIRST NAME]?**  | YES 1NO 0DON’T KNOW dREFUSED r | YES 1NO 0DON’T KNOW dREFUSED r | YES 1NO 0DON’T KNOW dREFUSED r |

|  | CHILD 1 | CHILD 2 | CHILD 3 |
| --- | --- | --- | --- |
| If C14 ≠ 1, askBSF, EHSC17. **In the past month, how often have you spent time with [CHILD FIRST NAME] in person? Would you say, every day or almost every day, a few times a week, a few times a month, once or twice, or never?**  | EVERY DAY OR ALMOST EVERY DAY 1 GO TO C19, CHILD 1A FEW TIMES A WEEK 2A FEW TIMES A MONTH 3ONCE OR TWICE 4NEVER 5DON’T KNOW dREFUSED r | EVERY DAY OR ALMOST EVERY DAY 1 GO TO C19, CHILD 2A FEW TIMES A WEEK 2A FEW TIMES A MONTH 3ONCE OR TWICE 4NEVER 5DON’T KNOW dREFUSED r | EVERY DAY OR ALMOST EVERY DAY 1 GO TO C19, CHILD 3A FEW TIMES A WEEK 2A FEW TIMES A MONTH 3ONCE OR TWICE 4NEVER 5DON’T KNOW dREFUSED r |
| If C14 ≠ 1, askEHS tailored for PACTC18. **In the past month, how often have you had contact with [CHILD FIRST NAME]?**  **This would include having talked on the phone, sent letters, sent birthday cards, or sent text messages.** **Would you say, every day or almost every day, a few times a week, a few times a month, once or twice, or never?**  | EVERY DAY OR ALMOST EVERY DAY 1A FEW TIMES A WEEK 2A FEW TIMES A MONTH 3ONCE OR TWICE 4NEVER 5DON’T KNOW dREFUSED r | EVERY DAY OR ALMOST EVERY DAY 1A FEW TIMES A WEEK 2A FEW TIMES A MONTH 3ONCE OR TWICE 4NEVER 5DON’T KNOW dREFUSED r | EVERY DAY OR ALMOST EVERY DAY 1A FEW TIMES A WEEK 2A FEW TIMES A MONTH 3ONCE OR TWICE 4NEVER 5DON’T KNOW dREFUSED r |
| C19. **In the past month, did you buy things for [CHILD FIRST NAME] that (he/she) needed like clothes, school supplies, medicine, or other things (he/she) needed?** GO TO C20, CHILD 3 IF C14, CHILD 3 ≠1 AND C17, CHILD 3 ≠1OR GO TO C5, CHILD 4 IF C14, CHILD 3 =1 OR C17, CHILD 3 =1 AND C4, CHILD 3 =1 OR C10, CHILD 3=1ORGO TO D1, IF C14, CHILD 3=1 OR C17, CHILD 3=1 AND C4, CHILD 3=0 AND C10, CHILD 3=0 GO TO C20, CHILD 1 IF C14, CHILD 1 ≠1 AND C17, CHILD 1 ≠1OR GO TO C5, CHILD 2 IF C14, CHILD 1 =1 OR C17, CHILD 1 =1 AND C4, CHILD 1 =1 OR C10, CHILD 1=1ORGO TO D1, IF C14, CHILD 1=1 OR C17, CHILD 1=1 AND C4, CHILD 1=0 AND C10, CHILD 1=0 GO TO C 20, CHILD 2 IF C14, CHILD 2 ≠1 AND C17, CHILD 2 ≠1OR GO TO C5, CHILD 3 IF C14, CHILD 2 =1 OR C17, CHILD 2 =1 AND C4, CHILD 2 =1 OR C10, CHILD 2=1ORGO TO D1, IF C14, CHILD 2=1 OR C17, CHILD 2=1 AND C4, CHILD 2=0 AND C10, CHILD 2=0 BSF tailored for PACT | YES 1 GO TO C19a, CHILD 1NO 0 DON’T KNOW d REFUSED r  | YES 1 GO TO C19a, CHILD 2NO 0 DON’T KNOW d REFUSED r  | YES 1 GO TO C19a, CHILD 3NO 0DON’T KNOW dREFUSED r  |
| C19a. **How much money did you spend?** BSFGO TO C20, CHILD 3 IF C14, CHILD 3 ≠1 AND C17, CHILD 3 ≠1OR GO TO C5, CHILD 4 IF C14, CHILD 3 =1 OR C17, CHILD 3 =1 AND C4, CHILD 3 =1 OR C10, CHILD 3=1ORGO TO D1, IF C14, CHILD 3=1 OR C17, CHILD 3=1 AND C4, CHILD 3=0 AND C10, CHILD 3=0 GO TO C20, CHILD 2 IF C14, CHILD 2 ≠1 AND C17, CHILD 2 ≠1OR GO TO C5, CHILD 3 IF C14, CHILD 2 =1 OR C17, CHILD 2 =1 AND C4, CHILD 2 =1 OR C10, CHILD 2=1ORGO TO D1, IF C14, CHILD 2=1 OR C17, CHILD 2=1 AND C4, CHILD 2=0 AND C10, CHILD 2=0 GO TO C20, CHILD 1 IF C14, CHILD 1 ≠1 AND C17, CHILD 1 ≠1OR GO TO C5, CHILD 2 IF C14, CHILD 1 =1 OR C17, CHILD 1 =1 AND C4, CHILD 1 =1 OR C10, CHILD 1=1ORGO TO D1, IF C14, CHILD 1=1 OR C17, CHILD 1=1 AND C4, CHILD 1=0 AND C10, CHILD 1=0  **PROBE: Your best guess is fine.** | $| | |,| | | | AMOUNTDON’T KNOW d REFUSED r  | $| | |,| | | | AMOUNTDON’T KNOW d REFUSED r  | $| | |,| | | | AMOUNTDON’T KNOW d REFUSED r  |

