###### **Family Options Study**

**REVISED**

**36-Month Follow-Up ADULT Survey**

**December 2013**

**REVIEWER NOTE: CHANGES/NEW QUESTIONS FOR THE 36-MONTH SURVEY ARE HIGHLIGHTED**

Introduction

Hello, my name is [ ]. I work for a company called Abt SRBI. Abt SRBI is an independent research company and we are helping the U.S. Department of Housing and Urban Development (HUD) to do this study.

You might remember meeting with me or one of my co-workers back in [MONTH/YEAR of RA ] at [INSERT SHELTER NAME]. At that time I talked to you about a study that we are doing to find out about what kind of housing is best for families who become homeless.

Since that first meeting, you may recall participating in short telephone interviews with us or responding to a letter we sent you, or completing a longer interview around [MONTH/YEAR 18 MONTH COMPLETED]. When we last talked back in [MONTH/YEAR OF LAST INTERVIEW], I mentioned that I’d be getting in touch with you again to find out about your housing and other experiences.

I’d like to ask you some questions now. This interview will take about 60 minutes to complete. You can stop the interview at any time. You can choose not to answer any question. If you choose not to answer any questions or to stop the interview, there will be no penalty or effect on any benefits you receive now or in the future. The information you provide will be kept confidential and only used for studies about the housing and services that are the focus of this study. The Office of Management and Budget approved the collection of this information under OMB control number 2528-0259 and it expires xx/xx/xxxx. If you have comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, please send them to Michelle Wood c/o Abt Associates, 4550 Montgomery Ave, Suite 800N, Bethesda, MD 20814, Attn: OMB-PRA (2528-0259.

At the end of the interview, you will receive $60, in appreciation for your time. We may ask for your permission to collect data from up to two children in your household.

*Do you have any questions?*

[INTERVIEWER: ANSWER QUESTIONS ACCORDINGLY]

If you have any other questions, even after we finish this interview, you may also call the study toll-free line at 1-800-320-9193.

If you have any questions about your rights as a participant in this study, you can call Ms. Katie Speanburg, the Abt Associates Institutional Review Board (IRB) Administrator, toll free at (877) 520-6835.

Okay, let’s get started.

INCARCERATED SCREENER:

INTERVIEWER: IF INTERVIEW IS COMPLETED BY PHONE: IS RESPONDENT INCARCERATED?

YES ❑ 1

NO ❑ 2 (**SKIP TO SC1)**

DON’T KNOW ❑ 8 (**SKIP TO SC1)**

INTERVIEWER: IF RESPONDENT IS INCARCERATED: DO YOU HAVE AN IRB APPROVED PROTOCOL FOR THIS RESPONDENT?

YES ❑ 1

NO ❑ 2 (**SKIP TO TERMINATE SCRIPT 1)**

DON’T KNOW ❑ 8 (**SKIP TO TERMINATE SCRIPT 1)**

TERMINATE SCRIPT 1:*I’m sorry, but I am having difficulty calling up your record. I will resolve this issue with my supervisor. I will try to reschedule this appointment at that time.*

SAMPLE VARIABLE DEFINITIONS:

* ***SAMP\_NUM1….SAMP\_NUMx***: This is the randomly generated sample number for each potential focal child.
* ***CHILD\_WITH1…CHILD\_WITHx***: This is the variable that indicates whether the child was in the shelter with the parent at baseline or not. 1=Yes with parent; 0=No not with parent
* ***NEWBORN1….NEWBORNx***: This is the variable that indicates whether or not this slot for potential focal child is set as a newborn child. 0 = not newborn; 1 = slot for newborn 1; 2 = slot for newborn 2
* ***NUMCHILD***: This is the variable indicates the maximum number of potential focal children for CAPI to loop through.

FOCAL CHILD SELECTION SCREENER

*[ASK FOCAL CHILD SCREENER QUESTIONS ONLY IF 18 MONTH INTERVIEW NOT COMPLETED OR 18 MONTH COMPLETE BUT NO FOCAL CHILD SELECTED]*

*During prior interviews with us, you gave us some information about all the children living you and child members of your family that were not living with you. As I mentioned at the start of the interview, we want to ask you about up to two of these children. We also want to conduct some interviews or do some interactive assessments with up to two of these children.*

*The next few questions are intended to help us determine which child(ren) to ask about.*

SC1. Between [RADATE] and [DATE6MONTHSPRIOR] have you (given birth to/fathered) a child? **<SC1>**

YES ❑ 1

NO ❑ 2 (**SKIP TO SC2)**

REFUSED ❑ 7 (**SKIP TO SC2)**

DON’T KNOW ❑ 8 (**SKIP TO SC2)**

**<SC1A>** BASE: SC1=1

SC1a. Congratulations! How many babies were born?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number of babies

**<SC1ADKC7>** REFUSED ❑ 7

**<SC1ADKC8>** DON’T KNOW ❑ 8

Note: Values for **<SC1ADKC7>** / <**SC1ADKC8>**: 0 = NOT Selected; 1 = Selected.

SC1b. What is the child’s first name? **<SC1B\_X> [X = 1- 3]**

FIELD INTERVIEWER NOTE: IF SC1a>1 ASK FOR NAME OF CHILD STARTING WITH THE OLDEST TO YOUNGEST.

First Name: **\_\_\_\_<SC1B\_1\_OTHER\_X> [X = 1-3] BASE: SC1B\_X = 1**

REFUSED ❑ 7

DON’T KNOW ❑ 8

**CAPI: REPEAT SC1b FOR EACH CHILD BORN. NAME FOR OLDEST CHILD SHOULD BE USED FOR [CHILD] WHEN REFERRING TO CHILD WITH NEWBORNx=1; NAME FOR SECOND OLDEST CHILD SHOULD BE USED FOR [CHILD] WHEN REFERRING TO CHILD WITH NEWBORNx=2.**

CAPI SELECT FOCAL CHILD A:

* START WITH [SAMP\_NUM1]. This should be the child with the lowest randomly assigned sampling number.
* IF CHILD\_WITH1=0 OR NEWBORN1=1 OR 2 THEN SKIP TO NEXT SAMP\_NUM. IF CHILD\_WITH1=1 AND NEWBORN1=0 CONTINUE;

IF DOB IS PRESENT (from the prior data collection) ASK SC2; IF DOB IS NOT PRESENT SKIP TO SC2a.

**<SC2\_X> [X = 1-10]**

SC2. Our records show [CHILD]’s date of birth is [CHILD DOB]. Is that correct?

YES ❑ 1 (**SKIP TO SC3)**

NO ❑ 2

CHILD IS DECEASED **(SKIP TO CONDOLENCE SCRIPT)** ❑ 3

REFUSED ❑ 7 (**SKIP TO SC3)**

DON’T KNOW ❑ 8 (**SKIP TO SC3)**

SC2a. What is [CHILD]’s date of birth **<SC2AM\_X>/ <SC2AD\_X >/SC2AY\_X> [X = 1-10]**

ENTER DATE: \_\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Month / Day / Year

**<SC2AREFDK\_X\_C7> [X = 1-10]** REFUSED ❑ 7

**<SC2AREFDK\_X\_C8> [X = 1-10]** DON’T KNOW ❑ 8

Note: Values for **<SC2AREFDK\_X\_C7> /<SC2AREFDK\_X\_C8>** : 0 = NOT Selected; 1 = Selected.

**CAPI: CALCULATE AGE IN MONTHS AND YEARS BASED ON TODAYDATE-DOB.**

**CREATE VARIABLE: 18MOAGE:**

18MOAGE=0 IF AGE IN MONTHS AND YEARS IS UNDER 12 MONTHS;

18MOAGE=1 IF AGE IN MONTHS AND YEARS=12 MONTHS TO 3 YEARS 5 MONTHS;

18MOAGE=2 IF AGE IN MONTHS AND YEARS=3 YEARS 6 MONTHS TO 7 YEARS 11 MONTHS

18MOAGE=3 IF AGE IN MONTHS AND YEARS= 8 YEARS TO 17 YEARS 11 MONTHS.

18MOAGE=4 IF AGE IN MONTHS AND YEARS=18 OR MORE

CAPI: IF 18MOAGE=0, 1 OR 4 SKIP TO CHILD WITH [SAMP\_NUM2] AND REPEAT SC2; IF 18MOAGE=2 OR 3 CONTINUE;

CAPI: IF CHILD\_WITH1=0 SKIP TO CHILD WITH [SAMP\_NUM2] AND REPEAT SC2. IF CHILD\_WITH1=1, ASK SC3;

SC3. Do you currently live in the same household as [CHILD]…?  **<SC3\_X> [X = 1-10]**

All of the time ❑ 1

At least half of the time ❑ 2

Less than half of the time ❑ 3

None of the time ❑ 4

CHILD IS DECEASED **(READ CONDOLENCE SCRIPT)** ❑ 5

REFUSED ❑ 7

DON’T KNOW ❑ 8

**CONDOLENCE SCRIPT:** I am sorry for your loss. Do you need to take a minute before we go on?

**DEFINE FC\_STATUSx**

***(Note CAPI will assign all eligible children with a variable FC\_STATUS1….FC\_STATUSx). The values will be as follows:***

**FC\_STATUSx=A for child selected under Focal Child A criteria;**

**FC\_STATUSx=B for first child selected under Focal Child B criteria;**

**FC\_STATUSx=C for second child selected under Focal Child B criteria (use this if no child meets Focal Child A set of criteria).**

**FC\_STATUS=D for all children not selected**

**IDENTIFY SELECTED FOCAL CHILD A:**

* **IF SC3=1 OR 2 THEN FLAG [first\_namex] AS FC \_STATUSx=A.**
* **IF SC3=3,4,5,7,8 SKIP TO CHILD NEXT AVAILABLE [SAMP\_NUMx] AND REPEAT SC2 THROUGH SC3 UNTIL FOCAL CHILD A IS SELECTED.**

# CAPI SELECT FOCAL CHILD B:

**STARTING WITH CHILD WITH LOWEST UNSELECTED [SAMP\_NUMx] AVAILABLE THERE ARE 3 DIFFERENT SCENARIOS:**

* **IF CHILD\_DOB#, CHILD#, RELATIONSHIIP#, GENDER#, CHILDWITH#, AND NEWBORN#= PACKED; THEN ASK QUESTIONS SC4-SC7 TO SEE IF CHILD MEETS CRITERIA FOR SELECTION. IF NOT, GO TO NEXT LOWEST UNSELECTED SAMP\_NUMx.**
* **IF CHILD\_DOB#, CHILD#, RELATIONSHIIP#, GENDER#, CHILDWITH# = BLANK AND ((NEWBORN#= 1 OR 2 AND) SC1=YES) ; THEN ASK QUESTIONS SC4-SC7 TO SEE IF CHILD MEETS CRITERIA FOR SELECTION. IF NOT, GO TO NEXT LOWEST UNSELECTED SAMP\_NUMx.**
* **IF CHILD\_DOB#, CHILD#, RELATIONSHIIP#, GENDER#, CHILDWITH# = BLANK AND NEWBORN#= 0, GO TO NEXT LOWEST UNSELECTED SAMP\_NUMx.**

**NOTE: IF CHILD\_DOB#, CHILD#, RELATIONSHIIP#, GENDER#, CHILDWITH#, AND NEWBORN#= ARE ALL BLANK; THEN WE DO NOT HAVE MORE KIDS TO SCREEN IN.**

IF DOB IS PRESENT ASK SC4; IF DOB IS NOT PRESENT SKIP TO SC4a. **<SC4\_X> [X = 1-10}**

SC4. Our records show [CHILD]’s date of birth is [CHILD DOB]. Is that correct?

YES ❑ 1 (**SKIP TO SC5)**

NO ❑ 2

CHILD IS DECEASED **(SKIP TO CONDOLENCE SCRIPT)** ❑ 3

REFUSED ❑ 7 (**SKIP TO SC5**

DON’T KNOW ❑ 8 (**SKIP TO SC5)**

SC4a. What is [CHILD]’s date of birth **<SC4AM\_X>/<SC4AD\_X>/<SC4AY\_X> [X = 1-10]**

ENTER DATE: \_\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Month / Day / Year

**<SC4AREFDK\_X\_C7> [X = 1-10]** REFUSED ❑ 7

**<SC4AREFDK\_X\_C8> [X = 1-10]** DON’T KNOW ❑ 8

Note: Values for **<SC4AREFDK\_X\_C7> /<SC4AREFDK\_X\_C8>** : 0 = NOT Selected; 1 = Selected.

* **CALCULTE AGE BASED ON SC4 AND SC4A.**
* **CALCULATE 18MOAGE AS DEFINED BELOW. WE WILL EXCLUDE ANY CHILD WHERE 18MOAGE=’0’ (under 12 months of age)).**

**CAPI: CALCULATE AGE IN MONTHS AND YEARS BASED ON TODAYDATE-DOB.**

**CREATE VARIABLE: 18MOAGE WHERE 18MOAGE=blank:**

18MOAGE=0 IF AGE IN MONTHS AND YEARS IS UNDER 12 MONTHS;

18MOAGE=1 IF AGE IN MONTHS AND YEARS=12 MONTHS TO 3 YEARS 5 MONTHS;

18MOAGE=2 IF AGE IN MONTHS AND YEARS=3 YEARS 6 MONTHS TO 7 YEARS 11 MONTHS

18MOAGE=3 IF AGE IN MONTHS AND YEARS= 8 YEARS TO 17 YEARS 11 MONTHS.

18MOAGE=4 IF AGE IN MONTHS AND YEARS=18 OR MORE

**CAPI: IF 18MOAGE=0, 3 OR 4 CONTINUE**;

SC5. Do you currently live in the same household as [CHILD]…?  **<SC5\_X> [X = 1-10]**

All of the time ❑ 1

At least half of the time ❑ 2

Less than half of the time ❑ 3

None of the time ❑ 4

CHILD IS DECEASED **(READ CONDOLENCE SCRIPT)** ❑ 5

REFUSED ❑ 7

DON’T KNOW ❑ 8

**CONDOLENCE SCRIPT:** I am sorry for your loss. Do you need to take a minute before we go on?

**Identify Focal Child B:**

* **IF SC5=1 OR 2 THEN FLAG [FIRST\_NAMEx] AS FOCAL CHILD B.**

***CAPI NOTE: IF BOTH FOCAL CHILD A AND FOCAL CHILD B HAVE BEEN SELECTED AT THIS POINT, PROCEED TO INTERVIEW. ELSE IF SC5=3, 4, 7, 8 ASK SC6 THROUGH SC8d.***

**BASE: SC5=[3,4,7,8] SC6\_X [ X = 1-10]**

SC6. During the past month, about how often did you spend one or more hours a day with [CHILD]? Was it…

Every day or nearly every day ❑ 1

A few times a week ❑ 2

A few times in the last month ❑ 3

Only once or twice, or ❑ 4

Not at all ❑ 5

REFUSED ❑ 7

DON’T KNOW ❑ 8

**BASE: SC5= [3, 4, 7, 8]**

SC7. About how often in the past month did you know…

|  | ***Would you say it is…*** | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **[X = 1- 10] ↓↓↓↓** | **Always** | **Usually** | **Sometimes** | **Almost Never** | **Never** | **N/A** | **REF** | **DK** |
| **<SC7\_a\_X>** How [CHILD] spent his or her time when not in school or child care? | 1 | 2 | 3 | 4 | 5 |  | 7 | 8 |
| **<SC7\_b\_X>** Which other kids [CHILD] spent time with? | 1 | 2 | 3 | 4 | 5 |  | 7 | 8 |
| **<SC7\_c\_X>**  [ASK ONLY IF CHILD IS ≥6YEARS OF AGE] Whether [CHILD] had finished his/her schoolwork or studying? | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| **<SC7\_D\_X>** Which TV programs [CHILD] watched? | 1 | 2 | 3 | 4 | 5 |  | 7 | 8 |

**IDENTIFY FOCAL CHILD B:**

* **IF SC5=1 OR 2 OR (SC5=3,4,7,8 AND (SC6=1 OR 2 AND AT LEAST TWO ITEMS IN SC7A-D=1,2 OR 3) THEN FLAG [FIRST\_NAMEx ] AS FC \_STATUSx=B.**

***CAPI NOTE: IF BOTH FOCAL CHILD A AND FOCAL CHILD B HAVE BEEN SELECTED AT THIS POINT, PROCEED TO INTERVIEW.***

***IF ONLY FOCAL CHILD B HAS BEEN SELECTED (BUT NO FOCAL CHILD A), SCREEN FOR FOCAL CHILD C (USING SAME CRITERIA AS FOR FOCAL CHILD B).***

DISPLAY SCREENS TO DOCUMENT FOCAL CHILD SELECTION

WE HAVE SELECTED A TOTAL OF {INSERT NUMBER OF FC SELECTED}. THE NAMES OF THE CHILD/CHILDREN ARE:

IF 1 FC WAS SELECTED:

**FOCAL CHILD A/C:**

NAME: [DISPLAY NAME]

DOB: [DISPLAY DOB]

AGE: [DISPLAY CHILD AGE BASED ON DOB AND CURRENT DAY]

*IF AGE OF THE CHILD IS BETWEEN 12 TO 41 MONTH DISPLAY:*

YOU WILL NEED TO COMPLETE THE AGES AND STAGES QUESTIONNAIRE. TO DETERMINE WHICH VERSION OF THE ASQ TO USE: PLEASE GO TO: http://agesandstages.com/age-calculator/

*IF AGE OF THE FOCAL CHILD BETWEEN 42 MONTHS AND 66 MONTHS/ 3 YEARS AND SIX MONTHS TO 5 YEARS AND 6 MONTH DISPLAY:*

YOU WILL NEED TO COMPLETE THE AGES AND STAGES QUESTIONNAIRE AS WELL AS THEWJR II AND HTKS WITH [DISPLAY NAME OF FOCAL CHILD A] TO DETERMINE WHICH VERSION OF THE ASQ TO USE: PLEASE GO TO: http://agesandstages.com/age-calculator

*IF AGE OF THE FOCAL CHILD BETWEEN 67 MONTHS AND 95 MONTHS/ 3 YEARS AND SIX MONTHS TO 7 YEARS AND 11 MONTH DISPLAY:*

YOU WILL NEED TO COMPLETE THE WJR II AND HTKS WITH [DISPLAY NAME OF FOCAL CHILD A]

IF AGE OF THE FOCAL CHIILD BETWEEN 96 MONTH TO 215 MONTHS / 8 YEARS TO 17 YEARS AND 11 MONTH:

YOU WILL NEED TO COMPLETE THE CHILD SURVEY WITH [DISPLAY NAME OF FOCAL CHILD A]

IF 2 FC WERE SELECTED:

**FOCAL CHILD B:**

NAME: [DISPLAY NAME]

DOB: [DISPLAY DOB]

AGE: [DISPLAY CHILD AGE BASED ON DOB AND CURRENT DAY]

*IF AGE OF THE CHILD IS BETWEEN 12 TO 41 MONTH DISPLAY:*

YOU WILL NEED TO COMPLETE THE AGES AND STAGES QUESTIONNAIRE. TO DETERMINE WHICH VERSION OF THE ASQ TO USE: PLEASE GO TO: http://agesandstages.com/age-calculator/

*IF AGE OF THE FOCAL CHILD BETWEEN 42 MONTHS AND 66 MONTHS/ 3 YEARS AND SIX MONTHS TO 5 YEARS AND 6 MONTH DISPLAY:*

YOU WILL NEED TO COMPLETE THE AGES AND STAGES QUESTIONNAIRE AS WELL AS THEWJR II AND HTKS WITH [DISPLAY NAME OF FOCAL CHILD A] TO DETERMINE WHICH VERSION OF THE ASQ TO USE: PLEASE GO TO: http://agesandstages.com/age-calculator

*IF AGE OF THE FOCAL CHILD BETWEEN 67 MONTHS AND 95 MONTHS/ 5 YEARS AND 7 MONTHS TO 7 YEARS AND 11 MONTH DISPLAY:*

YOU WILL NEED TO COMPLETE THE WJR II AND HTKS WITH [DISPLAY NAME OF FOCAL CHILD B]

IF AGE OF THE FOCAL CHIILD BETWEEN 96 MONTH TO 215 MONTHS / 8 YEARS TO 17 YEARS AND 11 MONTH:

YOU WILL NEED TO COMPLETE THE CHILD SURVEY WITH [DISPLAY NAME OF FOCAL CHILD B]

FIELD INTERVIEWER: PLEASE RECORD INFORMATION ON YOUR FOCAL CHILD SELECTION SHEET. PLEASE CONFIRM THAT YOU HAVE RECORDED THE INFORMATION AND ARE READY TO CONTINUE WITH INTERVIEW:

YES ❑1 (**CONTINUE)**

NO ❑2

### Module1: Housing History and Stability

First, I’d like to ask about where you are living/staying right now.

BASE: ALL

1. Can you please confirm the address where you are living/staying now? [CAPI: PRE-FILL WITH ADDRESS ON RECORD. INTERVIEWER; CONFIRMM THAT INFORMATION IS CORRECT AND UPDATE AS NEEDED. REMEMBER: THIS IS NOT A MAILING ADDRESS – IT IS THE PLACE WHERE R IS LIVING/STAYING]

A1a. Is there a complex/building name? **<A1>**

A1b. Is there an apartment number? **<A1B>**

A1c. What city do you live in? **<A1C>**

A1d. What state do you live in? **<A1D>**

A1e. What is the zip code? **<A1E>**

BASE: ALL

1. How long have you lived in this place? You can tell me this answer in days, weeks, months or years, whichever is easiest for you. [INTERVIEWER/CAPI: RECORD NUMBER OF DAYS, WEEKS, MONTHS, YEARS. IF 0, RECORD THAT AS WELL].

NUMBER OF DAYS **<A2A1>**

NUMBER OF WEEKS **<A2A2**

NUMBER OF MONTHS **<A2A3>**

NUMBER OF YEARS **<A2A4>**

REFUSED ❑-2

DON’T KNOW ❑-1

CAPI:

IF RESPONDENT WAS RANDOMLY ASSIGNED TO *SUB; CBRR; OR UC* INTERVENTIONS SKIP TO A4.

IF RESPONDENT WAS RANDOMLY ASSIGNED TO *PBTH* INTERVENTION ASK A3.

**<A3>** BASE: RA\_RESULTS=PBTH

1. Is the place where you live now called the [INSERT NAME OF PROGRAM TO WHICH THE FAMILY WAS RANDOMLY ASSIGNED/ USE ALTERNATIVE NAMES IF PROGRAM IS KNOWN BY MORE THAN ONE NAME]?

YES ❑1 (**SKIP TO A5)**

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

**<A3A>** BASE: A3= [2, 7, 8]

A3a. Did you ever live at [NAME OF PROGRAM TO WHICH FAMILY WAS RANDOMLY ASSIGNED]?

YES ❑1 (**SKIP TO A3c)**

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

**<A3B>** BASE: A3a=[2, 7, 8]

A3b. What the main reason you did not ever live at [NAME OF PROGRAM TO WHICH FAMILY WAS RANDOMLY ASSIGNED?]

DO NOT READ LIST/ RECORD VERBATIM AND CODE

I DID NOT LIKE HOUSING (QUALITY) ❑1

I DID NOT LIKE THE LOCATON/NEIGHBORHOOD ❑2

I DID NOT LIKE PROGRAM RULES ❑3

I DID NOT LIKE OTHER RESIDENTS ❑4

I COULD NOT HAVE MY WHOLE FAMILY WITH ME ❑5

PROGRAM WOULD NOT ACCEPT ME ❑6

OTHER ❑95

(SPECIFY**\_\_<A3B\_95\_OTHER>\_Base <A3B> = 95)**

REFUSED ❑97

DON’T KNOW ❑98

**SKIP TO A4**

BASE: A3a=1

A3c. About how long did you live there? You can tell me the answer in days, weeks, or months, whichever is easiest for you.

NUMBER OF DAYS **<A3C1>**

NUMBER OF WEEKS **<A3C2>**

NUMBER OF MONTHS **<A3C3>**

NUMBER OF YEARS **<A3C4>**

REFUSED ❑-2

DON’T KNOW ❑-1

**<A3D>** BASE: A3a=1

A3d. What would you say was the main reason you left [NAME OF PROGRAM TO WHICH FAMILY WAS RANDOMLY ASSIGNED?]

DO NOT READ LIST/ RECORD VERBATIM AND CODE

I DID NOT LIKE HOUSING (QUALITY) ❑1

I DID NOT LIKE THE LOCATON/NEIGHBORHOOD ❑2

I DID NOT LIKE PROGRAM RULES ❑3

I DID NOT LIKE OTHER RESIDENTS ❑4

I COULD NOT HAVE MY WHOLE FAMILY WITH ME ❑5

PROGRAM ASKED ME TO LEAVE ❑6

OTHER ❑95

(SPECIFY**\_\_<A3D\_95\_OTHER> Base <A3D> = 95)**

REFUSED ❑97

DON’T KNOW ❑98

BASE: A3≠1

1. Which of the following best describes your current living situation?

| *Would you say you are living/staying in…* | **YES** | **NO** | **REF** | **DK** |
| --- | --- | --- | --- | --- |
| <A4a> A house or apartment that you own or rent. This does not include your parent’s or guardian’s home or apartment. | 1 | 2 | 7 | 8 |
| **BASE: A4a≠1**  <A4b> Your partner’s (boy/girlfriend’s/fiancé’s, significant other’s) place. | 1 | 2 | 7 | 8 |
| **BASE: A4b≠1**  <A4c> A friend or relative’s house or apartment, **and paying part of the rent** [PROBE: THIS INCLUDES YOUR PARENT’S or GUARDIAN’S HOUSE OR APARTMENT OR OTHER FRIEND OR RELATIVE] | 1 | 2 | 7 | 8 |
| **BASE: A4c≠1**  <A4d> A friend or relative’s house or apartment, **but not** paying part of the rent [PROBE: THIS INCLUDES YOUR PARENT’S or GUARDIAN’S HOUSE OR APARTMENT OR OTHER FRIEND OR RELATIVE] | 1 | 2 | 7 | 8 |
| ***CAPI: We ask A4a, A4b, A4c, or A4d until we have a ‘yes’ response and then skip to A5. Once we have a YES SKIP TO A5; Otherwise, continue down A4e through A4p until a YES response is reached.*** | | | | |
| BASE: A4a OR A4b OR A4C OR A4d ≠ 1  <A4e> A permanent housing program with services to help you keep your housing (on site or coming to you)  **IF YES: COLLECT NAME OF PROGRAM: <A4E\_1\_OTHER>\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_THEN SKIP TO A5** | 1 | 2 | 7 | 8 |
| BASE: A4e≠1  <A4f> A transitional housing program  **IF YES: COLLECT NAME OF PROGRAM: <A4F\_1\_OTHER>** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **THEN SKIP TO A5** | 1 | 2 | 7 | 8 |
| BASE: A4f≠1  <A4g> A domestic violence shelter **IF YES: SKIP TO A5** | 1 | 2 | 7 | 8 |
| BASE: A4g≠1  <A4h> An emergency shelter  **IF YES: COLLECT NAME OF PROGRAM: <A4H\_1\_OTHER>** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **THEN SKIP TO A5** | 1 | 2 | 7 | 8 |
| BASE: A4h≠1  <A4i> A voucher hotel or motel **IF YES: SKIP TO A9** | 1 | 2 | 7 | 8 |
| BASE: A4i≠1  <A4j> A hotel or motel you pay for yourself **IF YES: SKIP TO A9** | 1 | 2 | 7 | 8 |
| BASE: A4j≠1  <A4k> A residential drug or alcohol treatment program **IF YES: SKIP TO A9** | 1 | 2 | 7 | 8 |
| BASE: A4k≠1  <A4l> Jail or prison **IF YES: AND INCARCERATED FLAG1=NO or DK OR INCARCERATED FLAG 2=NO OR DK READ TERMINATE SCRIPT 1 IF YES AND INCARCERATED FLAG1=YES and INCARCERATED FLAG2=YES SKIP TO A9** | 1 | 2 | 7 | 8 |
| BASE: A4l≠1  <A4m> A car or other vehicle **IF YES: SKIP TO A9** | 1 | 2 | 7 | 8 |
| BASE: A4m≠1  <A4n> An abandoned building **IF YES: SKIP TO A9** | 1 | 2 | 7 | 8 |
| BASE: A4n≠1  <A4o> Anywhere outside [PROBE: STREETS, PARKS, ETC.] **IF YES: SKIP TO A9** | 1 | 2 | 7 | 8 |
| BASE: A4o≠1 Somewhere else?  <A4p> OTHER 🡪 SPECIFY: **<A4P\_1\_OTHER>** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **IF YES: SKIP TO A9** | 1 | 2 | 7 | 8 |

BASE: (A4a OR A4b OR A4c OR A4d OR A4e OR A4f OR A4g OR A4h= YES) OR A3=1

1. Do you think that you will be able to stay in the place where you are living/staying now as long as you want? **<A5>**

YES ❑1 (**SKIP TO A7)**

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

**<A6>** BASE: A5= [2, 7, 8]

1. Why don’t you think you will be able to stay in this place as long as you want?What would you say is the **main reason**?**[RECORD MAIN REASON AND CODE]**

IT IS NOT MY HOUSE OR APARTMENT ❑1

I WON’T BE ABLE TO CONTINUE TO PAY THE RENT ❑2

THE PROGRAM I’M IN HAS A TIME LIMIT ❑3

THE LANDLORD/OWNER HAS TOLD ME I WILL HAVE TO   
LEAVE ❑4

OTHER ❑95

(SPECIFY)\_\_**<A6\_95\_OTHER> base : <A6> = 95**\_\_)

REFUSED ❑97

DON’T KNOW ❑98

BASE: (A5=1 OR (A4a OR A4b OR A4c OR A4d=1)) **<A7>**

1. Do you currently receive any governmental housing assistance, such as through public housing, or Section 8 or Housing Choice Voucher?

YES ❑1 **(SKIP TO A8b)**

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

**<A8>** BASE: A7= [2, 7, 8]

1. Are you paying lower rent because the Federal, state, or local government is paying for part of your rent?

YES ❑1

NO ❑2 **(SKIP TO A9)**

REFUSED ❑7 **(SKIP TO A9)**

DON’T KNOW ❑8 **(SKIP TO A9)**

**<A8A>** BASE: A8=1

A8a. What is the name of the program that provides your housing assistance? This could be the place where you live or the program that helps you with your rent.

**RECORD VERBATIM**

<**A8B>** BASE: A8=1 OR A7=1

A8b. Is this assistance a Section 8 or Housing Choice Voucher, or is the building you live in a public housing or a Section 8 project or some other type of assistance?

**CAPI: ACCEPT ONE RESPONSE ONLY.**

PUBLIC HOUSING ❑1

A SECTION 8/HOUSING CHOICE VOUCHER ❑2

A SECTION 8/HCV PROJECT ❑3

OTHER TYPE OF HOUSING ASSISTANCE ❑95  
(SPECIFY): \_\_<**A8B\_95\_OTHER> Base: A8B = 95**

REFUSED ❑97

DON’T KNOW ❑98

<A9> BASE: ALL

1. Now, I’d like you to think about the last six months—that is, since [ MONTH/YEAR SIX MONTHS PRIOR TO INTERVIEW]. Were there any times when you were homeless in the last six months? By homeless, I mean times when you didn’t have a regular place to live and you were living in a homeless shelter or temporarily in an institution because you had nowhere else to go.

Homeless can also include living in a place not typically used for sleeping such as on the street, in a car, in an abandoned building, or in a bus or train station in the past six months.

Please **do not include** any times when you may have stayed with friends or relatives because you did not have your own place to stay. Please **do not include** times when you lived in a transitional housing program or permanent housing program.

YES ❑1

NO ❑2 **(SKIP TO A11)**

REFUSED ❑7 **(SKIP TO A11)**

DON’T KNOW ❑8 **(SKIP TO A11)**

**<A10>** BASE: A9=1

1. How many times were you homeless in the last six months?

[INTERVIEWER/CAPI: RECORD NUMBER OF TIMES THE PERSON WAS HOMELESS.]

NUMBER OF TIMES \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REFUSED ❑-1 **(SKIP TO A11)**

DON’T KNOW ❑-2 **(SKIP TO A11)**

BASE: A10≥1

A10a. *Thinking about all of the times you have been homeless in the past 6 months],* What would you say is the total number of days, weeks, or months that you have been homeless in the past 6 months?

[INTERVIEWER/CAPI: RECORD THE NUMBER OF DAYS, WEEKS, OR MONTHS. IF 0, RECORD THAT AS WELL.]

NUMBER OF DAYS **<A10A1>**

NUMBER OF WEEKS **<A10A2>**

NUMBER OF MONTHS **<A10A3>**

REFUSED ❑-2

DON’T KNOW ❑-1

**<A11>** BASE: ALL

1. Again, please think about the last six months. Were there any times when you were living with a friend or relative because you could not find or afford a place of your own?

YES ❑1

NO ❑2 **(SKIP TO A13)**

REFUSED ❑7 **(SKIP TO A13)**

DON’T KNOW ❑8 **(SKIP TO A13)**

**<A12>** BASE: A11=1

1. Altogether, how much time in the past six months, would you say you spent living with a friend or relative because you could not find or afford a place of your own? You can tell me this answer in days, weeks, or months, whichever is easiest for you. [INTERVIEWER/CAPI: RECORD NUMBER OF DAYS, WEEKS, MONTHS, YEARS. IF 0, RECORD THAT AS WELL].

NUMBER OF DAYS **<A12A1>**

NUMBER OF WEEKS **<A12A2>**

NUMBER OF MONTHS **<A12A3>**

REFUSED ❑-2

DON’T KNOW ❑-1

**<A13>** BASE: ALL

A13. Now I’d like you to focus just on the past 6 months—that is since [MONTH 6 MONTHS PRIOR INTERVIEW]. Think about all of the different places you have lived/stayed during the past 6 months. How many different places have you lived/stayed? Please include the place where you currently live/stay.

**FIELD INTERVIEWER NOTE:**

* IF ASKED BY RESPONDENT: THIS SHOULD INCLUDE ALL PLACES THE RESPONDENT HAS LIVED, INCLUDING HOMELESS SHELTERS
* IF RESPONDENT CYCLED BACK AND FORTH BETWEEN TWO PLACES, COUNT EACH ONLY ONCE

One place—where I am now ❑1

2 Places ❑2

3 Places ❑3

4 Places ❑4

5 Places ❑5

More than 5 Places ❑6

REFUSED ❑7

DON’T KNOW ❑8

Now I’d like you to think about the place you are **currently living.**

BASE: A14-A14e THESE QUESTIONS ARE ASKED ONLY OF THOSE WHERE RA\_RESULT WAS PBTH ***AND*** A3=YES AND [18MONTH IS NOT. COMPLETE]

IF [(RARESULT WAS SUB, CBRR, OR UC) ***OR*** (A3=NO, REF, DK) AND 18MONTH=COMPLETE] SKIP TO CAPI NOTE BEFORE A15.

A14: BLANK

**<A14BM> <A14BY> ↓↓**

A14B. When did you start living in [INSERT NAME OF PROGRAM TO WHICH THE FAMILY WAS RANDOMLY ASSIGNED/ USE ALTERNATIVE NAMES IF PROGRAM IS KNOWN BY MORE THAN ONE NAME]. Please tell me the month and year you started living there.

A14c. BLANK

A14d. **<A14D\_X> [X = 1-4]** BASE: A14b =REF/DK .How long have you participated [IN PROGRAM NAME]? By participate I mean how long you lived at the program?

A14e. BLANK

BASE: A15- A15e: ARE ASKED ONLY IF A4e, OR A4f OR A4g OR A4h=1 ELSE SKIP TO CAPI NOTE BEFORE A16.

A15: BLANK **<A15BM> <A15BY> ↓↓**

A15B. When did you start participating in [[INSERT PROGRAM NAME FROM A4e, A4f, OR A4g.].By participate I mean when started to get help with your rent or when you started to live at the program. Please tell me the month and year you started participating.

A15c. BLANK

A15d. **<A15D\_X> [X = 1-4]**  IF A15b =REF/DK ASK A15d, ELSE SKIP TO CAPI NOTE BEFORE A16.How long have you participated [IN INSERT PROGRAM NAME PROGRAM NAME]? By participate I mean how long you lived at the program or received help paying your rent?

CAPI: A16-A16e

ARE ASKED ONLY OF THOSE WHERE A8=1; ELSE SKIP TO A17

A16: BLANK **<A16BM> <A16BY> ↓↓**

A16B. When did you start participating in [[INSERT PROGRAM NAME FROM A8a.].By participate I mean when you started to get help with your rent or when you started living at the program. Please tell me the month and year you started participating.

A16c. BLANK.