|  | CHILD 4 | CHILD 5 | CHILD 6 |
| --- | --- | --- | --- |
| C17. **In the past month, how often have you spent time with [CHILD FIRST NAME] in person? Would you say, every day or almost every day, a few times a week, a few times a month, once or twice, or never?** BSF, EHS | EVERY DAY OR ALMOST EVERY DAY 1 GO TO C19, CHILD 4A FEW TIMES A WEEK 2A FEW TIMES A MONTH 3ONCE OR TWICE 4NEVER 5DON’T KNOW dREFUSED r | EVERY DAY OR ALMOST EVERY DAY 1 GO TO C19, CHILD 5A FEW TIMES A WEEK 2A FEW TIMES A MONTH 3ONCE OR TWICE 4NEVER 5DON’T KNOW dREFUSED r | EVERY DAY OR ALMOST EVERY DAY 1 GO TO C19, CHILD 6A FEW TIMES A WEEK 2A FEW TIMES A MONTH 3ONCE OR TWICE 4NEVER 5DON’T KNOW dREFUSED r |
| If C14 ≠ 1, askEHS tailored for PACTC18. **In the past month, how often have you had contact with [CHILD FIRST NAME]?**  **This would include having talked on the phone, sent letters, sent birthday cards, or sent text messages.** **Would you say, every day or almost every day, a few times a week, a few times a month, once or twice, or never?**  | EVERY DAY OR ALMOST EVERY DAY 1A FEW TIMES A WEEK 2A FEW TIMES A MONTH 3ONCE OR TWICE 4NEVER 5DON’T KNOW dREFUSED r | EVERY DAY OR ALMOST EVERY DAY 1A FEW TIMES A WEEK 2A FEW TIMES A MONTH 3ONCE OR TWICE 4NEVER 5DON’T KNOW dREFUSED r | EVERY DAY OR ALMOST EVERY DAY 1A FEW TIMES A WEEK 2A FEW TIMES A MONTH 3ONCE OR TWICE 4NEVER 5DON’T KNOW dREFUSED r |
| C19. **In the past month, did you buy things for [CHILD FIRST NAME] that (he/she) needed like clothes, diapers, school supplies, medicine, or other things (he/she) needed?** GO TO C20, CHILD 5 IF C14, CHILD 5 ≠1 AND C17, CHILD 5 ≠1OR GO TO C5, CHILD 6 IF C14, CHILD 5 =1 OR C17, CHILD 5 =1 AND C4, CHILD 5 =1 OR C10, CHILD 5=1ORGO TO D1, IF C14, CHILD 5=1 OR C17, CHILD 5=1 AND C4, CHILD 5=0 AND C10, CHILD 5=0 GO TO C20, CHILD 4 IF C14, CHILD 4 ≠1 AND C17, CHILD 4 ≠1OR GO TO C5, CHILD 5 IF C14, CHILD 4 =1 OR C17, CHILD 4 =1 AND C4, CHILD 4 =1 OR C10, CHILD 4=1ORGO TO D1, IF C14, CHILD 4=1 OR C17, CHILD 4=1 AND C4, CHILD 4=0 AND C10, CHILD 4=0 GO TO C20, CHILD 6 IF C14, CHILD 6 ≠1 AND C17, CHILD 6 ≠1OR GO TO C5, CHILD 7 IF C14, CHILD 6 =1 OR C17, CHILD 6 =1 AND C4, CHILD 6 =1 OR C10, CHILD 6=1ORGO TO D1, IF C14, CHILD 6=1 OR C17, CHILD 6=1 AND C4, CHILD 6=0 AND C10, CHILD 6=0 BSF tailored for PACT | YES 1 GO TO C23a, CHILD 4NO 0 DON’T KNOW d REFUSED r  | YES 1 GO TO C23a, CHILD 5NO 0 DON’T KNOW d REFUSED r  | YES 1 GO TO C23a, CHILD 6NO 0 DON’T KNOW dREFUSED r  |
| C19a. **How much money did you spend?** GO TO C20, CHILD 4 IF C14, CHILD 4 ≠1 AND C17, CHILD 4 ≠1OR GO TO C5, CHILD 5 IF C14, CHILD 4 =1 OR C17, CHILD 4 =1 AND C4, CHILD 4 =1 OR C10, CHILD 4=1ORGO TO D1, IF C14, CHILD 4=1 OR C17, CHILD 4=1 AND C4, CHILD 4=0 AND C10, CHILD 4=0 GO TO C20, CHILD 6 IF C14, CHILD 6 ≠1 AND C17, CHILD6 ≠1OR GO TO C5, CHILD 7 IF C14, CHILD 6 =1 OR C17, CHILD6 =1 AND C4, CHILD 6 =1 OR C10, CHILD 6=1ORGO TO D1, IF C14, CHILD 6=1 OR C17, CHILD 6=1 AND C4, CHILD 6=0 AND C10, CHILD 6=0 GO TO C20, CHILD 5 IF C14, CHILD 5 ≠1 AND C17, CHILD 5 ≠1OR GO TO C5, CHILD 6 IF C14, CHILD 5 =1 OR C17, CHILD 5 =1 AND C4, CHILD 5 =1 OR C10, CHILD 5=1ORGO TO D1, IF C14, CHILD 5=1 OR C17, CHILD 5=1 AND C4, CHILD 5=0 AND C10, CHILD 5=0 BSF **PROBE: Your best guess is fine.** | $| | |,| | | | AMOUNTDON’T KNOW d REFUSED r  | $| | |,| | | | AMOUNTDON’T KNOW d REFUSED r  | $| | |,| | | | AMOUNTDON’T KNOW d REFUSED r  |

 Some fathers find it hard to spend as much time as they want with their children. I’m going to read you a list of reasons some fathers have given us. For each one, please tell me if you strongly agree, mildly agree, mildly disagree or strongly disagree with this reason.

|  |  |  |  |
| --- | --- | --- | --- |
|  | CHILD 1 | CHILD 2 | CHILD 3 |
| C20. **I live too far away to see [CHILD FIRST NAME] more. Do you strongly agree, mildly agree, mildly disagree, or strongly disagree with this reason?** EHS | STRONGLY AGREE 1MILDLY AGREE 2MILDLY DISAGREE 3STRONGLY DISAGREE 4DON’T KNOW dREFUSED r | STRONGLY AGREE 1MILDLY AGREE 2MILDLY DISAGREE 3STRONGLY DISAGREE 4DON’T KNOW dREFUSED r | STRONGLY AGREE 1MILDLY AGREE 2MILDLY DISAGREE 3STRONGLY DISAGREE 4DON’T KNOW dREFUSED r |
| EHS tailored for PACTC21. **[MOTHER FIRST NAME] makes it hard for me to see [CHILD FIRST NAME]. Do you strongly agree, mildly agree, mildly disagree, or strongly disagree with this reason?**  | FILL [MOTHER NAME] FROM C8 OR C9aSTRONGLY AGREE 1MILDLY AGREE 2MILDLY DISAGREE 3STRONGLY DISAGREE 4DON’T KNOW dREFUSED r | FILL [MOTHER NAME] FROM C8 OR C9aSTRONGLY AGREE 1MILDLY AGREE 2MILDLY DISAGREE 3STRONGLY DISAGREE 4DON’T KNOW dREFUSED r | FILL [MOTHER NAME] FROM C8 OR C9aSTRONGLY AGREE 1MILDLY AGREE 2MILDLY DISAGREE 3STRONGLY DISAGREE 4DON’T KNOW dREFUSED r |
| EHS tailored for PACTC22. **Another family member makes it hard for me to see [CHILD FIRST NAME]. Do you strongly agree, mildly agree, mildly disagree, or strongly disagree with this reason?**  | STRONGLY AGREE 1MILDLY AGREE 2MILDLY DISAGREE 3STRONGLY DISAGREE 4DON’T KNOW dREFUSED r | STRONGLY AGREE 1MILDLY AGREE 2MILDLY DISAGREE 3STRONGLY DISAGREE 4DON’T KNOW dREFUSED r | STRONGLY AGREE 1MILDLY AGREE 2MILDLY DISAGREE 3STRONGLY DISAGREE 4DON’T KNOW dREFUSED r |
| GO TO C5 CHILD 4, IF C4, CHILD 3=1 OR C10, CHILD 3=1.ORGO TO D1, IF C4, CHILD 3=0 OR C10, CHILD 3=0.GO TO C5, CHILD 3, IF C4, CHILD 2=1 OR C10, CHILD 2=1.ORGO TO D1, IF C4, CHILD 2=0 OR C10, CHILD 2=0.GO TO C5, CHILD 2, IF C4, CHILD 1=1 OR C10, CHILD 1=1.ORGO TO D1, IF C4, CHILD 1=0 OR C10, CHILD 1=0.EHS tailored for PACTC23. **It’s hard to see [CHILD FIRST NAME] because I cannot financially provide for (him/her). Do you strongly agree, mildly agree, mildly disagree, or strongly disagree with this reason?**  | STRONGLY AGREE 1MILDLY AGREE 2MILDLY DISAGREE 3STRONGLY DISAGREE 4DON’T KNOW dREFUSED r | STRONGLY AGREE 1MILDLY AGREE 2MILDLY DISAGREE 3STRONGLY DISAGREE 4DON’T KNOW dREFUSED r | STRONGLY AGREE 1MILDLY AGREE 2MILDLY DISAGREE 3STRONGLY DISAGREE 4DON’T KNOW dREFUSED r |

 Some fathers find it hard to spend as much time as they want with their children. I’m going to read you a list of reasons some fathers have given us. For each one, please tell me if you strongly agree, mildly agree, mildly disagree or strongly disagree with this reason.

|  |  |  |  |
| --- | --- | --- | --- |
|  | CHILD 4 | CHILD 5 | CHILD 6 |
| C20. **I live too far away to see [CHILD FIRST NAME] more. Do you strongly agree, mildly agree, mildly disagree, or strongly disagree with this reason?** EHS | STRONGLY AGREE 1MILDLY AGREE 2MILDLY DISAGREE 3STRONGLY DISAGREE 4DON’T KNOW dREFUSED r | STRONGLY AGREE 1MILDLY AGREE 2MILDLY DISAGREE 3STRONGLY DISAGREE 4DON’T KNOW dREFUSED r | STRONGLY AGREE 1MILDLY AGREE 2MILDLY DISAGREE 3STRONGLY DISAGREE 4DON’T KNOW dREFUSED r |
| EHS tailored for PACTC21. **[MOTHER FIRST NAME] makes it hard for me to see [CHILD FIRST NAME]. Do you strongly agree, mildly agree, mildly disagree, or strongly disagree with this reason?**  | FILL [MOTHER NAME] FROM C8 OR C9aSTRONGLY AGREE 1MILDLY AGREE 2MILDLY DISAGREE 3STRONGLY DISAGREE 4DON’T KNOW dREFUSED r | FILL [MOTHER NAME] FROM C8 OR C9aSTRONGLY AGREE 1MILDLY AGREE 2MILDLY DISAGREE 3STRONGLY DISAGREE 4DON’T KNOW dREFUSED r | FILL [MOTHER NAME] FROM C8 OR C9aSTRONGLY AGREE 1MILDLY AGREE 2MILDLY DISAGREE 3STRONGLY DISAGREE 4DON’T KNOW dREFUSED r |
| EHS tailored for PACTC22. **Another family member makes it hard for me to see [CHILD FIRST NAME]. Do you strongly agree, mildly agree, mildly disagree, or strongly disagree with this reason?**  | STRONGLY AGREE 1MILDLY AGREE 2MILDLY DISAGREE 3STRONGLY DISAGREE 4DON’T KNOW dREFUSED r | STRONGLY AGREE 1MILDLY AGREE 2MILDLY DISAGREE 3STRONGLY DISAGREE 4DON’T KNOW dREFUSED r | STRONGLY AGREE 1MILDLY AGREE 2MILDLY DISAGREE 3STRONGLY DISAGREE 4DON’T KNOW dREFUSED r |
| GO TO C5, CHILD 5, IF C4, CHILD 4=1 OR C10, CHILD 4=1.ORGO TO D1, IF C4, CHILD 4=0 OR C10, CHILD 4=0.GO TO C5, CHILD 6, IF C4, CHILD 5=1 OR C10, CHILD 5=1.ORGO TO D1, IF C4, CHILD 5=0 OR C10, CHILD 5=0.GO TO C5 CHILD 7, IF C4, CHILD 6=1 OR C10, CHILD 6=1.ORGO TO D1, IF C4, CHILD 6=0 OR C10, CHILD 6=0.EHS tailored for PACTC23. **It’s hard to see [CHILD FIRST NAME] because I cannot financially provide for (him/her). Do you strongly agree, mildly agree, mildly disagree, or strongly disagree with this reason?**  | STRONGLY AGREE 1MILDLY AGREE 2MILDLY DISAGREE 3STRONGLY DISAGREE 4DON’T KNOW dREFUSED r | STRONGLY AGREE 1MILDLY AGREE 2MILDLY DISAGREE 3STRONGLY DISAGREE 4DON’T KNOW dREFUSED r | STRONGLY AGREE 1MILDLY AGREE 2MILDLY DISAGREE 3STRONGLY DISAGREE 4DON’T KNOW dREFUSED r |

**D. RELATIONSHIPS**

I’d like to talk to you about some of the relationships in your life, thinking about the women you have had children with. You told us [Fill MOTHER FIRST NAME AND LAST NAME(S) from C8 OR C9a.] (is/are) the mother(s) of your (child/children) that (is/are) under the age of 18.

|  | MOTHER 1 | MOTHER 2 | MOTHER 3 |
| --- | --- | --- | --- |
| D1. **Is there anyone we missed?** PROGRAMMER NOTE: FILL [MOTHER FIRST AND LAST NAME] FROM C8 AND C9a AS ADDITIONAL SCREEN FOR DUPLICATE NAMES. | YES 1 GO TO C3a, CHILD 7NO 0 GO TO D2DON’T KNOW d GO TO D2REFUSED r GO TO D2 | YES 1 GO TO C3a, CHILD 8NO 0 GO TO D2DON’T KNOW d GO TO D2REFUSED r GO TO D2 | YES 1 GO TO C3a, CHILD 9NO 0 GO TO D2DON’T KNOW d GO TO D2REFUSED r GO TO D2 |
| BSF tailored for PACTD2. **Let’s talk about [MOTHER FIRST NAME]. Are you and [MOTHER FIRST NAME] married, divorced, separated, or have you never been married to each other?**  | MARRIED 1 GO TO D5DIVORCED 2SEPARATED 3ANNULLED 4NEVER MARRIED 5DECEASED 6 GO TO D2, MOTHER 2 IF C9a=MOTHER NAME WRITTEN OR GO TO D15 IF C9a=NO MOTHER NAME WRITTENINTERVIEWER: IF D2=6, THEN SAY**: I’m very sorry to hear that. Our condolences for your loss.**DON’T KNOW dREFUSED r | DELETE MARRIED IF D2, MOTHER 1 = 1 OR 3MARRIED 1 GO TO D5DIVORCED 2SEPARATED 3ANNULLED 4NEVER MARRIED 5DECEASED 6 GO TO D2, MOTHER 3 IF C9a= HAS TWO MOTHER NAMES WRITTEN OR GO TO D15 IF C9a=NO MOTHER NAME WRITTENINTERVIEWER: IF D2=6, THEN SAY**: I’m very sorry to hear that. Our condolences for your loss.**DON’T KNOW dREFUSED r | DELETE MARRIED IF D2, MOTHER 1 OR 2 = 1 OR 3MARRIED 1 GO TO D5DIVORCED 2SEPARATED 3ANNULLED 4NEVER MARRIED 5DECEASED 6 GO TO D2, MOTHER 4 IF C9a= HAS THREE MOTHER NAMES WRITTEN OR GO TO D15 IF C9a=NO MOTHER NAME WRITTENINTERVIEWER: IF D2=6, THEN SAY**: I’m very sorry to hear that. Our condolences for your loss.**DON’T KNOW dREFUSED r |
| IF D2=1, GO TO D7IF D3=1 OR 2, GO TO D5IF D3=3, D, OR R, GO TO D4IF D3=1 OR 2, GO TO D5IF D3=3, D, OR R, GO TO D4IF D3=1 OR 2, GO TO D5IF D3=3, D, OR R, GO TO D4BSFD3. **How would you describe your current relationship with [MOTHER FIRST NAME]? We are romantically involved on a steady basis, we are involved in an on- again, off-again romantic relationship, or we are not in a romantic relationship.**  | ROMANTICALLY INVOLVED ON STEADY BASIS 1 INVOLVED ON-AND-OFF AGAIN 2NOT IN ROMANTIC RELATIONSHIP 3DON’T KNOW dREFUSED r | ROMANTICALLY INVOLVED ON STEADY BASIS 1 INVOLVED ON-AND-OFF AGAIN 2NOT IN ROMANTIC RELATIONSHIP 3DON’T KNOW dREFUSED r | ROMANTICALLY INVOLVED ON STEADY BASIS 1 INVOLVED ON-AND-OFF AGAIN 2NOT IN ROMANTIC RELATIONSHIP 3DON’T KNOW dREFUSED r |
| ASK IF D3=3PACT developedD4. **Do you have any contact with [MOTHER FIRST NAME]?** | YES 1 NO 0 GO TO D11DON’T KNOW d GO TO D11REFUSED r GO TO D11 | YES 1 NO 0 GO TO D11DON’T KNOW d GO TO D11REFUSED r GO TO D11 | YES 1 NO 0 GO TO D11DON’T KNOW d GO TO D11REFUSED r GO TO D11 |
| BSF tailored for PACTD5. **Do you live with [MOTHER FIRST NAME] all of the time? By this I mean you do not have another place that you consider your home.**  **PROBE: This is where you receive your mail, have keys, pay rent.** | YES 1 GO TO D8NO 0 DON’T KNOW d REFUSED r  | YES 1 GO TO D8NO 0 DON’T KNOW d REFUSED r  | YES 1 GO TO D8NO 0 DON’T KNOW d REFUSED r  |