A16d. **<A16D\_X> [X = 1-4]** IF A16b =REF/DK ASK A16d, ELSE SKIP TO A17.How long did you participate in [INSERT PROGRAM NAME FROM A8a IF NOT BLANK].By participate I mean when you got help with your rent or when you lived at the program.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Program Name** | **Date started** | **Date stopped** | **Total Time in Program  (in weeks, months, or days)** | **Program Type** |
| A14: [NAME OF PROGRAM TO WHICH THE FAMILY WAS RANDOMLY ASSIGNED] | A14b<A14BM>/<A14BY> \_\_\_/\_\_\_\_\_  MM/YYYY  RF 7  DK 8  **<A14BM>/<A14BY>** | A14c BLANK | A14d <A14D\_X> X = 1-4 INTERVIEWER: RECORD THE NUMBER OF DAYS, WEEKS, MONTHS AND YEARS. <A14D\_X> X = 1-4 \_\_\_NUMBER OF DAYS  \_\_\_NUMBER OF WEEKS  \_\_\_NUMBER OF MONTHS  \_\_\_NUMBER OF YEARS | A14e BLANK |
| A15a **[NAME OF PROGRAM IN A4e, A4f, or A4g]** | A15b <A15BM>/<A15BY> \_\_\_/\_\_\_\_\_  MM/YYYY  RF 7  DK 8 | A15c BLANK | A15d <A15D\_X> X = 1-4 INTERVIEWER: RECORD THE NUMBER OF DAYS, WEEKS, MONTHS, YEARS  \_\_\_NUMBER OF DAYS  \_\_\_NUMBER OF WEEKS  \_\_\_NUMBER OF MONTHS  \_\_\_NUMBER OF YEARS | A15e BLANK |
| A16a **[NAME OF PROGRAM IN A8A]** | A16b <A15BM>/<A15BY> \_\_\_/\_\_\_\_\_  MM/YYYY  RF 7  DK 8 | **A16c**  BLANK | A16d <A16D\_X> X = 1-4 INTERVIEWER: RECORD THE NUMBER OF DAYS, WEEKS, MONTHS, YEARS  \_\_\_NUMBER OF DAYS  \_\_\_NUMBER OF WEEKS  \_\_\_NUMBER OF MONTHS  \_\_\_NUMBER OF YEARS | A16e BLANK |

**<A17>** BASE: ALL

A17. Now I’d like you to think about the time since [18 MONTH DATEMONTH/YEAR].

CAPI TEXT SUBSTITUTION: IF A7 or A8 = YES or IF RA RESULT=PBTH INSERT: Other than where you are now/

OTHERWISE:

Have you participated in any program to help you with your housing? This could be a housing program where you lived or a program that helped you pay the rent in your own apartment or house.

YES ❑1

NO ❑2 **(SKIP TO B1)**

REFUSED ❑7 **(SKIP TO B1)**

DON’T KNOW ❑8 **(SKIP TO B1)**

**<A17A>** BASE: A17=1

A17a. How many other programs to help you with your housing have you participated in?

NUMBER OF PROGRAMS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REFUSED ❑-1

DON’T KNOW ❑-2

BASE: A18-A20

IF A17=YES ASK A18 FOR FIRST OTHER PROGRAM. REPEAT FOR UP TO 3 LOOPS (LOOP 2 as A19 SERIES; LOOP 3 as A20 SERIES)

A18a. What was the name of the other program that you participated in?

A18b. When did you start participating in that program? By participate I mean when you got help with your rent or when you lived at the program? Please tell me the month and year you started participating in that program.

A18c. When did you stop participating in that program? By participate I mean when you got help with your rent or when you lived at the program? Please tell me the month and year you stopped participating in that program.

A18d. IF A18b OR A18c are REF/DK ASK A18d, ELSE SKIP TO A18e. How long did you participate in that program? By participate I mean when you got help with your rent or when you lived at the program.

A18e. What type of program was that? Was is a permanent housing program with services, a transitional housing program a section 8 or housing choice voucher or PHA subsidy, a section 8 project, a shelter, or something else?

| Program Name | Date Started | Date Stopped | Total Time in Program (in weeks, months, or days) | Program Type |
| --- | --- | --- | --- | --- |
| A18a \_\_\_\_\_\_\_\_\_\_\_\_  RECORD PROGRAM NAME <A18A> | A18b **<A18BM>**  **<A18BY>**  \_\_\_/\_\_\_\_\_  MM/YYYY  RF -1  DK -2 | A18c **<A18CM>**  **<A18CY>**  \_\_\_/\_\_\_\_\_  MM/YYYY  STILL THERE = 0  RF -1  DK -2 | A18d Base: A18b or a18c = RF/DK **<A18D\_X> [X = 1-4]**  INTERVIEWER: RECORD THE NUMBER OF DAYS, WEEKS, MONTHS,  \_\_\_NUMBER OF DAYS  \_\_\_NUMBER OF WEEKS  \_\_\_NUMBER OF MONTHS  \_\_\_NUMBER OF YEARS  RF -1  DK -2 | A18e <A18E> Base: A18a = packed Permanent housing program with services to help you keep your housing 1  Transitional housing program 2  Section 8/HCV voucher or PHA subsidY 3  CBRR subsidy 4  Section 8 Project 5  A shelter ]**<A18E\_94\_OTHER**\_\_\_\_\_ 94  OTHER [SPECIFY] **A18E\_95\_OTHER** \_\_\_\_\_\_\_\_ 95  refused 97  don’t know 98 |
| A19a \_\_\_\_\_\_\_\_\_\_\_\_  RECORD PROGRAM NAME<A19A> | A19b **<A19BM>**  **<A19BY>**  \_\_\_/\_\_\_\_\_  MM/YYYY  RF -1  DK -2 | A19c **<A19CM>**  **<A19CY>**  \_\_\_/\_\_\_\_\_  MM/YYYY  STILL THERE 0  RF -1  DK -2 | A19d Base: A19b or A19c = RF/DK **<A19D\_X> [X = 1-4]**  INTERVIEWER: RECORD THE NUMBER OF DAYS, WEEKS, MONTHS,  \_\_\_NUMBER OF DAYS  \_\_\_NUMBER OF WEEKS  \_\_\_NUMBER OF MONTHS  \_\_\_NUMBER OF YEARS  RF -1  DK -2 | A19e <A19E> Base: A19a = packed Permanent housing program with services to help you keep your housing 1  Transitional housing program 2  Section 8/HCV voucher or PHA subsidY 3  CBRR subsidy 4  Section 8 Project 5  A shelter **<A19E\_94\_OTHER**>\_\_\_\_\_\_\_\_ 94  OTHER [SPECIFY] \_ **A19E\_95\_OTHER** 95  refused 97  don’t know 98 |
| A20a <A20A>  \_\_\_\_\_\_\_\_\_\_\_\_  RECORD PROGRAM NAME | A20b **<A20BM>**  **<A20BY>**  \_\_\_/\_\_\_\_\_  MM/YYYY  RF -1  DK -2 | A20c **<A20CM>**  **<A20CY>**  \_\_\_/\_\_\_\_\_  MM/YYYY  STILL THERE 0  RF -1  DK -2 | A20d Base: A20b or A20c = RF/DK **<A20D\_X> [X = 1-4]**  INTERVIEWER: RECORD THE NUMBER OF DAYS, WEEKS, MONTHS,  \_\_\_NUMBER OF DAYS  \_\_\_NUMBER OF WEEKS  \_\_\_NUMBER OF MONTHS  \_\_\_NUMBER OF YEARS  RF -1  DK -2 | A20e <A20E> Base: A20a = packed Permanent housing program with services to help you keep your housing 1  Transitional housing program 2  Section 8/HCV voucher or PHA subsidY 3  CBRR subsidy 4  Section 8 Project 5  A shelter] **<A20E\_94\_OTHER**>\_\_\_ 94  OTHER [SPECIFY] \_ **A19E\_95\_OTHER** 95  refused 97  don’t know 98 |

### **Module** 2: Housing Quality and Affordability (Current Unit)

Now I would like to find out who is living with you now.

BASE: ALL

1. The last time we talked, [MM/YYYY OF LAST INTERVIEW] you told us about the people that were living with you at that time. I’m going to read you the first names of each person you told me about last time and I’d like you to tell me if each of them are staying with you now?

CAPI: ASK B1a FOR EACH PERSON LIVING WITH THE R AT ANY TIME

B1a. Is [NAME1] living with you now? **<B1A\_X> [X = 1- 30]**

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

B1b. What is [NAME]’s date of birth

**<B1BM\_X>/<B1BD\_X>/<B1BY\_X> [X = 1- 30]**

ENTER DATE:  \_\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Month / Day / Year

REFUSED ❑-2

DON’T KNOW ❑-1

CAPI: IF DOB AVAILABLE: CONFIRM DOB IN B1c AND THEN SKIP TO NEXT PERSON;

IF DOB IS NOT AVAILABLE ASK B1b THEN SKIP TO NEXT PERSON;

**<B1C\_X [X = 1-30] ↓↓↓**

B1c. Our records show that [NAME]’s date of birth is [DISPLAY DOB]. Is that correct?

YES ❑1

NO ❑2 (**GO TO B1B)** REFUSED ❑7

DON’T KNOW ❑8

1. BLANK

**<B3>** BASE: ALL

1. Are there any other people that are living with you right now whom we haven’t talked about?

YES 1

NO 2 **SKIP TO B5**

REFUSED 7 **SKIP TO B5**

DON’T KNOW 8 **SKIP TO B5**

**<B3A>** BASE: B3=1

B3a. How many other people who we haven’t talked about yet, but are ***living with you right now*** are adults, 18 years old or older?

NUMBER OF ADULTS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REFUSED -2

DON’T KNOW -1

**<B3B>** BASE: B3=1

B3b. How many other people who we haven’t talked about yet, but are ***living with you right now*** are children, 17 years old or younger?

NUMBER OF CHILDREN \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REFUSED -2

DON’T KNOW -1

BASE: B3A>0 [COLLECT UP TO 5 ADULTS]

1. Please tell me the first names of the **adults** who are living with you now whom we haven’t talked about. By adults I mean people 18 years old or older. Do not include yourself.

B4a1. **<B4A\_1>**

B4a2. **<B4A\_2>**

B4a3. **<B4A\_3>**

B4a4. **<B4A\_4>**

B4a5. **<B4A\_5>**

B4a6. **<B4A\_6>**

BASE: B3B>0 [COLLECT UP TO 5 CHILDREN]

1. Please tell me the first names of the **children** who are living with you now whom we haven’t talked about. By children I mean people 17 years old or younger. ***Please do not include children 18 years old or older.*** Do not include yourself.

B5a1. **<B5A\_1>**

B5a2. **<B5A\_2>**

B5a3. **<B5A\_3>**

B5a4. **<B5A\_4>**

B5a5. **<B5A\_5>**

B5a6. **<B5A\_6>**

**<B6\_X > [X = 1- 42] ↓↓↓**

DISPLAY THE NAMES OF ADULTS FROM (B1a=YES) and B4 SERIES AND FOR CHILDREN FROM (B1A =YES) AND B5 SERIES.

1. We would like to know if you decide to move, who in your family will move with you. I am going to read you the name of the people who are currently living with you. For each person, please tell me if you think she/he would move with you. If you moved, who do you think would go with you?

|  |  |
| --- | --- |
| **MEMBERS OF THE HOUSEHOLD** | If you moved, would [DISPLAY NAME OF PERSON] move with you? |
| ADULT 1 | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| ADULT 2 | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| ADULT 3 | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| ADULT 4 | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| ADULT 5 | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| CHILD 1 | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| CHILD 2 | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| CHILD 3 | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| CHILD 4 | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| CHILD 5 | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |

**COMPUTATION OF CORE HOUSESHOLD:** FOR ALL THE MEMBERS OF THE HOUSEHOLD THAT ANSWER YES TO THE B6 QUESTIONS – THOSE ARE GOING TO BE FLAGGED AS CORE HOUSEHOLD MEMBERS. THIS WILL BE USED IN SECTION B AS WELL AS SECTION D.

For the next questions, when I ask you about the people in your family, I would like you to include those people we just talked about who ***live with you now and would move with you if you moved***.

CAPI: If respondent answered YES to A4k, A4L, A4m, A4n, or A4o SKIP TO MODULE 3/C1. OTHERWISE CONTINUE WITH B7

*I am now going to ask you about the place where you are living now.*

BASE: A4k≠1 OR A4L≠1 OR A4m≠1 OR A4n≠1 OR A4o≠1 **<B7>**

1. Not including kitchens, bathrooms and hallways, how many rooms are there in your house/apartment/ living space available for the use of your family [THE PEOPLE WE JUST TALKED ABOUT]?

**[READ LIST. ACCEPT ONE RESPONSE ONLY.]**

One ❑1

Two ❑2

Three ❑3

Four ❑4

Five ❑5

Six or more ❑6

REFUSED ❑7

DON’T KNOW ❑8

BASE: A4k≠1 OR A4L≠1 OR A4m≠1 OR A4n≠1 OR A4o≠1 **<B8>**

1. Overall, how would you describe the condition of your current house or apartment? Would you say it is in*:*

**[READ LIST. ACCEPT ONE RESPONSE ONLY.]**

Excellent Condition ❑1

Good Condition ❑2

Fair Condition ❑3

Poor Condition ❑4

REFUSED ❑7

DON’T KNOW ❑8

BASE: A4k≠1 OR A4L≠1 OR A4m≠1 OR A4n≠1 OR A4o≠1

1. Does your **current** housing have any of the following problems?

|  | **YES** | **NO** | **REF** | **DK** |
| --- | --- | --- | --- | --- |
| **<B9a>** Mildew, mold, or water damage on any wall, floor, or ceiling? | 1 | 2 | 7 | 8 |
| **<B9b>** Any floor problems such as boards, tiles, carpeting or linoleum that are missing, curled, or loose? | 1 | 2 | 7 | 8 |
| **<B9c>** Any holes or large cracks where outdoor air or rain can come in? | 1 | 2 | 7 | 8 |
| **<B9d>** Bad odors such as sewer, natural gas, etc. in your home? | 1 | 2 | 7 | 8 |
| **<B9e>** In the last three months has any bathroom floor been covered by water because of a plumbing problem? | 1 | 2 | 7 | 8 |
| **<B9f>** In the last three months has your toilet not worked for 6 hours or more? | 1 | 2 | 7 | 8 |
| **<B9g>** In the last three months has your electricity not worked for 2 hours or more? | 1 | 2 | 7 | 8 |
| **<B9h>** In cold weather, do you ever need to use your oven to heat your home? | 1 | 2 | 7 | 8 |

BASE: A4k≠1 OR A4L≠1 OR A4m≠1 OR A4n≠1 OR A4o≠1 **<B10>**

1. In the month just past, what did you and the people in your family pay [as rent/for the mortgage/ and any condo fee]? We are interested only in knowing the amount of the [rent/mortgage/condo fee] payment that you and your family paid, not any amount that may have been paid by other people who live here, other people who don't live here, or a government program.

**[FOUR DIGITS, WHOLE DOLLARS ONLY]**

CAPI: IF RESPONDENT ANSWERED “YES” TO A4a, adjust question text FOR B10 to ask about RENT/mortgage; otherwise ask about rent ONLY.

$ PER MONTH

REFUSED ❑-2

DON’T KNOW ❑-1

**<B10A>** Base: <B10> ≠ [-1,-2]

B10a. That is, $[AMOUNT FROM B10] that you and the people in your family paid last month for your [mortgage/rent]. Is that right?

YES ❑1

NO ❑2 **(REPEATB10)**

BASE: A4k≠1 OR A4L≠1 OR A4m≠1 OR A4n≠1 OR A4o≠1 **<B11>**

1. In the month just past, what was the total amount you and the people in your family paid for utilities **that were not included as part of the rent or condominium fee**? *By all utilities, I mean electricity, heat, gas, and water. We are interested only in knowing the total amount of utility payments that you and your family paid, not any amount that may have been paid by other people or a government program.*

**[FOUR DIGITS, WHOLE DOLLARS ONLY]**

UTILITIES $ PER MONTH \_\_\_\_\_

NO PAYMENT/INCLUDED IN RENT OR

IN CONDOMINIUM FEE ❑-3 (**GO TO C1)**

REFUSED ❑-2 (**GO TO C1)**

DON’T KNOW ❑-1 (**GO TO C1)**

B11a. That is $[AMOUNT FROM B11] that you and your family paid last month for all utilities. Is that right? **<B11A>** Base: <B11> ≠ [-3,-2,-1]

YES ❑1

NO ❑2 (**REPEAT B11)**

BASE: (BASE: A4k≠1 OR A4L≠1 OR A4m≠1 OR A4n≠1 OR A4o≠1) AND B11≠-3-,-2,-1 **<B12>**

1. What is the total amount of all utility payments, for a *typical* month—that is *not* a month with unusually high or low heat or air conditioning bills?

**[FOUR DIGITS, WHOLE DOLLARS ONLY]**

TYPICAL COST PER MONTH $

NO PAYMENT/INCLUDED IN RENT OR

IN CONDOMINIUM FEE ❑-3 (**GO TO C1)**

REFUSED ❑-2 (**GO TO C1)**

DON’T KNOW ❑-1 (**GO TO C1)**

**<B12A>**

B12a. I have entered $[amount from B12] as the amount you and family members who are with you here pay in a typical month for all utilities. Is this correct?

YES ❑1

NO ❑2 (**REPEAT B12)**

### Module 3: Employment Income, Self-Sufficiency, and Hardship

Now I’d like to ask a few questions about your work experience.

BASE: ALL

1. Last week, did you do any work for pay? **<C1>**

YES ❑1 **(SKIP TO C3)**

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

**<C2>** BASE: C1=[2,7,8]

1. Since [18MONTH DATE], have you done any work at all for pay? This could include any jobs you may currently have, even if you did not do any work for pay last week.

YES ❑1

NO ❑2 **(SKIP TO C12)**

REFUSED ❑7 **(SKIP TO C12)**

DON’T KNOW ❑8 **(SKIP TO C12)**

**<C3>** BASE: C1=1 OR C2=1

1. Since [18 MONTH DATE], that is in the past [NUMBER OF MONTH SINCE 18MONTH] months, how many different jobs have you had? Please include all jobs.

# of jobs

DON’T KNOW ❑-1

REFUSED ❑-2

<**C4>** BASE: C3>=1

1. Since [18 MONTH DATE], that is in the past [NUMBER OF MONTH SINCE 18MONTH] months, how many months did you work for pay at least for part of the month? Please include any months you worked for pay, even if you did not work the entire month.

# of months

DON’T KNOW ❑-1

REFUSED ❑-2

Now, I would like to ask you about your {SEE TEXT SUBSTITUTION BELOW}

**IF C1=YES AND C3>1** main job. Your main job is the one where you work the most hours.

**IF C1=YES AND C3=1** current job.

**IF C1=NO, REF, DK** most recent job.

**CAPI WILL SUBSTITUTE TEXT ACCORDINGLY THROUGHOUT C5-C7. SUBSTITUTIONS WILL BE: C1=1 AND C3 >1: main job or C1=1 AND C3=1: current job or C1=2,7,8 most recent job.**

**<C5>** BASE: C1=1 OR C2=1

1. How many hours per week do/did you usually work at your [main job/ current job/most recent job]?

IF NEEDED: By main job, I mean the one at which you usually work the most hours.

NUMBER OF HOURS ❑1-84

REFUSED ❑-2

DON’T KNOW ❑-1

Now I have a few questions about the [main job/ current job/most recent job] at which you worked last week/your most recent job. By main job I mean the one where you worked the most hours.

**<C6>** BASE: C1=1 OR C2=1

1. For your (main)/most recent job, what is the easiest way for you to report your total earnings before taxes or other deductions: hourly, weekly, monthly, annually, or on some other basis?

HOURLY ❑1

DAILY ❑2

WEEKLY ❑3

BI-WEEKLY (EVERY 2 WEEKS) ❑4

TWICE MONTHLY ❑5

MONTHLY ❑6

ANNUALLY ❑7

PER UNIT ❑8

OTHER (SPECIFY\_\_<C6\_96\_OTHER> \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) ❑95

REFUSED ❑97

DON’T KNOW ❑98

**<C7>** BASE: C1=1 OR C2=1

1. [Do/Did] you usually receive overtime pay, tips, or commissions (at this/on your main/on your most recent] job?

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

**<C8>** BASE: C1=1 OR C2=1

1. Including overtime pay, tips, and commissions), what [are/were] your usual [REFER TO PAY FREQUENCY REPORTED IN C6] (hourly/daily/weekly/biweekly/twice monthly/ monthly/annual/per unit) earnings on this job, before taxes or other deductions?

ENTER DOLLAR AMOUNT$\_\_ \_\_ ,\_\_ \_\_ \_\_\_

REFUSED ❑-2

DON’T KNOW ❑-1

**IF C6=2 CONTINUE TO C9;**

**IF C6=7 SKIPTO C10**

**IF C6=8 SKIPTO C11**

**OTHERWISE SKIP TO C12**

**<C9>** BASE: C6=2

1. How many days a week do you usually work?

NUMBER OF DAYS\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REFUSED ❑-2

DON’T KNOW ❑-1

**SKIP TO C12**

**<C10>** BASE: C6=7

1. How many weeks a year do you get paid for?

NUMBER OF WEEKS\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REFUSED ❑-2

DON’T KNOW ❑-1

**SKIP TO C12**

**<C11>** BASE: C6=8

1. For how many [UNITS] are you usually paid per week (on this job)?

NUMBER OF UNITS\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REFUSED ❑-2

DON’T KNOW ❑-1

Now I would like to ask you about different sources of income or assistance you or people in your family may receive. Your responses to these questions will not affect your family’s eligibility for housing assistance or other types of assistance. By family, I mean the people we talked about before who live with you now and who would move with you if you moved.

C12. Thinking about the last month, (that is, the last 30 days), did you, or anyone in your family who is with you now, receive any assistance or income from…

**BASE: ALL**

|  | **YES** | **NO** | **REF** | **DK** |
| --- | --- | --- | --- | --- |
| **<C12\_1\_A>** Employment income | 1 | 2 | 7 | 8 |
| **<C12\_1\_B>** Supplementary Nutrition Assistance Program  (SNAP) (PROBE: Food stamps?) | 1 | 2 | 7 | 8 |
| **<C12\_1\_C>** SSI (Supplemental Security Income)? | 1 | 2 | 7 | 8 |
| **<C12\_1\_D>** TANF (Temporary Assistance for Needy Families,  or welfare cash assistance)? [WILL INSERT LOCAL NAME OF TANF PROGRAM AND PROBE USING LOCAL NAME] | 1 | 2 | 7 | 8 |
| **<C12\_1\_E>** Unemployment Insurance/ Unemployment  Compensation? | 1 | 2 | 7 | 8 |
| **<C12\_1\_F>** Child Support? | 1 | 2 | 7 | 8 |
| **<C12\_1\_G>** WIC (Women, Infants, and Children)? | 1 | 2 | 7 | 8 |
| **<C12\_1\_H>** Social Security Disability Insurance (SSDI) | 1 | 2 | 7 | 8 |
| **<C12\_2\_1>** Social Security Survivor’s benefits? | 1 | 2 | 7 | 8 |
| **<C12\_2\_J>** Medicaid? | 1 | 2 | 7 | 8 |
| **<C12\_2\_K>** State health insurance? (e.g. INDIGENT CARE)  [WILL INSERT LOCAL NAMES OF ANY STATE HEALTH  INSURANCE OR ASSISTANCE]? | 1 | 2 | 7 | 8 |
| **<C12\_2\_L>** State Children’s Health Insurance Program (SCHIP)? | 1 | 2 | 7 | 8 |
| **<C12\_2\_M>** Child Care Assistance? | 1 | 2 | 7 | 8 |
| **<C12\_2\_N>** Alimony | 1 | 2 | 7 | 8 |
| **<C12\_2\_O>** Cash from people living with you who are not  part of your family? | 1 | 2 | 7 | 8 |
| **<C12\_2\_Q>** Cash from relatives or friends who do not live with you? | 1 | 2 | 7 | 8 |
| **<C12\_2\_R>** Other Sources of Income or Assistance | 1 | 2 | 7 | 8 |

1. BLANK

**<C13>** BASE: ALL

1. During [most recently completed calendar year 2013 or 2014] what was the total amount of cash income, before taxes or other deductions, you and all the people in your family received? Please include money from your main job, work on the side, welfare, SSI, SSDI, help from your family and friends, child support, alimony, and any other money income received by you or any other household member.

ENTER DOLLAR AMOUNT: $\_\_\_ \_\_\_\_ \_\_\_\_ , \_\_\_\_ \_\_\_\_ \_\_\_\_\_

REFUSED -❑-2 **(SKIP TO C14)**

DON’T KNOW -❑-1 **(SKIP TO C14)**

**<C13A>** BASE: C13 ≠ -2,-1

C13a. I have entered $[amount from C13] as the typical combined annual income for you and all the people in your family who live with you. Is this correct?

YES ❑-1 **(SKIP TO C19)**

NO ❑-2 **(REPEAT C13)**

**<C14>** C13=-1,-2

1. Would it amount to $10,000or more?

YES ❑1

NO ❑2 (**SKIP TO C18)**

REFUSED ❑7 (**SKIP TO C18)**

DON’T KNOW ❑8 **(SKIP TO C18)**

**<C15>** BASE: C14=1

1. Would it amount to $20,000 or more?

YES ❑1

NO ❑2 (**SKIP TO C17)**

REFUSED ❑7 (**SKIP TO C17)**

DON’T KNOW ❑8 **(SKIP TO C17)**

**<C16>** BASE: C15=1

1. Would it amount to $30,000 or more?

YES ❑1 (**SKIP TO C19)**

NO ❑2 (**SKIP TO C19)**

REFUSED ❑7 (**SKIP TO C19)**

DON’T KNOW ❑8 **(SKIP TO C19)**

**<C17>** BASE: C15= [2, 7, 8]

1. Would it amount to $15,000 or more?

YES ❑1 (**SKIP TO C19)**

NO ❑2 (**SKIP TO C19)**

REFUSED ❑7 (**SKIP TO C19)**

DON’T KNOW ❑8 **(SKIP TO C19)**

**<C18>** BASE: C14= [2, 7, 8]

1. Would it amount to $5,000 or more?

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

**<C19>** BASE: ALL

1. Workers sometimes receive a tax refund from the Earned Income Tax Credit or because they overpaid taxes in the previous year. This refund can be paid in one refund check or it can be paid in workers’ paychecks. Did you receive a tax refund check from the federal government early in [2014/2015 [INSERT CORRECT YEAR BASED ON TIMING OF INTERVIEW], between January and June or as part of your paycheck?

YES ❑1

NO **(SKIP TO C20)** ❑2

REFUSED **(SKIP TO C20 )** ❑7

DON’T KNOW **(SKIP TO C20 )** ❑8

**<C19A>** BASE: C19=1

C19a. How much was your tax refund?

Enter amount: $\_\_ \_\_ \_\_ \_\_

DON’T KNOW ❑-1

REFUSED ❑-2

**<C19B>** BASE: C19=1

C19b. Did you receive your refund in one check or as part of your paycheck?

REFUND CHECK ❑1

PAYCHECK ❑2

REFUSED ❑7

DON’T KNOW ❑8

Now I have some questions about your schooling.

**<C20> Base: All**

1. What is the highest grade or year of regular school that you have completed and gotten credit for? [DO NOT READ LIST. ACCEPT ONE RESPONSE ONLY.]

Nursery School to 6th grade or no schooling ❑1

7th to 12th grade –NO DIPLOMA ❑2

High School Graduate/HAVE DIPLOMA ❑3

High School Equivalent (GED) General Educational Development ❑4

Some College ❑5

Technical Certificate ❑6

Associates Degree ❑7

Bachelor’s Degree ❑8

Master’s Degree, Doctorate Degree, or other Professional Degree  
(for example, MD, DDS, DVM, LLB, JD) ❑9

REFUSED ❑97

DON’T KNOW ❑98

**<C21>** BASE: ALL

Do you have a high school diploma or a GED? [PROBE FOR GED VS. HIGH SCHOOL DIPLOMA; ACCEPT ONE RESPONSE ONLY.]

GED ❑1

HIGH SCHOOL DIPLOMA ❑2

NEITHER ❑4

REFUSED ❑7

DON’T KNOW ❑8

**<C22>** BASE: ALL

1. Do you have a technical certificate or vocational accreditation?

YES ❑1

NO ❑2 (**SKIP TO C24)**

REFUSED ❑7 (**SKIP TO C24)**

DON’T KNOW ❑8 (**SKIP TO C24)**

**<C23>** BASE: C22=1

1. What kind of technical certificate or vocational accreditation did you receive? Was it:

An Occupational/Vocational Certificate ❑1

(such as certified nursing assistant)

Please specify the type of certificate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

An Occupational/Vocational License ❑2

(such as electrician, plumber, nurse)

Please specify the type of license: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Associate’s Degree ❑3

Other technical certificate or vocational accreditation ❑4

Please specify the type of certificate or accreditation: **<C23\_X\_OTHER [x = 1,2]** \_\_\_\_\_\_\_\_\_\_\_\_\_BASE: C23 = 4

REFUSED ❑7

DON’T KNOW ❑8

**<C24> BASE: ALL**

1. Now I would like to ask you about any regular school or any training you may have had since [18 MONTH DATE].Have you participated in any school or training program ***that lasted at least two weeks*** that was designed to help you find a job, improve your job skills, or learn a new job?

YES ❑1

NO ❑2 **(SKIP TO C28)**

REFUSED ❑7 **(SKIP TO C28)**

DON’T KNOW ❑8 **(SKIP TO C28)**

**<C25>** BASE: C24=1

1. How many different training programs have you participated in since [18 MONTH DATE].

NUMBER OF PROGRAMS\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REFUSED ❑-2

DON’T KNOW ❑-1

**CAPI ALLOW FOR UP TO 6 TRAINING**

**<C26\_TX> [X = 1-6]**

1. What kind of schooling or training was that? Please tell me about each one. DO NOT READ LIST. ACCEPT ONE RESPONSE ONLY FOR EACH TRAINING PROGRAM. CODE TYPE OF TRAINING IN TABLE BELOW FOR EACH PROGRAM. COMPLETE AS MANY COLUMNS AS NUMBER OF TRAINING PROGRAMS REPORTED IN C25.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Training #1**  C25>=1 | **Training#2**  C25>=2 | **Training #3**  C25>=3 | **Training #4**  C25>=4 |
| REGULAR HIGH SCHOOL, DIRECTED TOWARD HS DIPLOMA | 1 | 1 | 1 | 1 |
| PREPARATION FOR A GED EXAM | 2 | 2 | 2 | 2 |
| 2-YEAR COLLEGE DIRECTED TOWARD A DEGREE | 3 | 3 | 3 | 3 |
| 4-YEAR COLLEGE DIRECTED TOWARD A DEGREE | 4 | 4 | 4 | 4 |
| GRADUATE COURSES | 5 | 5 | 5 | 5 |
| COLLEGE COURSES NOT DIRECTED TOWARD A DEGREE | 6 | 6 | 6 | 6 |
| VOCATIONAL EDUCATION OUTSIDE A COLLEGE (BUSINESS or TECHNICAL SCHOOLS, EMPLOYER OR UNION-PROVIDED TRAINING,OR MILITARY TRAINING IN VOCATIONAL BUT NOT MILITARY SKILLS | 7 | 7 | 7 | 7 |
| NON-VOCATIONAL ADULT EDUCATION NOT DIRECTED TOWARD A DEGREE (BASIC EDUCATION, LITERACY TRAINING, ENGLISH AS A  SECOND LANGUAGE | 8 | 8 | 8 | 8 |
| JOB SEARCH ASSISTANCE, JOB FINDING, ORIENTATION TO THE WORLD OF WORK | 9 | 9 | 9 | 9 |
| OTHER  (SPECIFY: **C26\_TX = 95 [X = 1-6] \_\_\_\_\_\_\_\_\_\_\_\_\_)**  **base: <C26\_TX> = 95** | 95 | 95 | 95 | 95 |
| REFUSED | 97 | 97 | 97 | 97 |
| DON’T KNOW | 98 | 98 | 98 | 98 |

**<C27>** BASE: C24=1

1. Altogether since [18 MONTH DATE], that is in the past [N] months, about how many weeks would you say you have spent in training programs that were designed to help you find a job, improve your job skills, or learn a new job?

NUMBER OF WEEKS\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REFUSED ❑-2

DON’T KNOW ❑-1

## Food Security

These next questions are about the food eaten in your household in the last 30 days and whether you were able to afford the food you need.

BASE: ALL

1. I'm going to read you two statements that people have made about their food situation. Please tell me whether the statement was OFTEN, SOMETIMES, or NEVER true for (you/you and the other members of your household) in the last 30 days.

**<C28A>**

C28a. The first statement is “We couldn't afford to eat balanced meals." Was that often, sometimes, or never true for you in the last 30 days?

OFTEN TRUE ❑1

SOMETIMES TRUE ❑2

NEVER TRUE ❑3

REFUSED ❑7

DON’T KNOW ❑8

**<C28B>** BASE: ALL

C28b. The second statement is: “The food that I bought just didn’t last, and I didn’t have money to get any more.” Was that often, sometimes, or never true for you in the last 30 days?

OFTEN TRUE ❑1

SOMETIMES TRUE ❑2

NEVER TRUE ❑3

REFUSED ❑7

DON’T KNOW ❑8

**<C29>** BASE: ALL

1. In the past 30 days, , did you or other adults in your household ever cut the size of your meals or skip meals because there wasn’t enough money for food?

YES ❑1

NO ❑2 (**SKIP TOC32)**

REFUSED ❑7 (**SKIP TO C32)**

DON’T KNOW ❑8 (**SKIP TO C32)**

**<C30>** BASE: C29=1

1. In the last 30 days, did you ever eat less than you felt you should because there wasn't enough money to buy food?

Yes ❑1

No ❑2

REFUSED ❑7

DON’T KNOW ❑8

**<C31>** BASE: C29=1

1. In the last 30 days, were you ever hungry but didn't eat because you couldn't afford enough food?

Yes ❑1

No ❑2

REFUSED ❑7

DON’T KNOW ❑8

**<C32>** BASE: ALL

1. In the last 30 days, did you or other adults in your household ever not eat for a whole day because there wasn't enough money for food?

Yes ❑1

No ❑2

REFUSED ❑7

DON’T KNOW ❑8

## Economic Stressors

Now, I would like you to think about *the past six months*, that is since [MONTH 6 MONTHS PRIOR].

**BASE: ALL**

1. How often does it happen that you do not have enough money to afford:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **NEVER** | **ONCE IN A WHILE** | **FAIRLY OFTEN** | **VERY OFTEN** | **DK** | **REF** |
| **<C33\_A>** the kind of medical care your  family should have? | 1 | 2 | 3 | 4 | 8 | 7 |
| **<C33\_B>**the kind of clothing your family should have? | 1 | 2 | 3 | 4 | 8 | 7 |
| **<C33\_C>** the leisure activities that your family wants? | 1 | 2 | 3 | 4 | 8 | 7 |
| **<C33\_D>** your rent? | 1 | 2 | 3 | 4 | 8 | 7 |

**<C34>** BASE: ALL

1. In general, how do your family's finances usually work out at the end of the month? Do you find that you usually end up with [**READ LIST]**

Some money left over ❑1

Just enough money to make ends meet ❑2

Not enough money to make ends meet ❑3

REFUSED ❑7

DON’T KNOW ❑8

### Module 4: Family Composition and Preservation

Now I’d like to ask you about the people in your family. I’ll ask you about the people we talked about earlier—those who you said are living with you now—and people who are not staying with you now.

<D1> BASE: ALL

1. **Wh**at is your marital status? Are you currently…

Single, never married ❑1

Married or living in a marriage like situation ❑2

Widowed ❑3

Separated/Divorced ❑4

REFUSED ❑7

DON’T KNOW ❑8

BASE: ALL

1. Earlier we talked about the people in your family who are living with you now and would move with you if you moved. Those people are:

CAPI: DISPLAY NAMES FROM MODULE 2:

CORE HOUSEHOLD MEMBERS.

1. BLANK

## SEPARATIONS

Now I’d like to ask you about people whom you consider to be part of your family but who are not living with you now.