|  | MOTHER 4 | MOTHER 5 | MOTHER 6 |
| --- | --- | --- | --- |
| D1. **Is there anyone we missed?** PROGRAMMER NOTE: FILL [MOTHER FIRST AND LAST NAME] FROM C10 AND C11a AS ADDITIONAL SCREEN FOR DUPLICATE NAMES. | YES 1 GO TO C3a, CHILD 10NO 0 GO TO D2DON’T KNOW d GO TO D2REFUSED r GO TO D2 | YES 1 GO TO C3a, CHILD 11NO 0 GO TO D2DON’T KNOW d GO TO D2REFUSED r GO TO D2 | YES 1 GO TO C3a, CHILD 12NO 0 GO TO D2DON’T KNOW d GO TO D2REFUSED r GO TO D2 |
| BSF tailored for PACTD2. **Let’s talk about [MOTHER FIRST NAME]. Are you and [MOTHER FIRST NAME] married, divorced, separated, or have you never been married to each other?**  | DELETE MARRIED IF D2, MOTHER 1, 2 OR 3 = 1 OR 3MARRIED 1 GO TO D5DIVORCED 2SEPARATED 3ANNULLED 4NEVER MARRIED 5DECEASED 6 GO TO D2, MOTHER 5 IF C9a= HAS FOUR MOTHER NAMES WRITTEN OR GO TO D15 IF C9a=NO MOTHER NAME WRITTENINTERVIEWER: IF D2=6, THEN SAY**: I’m very sorry to hear that. Our condolences for your loss.**DON’T KNOW dREFUSED r | DELETE MARRIED IF D2, MOTHER 1, 2, 3 OR 4 = 1 OR 3MARRIED 1 GO TO D5DIVORCED 2SEPARATED 3ANNULLED 4NEVER MARRIED 5DECEASED 6 GO TO D2, MOTHER 6 IF C9a= HAS FIVE MOTHER NAMES WRITTEN OR GO TO D15 IF C9a=NO MOTHER NAME WRITTENINTERVIEWER: IF D2=6, THEN SAY**: I’m very sorry to hear that. Our condolences for your loss.**DON’T KNOW dREFUSED r | DELETE MARRIED IF D2, MOTHER 1, 2, 3, 4, OR 5 = 1 OR 3MARRIED 1 GO TO D5DIVORCED 2SEPARATED 3ANNULLED 4NEVER MARRIED 5DECEASED 6 GO TO D2, MOTHER 7 IF C9a= HAS SIX MOTHER NAMES WRITTEN OR GO TO D15 IF C9a=NO MOTHER NAME WRITTENINTERVIEWER: IF D2=6, THEN SAY**: I’m very sorry to hear that. Our condolences for your loss.**DON’T KNOW dREFUSED r |
| IF D2=1, GO TO D7IF D3=1 OR 2, GO TO D5IF D3=3, D, OR R, GO TO D4IF D3=1 OR 2, GO TO D5IF D3=3, D, OR R, GO TO D4IF D3=1 OR 2, GO TO D5IF D3=3, D, OR R, GO TO D4BSFD3. **How would you describe your current relationship with [MOTHER FIRST NAME]? We are romantically involved on a steady basis, we are involved in an on- again, off-again romantic relationship, or we are not in a romantic relationship.**  | ROMANTICALLY INVOLVED ON STEADY BASIS 1 INVOLVED ON-AND-OFF AGAIN 2NOT IN ROMANTIC RELATIONSHIP 3DON’T KNOW dREFUSED r | ROMANTICALLY INVOLVED ON STEADY BASIS 1 INVOLVED ON-AND-OFF AGAIN 2NOT IN ROMANTIC RELATIONSHIP 3DON’T KNOW dREFUSED r | ROMANTICALLY INVOLVED ON STEADY BASIS 1 INVOLVED ON-AND-OFF AGAIN 2NOT IN ROMANTIC RELATIONSHIP 3DON’T KNOW dREFUSED r |
| ASK IF D3=3PACT developedD4. **Do you have any contact with [MOTHER FIRST NAME]?** | YES 1 NO 0 GO TO D11DON’T KNOW d GO TO D11REFUSED r GO TO D11 | YES 1 NO 0 GO TO D11DON’T KNOW d GO TO D11REFUSED r GO TO D11 | YES 1 NO 0 GO TO D11DON’T KNOW d GO TO D11REFUSED r GO TO D11 |
| BSF tailored for PACTD5. **Do you live with [MOTHER FIRST NAME] all of the time? By this I mean you do not have another place that you consider your home.**  **PROBE: This is where you receive your mail, have keys, pay rent.** | YES 1 GO TO D8NO 0 DON’T KNOW d REFUSED r  | YES 1 GO TO D8NO 0 DON’T KNOW d REFUSED r  | YES 1 GO TO D8NO 0 DON’T KNOW d REFUSED r  |

|  |  |  |  |
| --- | --- | --- | --- |
|  | MOTHER 1 | MOTHER 2 | MOTHER 3 |
| D6. **How many nights a week do you stay with [MOTHER FIRST NAME] in the same place?** PACT developed | 0 01 12 23 34 45 56 67 7DON’T KNOW dREFUSED r | 0 01 12 23 34 45 56 67 7DON’T KNOW dREFUSED r | 0 01 12 23 34 45 56 67 7DON’T KNOW dREFUSED r |
| WFNJ-EC1D7. **Does [MOTHER FIRST NAME] live with a romantic partner all or some of the time?**  | YES 1NO 0 DON’T KNOW d REFUSED r  | YES 1NO 0 DON’T KNOW d REFUSED r  | YES 1NO 0 DON’T KNOW d REFUSED r  |
| FFCWSD8. **In general, would you say your relationship with [MOTHER FIRST NAME] is excellent, very good, fair, or poor?**  | EXCELLENT 1VERY GOOD 2FAIR 3POOR 4DON’T KNOW dREFUSED r | EXCELLENT 1VERY GOOD 2FAIR 3POOR 4DON’T KNOW dREFUSED r | EXCELLENT 1VERY GOOD 2FAIR 3POOR 4DON’T KNOW dREFUSED r |
| **Now, I would like to talk about you and [MOTHER FIRST NAME] as parents.** PAMD9. **For the following statement, please tell me if you strongly agree, mildly agree, mildly disagree, or strongly disagree. [MOTHER FIRST NAME] and I are a good parenting team.**  | STRONGLY AGREE 1AGREE 2NOT SURE 3DISAGREE 4STRONGLY DISAGREE 5DON’T KNOW dREFUSED r | STRONGLY AGREE 1AGREE 2NOT SURE 3DISAGREE 4STRONGLY DISAGREE 5DON’T KNOW dREFUSED r | STRONGLY AGREE 1AGREE 2NOT SURE 3DISAGREE 4STRONGLY DISAGREE 5DON’T KNOW dREFUSED r |
| FFCWS tailored for PACTD10. **For the following statement, please tell me if you strongly agree, mildly agree, mildly disagree, or strongly disagree. [MOTHER FIRST NAME] supports you in the way you want to raise your children.**  | STRONGLY AGREE 1AGREE 2NOT SURE 3DISAGREE 4STRONGLY DISAGREE 5DON’T KNOW dREFUSED r | STRONGLY AGREE 1AGREE 2NOT SURE 3DISAGREE 4STRONGLY DISAGREE 5DON’T KNOW dREFUSED r | STRONGLY AGREE 1AGREE 2NOT SURE 3DISAGREE 4STRONGLY DISAGREE 5DON’T KNOW dREFUSED r |