**CAPI: D4 TO D10 MEMBERS THE HOUSEHOLD – WHO B1a SERIES =NO, NOT LIVING WITH R. ALLOW UP TO 10 FAMILY MEMBERS**

**CAPI: WHENEVER DECEASED IS SELECTED AS RESPONSE (D6), DISPLAY CONDOLENCE SCRIPT:** I am sorry for your loss. Do you need to take a minute before we go on? (SKIP TO NEXT PERSON)

|  | **FAMILY MEMBER 1** | **FAMILY MEMBER 2** | **FAMILY MEMBER 3** |
| --- | --- | --- | --- |
| 1. List of family members with Respondent at last interview BUT NOT WITH RESPONDENT NOW |  |  |  |
| 1. How long has it been since [NAME] lived/stayed with you?   **<D5\_X\_Y> [X = 1-4, Y = 1-20]** | \_\_\_\_\_Days  \_\_\_\_\_Weeks  \_\_\_\_\_Months  \_\_\_\_\_Years  DECEASED = -3 | \_\_\_\_\_Days  \_\_\_\_\_Weeks  \_\_\_\_\_Months  \_\_\_\_\_Years  DECEASED = -3 | \_\_\_\_\_Days  \_\_\_\_\_Weeks  \_\_\_\_\_Months  \_\_\_\_\_Years  DECEASED = -3 |
| 1. Where is [NAME] living/staying now?   **<D6A\_X> 🡪🡪**  **[X = 1-20]**  **<D6a\_95\_OTHER\_X>**  **[x = 1-20]**  **Base for <D6A\_95\_OTHER\_X > IS**  **<D6A\_X > = 95**  **<D6B\_X> 🡪🡪**  **[X = 1-20]**  **Other … 95 🡪🡪**  **<D6C\_X\_Y>🡪🡪**  **[X = 1-4; Y = 1-20]**  **<D6B\_95\_OTHER\_x> →**  **[x = 1-20]**  **Base for <D6B\_95\_OTHER\_X > IS**  **<D6B\_X > = 95** | **IF NAME is an ADULT ≥18?**  A place of his/her own 1  With friends or relatives 2  In the military 3  Incarcerated 4  Homeless 5  Other 95  (Specify\_**<D6a\_95\_OTHER\_X>)**  REF 97  DK 98  DECEASED 94  **IF NAME is a CHILD <18?**  With child’s other parent 1  With your own parents or in-laws ***in foster care arrangement*** 2  With your own parents or in-***laws not in foster care arrangement*** 3  With other relatives, ***in foster care arrangement*** 4  With other relatives, ***not in foster care arrangement*** 5  In foster care, not with relatives (NON RELATIVE FOSTER CARE) 6  🡪How long in foster care? \_\_\_\_  Other: 95  (Specify <D6B\_95\_OTHER\_X>\_\_\_\_\_\_\_\_\_  DK 98  REF 97 | **IF NAME is an ADULT ≥18?**  A place of his/her own 1  With friends or relatives 2  In the military 3  Incarcerated 4  Homeless 5  Other 95  (Specify\_**<D6a\_95\_OTHER\_X>)**\_)  REF 97  DK 98  DECEASED 94  **IF NAME is a CHILD <18?**  With child’s other parent 1  With your own parents or in-laws ***in foster care arrangement*** 2  With your own parents or in-***laws not in foster care arrangement*** 3  With other relatives, ***in foster care arrangement*** 4  With other relatives, ***not in foster care arrangement*** 5  In foster care, not with relatives (NON RELATIVE FOSTER CARE) 6  🡪How long in foster care? \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Other: \_\_\_\_\_\_\_\_\_\_\_ 957  (Specify <D6B\_95\_OTHER\_X> \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  DK 98  REF ……………………………97 | **IF NAME is an ADULT ≥18?**  A place of his/her own 1  With friends or relatives 2  In the military 3  Incarcerated 4  Homeless 5  Other 95  (Specify **D6a\_95\_OTHER\_X>)**\_\_\_\_\_\_\_\_\_\_\_  REF 97  DK 98  DECEASED 94  **IF NAME is a CHILD <18?**  With child’s other parent 1  With your own parents or in-laws ***in foster care arrangement*** 2  With your own parents or in-***laws not in foster care arrangement*** 3  With other relatives, ***in foster care arrangement*** 4  With other relatives, ***not in foster care arrangement*** 5  In foster care, not with relatives (NON RELATIVE FOSTER CARE) 6  🡪How long in foster care? \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ 95  (Specify <D6B\_95\_OTHER\_X>\_\_\_\_\_\_\_\_\_  DK 98  REF 97 |
| 1. [ASK IF [NAME]1 IS NOW 17 OR YOUNGER and FOSTER CARE REPORTED IN D6: Was the foster care placement for [NAME] arranged by [LOCAL NAME OF CHILD WELFARE PROGRAM] | YES 1  NO 2  DON’T KNOW 7  REFUSED 8  **<D7\_X> [X = 1-20]** | YES 1  NO 2  REFUSED 7  DON’T KNOW 8  **<D7\_X> [X = 1-20]** | YES 1  NO 2  REFUSED 7  DON’T KNOW 8  **<D7\_X> [X = 1-20]** |
| 1. ASK IF [NAME] IS NOW 17OR UNDER: What would you say has been the total amount of time [CHILD] has spent living apart from you? | **<D8A\_1\_X> [X = 1-20] ↓**  \_\_\_\_\_\_\_ Year(s)  **<D8A\_2\_X> [X = 1-20] ↓**  \_\_\_\_\_\_ Month(s)  **HAS NEVER LIVED WITH RESPONDENT** | **<D8A\_1\_X> [X = 1-20] ↓**  \_\_\_\_\_\_\_ Year(s)  **<D8A\_2\_X> [X = 1-20] ↓**  \_\_\_\_\_\_ Month(s)  **HAS NEVER LIVED WITH RESPONDENT** | **<D8A\_1\_X> [X = 1-20] ↓**  \_\_\_\_\_\_\_ Year(s)  **<D8A\_2\_X> [X = 1-20] ↓**  \_\_\_\_\_\_ Month(s)  **HAS NEVER LIVED WITH RESPONDENT** |
| 1. ASK IF [NAME] IS NOW 17OR YOUNGER: Does [NAME] have a disability? That could include either a physical, emotional, or mental health condition. | YES 1  NO **(SKIP TO NEXT PERSON)** 2  DON’T KNOW 7  REFUSED 8  **<D9\_X> [X = 1-20]** | YES 1  NO **(SKIP TO NEXT PERSON** 2  REFUSED 7  DON’T KNOW 8  **<D9\_X> [X = 1-20]** | YES 1  NO **(SKIP TO NEXT PERSON** 2  REFUSED 7  DON’T KNOW 8  **<D9\_X> [X = 1-20]** |
| 1. Is there anything about your housing situation that makes it difficult for [NAME] to live with you?   **<D10\_X> [X = 1-20]**  **🡪🡪** | I DON’T HAVE A PLACE OF MY OWN TO LIVE 1  I DON’T HAVE A BIG ENOUGH PLACE TO LIVE 2  MY LANDLORD WON’T LET [NAME] LIVE IN MY PLACE 3  THE PROGRAM I’M IN WON’T LET NAME] LIVE IN MY PLACE 4  THE OTHER PEOPLE I LIVE WITH WON’T LET [NAME] LIVE WITH ME 5  \*BROKENUP, NO LONGER IN A RELATIONSHIP, NO LONGER MARRIED…. 6  DON’T KNOW 7  REFUSED 8  \*OTHER (SPECIFY) ………..9 | I DON’T HAVE A PLACE OF MY OWN TO LIVE 1  I DON’T HAVE A BIG ENOUGH PLACE TO LIVE 2  MY LANDLORD WON’T LET [NAME] LIVE IN MY PLACE 3  THE PROGRAM I’M IN WON’T LET NAME] LIVE IN MY PLACE 4  THE OTHER PEOPLE I LIVE WITH WON’T LET [NAME] LIVE WITH ME 5  \*BROKENUP,NOLONGER IN A RELATIONSHIP, NO LONGER MARRIED…. 6  DON’T KNOW 7  REFUSED 8  \*OTHER(SPECIFY) ………..9 | I DON’T HAVE A PLACE OF MY OWN TO LIVE 1  I DON’T HAVE A BIG ENOUGH PLACE TO LIVE 2  MY LANDLORD WON’T LET [NAME] LIVE IN MY PLACE 3  THE PROGRAM I’M IN WON’T LET NAME] LIVE IN MY PLACE 4  THE OTHER PEOPLE I LIVE WITH WON’T LET [NAME] LIVE WITH ME 5  \*BROKEN UP, NO LONGER IN A RELATIONSHIP, NO LONGER MARRIED…. 6  DON’T KNOW 7  REFUSED 8  \*OTHER (SPECIFY) ………..9 |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

CAPI: IF NEW MEMBERS IDENTIFIED IN B4 and B5 ASK D11 –D15; ELSE SKIP TO D16. ALLOW UP TO 10 NEW MEMBERS.

Now I have some questions about the family members WHO ARE LIVING WITH YOU NOW but who were not with you the last time we talked. Let’s start with the adults.

|  | **NEW FAMILY MEMBER 1 [NAME]** | **NEW FAMILY MEMBER 2 [NAME])** | **NEW FAMILY MEMBER 3 [NAME]** | **NEW FAMILY MEMBER 4 [NAME]** |
| --- | --- | --- | --- | --- |
| 1. What is [NAME]’s relationship to you?   **<D11\_X> [X = 1-12] 🡪** | Husband or Wife 1  Lover/partner 2  child 3  Step-child 4  Foster child 5  Child of Lover/partner 6  Son- or  Daughter-in-law 7  Mother or Father 8  Step-Parent 9  Mother- or Father-in-law  or partner's parent 10  Grandparent 11  Brother or Sister 12  Brother- or Sister-in-law 13  Grandchild 14  Other Relative 15 | Husband or Wife 1  Lover/partner 2  child 3  Step-child 4  Foster child 5  Child of Lover/partner 6  Son- or  Daughter-in-law 7  Mother or Father 8  Step-Parent 9  Mother- or Father-in-law  or partner's parent 10  Grandparent 11  Brother or Sister 12  Brother- or Sister-in-law 13  Grandchild 14  Other Relative 15 | Husband or Wife 1  Lover/partner 2  child 3  Step-child 4  Foster child 5  Child of Lover/partner 6  Son- or  Daughter-in-law 7  Mother or Father 8  Step-Parent 9  Mother- or Father-in-law  or partner's parent 10  Grandparent 11  Brother or Sister 12  Brother- or Sister-in-law 13  Grandchild 14  Other Relative 15 | Husband or Wife 1  Lover/partner 2  child 3  Step-child 4  Foster child 5  Child of Lover/partner 6  Son- or  Daughter-in-law 7  Mother or Father 8  Step-Parent 9  Mother- or Father-in-law  or partner's parent 10  Grandparent 11  Brother or Sister 12  Brother- or Sister-in-law 13  Grandchild 14  Other Relative 15 |
| 1. Is [NAME] male or female?   **<D12\_X> [X = 1-12] 🡪** | MALE 1  FEMALE 2  REFUSED 7  DON’T KNOW 8 | MALE 1  FEMALE 2  REFUSED 7  DON’T KNOW 8 | MALE 1  FEMALE 2  REFUSED 7  DON’T KNOW 8 | MALE 1  FEMALE 2  REFUSED 7  DON’T KNOW 8 |
| 1. What is [NAME]’s Date of Birth?   **<D13M\_X> [X = 1-12] 🡪**  **<D13D\_X> [X = 1-12] 🡪**  **<D13Y\_X> [X = 1-12] 🡪** | \_\_\_/\_\_\_/\_\_\_\_\_  MM DD YYYY | \_\_\_/\_\_\_/\_\_\_\_\_  MM DD YYYY | \_\_\_/\_\_\_/\_\_\_\_\_  MM DD YYYY | \_\_\_/\_\_\_/\_\_\_\_\_  MM DD YYYY |
| 1. ASK IF D12 shows [NAME] is 18or OLDER. Is [NAME] currently working for pay?   **<D14\_X> [X = 1-12] 🡪** | YES 1  NO 2  REFUSED 7  DON’T KNOW 8  **<D14\_X> [X = 1-12] 🡪** | YES 1  NO 2  REFUSED 7  DON’T KNOW 8  **<D14\_X> [X = 1-12] 🡪** | YES 1  NO 2  REFUSED 7  DON’T KNOW 8  **<D14\_X> [X = 1-12] 🡪** | YES 1  NO 2  REFUSED 7  DON’T KNOW 8  **<D14\_X> [X = 1-12] 🡪** |
| **<D15\_XCY>**  **[X = 1-12; Y = 1-8] 🡪**  Please tell me if the decision to have [person] live with you was based on any of the following reasons:  [READ LIST; We can accept up to 4 responses and “no  Other mentions.]  **Base for**  **<D15\_6\_OTHER\_X> [X = 1-12]:**  **<D15\_XCY> = 6 (other)** | I have a place of my  own to live 1  have a big enough place to live 2  sUPERVISION IS AVAILABLE SO CHILD IS PERMITTED TO LIVE WITH ME 3  I have a safe enough place to live 4  The program helped me to get [child] back 5  Other: 6  **<D15\_6\_OTHER\_X> [X = 1-12]** [SPECIFY]\_\_\_\_\_\_\_\_\_\_\_\_\_  REFUSED 7  DON’T KNOW 8 | I have a place of my  own to live 1  have a big enough place to live 2  sUPERVISION IS AVAILABLE SO CHILD IS PERMITTED TO LIVE WITH ME 3  I have a safe enough place to live 4  The program helped me to get [child] back 5  Other: 6  **<D15\_6\_OTHER\_X> [X = 1-12]** [SPECIFY]\_\_\_\_\_\_\_\_\_\_\_\_\_  REFUSED 7  DON’T KNOW 8 | I have a place of my  own to live 1  have a big enough place to live 2  sUPERVISION IS AVAILABLE SO CHILD IS PERMITTED TO LIVE WITH ME 3  I have a safe enough place to live 4  The program helped me to get [child] back 5  Other: 6  **<D15\_6\_OTHER\_X> [X = 1-12]** [SPECIFY]\_\_\_\_\_\_\_\_\_\_\_\_\_  REFUSED 7  DON’T KNOW 8 | I have a place of my  own to live 1  have a big enough place to live 2  sUPERVISION IS AVAILABLE SO CHILD IS PERMITTED TO LIVE WITH ME 3  I have a safe enough place to live 4  The program helped me to get [child] back 5  Other: 6  **<D15\_6\_OTHER\_X> [X = 1-12]** [SPECIFY]\_\_\_\_\_\_\_\_\_\_\_\_\_  REFUSED 7  DON’T KNOW 8 |

CAPI: ASK ONLY OF MEMBERS FROM BASELINE (LIVING AND NOT LIVING AT SHELTER) AND B1 SERIES = YES, THEY ARE LIVING WITH RESPONDENT. ALLOW UP TO 10 FAMILY MEMBERS

Now I would like to ask you some questions about the people in your family who were living with you in [18 MONTH DATE] and who are living with you now. Ask following questions for all people on the household roster both at baseline and now:

|  | **FAMILY MEMBER 1** | **FAMILY MEMBER 2** | **FAMILY MEMBER 3** |
| --- | --- | --- | --- |
| 1. Was there ever a time in the past six months when [NAME] was not living with you? | YES 1  NO**(SKIP TO D21**) 2  REFUSED 7  DON’T KNOW 8  **<D16\_X> [X = 1-20]** | YES 1  NO**(SKIP TO D21** 2  REFUSED 7  DON’T KNOW 8  **<D16\_X> [X = 1-20]** | YES 1  NO**(SKIP TO D21** 2  REFUSED 7  DON’T KNOW 8  **<D16\_X> [X = 1-20]** |
| 1. ASK IF D16=1: How many weeks during the last six months was [NAME] not living with you? Note: 0=less than a week. | \_\_\_\_\_\_\_ Weeks  REFUSED -1  DON’T KNOW -2  **<D17\_X> [X = 1-20]** | \_\_\_\_\_\_\_ Weeks  REFUSED -1  DON’T KNOW -2  **<D17\_X> [X = 1-20]** | \_\_\_\_\_\_\_ Weeks  REFUSED -1  DON’T KNOW -2  **<D17\_X> [X = 1-20]** |
| **<D18A\_X> [X = 1-20] 🡪**  ASK IF D16=1: Please tell where the [NAME] was during those weeks?  **Base for <D18A\_95\_OTHER\_X> is <D18A\_X> = 95**  **<D18B\_X> [X = 1-20] 🡪**  **<D18C\_X\_Y>**  **[X = 1-4; Y = 1-20] 🡪**  **Base for <D18B\_95\_OTHER\_X> is <D18B\_X> = 95** | **IF NAME is an ADULT ≥18?**  A place of his/her own 1  With friends or relatives 2  In the military 3  Incarcerated 4  Homeless 5  Other……………………………95  **<D18A\_95\_OTHER\_X> [X = 1-20] ↓**  (Specify\_\_\_\_\_\_\_\_\_\_\_\_\_)  REF………………………………97  DK 98  **IF NAME is a CHILD <18?**  With child’s other parent 1  With your own parents or in-laws ***in foster care arrangement*** 2  With your own parents or in-***laws not in foster care arrangement*** 3  With other relatives, ***in foster care arrangement*** 4  With other relatives, ***not in foster care arrangement*** 5  In foster care, not with relatives (NON RELATIVE FOSTER CARE) 6  🡪How long in foster care? \_NUMBER OF DAYS  \_NUMBER OF WEEKS  \_NUMBER OF MONTHS  \_NUMBER OF YEARS \_\_\_\_\_\_\_\_\_\_  Other……………………………95  **<D18B\_95\_OTHER\_X> [X = 1-20] ↓**  (Specify\_\_\_\_\_\_\_\_\_\_\_\_\_)  REF………………………………97  DK 98 | **IF NAME is an ADULT ≥18?**  A place of his/her own 1  With friends or relatives 2  In the military 3  Incarcerated 4  Homeless 5  Other………………………95  **<D18A\_95\_OTHER\_X> [X = 1-20] ↓**  (Specify\_\_\_\_\_\_\_\_\_\_\_\_\_)  REF………………………………97  DK 98  **IF NAME is a CHILD <18?**  With child’s other parent 1  With your own parents or in-laws ***in foster care arrangement*** 2  With your own parents or in-***laws not in foster care arrangement*** 3  With other relatives, ***in foster care arrangement*** 4  With other relatives, ***not in foster care arrangement*** 5  In foster care, not with relatives (NON RELATIVE FOSTER CARE) 6  🡪How long in foster care? \_NUMBER OF DAYS  \_NUMBER OF WEEKS  \_NUMBER OF MONTHS  \_NUMBER OF YEARS \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Other……………………………95  **<D18B\_95\_OTHER\_X> [X = 1-20] ↓**  (Specify\_\_\_\_\_\_\_\_\_\_\_\_\_)  REF………………………………97  DK 98 | **IF NAME is an ADULT ≥18?**  A place of his/her own 1  With friends or relatives 2  In the military 3  Incarcerated 4  Homeless 5  Other……………………………95  **<D18A\_95\_OTHER\_X> [X = 1-20] ↓**  (Specify\_\_\_\_\_\_\_\_\_\_\_\_\_)  REF………………………………97  DK 98  **IF NAME is a CHILD <18?**  With child’s other parent 1  With your own parents or in-laws ***in foster care arrangement*** 2  With your own parents or in-***laws not in foster care arrangement*** 3  With other relatives, ***in foster care arrangement*** 4  With other relatives, ***not in foster care arrangement*** 5  In foster care, not with relatives (NON RELATIVE FOSTER CARE) 6  🡪How long in foster care? \_NUMBER OF DAYS  \_NUMBER OF WEEKS  \_NUMBER OF MONTHS  \_NUMBER OF YEARS \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Other……………………………95  **<D18B\_95\_OTHER\_X> [X = 1-20] ↓**  (Specify\_\_\_\_\_\_\_\_\_\_\_\_\_)  REF………………………………97  DK 98 |
| 1. [ASK IF NAME NOW 17OR YOUNGER and FOSTER CARE REPORTED IN D18]: Was the foster care placement for [NAME] arranged by [LOCAL NAME OF CHILD WELFARE PROGRAM] | YES 1  NO 2  DON’T KNOW 7  REFUSED 8  **<D19\_X> [X = 1-20]** | YES 1  NO 2  REFUSED 7  DON’T KNOW 8  **<D19\_X> [X = 1-20]** | YES 1  NO 2  REFUSED 7  DON’T KNOW 8  **<D19\_X> [X = 1-20]** |
| 1. Was there anything about your housing situation that makes it difficult for [NAME] to live with you?   **Base for <D20\_95\_OTHER\_X> is <D20\_X> = 95 →→→** | I didn’t have a place of my own to live 1  I didn’t have a big enough place to live 2  My landlord wouldn’t let [xx] live in my place 3  The program i’m in wouldn’t let [name] live in my place 4  The other people i live with wouldn’t let [name] live with me 5  Other……………………………95  **<D20\_95\_OTHER\_X> [X = 1-20] ↓↓**  (specify\_\_\_\_\_\_\_\_\_)  Don’t know 97  Refused 98 | I didn’t have a place of my own to live 1  I didn’t have a big enough place to live 2  My landlord wouldn’t let [xx] live in my place 3  The program i’m in wouldn’t let [name] live in my place 4  The other people i live with wouldn’t let [name] live with me 5  Other ……………………………95  **<D20\_95\_OTHER\_X> [X = 1-20] ↓↓**  (specify\_\_\_\_\_\_\_\_\_)  Don’t know 97  Refused 98 | I didn’t have a place of my own to live 1  I didn’t have a big enough place to live 2  My landlord wouldn’t let [xx] live in my place 3  The program i’m in wouldn’t let [name] live in my place 4  The other people i live with wouldn’t let [name] live with me 5  Other ……………………………95  **<D20\_95\_OTHER\_X> [X = 1-20] ↓↓**  (specify\_\_\_\_\_\_\_\_\_)  Don’t know 97  Refused 98 |

Now I would like to ask some additional questions about you and other people who were living with you since [18 MONTH DATE] who are 16 year or older.