|  |  |  |  |
| --- | --- | --- | --- |
|  | MOTHER 4 | MOTHER 5 | MOTHER 6 |
| D6. **How many nights a week do you stay with [MOTHER FIRST NAME] in the same place?** PACT developed | 0 01 12 23 34 45 56 67 7DON’T KNOW dREFUSED r | 0 01 12 23 34 45 56 67 7DON’T KNOW dREFUSED r | 0 01 12 23 34 45 56 67 7DON’T KNOW dREFUSED r |
| WFNJ-EC1D7. **Does [MOTHER FIRST NAME] live with a romantic partner all or some of the time?**  | YES 1NO 0 DON’T KNOW d REFUSED r  | YES 1NO 0 DON’T KNOW d REFUSED r  | YES 1NO 0 DON’T KNOW d REFUSED r  |
| FFCWSD8. **In general, would you say your relationship with [MOTHER FIRST NAME] is excellent, very good, fair, or poor?**  | EXCELLENT 1VERY GOOD 2FAIR 3POOR 4DON’T KNOW dREFUSED r | EXCELLENT 1VERY GOOD 2FAIR 3POOR 4DON’T KNOW dREFUSED r | EXCELLENT 1VERY GOOD 2FAIR 3POOR 4DON’T KNOW dREFUSED r |
| **Now, I would like to talk about you and [MOTHER FIRST NAME] as parents.** PAMD9. **For the following statement, please tell me if you strongly agree, mildly agree, mildly disagree, or strongly disagree. [MOTHER FIRST NAME] and I are a good parenting team.**  | STRONGLY AGREE 1AGREE 2NOT SURE 3DISAGREE 4STRONGLY DISAGREE 5DON’T KNOW dREFUSED r | STRONGLY AGREE 1AGREE 2NOT SURE 3DISAGREE 4STRONGLY DISAGREE 5DON’T KNOW dREFUSED r | STRONGLY AGREE 1AGREE 2NOT SURE 3DISAGREE 4STRONGLY DISAGREE 5DON’T KNOW dREFUSED r |
| FFCWS tailored for PACTD10. **For the following statement, please tell me if you strongly agree, mildly agree, mildly disagree, or strongly disagree. [MOTHER FIRST NAME] supports you in the way you want to raise your children.**  | STRONGLY AGREE 1AGREE 2NOT SURE 3DISAGREE 4STRONGLY DISAGREE 5DON’T KNOW dREFUSED r | STRONGLY AGREE 1AGREE 2NOT SURE 3DISAGREE 4STRONGLY DISAGREE 5DON’T KNOW dREFUSED r | STRONGLY AGREE 1AGREE 2NOT SURE 3DISAGREE 4STRONGLY DISAGREE 5DON’T KNOW dREFUSED r |

|  |  |  |  |
| --- | --- | --- | --- |
|  | MOTHER 1 | MOTHER 2 | MOTHER 3 |
| BSF tailored for PACT**Now, I’m going to ask you some questions about the financial support you may provide to your (child/children).**D11. **Do you have a legal arrangement or child support order that requires you to provide financial support for any children you have with [MOTHER FIRST NAME]?**  | SKIP D11-14 IF D2, MOTHER 1=1YES 1 NO 0 GO TO D14DON’T KNOW d GO TO D14REFUSED r GO TO D14 | SKIP D11-14 IF D2, MOTHER 2=1YES 1 NO 0 GO TO D14DON’T KNOW d GO TO D14REFUSED r GO TO D14 | SKIP D11-14 IF D2, MOTHER 3=1YES 1 NO 0 GO TO D14DON’T KNOW d GO TO D14REFUSED r GO TO D14 |
| D12. **In the past month, how much did you pay for that order or agreement you had with [MOTHER FIRST NAME]?** BSF | $| | |,| | | | AMOUNTDON’T KNOW dREFUSED r | $| | |,| | | | AMOUNTDON’T KNOW dREFUSED r | $| | |,| | | | AMOUNTDON’T KNOW dREFUSED r |
| If D13 = 0, d, r:Go to D2, Mother 4 if C9a = three mother namesOrGo to D15 if C9a = two mother namesIf D13 = 0, d, r:Go to D2, Mother 3 if C9a = two mother namesOrGo to D15 if C9a = one mother nameIF D13 = 0, D, R:Go to D2, MOTHER 2 if C9a = one mother nameOrGo to D15 if C9a = no mother nameFFCWSD13. **In the past month, have you given financial support to [MOTHER FIRST NAME] directly instead of or in addition to any formal child support you may have paid?**  | YES 1 NO 0DON’T KNOW dREFUSED r | YES 1 NO 0DON’T KNOW dREFUSED r | YES 1 NO 0DON’T KNOW dREFUSED r |
| Go to D2, Mother 4 if C9a = three mother namesOrGo to D15 if C9a = two mother NAMESGo to D2, Mother 3 if C9a = two mother namesOrGo to D15 if C9a = one mother nameGo to D2, Mother 2 if C9a = one mother nameOrGo to D15 if C9a = no mother nameFFCWSD14. [IF D11=1, THEN READ **Not including money that you paid as part of the formal child support,] How much money did you give [MOTHER FIRST NAME] in the past month?**  | $| | |,| | | | AMOUNTDON’T KNOW dREFUSED r | $| | |,| | | | AMOUNTDON’T KNOW dREFUSED r | $| | |,| | | | AMOUNTDON’T KNOW dREFUSED r |

|  |  |  |  |
| --- | --- | --- | --- |
|  | MOTHER 4 | MOTHER 5 | MOTHER 6 |
| BSF tailored for PACT**Now, I’m going to ask you some questions about the financial support you may provide to your (child/children).**D11. **Do you have a legal arrangement or child support order that requires you to provide financial support for any children you have with [MOTHER FIRST NAME]?**  | SKIP D11-14 IF D2, MOTHER 4=1YES 1 NO 0 GO TO D14DON’T KNOW d GO TO D14REFUSED r GO TO D14 | SKIP D11-14 IF D2, MOTHER 5=1YES 1 NO 0 GO TO D14DON’T KNOW d GO TO D14REFUSED r GO TO D14 | SKIP D11-14 IF D2, MOTHER 6=1YES 1 NO 0 GO TO D14DON’T KNOW d GO TO D14REFUSED r GO TO D14 |
| D12. **In the past month, how much did you pay for that order or agreement you had with [MOTHER FIRST NAME]?** BSF | $| | |,| | | | AMOUNTDON’T KNOW dREFUSED r | $| | |,| | | | AMOUNTDON’T KNOW dREFUSED r | $| | |,| | | | AMOUNTDON’T KNOW dREFUSED r |
| If D13 = 0, d, r:Go to D2, Mother 7 if C9a = six mother namesOrGo to D15 if C9a = five mother namesIf D13 = 0, d, r:Go to D2, Mother 6 if C9a = five mother namesOrGo to D15 if C9a = four mother namesIf D13 = 0, d, r:Go to D2, Mother 5 if C9a = four mother namesOrGo to D15 if C9a = three mother names.FFCWSD13. **In the past month, have you given financial support to [MOTHER FIRST NAME] directly instead of or in addition to any formal child support you may have paid?**  | YES 1 NO 0DON’T KNOW dREFUSED r | YES 1 NO 0DON’T KNOW dREFUSED r | YES 1 NO 0DON’T KNOW dREFUSED r |
| FFCWSD14. [IF D11=1, THEN READ **Not including money that you paid as part of the formal child support,] How much money did you give [MOTHER FIRST NAME] in the past month?** Go to D2, Mother 7 if C9a = six mother namesOrGo to D15 if C9a = five mother namesGo to D2, Mother 6 if C9a = five mother namesOrGo to D15 if C9a = four mother namesGo to D2, Mother 5 if C9a = four mother namesOrGo to D15 if C9a = THREE MOTHER names | $| | |,| | | | AMOUNTDON’T KNOW dREFUSED r | $| | |,| | | | AMOUNTDON’T KNOW dREFUSED r | $| | |,| | | | AMOUNTDON’T KNOW dREFUSED r |

Now, I’m going to ask about women you may have romantic relationships with who are not the mothers of your children.

IF D2=1 OR D3=1 OR 2, THEN FILL [MOTHER’S NAME/MOTHERS’ NAMES].

D15. Are you in a romantic relationship with someone other than [MOTHER’S NAME/MOTHERS’ NAMES]?

YES 1

PACT developed

NO 0 GO TO E1

DON’T KNOW d GO TO E1

REFUSED r GO TO E1

 Some people may have a romantic relationship with more than one partner. If you have a relationship with more than one partner that we haven’t already talked about, please think about the romantic relationship that you consider to be the most serious.

D16. Please spell that person’s first name.

WFNJ-EC1

FIRST NAME

DON’T KNOW d

REFUSED r

IF D2, [MOTHER 1], [MOTHER 2], [MOTHER 3], [MOTHER 4], [MOTHER 5], OR [MOTHER 6] ≠ 1 OR 3 FILL MARRIED.

D17. Are you and [D16 FIRST NAME] married, divorced, separated, or have you never been married to each other?

BSF tailored for PACT

 CODE ONE ONLY

MARRIED 1 GO TO D19

DIVORCED 2

SEPARATED 3

ANNULLED 4

NEVER MARRIED 5

DON’T KNOW d

REFUSED r

D18. How would you describe your current relationship with [D16 FIRST NAME]? We are romantically involved on a steady basis, we are involved in an on-again, off-again romantic relationship, or we are not in a romantic relationship.

BSF

 CODE ONE ONLY

ROMANTICALLY INVOLVED ON STEADY BASIS 1

INVOLVED ON-AND-OFF AGAIN 2

NOT IN ROMANTIC RELATIONSHIP 3

DON’T KNOW d

REFUSED r

D19. Do you live with [D16 NAME] all of the time? By this I mean that you do not have another place that consider your home.

BSF tailored for PACT

 PROBE: You do not have another place where you receive your mail, have keys, pay rent.

 CODE ONE ONLY

YES 1

NO 0

DON’T KNOW d

REFUSED r

D20. Please tell me if you strongly agree, mildly agree, mildly disagree, or strongly disagree with the following statement. [D16 FIRST NAME] makes it hard for me to see my child/children.

EHS tailored for PACT

 CODE ONE ONLY

STRONGLY AGREE 1

MILDLY AGREE 2

MILDLY DISAGREE 3

STRONGLY DISAGREE 4

DON’T HAVE ONE 5

DON’T KNOW d

REFUSED r

**E. NON-BIOLOGICAL, RESIDENTIAL CHILDREN**

Now I would like to ask you some questions about children who live with you other than your biological children.

E1. Are there any children under the age of 18 who live with you all or most of the time?

PACT developed

YES 1

NO 0 GO TO F1

DON’T KNOW d GO TO F1

REFUSED r GO TO F1

E2. How many of these children under the age of 18 live with you?

PACT developed

 | | | CHILDREN

DON’T KNOW d

REFUSED r

SKIP E3 if D15=0 or DON’T KNOW OR REFUSED

E3. How many of these children are [D16 FIRST NAME]’s children?

PACT developed

 | | | CHILDREN

DON’T KNOW d

REFUSED r

**F. ECONOMIC STABILITY**

 The next questions are about work you have done for pay.

F1. In the past month have you worked for pay? Please include any regular paid jobs, odd jobs, temporary jobs, work in your own business, “under the table” work, “informal” work, or any other types of work you have done.

WFNJ tailored for PACT

YES 1 GO TO F3

NO 0

DON’T KNOW d

REFUSED r

F2. In what month and year did you last work for pay? Please include any regular paid jobs, odd jobs, temporary jobs, work in your own business, “under the table” work, “informal” work, or any other types of work you have done.

|\_\_\_|\_\_\_| / |\_\_\_|\_\_\_|\_\_\_|\_\_\_| GO TO F6

WFNJ

 MONTH YEAR

DON’T KNOW d GO TO F6

REFUSED r GO TO F6

F3. In the past month, how much money did you make? Please include tips, bonuses, commissions, and regular overtime pay and count all money you received before taxes and deductions. If you held more than one job, include your total earnings from all of your work during the past month.

WFNJ tailored for PACT

$ | | | | **,** | | | | AMOUNT GO TO F6

DON’T KNOW d

REFUSED r

F4. I just need to know a range. Can you tell me if it was . . .

WFNJ tailored for PACT

 CODE ONE ONLY

**$0 - $500,** 1 GO TO F6

**$501 - $1,000,** 2 GO TO F6

**$1,001 to $2,000,** 3 GO TO F6

**$2,001 to $3,000,** 4 GO TO F6

**$3,001 to $4,000,** 5 GO TO F6

**$4,001 to $5,000, or** 6 GO TO F6

**more than $5,000?** 7 GO TO F6

DON’T KNOW d

REFUSED r

F4a. How many weeks this past month did you work?

WFNJ

| | | WEEKS

DON’T KNOW d GO TO F6

REFUSED r GO TO F6

F4b. How many hours do you usually work in a week? Your best estimate is fine.

RWTW tailored for PACT

| | | HOURS PER WEEK

99 OR MORE HOURS PER WEEK 99

DON’T KNOW d GO TO F6

REFUSED r GO TO F6

F4c. What is your current hourly rate of pay, before taxes and deductions?

RWTW tailored for PACT

$ | | | | **.** | | | PER HOUR

DON’T KNOW d GO TO F6

REFUSED r GO TO F6

F4d. Based on what you’ve told me, last month you made about [fill AMOUNT CALCULATED FROM F4a, F4b, F4c]. Is that correct?

RWTW

YES 1

NO 0 GO TO F4a

DON’T KNOW d GO TO F4a

REFUSED r GO TO F4a

NOTE: IF F4d=NO, DON’T KNOW, OR REFUSED TWICE, GO TO F5.

F5. In addition to your pay, do you get tips, bonuses, or commissions?

RWTW tailored for PACT

YES 1

NO 0 GO TO F6

DON’T KNOW d GO TO F6

REFUSED r GO TO F6

F5a. In the past month, how much did you receive in tips, bonuses, or commissions?

RWTW tailored for PACT

$ | | | | **,** | | | | AMOUNT Go to F6

DON’T KNOW d

REFUSED r

F5b. I just need to know a range. Can you tell me if it was . . .

 CODE ONE ONLY

WFNJ tailored for PACT

**$0 - $100,** 1

**$101 - $200,** 2

**$201 - $300,** 3

**$301 - $400,** 4

**$401 - $500,** 5

**$501 - $1,000,** 6

**$1,001 to $2,000,** 7

**$2,001 to $3,000,** 8

**$3,001 to $4,000,** 9

**$4,001 to $5,000, or** 10

**more than $5,000?** 11

DON’T KNOW d

REFUSED r

The next questions are about where you live.

F6. Do you currently own your home, rent it, pay some amount toward rent, live rent free with a friend or relative, or do you have some other arrangement?

WFNJ

 CODE ONE ONLY

OWN OR HAVE MORTGAGE 1

RENT 2

PAY SOME OF THE RENT 3

LIVE RENT FREE (SOMEONE ELSE RENTS/OWNS HOUSE) 4

LIVE IN SHELTER 5

LIVE ON STREETS 6

LIVE IN ABANDONED BUILDING/CAR 7

OTHER (SPECIFY) 99

DON’T KNOW d

REFUSED r

F7. Do you expect that you will be able to stay in your current housing for the next year?

HII

YES 1

NO 0

DON’T KNOW d

REFUSED r

**G. FATHER BACKGROUND AND WELL BEING**

The next questions are about your relationship with your biological father.

G1. When you were growing up, would you say your biological father was . . .

PACT developed

 CODE ONE ONLY

**very involved,** 1

**somewhat involved, or** 2

**not at all involved?** 3 GO TO G3

DON’T KNOW d GO TO G3

REFUSED r GO TO G3

G2. Would you say that the general quality of your relationship with your biological father while you were growing up was . . .

PACT developed

 CODE ONE ONLY

**excellent,** 1

**very good,** 2

**good,** 3

**fair or,** 4

**poor?** 5

we did not have a relationship 6

DON’T KNOW d

REFUSED r

The next questions are about how you are doing.

G3. Over the last two weeks, how often have you been bothered by any of the following problems? Would you say that the problem happened not at all, several days, more than half the days, or nearly every day?