**B1a SERIES =”PACKED” AND AGE = 16 YEARS AND OLDER. ALLOW UP TO 10 FAMILY MEMBERS**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **RESPONDENT** | **FAMILY MEMBER 2** | **FAMILY MEMBER 3** |
| 1. Was there any time in the past six months when [PERSON/YOU] [was/were] in a residential treatment program? | YES 1  NO 2  DON’T KNOW 7  REFUSED 8  **<D21\_X> [X = 0-20]** | YES 1  NO 2  DON’T KNOW 7  REFUSED 8  **<D21\_X> [X = 0-20]** | YES 1  NO 2  DON’T KNOW 7  REFUSED 8  **<D21\_X> [X = 0-20]** |
| D21a. IF D21=1 ASK: How many days/weeks/months was [NAME]/were you in treatment?  **<D21A\_X\_Y> [ X = 1-3; Y = 1-20] →→→** | \_\_\_\_\_\_\_ Day(s)  \_\_\_\_\_\_ Week(s)  \_\_\_\_\_\_ Month(s) | \_\_\_\_\_\_\_ Day(s)  \_\_\_\_\_\_ Week(s)  \_\_\_\_\_\_ Month(s) | \_\_\_\_\_\_\_ Day(s)  \_\_\_\_\_\_ Week(s)  \_\_\_\_\_\_ Month(s) |
| 1. Was there any time in the past six months when [PERSON/you] was/were in a hospital?   **<D22\_X> [X = 0-20] →→→** | YES 1  NO 2  DON’T KNOW 7  REFUSED 8 | YES 1  NO 2  DON’T KNOW 7  REFUSED 8 | YES 1  NO 2  DON’T KNOW 7  REFUSED 8 |
| D22a IF D22=1 ASK: How many days/weeks/months was [NAME]/were you in the hospital?  **<D22A\_X\_Y> [ X = 1-3; Y = 1-20] →→→** | \_\_\_\_\_\_\_ Day(s)  \_\_\_\_\_\_ Week(s)  \_\_\_\_\_\_ Month(s)  **<D22A\_X\_Y> [ X = 1-3; Y = 1-20]** | \_\_\_\_\_\_\_ Day(s)  \_\_\_\_\_\_ Week(s)  \_\_\_\_\_\_ Month(s)  **<D22A\_X\_Y> [ X = 1-3; Y = 1-20]** | \_\_\_\_\_\_\_ Day(s)  \_\_\_\_\_\_ Week(s)  \_\_\_\_\_\_ Month(s)  **<D22A\_X\_Y> [ X = 1-3; Y = 1-20]** |
| 1. Was there any time in the past six months when [NAME]/you was/were in jail or prison?   **<D23\_X> [X = 0-20] →→→** | YES 1  NO 2  DON’T KNOW 7  REFUSED 8 | YES 1  NO 2  DON’T KNOW 7  REFUSED 8 | YES 1  NO 2  DON’T KNOW 7  REFUSED 8 |
| D23a IF D23=1 ASK: How many days/weeks/months was [NAME]/were you in jail or prison? | \_\_\_\_\_\_\_ Day(s)  \_\_\_\_\_\_ Week(s)  \_\_\_\_\_\_ Month(s  **<D23A\_X\_Y> [X =-1-3;Y = 1-20]** | \_\_\_\_\_\_\_ Day(s)  \_\_\_\_\_\_ Week(s)  \_\_\_\_\_\_ Month(s)  **<D23A\_X\_Y> [X =-1-3;Y = 1-20]** | \_\_\_\_\_\_\_ Day(s)  \_\_\_\_\_\_ Week(s)  \_\_\_\_\_\_ Month(s  **<D23A\_X\_Y> [X =-1-3;Y = 1-20]** |

### Module 5: Adult Well-Being

The next few questions are about your health and refer to how you are doing now.

**<E1>** BASE: ALL

1. Overall, how would you rate your health during the past month/30 days?

Excellent ❑1

Very good ❑2

Good ❑3

Fair ❑4

Poor ❑5

REFUSED ❑7

DON’T KNOW ❑8

BASE: ALL

1. I will read a list of items to you. Please tell me how you think about yourself right now for each item. Please take a few moments to focus on yourself and what is going on in your life at this moment. Please tell me whether each item is Definitely False, Mostly False, Somewhat False, Somewhat True, Mostly True, and Definitely True for you right now.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Definitely false** | **Mostly false** | **Somewhat false** | **Somewhat true** | **Mostly true** | **Definitely true** | **REFISED** | **DON’T KNOW** |
| **<E2\_A>** If I should find myself in a jam, I could think of many ways to get out of it. | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| **<E2\_B>** At the present time, I am energetically pursuing my goals. | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| **<E2\_C>** There are lots of ways around any problem that I am facing now. | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| **<E2\_D>** Right now I see myself as being pretty successful. | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| **<E2\_E>** I can think of many ways to reach my current goals. | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| **<E2\_f>** At this time, I am meeting the goals that I have set for myself. | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |

The next questions are about how you have been feeling during the past 30 days (that is, the past month).

BASE: ALL

1. How much of the time during the past 30 days have you felt...

[Read list]

|  | **All of the time** | **Most of the time** | **Some of the time** | **A little of the time** | **None of the time** | **REF** | **DK** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| E3a. Nervous? **<E3\_1>** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| E3b. Hopeless? **<E3\_2>** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| E3c. Restless or fidgety? **<E3\_3>** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| E3d. So depressed that nothing could cheer you up? **<E3\_4>** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| E3e. That everything was an effort? **<E3\_5>** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| E3f. Worthless? **<E3\_6>** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |

## PTSD Symptoms

Below is a list of the issues that people sometimes have after experiencing a lot of stress. I would like to ask you to think about the 30 days (that is the past month).

BASE: ALL

1. I’m going to read each one and then ask you to indicate how much that issue has bothered you in the **past month**. Please tell me whether each of the following issues have bothered you: not at all, a little bit, moderately, quite a bit, or extremely.

|  | **NOT AT ALL** | **A LITTLE BIT** | **MODERATELY** | **QUITE A BIT** | **EXTREMELY** | **REF** | **DK** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| E4a. Repeated, disturbing memories, thoughts, or images of a stressful experience? **<E4\_1\_A>** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| E4b. Repeated, disturbing dreams of a stressful experience? **<E4\_1\_B>** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| E4c. Suddenly acting or feeling as if stressful experiences were happening again (as if you were reliving it)? **<E4\_1\_C>** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| E4d. Feeling very upset when something reminded you of a stressful experience? **<E4\_1\_D>** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| E4e. Having physical reactions (e.g., heart pounding, trouble breathing, or sweating) when something reminded you of a stressful experience? **<E4\_1\_E>** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| E4f. Avoid thinking about or talking about the stressful experiences or avoid having feelings related to it? **<E4\_1\_F>** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| E4g. Avoid activities or situations because they remind you of a stressful experience? **<E4\_1\_G>** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| E4h. Trouble remembering important parts of the stressful experience? **<E4\_1\_H>** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| E4i. Loss of interest in things that you used to enjoy? **<E4\_2\_I>** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| E4j. Feeling distant or cut off from other people? **<E4\_2\_J>** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| E4k. Feeling emotionally numb or being unable to have loving feelings for those close to you? **<E4\_2\_K>** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| E4l. Feeling as if your *future* will somehow be *cut short*? **<E4\_2\_L>** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| E4m. Trouble falling or staying asleep? **<E4\_2\_M>** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| E4n. Feeling *irritable* or having *angry outbursts*? **<E4\_2\_N>** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| E4o. Having difficulty concentrating? **<E4\_2\_O>** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| E4p. Being “*super alert*” or watchful on guard? **<E4\_2\_P>** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| E4q. Feeling *jumpy* or easily startled? **<E4\_2\_Q>** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |

# Now I would like to ask you some questions about alcohol and drugs. These are questions about different experiences some people may have if they use drugs or alcohol. We are asking these questions of everyone in the study. Remember that the information you provide will be kept confidential and will only be used for this study.

<**E5>** BASE: ALL

1. Do you sometimes take a drink in the morning when you first get up?

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

The next questions are about the past 6 months. That is, since [DISPLAY 6 MONTH AGO]

<**E6>** BASE: ALL

1. During the past 6 months, has a friend or family member ever told you about things you said or did while you were drinking that you could not remember?

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

<**E7>** BASE: ALL

1. During the past 6 months, have you had a feeling of guilt or remorse after drinking?

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

<**E8>** BASE: ALL

1. During the past 6 months, have you failed to do what was normally expected of you because of drinking?

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

<**E9>** BASE: ALL

1. During the past 6 months have you lost friends or boy/girlfriends because of drinking?

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

Now, I have some questions about illegal drugs. By illegal drugs, I mean things like marijuana (except when used for medicinal purposes), ecstasy, cocaine, crack, heroin, speed, uppers, downers, etc.

BASE: ALL

1. Thinking about the past 6 months that is since [MONTH 6 MONTHS PRIOR]. (READ EACH CATEGORY AND MARK RESPONSE.)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **YES** | **NO** | **REF** | **DK** |
| E10a. Have you used more than one drug at a time? **<E10\_A>** | 1 | 2 | 7 | 8 |
| E10b. Have you had “blackouts” or “flashbacks” as a result of drug use? **< E10\_B>** | 1 | 2 | 7 | 8 |
| E10c. Have your friends or relatives known or suspected that you used drugs? **< E10\_C>** | 1 | 2 | 7 | 8 |
| E10d. Have you ever lost friends because of drugs?  **< E10\_D>** | 1 | 2 | 7 | 8 |
| ***Remember, this is in the past 6 Months…*** |  |  |  |  |
| E10e. Have you ever not spent time with your family or missed work because of drug use? **< E10\_E>** | 1 | 2 | 7 | 8 |
| E10f. Have you engaged in illegal activities in order to obtain drugs? **< E10\_F>** | 1 | 2 | 7 | 8 |
| E10g. Have you ever experienced withdrawal symptoms as a result of heavy drug intake? **<E10\_G>** | 1 | 2 | 7 | 8 |
| E10h. Have you had medical problems as a result of drug use (e.g. memory loss, hepatitis, convulsions, bleeding?) **< E10\_H>** | 1 | 2 | 7 | 8 |

**<E11>** BASE: ALL

1. In the last 6 months, have you ever been physically abused or threatened with violence by a person who you were romantically involved with, such as a spouse, boy/girlfriend, or partner?

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

### Module 6: Child Well-Being and Parenting

“Now I would like to talk to you about [NAME OF CHILD].”

REVIEWER NOTE:F1-F5 were moved to front of survey for Focal Child Screening

1. *blank*
2. *blank*
3. *blank*
4. *blank*
5. *blank*

I’d like to start by discussing [CHILD]’s educational progress.

**ATTENDANCE/TIME IN SCHOOL**

BASE: FC AGE = 4 YEARS TO 20 YEARS 11 months

**<F6\_X> [X = 1-3]**

1. Is [CHILD] enrolled in [school or [IF CHILD IS LESS THAN 6YEARS OLD] child care] now? Child care can include center-based care as well as any other home day care or babysitting arrangement you may have for your child.

YES ❑1 (SKIP TO F8)

NO ❑2

IF VOLUNTEERED: HOME-SCHOOLED ❑3 (SKIP TO F8)

IF VOLUNTEERED: ON SUMMER/SCHOOL VACATION ❑4 (SKIP TO F8)

IF VOLUNTEERED: NOT IN SCHOOL OR CHILD CARE YET ❑5 (SKIP TO F8)

REFUSED ❑7 (SKIP TO F8)

DON’T KNOW ❑8 (SKIP TO F8)

BASE: F6=2

1. When was [CHILD] last enrolled in [school or [IF CHILD IS LESS THAN 6 YEARS OLD] child care]?

ENTER DATE: **\_<F7M\_X> [X = 1-3] ↓↓**\_/\_**\_<F7Y\_X> [X = 1-3]**\_\_\_↓↓↓

Month / Year

<F7\_X> [X = 1- 3] ↓↓↓↓

REFUSED ❑-1

DON’T KNOW ❑-2

NEVER IN SCHOOL/CHILD CARE ❑-3

BASE: FC AGE = 4 YEARS TO 20 YEARS

1. What is the highest grade or year of school that [CHILD] has ever completed?   
   [DO NOT READ LIST. ACCEPT ONE RESPONSE ONLY.]

**<F8> [X = 1-3]**

CURRENTLY IN ANY FORM OF CHILD CARE OR PRESCHOOL ❑1 **(SKIP TO F10)**

CURRENTLY IN FIRST YEAR OF SCHOOL……..❑2 **(SKIP TO CAPI INSTRUCTIONS BEFORE F10)**

KINDERGARTEN ………………………………………………....❑3 **(SKIP TO CAPI INSTRUCTIONS BEFORE F10)**

FIRST GRADE…………………………………………………….❑4**(SKIP TO CAPI INSTRUCTIONS BEFORE F10)**

SECOND GRADE ………………………………………………..❑5 **(SKIP TO CAPI INSTRUCTIONS BEFORE F10)**

THIRD GRADE ……………………………………………………❑6 (**SKIP TO CAPI INSTRUCTIONS BEFORE F10)**

FOURTH GRADE ………………………………………………..❑7 (**SKIP TO CAPI INSTRUCTIONS BEFORE F10)**

FIFTH GRADE …………………………………………………….❑8 (**SKIP TO CAPI INSTRUCTIONS BEFORE F10)**

SIXTH GRADE …………………………………………………...❑9 (**SKIP TO CAPI INSTRUCTIONS BEFORE F10)**

SEVENTH GRADE ……………………………………………….❑10 (**SKIP TO CAPI INSTRUCTIONS BEFORE F10)**

EIGHTH GRADE ………………………………………………….❑11 (**SKIP TO CAPI INSTRUCTIONS BEFORE F10)**

NINTH GRADE …………………………………………………..❑12 (**SKIP TO CAPI INSTRUCTIONS BEFORE F10)**

TENTH GRADE …………………………………………………..❑13 (**SKIP TO CAPI INSTRUCTIONS BEFORE F10)**

ELEVENTH GRADE ……………………………………………..❑14 **(SKIP TO CAPI INSTRUCTIONS BEFORE F10)**

TWELFTH GRADE………………………………………………❑15 **(SKIP TO F9)**

SOME COLLEGE, BUT NO DEGREE……………………❑16 **(SKIP TO F9)**

ASSOCIATES DEGREE ………………………………………❑17 **(SKIP TO F9)**

BACHELOR’S DEGREE OR HIGHER……………………❑18 **(SKIP TO F9)**

REFUSED ………………………………………………………..❑97 **SKIP TO CAPI INSTRUCTIONS BEFORE F10)**

DON’T KNOW ……………………………..❑98 **(SKIP TO CAPI INSTRUCTIONS BEFORE F10)**

BASE: F8=15-18 **<F9\_X> [X = 1-3]**

1. Did [CHILD] get a high school diploma?

YES ❑1 (**SKIP TO F10)**

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

BASE: F8=15-18AND F9=2,7,8 **<F9\_X> [X = 1-3]**

F9A. Did [CHILD] get a General Educational Development or GED

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

BASE: F8=15-18AND F9=2,7,8 **<F9\_X> [X = 1-3]**

F9B. Since [18 MONTH DATE] has [CHILD] participated in any school or training programs that lasted at least two weeks that were designed to help him/her find a job, improve his/her job skills or learn a new job?

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

IF FC AGE =4 YEAR OR OLDER, SKIP TO F12

IF FC AGE = 1 YEAR AND 6 MONTHS TO 3 YEARS 11 MONTHS, SKIP TO F10

IF FC AGE = 0 TO 1.5 YEARS, SKIP TO F18.

IF FC AGE ≥18 SKIP TO F12

BASE: ((FC AGE = 1 YEAR AND 6 MONTHS TO 3 YEARS AND 11 MONTHS) or (FC AGE = 4 YEARS TO 17 YEARS AND F8=1))

**<F10\_X> [X = 1-3]**

1. Is your child in regular child care or school at least 10 hours per week?

YES ❑1

NO ❑2 (**SKIP TO F13)**

REFUSED ❑7 (**SKIP TO F13)**

DON’T KNOW ❑8 (**SKIP TO F13)**

<**F10A\_X> [X = 1-3]** BASE: F10=1

F10a. How many different child care arrangements or schools has your child been in for at least 10 hours a week since [IF APPLICABLE: DATE OF 18MONTHINTVW ]/OR [you began participating in the study around [RA DATE]? *Please include all types of child care arrangements.*

\_\_\_\_\_\_\_\_# child care arrangements **(SKIP TO F11)**

REFUSED ❑ 7 **(SKIP TO F13)**

**IF F10a>1, THEN CYCLE THROUGH F11 through F11c UNTIL ALL ARRANGEMENTS ARE REPORTED (MAX LOOPS=3)**

DON’T KNOW ❑ 8 **(SKIP TO F13)**

<**F11\_X> [X = 1-3]** BASE: F10=1

F11. IF F10a=1: What sort of care is [NAME OF CHILD] in?

IF f10a>1: Starting with the place that [NAME OF CHILD] spend the most time, what sort of care it is?

IF f10a=2: Starting with the second place that [NAME OF CHILD] spend the most time, what sort of care it is?

IF f10a=3 : Starting with the third place that [NAME OF CHILD] spend the most time, what sort of care it is?