PHQ-8

|  |  |
| --- | --- |
|  | SELECT ONE RESPONSE PER ROW |
|  | **NOT AT ALL** | **SEVERAL DAYS** | **MORE THAN HALF THE DAYS** | **NEARLY EVERY DAY** | **DK** | **REF** |
| a. **Little interest or pleasure in doing things**  | 0 | 1 | 2 | 3 | d | r |
| b. **Feeling down, depressed, or hopeless**  | 0 | 1 | 2 | 3 | d | r |
| c. **Trouble falling or staying asleep, or sleeping too much**  | 0 | 1 | 2 | 3 | d | r |
| d. **Feeling tired or having little energy**  | 0 | 1 | 2 | 3 | d | r |
| e. **Poor appetite or overeating**  | 0 | 1 | 2 | 3 | d | r |
| f. **Feeling bad about yourself — or that you are a failure or have let yourself or your family down**  | 0 | 1 | 2 | 3 | d | r |
| g. **Trouble concentrating on things, such as reading the newspaper or watching television**  | 0 | 1 | 2 | 3 | d | r |
| h. **Moving or speaking so slowly that other people could have noticed? Or the opposite — being so fidgety or restless that you have been moving around a lot more than usual**  | 0 | 1 | 2 | 3 | d | r |

G4. For each of the following statements, tell me if you strongly agree with the statement, agree with the statement, disagree with the statement, or strongly disagree with the statement. While you may not find a response that exactly states your feelings, give the response that comes closest to describing how you feel.

PSI

|  |  |
| --- | --- |
|  | SELECT ONE RESPONSE PER ROW |
|  | **STRONGLY AGREE** | **SOMEWHAT AGREE** | **SOMEWHAT DISAGREE** | **STRONGLY DISAGREE** | **DK** | **REF** |
| a. **I feel trapped by my responsibilities as a parent.**  | 1 | 2 | 3 | 4 | d | r |
| b. **Sometimes I feel my (child/children) (doesn’t/don’t) like me and (doesn’t/don’t) want to be close to me.**  | 1 | 2 | 3 | 4 | d | r |
| c. **When I do things for my (child/children), I get the feeling that my efforts are not appreciated very much.**  | 1 | 2 | 3 | 4 | d | r |

G5. For each of the following statements, please tell me if you strongly agree, somewhat agree, somewhat disagree, or strongly disagree.

|  |  |
| --- | --- |
|  | SELECT ONE RESPONSE PER ROW |
|  | **STRONGLY AGREE** | **SOMEWHAT AGREE** | **SOMEWHAT DISAGREE** | **STRONGLY DISAGREE** | **DK** | **REF** |
| FFCWSa. **I have little control over the things that happen to me.**  | 1 | 2 | 3 | 4 | d | r |
| FFCWSb. **There is really no way I can solve some of the problems I have.**  | 1 | 2 | 3 | 4 | d | r |
| FFCWSc. **There is little I can do to change many of the important things in my life.**  | 1 | 2 | 3 | 4 | d | r |
| FFCWSd. **I often feel helpless in dealing with problems.**  | 1 | 2 | 3 | 4 | d | r |
| FFCWSe. **Sometimes I feel that I’m being pushed around.**  | 1 | 2 | 3 | 4 | d | r |
| PACT developedf. **There is so much to take care of now that it’s hard for me to make plans for the future.**  | 1 | 2 | 3 | 4 | d | r |

G6. The following question is about any religious services you may attend. In the past year, about how often have you attended religious services? Was it . . .

BSF

 CODE ONE ONLY

**never,** 0

**a few times a year,** 1

**a few times a month, or** 2

**once a week or more?** 3

DON’T KNOW d

REFUSED r

I would like to ask you a few questions about your experience with the criminal justice system.

G7. Have you ever been arrested?

BSF

YES 1

NO 0 GO TO H1

DON’T KNOW d

REFUSED r

G8. How many times in your life have you been arrested?

SVORI

 INTERVIEWER CODE 0 IF TIMES = 0

 | | | TIMES GO TO G9

NEVER ARRESTED 0 GO TO H1

DON’T KNOW d

REFUSED r

G8a. Would you say . . .

SVORI tailored for PACT

 CODE ONE ONLY

**once or twice,** 1

**3 to 5 times,** 2

**6 to 10 times, or**  3

**more than 10 times?** 4

DON’T KNOW d

REFUSED r

G9. How many times in your life have you been convicted of a crime?

SVORI

 INTERVIEWER CODE 0 IF TIMES = 0

 | | | TIMES GO TO G10

NEVER CONVICTED 0 GO TO H1

DON’T KNOW d

REFUSED r

G9a. Would you say . . .

 CODE ONE ONLY

SVORI tailored for PACT

**once or twice,** 1

**3 to 5 times,** 2

**6 to 10 times, or**  3

**more than 10 times?** 4

DON’T KNOW d

REFUSED r

G10. Please think of the longest time that you were in an adult correctional institution like a county, state or federal jail or prison. During that time period, how long were you in an adult correctional institution?

SVORI tailored for PACT

INTERVIEWER: IF LESS THAN 1 WEEK, ENTER 1 WEEK.

INTERVIEWER: FIRST ENTER IF RESPONSE IS WEEKS, MONTHS AND/OR YEARS. YOU WILL ENTER THE NUMBER OF YEARS AND/OR MONTH ON NEXT TWO SCREENS.

 | | | |

 CODE ONE ONLY

WEEKS 1

MONTHS 2

YEARS 3

NEVER INCARCERATED 0

DON’T KNOW d

REFUSED r

G11. Are you currently on parole or probation?

SVORI

YES 1

NO 0

DON’T KNOW d

REFUSED r

**H. MOTIVATION TO PARTICIPATE IN PROGRAM**

Now, I am going to ask you some questions about your interest in [PROGRAM NAME].

H1. Please rate the following items on a scale of 1 to 4, with one being the area of your life you would most like to change and four being the area you would least like to change.

PACT developed

|  |  |
| --- | --- |
|  | **CODE ONE PER ROW** |
|  | **NUMBER** | **DK** | **REF** |
| a. **Your relationship with your child(ren)**  | | | | d | r |
| b. **Your job situation**  | | | | d | r |
| c. **Your relationship with your child(ren)’s mother(s)**  | | | | d | r |
| d. **Your child support issues**  | | | | d | r |

H2. Please tell me how much you agree with the following statements. Do you strongly agree, agree, disagree, or strongly disagree?

|  |  |
| --- | --- |
| PACT developed | **CODE ONE PER ROW** |
|  | **STRONGLY AGREE** | **AGREE** | **DISAGREE** | **STRONGLY DISAGREE** | **DK** | **REF** |
| a. **Making time to come to this program is a top priority for me.** (Do you strongly agree, agree, disagree, or strongly disagree?)  | 1 | 2 | 3 | 4 | d | r |
| b. **I already know that I have other things going on that will make it hard for me to attend regularly.** (Do you strongly agree, agree, disagree, or strongly disagree?)  | 1 | 2 | 3 | 4 | d | r |
| c. **Transportation problems will make it hard for me to attend regularly.** (Do you strongly agree, agree, disagree, or strongly disagree?)  | 1 | 2 | 3 | 4 | d | r |

**I. CONTACT INFORMATION 2**

To thank you for your time, we would like to send you $10.

I1. What is your address?

STREET 1

STREET 2

APT. #

CITY

STATE

ZIP

DON’T KNOW d

REFUSED r

I2. Do you want us to send your $10 to that address?

YES 1 GO TO I3

NO 0

DON’T KNOW d

REFUSED r

I2a. What address would you like us to mail your $10 to?

STREET 1

STREET 2

APT. #

CITY

STATE

ZIP

DON’T KNOW d

REFUSED r

I3. What is your email address?

DON’T HAVE ONE 0

DON’T KNOW d

REFUSED r

 We have a couple of questions that will help us contact you in about a year. Do you have any of the following social networking accounts?

I4. Do you have a Facebook account?

Youthbuild

YES 1

NO 0 GO TO I5

DON’T KNOW d GO TO I5

REFUSED r GO TO I5

I4a. What name do you use on Facebook?

DON’T KNOW d

REFUSED r

I5. Do you have a MySpace account?

YES 1

NO 0 GO TO I6

DON’T KNOW d GO TO I6

REFUSED r GO TO I6

I5a. What name do you use on MySpace?

DON’T KNOW d

REFUSED r

I6. Do you have a Twitter account?

YES 1

NO 0 GO TO I7

DON’T KNOW d GO TO I7

REFUSED r GO TO I7

I6a. What name do you use on Twitter?

DON’T KNOW d

REFUSED r

I7. Do you have a social networking account other than Facebook, MySpace, or Twitter?

YES 1

NO 0 GO TO I8a

DON’T KNOW d GO TO I8a

REFUSED r GO TO I8a

I7a. What social networking provider do you use?

DON’T KNOW d

REFUSED r

 We would like to contact you in about a year to see how you are doing. In case we have trouble reaching you, we would like to have the names of three people who would most likely know where you are or who you keep in close contact with, such as a grandmother or grandfather, other relative, or friend. We will not contact these people for any other reason.

I8a. What is the full name of the first person we should contact?

FIRST NAME

MIDDLE INITIAL/NAME

LAST NAME

DON’T KNOW d

REFUSED r

I8b. What is (his/her) address?

STREET 1

STREET 2

APT. #

CITY

STATE

ZIP

DON’T KNOW d

REFUSED r

I8c. What is (his/her) relationship to you?

 CODE ONE ONLY

WIFE/GIRLFRIEND/FIANCÉE 1

MOTHER 2

FATHER 3

SISTER/BROTHER 4

GRANDMOTHER/GRANDFATHER 5

FRIEND 6

OTHER (SPECIFY) 99

DON’T KNOW d

REFUSED r

I8d. What is (his/her) home telephone number?

 | | | | - | | | | -| | | | | TELEPHONE

NO LANDLINE, ONLY CELL PHONE 0

DON’T KNOW d

REFUSED r

I8e. Does (he/she) have a cell phone?

YES 1

NO 0 GO TO I8g

DON’T KNOW d GO TO I8g

REFUSED r GO TO I8g

I8f. Can I have that number?

 | | | | - | | | | -| | | | | TELEPHONE

DON’T KNOW d

REFUSED r

I8g. What is (his/her) work telephone number?

 | | | | - | | | | -| | | | | TELEPHONE

NO WORK NUMBER 0

DON’T KNOW d

REFUSED r

I8h. What is (his/her) email address?

EMAIL ADDRESS

DOESN’T HAVE ONE 0 GO TO I8j

DON’T KNOW d GO TO I8j

REFUSED r GO TO I8j

I8i. Does (he/she) have another email address?

EMAIL ADDRESS

DON’T KNOW d

REFUSED r

I8j. Which of the following is the primary social network used by this person?

 CODE ONE ONLY

**Facebook,** 1

**Twitter,** 2

**MySpace,** 3

**personal blog, or** 4

**other** (SPECIFY) 99

NONE 0 GO TO I9a

DON’T KNOW d GO TO I9a

REFUSED r GO TO I9a

I8k. What name does this person use in that social network?

 NAME

DON’T KNOW d

REFUSED r

SECOND CONTACT

I9a. What is the full name of the second person we should contact?

FIRST NAME

MIDDLE INITIAL/NAME

LAST NAME

DON’T KNOW d

REFUSED r

I9b. What is (his/her) address?

STREET 1

STREET 2

APT. #

CITY

STATE

ZIP

DON’T KNOW d

REFUSED r

I9c. What is (his/her) relationship to you?

 CODE ONE ONLY

WIFE/GIRLFRIEND/FIANCÉE 1

MOTHER 2

FATHER 3

SISTER/BROTHER 4

GRANDMOTHER/GRANDFATHER 5

FRIEND 6

OTHER (SPECIFY) 99

DON’T KNOW d

REFUSED r

I9d. What is (his/her) home telephone number?

 | | | | - | | | | -| | | | | TELEPHONE

NO LANDLINE, ONLY CELL PHONE 0

DON’T KNOW d

REFUSED r

I9e. Does (he/she) have a cell phone?

YES 1

NO 0 GO TO I9g

DON’T KNOW d GO TO I9g

REFUSED r GO TO I9g

I9f. Can I have that number?

 | | | | - | | | | -| | | | | TELEPHONE

DON’T KNOW d

REFUSED r

I9g. What is (his/her) work telephone number?

 | | | | - | | | | -| | | | | TELEPHONE

NO WORK NUMBER 0

DON’T KNOW d

REFUSED r

I9h. What is (his/her) email address?

EMAIL ADDRESS

DOESN’T HAVE ONE 0 GO TO I9j

DON’T KNOW d GO TO I9j

REFUSED r GO TO I9j

I9i. Does (he/she) have another email address?

EMAIL ADDRESS

DON’T KNOW d

REFUSED r

I9j. Which of the following is the primary social network used by this person?

 CODE ONE ONLY

**Facebook,** 1

**Twitter,** 2

**MySpace,** 3

**personal blog, or** 4

**other** (SPECIFY) 99

NONE 0 GO TO I10a

DON’T KNOW d GO TO I10a

REFUSED r GO TO I10a

I9k. What name does this person use in that social network?

NAME

DON’T KNOW d

REFUSED r

THIRD CONTACT

I10a. What is the full name of the third person we should contact?

FIRST NAME

MIDDLE INITIAL/NAME

LAST NAME

DON’T KNOW d

REFUSED r

I10b. What is (his/her) address?

STREET 1

STREET 2

APT. #

CITY

STATE

ZIP

DON’T KNOW d

REFUSED r

I10c. What is (his/her) relationship to you?

 CODE ONE ONLY

WIFE/GIRLFRIEND/FIANCÉE 1

MOTHER 2

FATHER 3

SISTER/BROTHER 4

GRANDMOTHER/GRANDFATHER 5

FRIEND 6

OTHER (SPECIFY) 99

DON’T KNOW d

REFUSED r

I10d. What is (his/her) home telephone number?

 | | | | - | | | | -| | | | | TELEPHONE

NO LANDLINE, ONLY CELL PHONE 0

DON’T KNOW d

REFUSED r

I10e. Does (he/she) have a cell phone?

YES 1

NO 0 GO TO I10g

DON’T KNOW d GO TO I10g

REFUSED r GO TO I10g

I10f. Can I have that number?

 | | | | - | | | | -| | | | | TELEPHONE

DON’T KNOW d

REFUSED r

I10g. What is (his/her) work telephone number?

 | | | | - | | | | -| | | | | TELEPHONE

NO WORK NUMBER 0

DON’T KNOW d

REFUSED r

I10h. What is (his/her) email address?

EMAIL ADDRESS

DOESN’T HAVE ONE 0 GO TO I10j

DON’T KNOW d GO TO I10j

REFUSED r GO TO I10j

I10i. Does (he/she) have another email address?

EMAIL ADDRESS

DON’T KNOW d

REFUSED r

I10j. Which of the following is the primary social network used by this person?

 CODE ONE ONLY

**Facebook,** 1

**Twitter,** 2

**MySpace,** 3

**personal blog, or** 4

**other** (SPECIFY) 99

NONE 0 GO TO END1

DON’T KNOW d GO TO END1

REFUSED r GO TO END1

I10k. What name does this person use in that social network?

NAME

DON’T KNOW d

REFUSED r

**END OF CALL**

END1. Those are all of the questions I have. You will receive $10 as a token of our appreciation. We will be in touch with you again in about a year to see how you are doing. As I mentioned earlier, a computer will randomly assign you to one of two study groups. Please hand the phone back to the staff person at [PROGRAM NAME], and he or she will let you know which group you have been assigned to. Thank you.

 INTERVIEWER: INFORM PROGRAM STAFF THAT RESPONDENT HAS COMPLETED THE INTERVIEW AND HE OR SHE CAN CONTINUE WITH RANDOM ASSIGNMENT.

END2. Thank you very much for your time. Those are all of the questions I have. Can you please hand the phone back to the staff person at [PROGRAM NAME]?

INTERVIEWER: INFORM PROGRAM STAFF THAT RESPONDENT IS NOT ELIGIBLE TO PARTICIPATE IN THE PACT STUDY BECAUSE HE DOES NOT HAVE ANY BIOLOGICAL CHILDREN.