Family-based care in someone’s home with other children ❑1

School or Center-based care ❑2 (**SKIP TO F11c)**

Child care provided in my home ❑3

In some other arrangement (SPECIFY\_\_\_\_\_\_\_\_\_) ❑95 **←←<F11\_95\_OTHER\_X\_1> [X = 1-3]**

REFUSED ❑97

DON’T KNOW ❑98

F11b. Is the provider a relative?

<**F11B\_X> [X = 1-3]**

BASE: F10=1 AND F11≠ 2

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

BASE: F10=1 AND F11=2

F11c. Now I’d like to ask about the type of child care provider [CHILD] is in.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Is the provider [READ PROVIDER TYPE]?** | **YES** | **NO** | **REFUSED** | **DON’T KNOW** |
| F11c1. Early Head Start**? <F11C\_1\_X\_1> [X = 1-3]** | 1 | 2 | 7 | 8 |
| F11c2**.** Head Start? **<F11C\_2\_X\_1> [X = 1-3]** | 1 | 2 | 7 | 8 |
| F11c3. Other School or Center? **<F11C\_3\_X\_1> [X = 1-3]** | 1 | 2 | 7 | 8 |

BASE: FC AGE = 4 YEARS TO 20 YEARS AND (F8≠1))

1. Now I have some questions about the number of schools [CHILD] has attended since you started participating in the study that is since [18MONTH DATE].

**<F12A1\_X> [X = 1-3] ↓↓↓**

F12a. Since, [18 MONTH DATE]], how many different schools has [FOCAL CHILD’S NAME] attended?

\_\_\_\_\_\_# schools

REFUSED ❑-1

DON’T KNOW ❑-2

BASE: FC AGE = 4 YEARS TO 20 YEARS AND (F8≠1)) **<F12B1\_X> [X = 1-3] ↓↓↓**

F12b. Since [18 MONTH DATE], has [CHILD’S NAME] repeated a grade or been prevented from moving on to the next grade or level in school?

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

IF F9 or F9A=YES SKIP TO F17A

BASE: FC AGE = 4 YEARS TO 17 YEARS 11 MONTHSAND (F8≠1)) <**F12C1\_X> [X = 1-3] ↓↓↓**

F12c. Think about [CHILD’S] report card at the end of the last term. Would you describe the report card as mostly As, mostly Bs, mostly Cs; mostly Ds or mostly Fs?

Mostly As ❑1

Mostly Bs ❑2

Mostly Cs ❑3

Mostly Ds ❑4

Mostly Fs ❑5

REFUSED ❑6

DON’T KNOW ❑7

BASE: FC AGE = 1 YEAR AND 6 MONTHS TO 17 YEARS AND 11 MONTHS

1. How many days in the past month has your child missed child care/school?

\*IF F6=4, or *interview is during the summer, ask parent to remember the last month of school*]

[CAPI NOTE: PROBE: A SCHOOL MONTH TYPICALLY HAS 20-23 DAYS (M-F) values 0-24]

NUMBER OF DAYS \_\_\_\_\_\_\_\_<**F13A1\_X> [X = 1-3] ↓↓↓**

REFUSED ❑-1

DON’T KNOW ❑-2

BASE: FC AGE = 1 YEAR AND 6 MONTHS TO 17 YEARS AND 11 MONTHS **<F14\_X> [X = 1-3]**

1. During the past 6 months, has anyone from [CHILD’S] school/child care asked someone to come in and talk about problems [CHILD] was having with behavior?

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

BASE: FC AGE = 1YEAR AND 6 MONTHS TO 17 YEARS AND 11 MONTHS **<F15\_X> [X = 1-3]**

1. During the past 6 months [THAT IS SINCE MONTH SIX MONTHS PRIOR TO INTERVIEW DATE], has [CHILD] been suspended or expelled from school/child care?

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

BASE: FC AGE = 1YEAR AND 6 MONTHS TO 17 YEARS AND 11 MONTHS **<F16\_X> [X = 1-3]**

1. How much does your child like school/ child care? Would you say not at all, not very much, some, pretty much, or very much?

Not at all ❑1

Not very much ❑2

Some ❑3

Pretty much ❑4

Very much ❑5

REFUSED ❑7

DON’T KNOW ❑8

BASE: FC AGE = 1YEAR AND 6 MONTHS TO 17 YEARS AND 11 MONTHS **<F17\_X> [X = 1-3]**

1. How would you rate your child’s experiences at school/child care? Would you say that he/she has had mostly positive experiences; both positive and negative experiences; or mostly negative experiences?

Mostly positive experiences ❑1

Both positive and negative experiences ❑2

Mostly negative experiences ❑3

REFUSED ❑7

DON’T KNOW ❑8

F17A.

**CAPI: ASK FOLLOWING QUESTIONS FOR ALL FOCAL CHILDREN REGARDLESS OF AGE**

BASE: ALL FC\_A OR FC\_B OR FC\_C

1. Would you say [CHILD’S NAME]’s health in general is excellent, very good, good, fair, or poor? **<F18\_X> [X = 1-3]**

EXCELLENT ❑1

VERY GOOD ❑2

GOOD ❑3

FAIR ❑4

POOR ❑4

REFUSED ❑7

DON’T KNOW ❑8

BASE: ALL FC\_A OR FC\_B OR FC\_C **<F18A\_X> [X = 1-3]**

F18a. [Do you take [CHILD’S NAME]/IF FCAGE>=18: Does [CHILD’S NAME] go] to a particular doctor’s office, clinic, health center, hospital, or other place if he/she is sick or if you need advice about his/her health?

YES ❑1

NO ❑2 (**SKIP TO F19)**

REFUSED ❑7 (**SKIP TO F19)**

DON’T KNOW ❑8 (**SKIP TO F19)**

BASE: (ALL FC\_A OR FC\_B OR FC\_C) AND F18a=1 <**F18B\_X> [X = 1-3]**

F18b. Can you tell me where [you take [CHILD’S NAME] ]/IF FCAGE>=18: Does [CHILD’S NAME] goes]? [RECORD RESPONSE ANDCODE TO ONE OF FOLLOWING]

Private doctor/clinic ❑1

Hospital outpatient department ❑2

Community or public health clinic ❑3

Emergency Room ❑4

Drug store or pharmacy ❑5

OTHER (SPECIFY)**<F18B\_95\_OTHER\_X> [X = 1-3]**  ❑95

REFUSED ❑97

DON’T KNOW ❑98

BASE: ALL FC\_A OR FC\_B OR FC\_C <**F19\_X> [X = 1-3]**

1. During the past 12 months, did [CHILD’S NAME] receive a physical examination or well-child check-up?

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

**IF CHILD WAS BORN SINCE RANDOM ASSIGNMENT**

**BASE: SC1=1 AND FC\_STATUS=B OR C**

1. When [CHILD’S NAME] was born, how much did he/she weigh?

**<F20A1\_X> [X = 2, 3] ↓↓↓** **<F20A2\_X> [X = 2, 3] ↓↓↓**

\_\_\_\_\_# pounds \_\_\_\_\_\_# oz

REFUSED ❑-1

DON’T KNOW ❑-2

**<F20A\_X> [X = 2, 3]** BASE: F20=-2

F20a. [IF F20 = DK] Do you remember if [CHILD’S NAME] was underweight or about the right weight?

Underweight ❑1

About the right weight ❑2

REFUSED ❑7

DON’T KNOW ❑8

**CAPI: IF CHILD<3 YEARS OF AGE SKIP TO F26. IF CHILD ≥4 YEARS OF AGE SKIP TO F22**

**BEHAVIOR PROBLEMS—ASK F21 for 3-YEAR Olds; F22 for CHILDREN AGE 4-10; and F23 for CHILDREN AGE 11-17 YEARS 11 MONTHS.**

BASE: FC AGE = 3 YEAR TO 3 YEARS AND 11 MONTHS

1. For each item please tell me whether it is Not True, Somewhat True, or Certainly True. Please answer each item as best you can, even if you are not absolutely certain. Please give your answer based on the child’s behavior over the last six months.

|  | **NOT TRUE** | **SOMEWHAT TRUE** | **CERTAINLY TRUE** | **REF** | **DK** |
| --- | --- | --- | --- | --- | --- |
| a. Considerate of other people’s feelings **<F21\_1\_A\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| b. Restless, overactive, cannot stay still for long **<F21\_1\_B\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| c. Often complains of headaches, stomach-aches, or sickness  **<F21\_1\_C\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| d. Shares readily with other children, for example toys, treats, pencils **<F21\_1\_D\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| e. Often loses temper  **<F21\_1\_E\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| f. Rather solitary, prefers to play alone **<F21\_1\_F\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| g. Generally well behaved, usually does what adults request  **<F21\_1\_G\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| h. Many worries or often seems worried **<F21\_1\_H\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| i. Helpful if someone is hurt, upset or feeling ill **<F21\_1\_I\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| j. Constantly fidgeting or squirming **<F21\_1\_J\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| k. Has at least one good friend **<F21\_1\_K\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| l. Often fights with other children or bullies them **<F21\_1\_L\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| m. Often unhappy, depressed or tearful **<F21\_2\_M\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| n. Generally liked by other children **<F21\_2\_N\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| o. Easily distracted, concentration wanders**<F21\_2\_O\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| p. Nervous or clingy in new situations, easily loses confidence  **<F21\_2\_P\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| q. Kind to younger children **<F21\_2\_Q\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| r. Often argumentative with adults **<F21\_2\_R\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| s. Picked on or bullied by other children **<F21\_2\_S\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| t. Often offers to help others (parents, teachers, other children)  **<F21\_2\_T\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| u. Can stop and think things out before acting **<F21\_2\_U\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| v. Can be spiteful to others **<F21\_2\_V\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| w. Gets along better with adults than with other children  **<F21\_2\_W\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| x. Many fears, easily scared **<F21\_2\_X\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| y. Good attention span, sees tasks through to the end  **<F21\_2\_Y\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |

BASE: FC AGE = 4 YEARS to 10 YEARS AND 11 MONTHS

1. For each item please tell me whether it is Not True, Somewhat True, or Certainly True. Please answer each item as best you can, even if you are not absolutely certain. Please give your answer based on the child’s behavior over the last six months.

|  | **NOT TRUE** | **SOMEWHAT TRUE** | **CERTAINLY TRUE** | **REF** | **DK** |
| --- | --- | --- | --- | --- | --- |
| a. Considerate of other people’s feelings **<F22\_1\_A\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| b. Restless, overactive, cannot stay still for long **<F22\_1\_B\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| c. Often complains of headaches, stomach-aches, or sickness **<F22\_1\_C\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| d. Shares readily with other children, for example toys, treats, pencils **<F22\_1\_D\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| e. Often loses temper  **<F22\_1\_E\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| f. Rather solitary, prefers to play alone **<F22\_1\_F\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| g. Generally well behaved, usually does what adults request  **<F22\_1\_G\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| h. Many worries or often seems worried **<F22\_1\_H\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| i. Helpful if someone is hurt, upset or feeling ill **<F22\_1\_I\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| j. Constantly fidgeting or squirming **<F22\_1\_J\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| k. Has at least one good friend **<F22\_1\_K\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| l. Often fights with other children or bullies them **<F22\_1\_L\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| m. Often unhappy, depressed or tearful**<F22\_2\_M\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| n. Generally liked by other children **<F22\_2\_N\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| o. Easily distracted, concentration wanders **<F22\_2\_O\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| p. Nervous or clingy in new situations, easily loses confidence **<F22\_2\_P\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| q. Kind to younger children **<F22\_2\_Q\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| r. Often lies or cheats  **<F22\_2\_R\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| s. Picked on or bullied by other children **<F22\_2\_S\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| t. Often offers to help others (parents, teachers, other children)  **<F22\_2\_T\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| u. Thinks things out before acting **<F22\_2\_U\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| v. Steals from home, school or elsewhere **<F22\_2\_V\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| w. Gets along better with adults than with other children  **<F22\_2\_V\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| x. Many fears, easily scared **<F22\_2\_X\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| y. Good attention span, sees work through to the end  **<F22\_2\_Y\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |

BASE: FC AGE = 11 YEARS to 17 YEARS AND 11 MONTHS

1. For each item please tell me whether it is Not True, Somewhat True, or Certainly True. Please answer each item as best you can, even if you are not absolutely certain. Please give your answer based on the child’s behavior over the last six months.

|  | **NOT TRUE** | **SOMEWHAT TRUE** | **CERTAINLY TRUE** | **REF** | **DK** |
| --- | --- | --- | --- | --- | --- |
| a. Considerate of other people’s feelings **<F23\_1\_A\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| b. Restless, overactive, cannot stay still for long **<F23\_1\_B\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| c. Often complains of headaches, stomach-aches, or sickness **<F23\_1\_C\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| d. Shares readily with other youth, for example books, games, food **<F23\_1\_D\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| e. Often loses temper  **<F23\_1\_E\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| f. Would rather be alone than with other youth **<F23\_1\_F\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| g. Generally well behaved, usually does what adults request  **<F23\_1\_G\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| h. Many worries or often seems worried **<F23\_1\_H\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| i. Helpful if someone is hurt, upset or feeling ill **<F23\_1\_I\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| j. Constantly fidgeting or squirming **<F23\_1\_J\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| k. Has at least one good friend **<F23\_1\_K\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| l. Often fights with other youth or bullies them **<F23\_1\_L\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| m. Often unhappy, depressed or tearful **<F23\_2\_M\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| n. Generally liked by other youth **<F23\_2\_N\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| o. Easily distracted, concentration wanders **<F23\_2\_O\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| p. Nervous in new situations, easily loses confidence **<F23\_2\_P\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| q. Kind to younger children **<F23\_2\_Q\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| r. Often lies or cheats  **<F23\_2\_R\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| s. Picked on or bullied by other youth **<F23\_2\_S\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| t. Often offers to help others (parents, teachers, other children)  **<F23\_2\_T\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| u. Thinks things out before acting **<F23\_2\_U\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| v. Steals from home, school or elsewhere **<F23\_2\_V\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| w. Gets along better with adults than with other children **<F23\_2\_W\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| x. Many fears, easily scared **<F23\_2\_X\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |
| y. Good attention span, sees work through to the end **<F23\_2\_Y\_X> [X = 1-3]** | 1 | 2 | 3 | 7 | 8 |

BASE: FC AGE = 12 YEARS to 17 YEARS AND 11 MONTHS AND D22=BLANK **<F24\_X> [X = 1-3]**

1. In the past six months, has [CHILD’S NAME] been arrested?

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

BASE: FC AGE = 12 YEARS to 17 YEARS AND 11 MONTHS AND D22=BLANK **<F25\_X> [X = 1-3]**

1. In the past six months, has [CHILD’S NAME] had any problems that involved the police contacting the parent?

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

BASE: FC AGE = 18 YEARS to 20 YEARS AND 11 MONTHS

*The next set of questions are about [NAME] and his/her experiences now that he/she is a young adult including things like starting their own household, college or vocational training and employment..*

BASE: FC AGE = 18 YEARS to 20 YEARS AND 11 MONTHS

F25a. Has [NAME] ever been married? (SOURCE: NLSY 97 Parent Questionnaire)

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

BASE: FC AGE = 18 YEARS to 20 YEARS AND 11 MONTHS

F25b. Does [NAME] have any biological children of his/her own? (SOURCE: NLSY 97 Parent Questionnaire)

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

BASE: FC AGE = 18 YEARS to 20 YEARS AND 11 MONTHS

F25c. Last month did [CHILD’S NAME] do any work for pay? (SOURCE: CPS-Modified

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

F25d. During the last month, how many hours  did [CHILD] usually work each WEEK?  ? (SOURCE: 2013 American Community Survey)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_HOURS

REFUSED ❑-2

DON’T KNOW ❑-1

**ROUTINES & SLEEP**

BASE: ALL FC\_A OR FC\_B or FC\_C

1. Now I have some questions about your daily activities with [CHILD]. I will read a list of items. Please tell me if you and your child do each one Almost always; Most days; Sometimes; Rarely; or Almost Never.

| **Would you say that [READ ITEM}…** | **Almost Always** | **Most Days** | **Sometimes** | **Rarely** | **Almost Never** | **REF** | **DK** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| F26a. We eat together as a family once a day  **<F26\_1\_A\_X> [X = 1-3]** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| F26b. I set aside time for talking with [CHILD] each day **<F26\_1\_B\_X> [X = 1-3]** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| F26c. [CHILD] goes to bed at a regular time  **<F26\_1\_C\_X> [X = 1-3]** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| **ASK F26d IF CHILD IS UNDER 13 YEARS OLD; ELSE SKIP TO F26e** |  |  |  |  |  |  |  |
| F26d. We have an evening bedtime routine with [CHILD} **<F26\_1\_D\_X> [X = 1-3]** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| **ASK F26e IF [CHILD] age 13 OR OLDER; ELSE SKIP TO F26f** |  |  |  |  |  |  |  |
| F26e. [CHILD] has an evening bedtime routine  **<F26\_1\_E\_X> [X = 1-3]** | 1 | 2 | 3 | 4 | 5 | 7 | si8 |
| **Ask F26f-F26h if [CHILD] IS AGE 6 OR OLDER; ELSE SKIP TO F26i** |  |  |  |  |  |  |  |
| F26f. [CHILD] has a regular after school routine  **<F26\_2\_F\_X> [X = 1-3]** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| F26g. [CHILD] does his/her homework at the same time every day.  **<F26\_2\_G\_X> [X = 1-3]** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| F26h. Children in my house do regular household chores **<F26\_2\_H\_X> [X = 1-3]** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| **ASK F26i IF CHILD IS BETWEEN 2 AND 7 YEARS OLD ELSE SKIP TO F26j** |  |  |  |  |  |  |  |
| F26i. [CHILD]has difficulty waking up in the morning  **<F26\_2\_I\_X> [X = 1-3]** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| **ASK F26j. if [CHILD] IS AGE 8 TO 17 YEARS AND 11 MONTHS ELSE SKIP TO F26k** |  |  |  |  |  |  |  |
| F26j. [CHILD] has difficulty waking up on school days  **<F26\_2\_J\_X> [X = 1-3]** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| **ASK F26k. for ALL CHILDREN** |  |  |  |  |  |  |  |
| F26k. [CHILD] is tired during the day **<F26\_2\_K\_X> [X = 1-3]** | 1 | 2 | 3 | 4 | 5 | 7 | 8 |

BASE: FC AGE = 1 YEARS to 17 YEARS AND 11 MONTHS

1. Now I am going to read some statements about raising children. I would like you to tell me how true each statement is for you—very true, mostly true, sort of true, or not at all true? Would you say [READ ITEM] is…?

|  | ***Is [READ ITEM]…*** | | | | | |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Very True** | **Mostly True** | **Sort of True** | **Not at all true** | **REF** | **DK** |
| F27a. My [child seems/ children seem] to be much harder to care for than most.  **< F27\_1\_X > [X = 1-3]** | 1 | 2 | 3 | 4 | 7 | 8 |
| F27b. There are some things [my child does/ my children do] that really bother me a lot. **< F27\_2\_X > [X = 1-3]** | 1 | 2 | 3 | 4 | 7 | 8 |
| F27c. I often feel angry with my [child/children]  **< F27\_3\_X > [X = 1-3]** | 1 | 2 | 3 | 4 | 7 | 8 |
| F27d. Sometimes I lose patience with [my child’s/my children’s] demands and questions, and I just don’t listen to him/her/them anymore **< F27\_4\_X > [X = 1-3]** | 1 | 2 | 3 | 4 | 7 | 8 |

BASE: FC AGE = 1 YEARS to 17 YEARS AND 11 MONTHS **< F28\_X> [X = 1-3]**

1. How much trouble [has your child/have your children] been to raise? Would you say no trouble, a little bit of trouble, some trouble, quite a bit of trouble, or a great deal of trouble?

No trouble ❑1

A little bit of trouble ❑2

Some trouble ❑3

Quite a bit of trouble ❑4

A great deal of trouble ❑5

REFUSED ❑7

DON’T KNOW ❑8

BASE: ALL FC\_A OR FC\_B OR FC\_C

1. Sometimes parents feel that there are barriers or challenges that are keeping them from being good parents. Can you tell me if you agree strongly, agree, disagree, or disagree strongly that the following challenges affect your relationship with [NAME OF CHILD]:

|  | **Agree Strongly** | **Agree** | **Disagree** | **Disagree Strongly** | **REF** | **DK** |
| --- | --- | --- | --- | --- | --- | --- |
| F29a. other people make the rules for [NAME OF CHILD] –for example, when he has to go to bed, what to do when he misbehaves.  **< F29\_A\_X > [X = 1-3]** | 1 | 2 | 3 | 4 | 7 | 8 |
| F29b. People made fun of [NAME OF CHILD] because we didn’t [don’t] have a place to live.  **< F29\_B\_X > [X = 1-3]** | 1 | 2 | 3 | 4 | 7 | 8 |
| F29c. it’s not always possible for [NAME OF CHILD] to live with me. **< F29\_C\_X > [X = 1-3]** | 1 | 2 | 3 | 4 | 7 | 8 |
| F29d. There are bad influences on CHILD from other people who live around here.  **< F29\_D\_X > [X = 1-3]** | 1 | 2 | 3 | 4 | 7 | 8 |

BASE: ALL FC\_A OR FC\_B OR FC\_C **< F30\_X > [X = 1-3]**

1. About how many books do you have in the place you are living now?

0-9 BOOKS ❑1

10-20 BOOKS ❑2

MORE THAN 20 BOOKS ❑3

REFUSED ❑7

DON’T KNOW ❑8

BASE: ALL FC\_A OR FC\_B OR FC\_C **< F31\_X > [X = 1-3]**

1. Do you have a computer with internet access in in the place you are living now?

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

BASE: ALL FC\_A OR FC\_B OR FC\_C **< F32\_X > [X = 1-3]**

1. Does [CHILD] have any books that are completely his/her own?

YES ❑1

NO ❑2(**SKIP TO F36)**

REFUSED ❑7(**SKIP TO F36)**

DON’T KNOW ❑8(**SKIP TO F36)**

BASE:F32=1

F32a. About how many? **< F32A\_X > [X = 1-3]**

1 BOOK ❑1

2 BOOKS ❑2

3 OR MORE BOOKS ❑3

REFUSED ❑7

DON’T KNOW ❑8

1. *blank*
2. *blank*
3. *blank*

BASE: FC AGE = 12 MONTH TO 2 YEARS AND 11 years

1. Do you ever get a chance to read to [CHILD]?

< **F36\_X > [X = 1-3]**

YES ❑1

NO ❑2 **(SKIP TO F38)**

REFUSED ❑7 **(SKIP TO F38)**

DON’T KNOW ❑8 **(SKIP TO F38)**

F36a. About how many times a week do you get to do this?

**< F36A\_X > [X = 1-3]**

BASE= F36=1

Every day or almost every day ❑1

A few times a week ❑2

A few times in the last 2 weeks ❑3

Never or almost never ❑4

REFUSED ❑7

DON’T KNOW ❑8

1. BLANK
2. Now I’d like to talk to you about some of the toys you’ve gotten for [CHILD]. I’m going to ask you whether or not [CHILD] has different kinds of toys in the home now. :If observed, answer Yes; For Items NOT observable, Ask Respondent:

BASE: FC AGE = 12 MONTH TO 3 YEARS

|  | **Yes** | **No** | **REF** | **DK** |
| --- | --- | --- | --- | --- |
| F38a. Does [CHILD] have any toys that help him/her develop their strength, like a rocking horse, a crib gym, a ball? **<F38\_A\_X> [X = 1-3]** | 1 | 2 | 7 | 8 |
| F38b. Does [CHILD] have any toys that he/she can push around, like a toy vacuum cleaner or lawnmower? **<F38\_B\_X> [X = 1-3]** | 1 | 2 | 7 | 8 |
| F38c. Does [CHILD] have any toys that he/she can cuddle or pretend with like stuffed animals, dolls, action figures, or costumes?  **<F38\_C\_X> [X = 1-3]** | 1 | 2 | 7 | 8 |
| F38d. Does [CHILD] have any items that give them a safe place to play? For instance, does he/she have a high chair, a mobile or a playpen where he/she can play? **<F38\_D\_X> [X = 1-3]** | 1 | 2 | 7 | 8 |
| F38e. Does [CHILD] have any toys that he/she builds or puts together like blocks? (Anything that encourages hand-eye coordination or fine motor movements) **<F38\_E\_X> [X = 1-3]** | 1 | 2 | 7 | 8 |
| F38f. Does [CHILD] have any toys that he/she uses for reading or stories such as books or tapes/CD’s with stories to listen to? **<F38\_F\_X> [X = 1-3]** | 1 | 2 | 7 | 8 |
| F38g. Does [CHILD] have any toys that play music or teach music? **<F38\_G\_X> [X = 1-3]** | 1 | 2 | 7 | 8 |
| F38h. Does [CHILD] have toys or books that teach nursery rhymes, songs, prayers or poems? **<F38\_H\_X> [X = 1-3]** | 1 | 2 | 7 | 8 |
| F38i. Does [CHILD] have toys that he/she uses to make arts and crafts, like clay, finger paints, play dough, crayons, or paint? **<F38\_I\_X> [X = 1-3]** | 1 | 2 | 7 | 8 |
| F38j. Does [CHILD] have any toys with small pieces that he/she can take apart and put back together such as Lego’s, dolls with clothing, or does he/she ever use scissors to make arts and crafts? **<F38\_J\_X> [X = 1-3]** | 1 | 2 | 7 | 8 |

1. Now I’d like to talk to you about some of the toys you’ve gotten for [CHILD or CHILDREN IN AGE GROUP]. I’m going to ask you whether or not [CHILD] has different kinds of toys in the home now.

BASE: FC AGE = 3 YEARS TO 7 YEARS 11 MONTHS

|  | **Yes** | **No** | **DK** |
| --- | --- | --- | --- |
| F39a. Does [CHILD] have any toy instruments or any real instruments? **<F39\_A\_X> [X = 1-3]** | 1 | 2 | 8 |
| F39b. Does [CHILD] have any toys that teach colors? **<F39\_B\_X> [X = 1-3]** | 1 | 2 | 8 |
| F39c. Does [CHILD] have any toys that teach sizes? **<F39\_C\_X> [X = 1-3]** | 1 | 2 | 8 |
| F39d. Does [CHILD] have any toys that teach shapes? **<F39\_D\_X> [X = 1-3]** | 1 | 2 | 8 |
| F39e. Does [CHILD] have any toys that teach numbers? **<F39\_E\_X> [X = 1-3]** | 1 | 2 | 8 |
| F39f. Does [CHILD] have any toys that teach him/her the names of animals or the sounds and behaviors of animals? **<F39\_F\_X> [X = 1-3]** | 1 | 2 | 8 |
| F39g. Does [CHILD] have three or more puzzles? About how many? \*\*INDICATE YES IF 3 OR MORE **<F39\_G\_X> [X = 1-3]** | 1 | 2 | 8 |
| F39h. Does [CHILD] have toys or books that teach nursery rhymes, songs, prayers or poems? **<F39\_H\_X> [X = 1-3]** | 1 | 2 | 8 |
| F39i. Does [CHILD] have toys that he/she uses to make arts and crafts, like clay, finger paints, play dough, crayons, or paint? **<F39\_I\_X> [X = 1-3]** | 1 | 2 | 8 |
| F39j. Does [CHILD] have any toys with small pieces that he/she can take apart and put back together such as Legos, dolls with clothing, or does he/she ever use scissors to make arts and crafts? **<F39\_J\_X> [X = 1-3]** | 1 | 2 | 8 |
| F39k. Does [CHILD] have any access to any toys or books that teach him/her the alphabet? **<F39\_K\_X> [X = 1-3]** | 1 | 2 | 8 |

BASE: FC AGE = 3 YEARS TO 7 YEARS 11 MONTHS

1. Do you ever get a chance to read to [CHILD]?

<**F40\_X> [X = 1-3]**

YES ❑1

NO ❑2 **(SKIP TO F48)**

REFUSED ❑7 **(SKIP TO F48)**

DON’T KNOW ❑8 **(SKIP TO F48)**

BASE: F40=1

F40a. About how many times a week do you get to do this?

**<F40A\_X> [X = 1-3]**

Every day or almost every day ❑1

A few times a week ❑2

A few times in the last 2 weeks ❑3

Never or almost never ❑4

REFUSED ❑7

DON’T KNOW ❑8

BASE: FC AGE = 8 YEARS TO 17 YEARS AND 11 MONTHS

<**F41\_X> [X = 1-3]**

1. Getting homework done is usually a big hassle in most families.

How many times do you usually help [CHILD] with his/her homework in a 2 week period?

INTERVIEWER: IF RESPONDENT SAYS ANYTHING LESS THAN ONCE IN A TWO WEEK PERIOD CODE RESPONSE AS NEVER OR ALMOST NEVER.

EVERY DAY OR ALMOST EVERY DAY ❑1

A FEW TIMES A WEEK ❑2

ONCE OR TWICE IN 2 WEEK PERIOD ❑3

NEVER OR ALMOST NEVER ❑4

REFUSED ❑7

DON’T KNOW ❑8

BASE: FC AGE = 8 YEARS TO 17 YEARS AND 11 MONTHS

**<F42\_X> [X = 1-3]**

1. Kids can be pretty sneaky about their homework—they might pretend they don’t have any when they have a lot, or might say they’re finished after they have only looked at it for 10 minutes or so. Do you have rules about when or where [CHILD] does homework?

YES ❑1

NO ❑2 SKIP TO F42b

REFUSED ❑7 SKIP TO F42b

DON’T KNOW ❑8 SKIP TO F42b

**<F42A\_X> [X = 1-3]** BASE: F42 = 1

F42a. Are you able to stick to your rules about homework most of the time?:

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

BASE: FC AGE = 8 YEARS TO 17 YEARS 11 MONTHS

**<F42B\_X> [X = 1-3]**

F42b. Do you regularly check to make sure [CHILD]’s homework is completed?

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

BASE: FC AGE = 8 YEARS TO 17 YEARS 11 MONTHS

**<F43\_X> [X = 1-3]**

1. Do you and [CHILD] ever talk about how your days went?

YES ❑1

NO ❑2 **(SKIP TO F44)**

REFUSED ❑7 **(SKIP TO F44)**

DON’T KNOW ❑8 **(SKIP TO F44)**

**<F43A\_X> [X = 1-3]** BASE: F43=1

F43a. How often do you speak with [CHILD] about his/her day?

Every day or almost every day ❑1

A few times a week ❑2

A few times in the last 2 weeks ❑3

Never or almost never ❑4

REFUSED ❑7

DON’T KNOW ❑8

BASE: FC AGE = 8 YEARS TO 17 YEARS 11 MONTHS

**<F44\_X> [X = 1-3]**

1. Do you and [CHILD] ever sit and watch TV shows together?

YES ❑1

NO ❑2 **(SKIP TO F45)**

REFUSED ❑7 **(SKIP TO F45)**

DON’T KNOW ❑8 **(SKIP TO F45)**

**<F44\_X> [X = 1-3]** BASE: F44=1

F44b. Do you talk about the programs after they’re over?

YES ❑1

NO ❑2 **(SKIP TO F45)**

REFUSED ❑7 **(SKIP TO F45)**

DON’T KNOW ❑8 **(SKIP TO F45)**

**<F44C\_X> [X = 1-3]** BASE: F44b=1

F44c. How many times have you discussed a TV program with [CHILD] in the last 2 weeks?

Every day or almost every day ❑1

A few times a week ❑2

Once or twice in the last 2 weeks ❑3

Never or almost never ❑4

REFUSED ❑7

DON’T KNOW ❑8

BASE: FC AGE = 8 YEARS TO 17 YEARS 11 MONTHS

**<F45\_X> [X = 1-3]**

1. Is [CHILD] at all interested in current events?

YES ❑1

NO ❑2 **(SKIP TO F46)**

REFUSED ❑7 **(SKIP TO F46)**

DON’T KNOW ❑8 **(SKIP TO F46)**

**<F45A\_X> [X = 1-3]** BASE: F45=1

F45a. Does s/he ever watch the news with you?

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

**<F45B\_X> [X = 1-3]** BASE: F45=1

F45b. Have you tried to discuss anything out of the paper or from a newscast with him/her?

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

**<F45C\_X> [X = 1-3]** BASE: F45=1

F45c. How many times have you tried to have those types of conversations in the past 2 weeks?

Every day or almost every day ❑1

A few times a week ❑2

Once or twice in the last 2 weeks ❑3

Never or almost never ❑4

REFUSED ❑7

DON’T KNOW ❑8

BASE: FC AGE = 8 YEARS TO 17 YEARS 11 MONTHS

**<F46\_X> [X = 1-3]**

1. Does [CHILD] have a dictionary at home?

YES ❑1 **(SKIP TO F48)**

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

**<F46A\_X> [X = 1-3]** BASE: F46=2, 7, 8

1. BLANK

**F46a**. Does child have access to dictionary software or websites

for finding words?

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

**CAPI: F47 SERIES OF QUESTIONS ARE COMPLETED ON PAPER. (AGES AND STAGES QUESTIONNAIRE) IS ASKED OF CHILDREN BETWEEN 12 AND 66 MONTHS OF AGE.**

**IF FOCAL CHILD IS 42 MONTHS (3 YEARS 6 MONTHS to 66 months complete AGES and STAGES then SKIP to F48.) IF FOCAL CHILD IS 67 MONTHS OR OLDER SKIP TO F48.**

**THERE ARE MULTIPLE MODULES FOR THE AGES AND STAGES, DEPENDING ON THE AGE OF THE CHILD. USE AGE CALCULATOR TO DETERMINE WHICH AGES AND STAGES MODULE TO COLLECT.**

1. BLANK

**BASE: FC= A OR C ↓↓↓**

**CAPI: F48 IS ASKED ONLY ONCE PER HOUSEHOLD.**

**F48.**

These are some statements about where you live. Please answer which statements are True and which ones are False. For some statements you may feel that they are True some of the time but not always. Determine whether the statement is True or False the majority of the time, and answer accordingly.

**For example, with the following:**

**We eat takeout food where we live. Nearly all families do this some of the time. You should check True if this happens more than half the time or False if it happens less than half of the time.**

**Do you have any questions?**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **True** | **False** | **REF** | **DK** |
| F48a. There is very little commotion where we live. **<F48\_A>** | 1 | 2 | 7 | 8 |
| F48b. We can usually find things when we need them. **<F48\_B>** | 1 | 2 | 7 | 8 |
| F48c. We almost always seem to be rushed. **<F48\_C>** | 1 | 2 | 7 | 8 |
| F48d. We are usually able to “stay on top of things.” **<F48\_D>** | 1 | 2 | 7 | 8 |
| F48e. No matter how hard we try, we always seem to be running late **<F48\_E>** | 1 | 2 | 7 | 8 |
| F48f. It’s a real “zoo” in where we live. **<F48\_F>** | 1 | 2 | 7 | 8 |
| F48g. At home we can talk to each other without being interrupted. **<F48\_G>** | 1 | 2 | 7 | 8 |
| F48h. There is often a fuss going on where we live. **<F48\_H>** | 1 | 2 | 7 | 8 |
| F48i. No matter what our family/household plans, it usually doesn’t seem to work out. **<F48\_I>** | 1 | 2 | 7 | 8 |
| F48j. You can’t hear yourself think where we live. **<F48\_J>** | 1 | 2 | 7 | 8 |
| F48k. I often get drawn into other people’s arguments where I live. **<F48\_K>** | 1 | 2 | 7 | 8 |
| F48l. Where we live is a good place to relax. **<F48\_L>** | 1 | 2 | 7 | 8 |
| F48m. The telephone takes up a lot of our time where we live. **<F48\_M>** | 1 | 2 | 7 | 8 |
| F48n. The atmosphere where we live is calm. **<F48\_N>** | 1 | 2 | 7 | 8 |

### Module 7: Receipt of Services

BASE: ALL

*The following questions are about services you have received since* [MONTH AND YEAR OF RANDOM ASSIGNMENT]. We are interested in services you may have received from an agency or through a program you participated in. Please do not include any services or assistance you received from friends or family.

I am going to read through a list of services that you may have received since [MONTH AND YEAR OF RANDOM ASSIGNMENT]. For each type of service, please indicate whether you received the service or not.

**Adapted from Program Data Collection Guide for Family Options Study**

| ***Service*** | **a) Did you receive the service?** |
| --- | --- |
| **Services for Adults/Parents** |  |
| **Ask G1-G4 only if RARESULT=CBRR or PBTH; ELSE SKIP TO G5 interventions.** | |
| 1. Assistance obtaining rent subsidy   BASE:RA\_RESULTS= CBRR OR PBTH **<G1>** | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. Assistance locating housing, negotiation with landlord   BASE:RA\_RESULTS= CBRR OR PBTH **<G2>** | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. Assistance with moving (expenses, furnishings, etc.); Help to settle in   BASE:RA\_RESULTS= CBRR OR PBTH **<G3>** | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. Assistance dealing with relationships with landlord and other tenants   BASE:RA\_RESULTS= CBRR OR PBTH **<G4>** | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. Education (assistance to complete education, GED instruction)   BASE: ALL **<G5>** | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. Job-specific training (e.g., learning to do a specific job, such as data entry, nursing, word processing, retail work) **<G6>**   BASE: ALL | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. Pre-employment supports (e.g., job search assistance, job referrals)   BASE: ALL **<G7>** | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. Post-employment supports (assistance with supplies, uniforms, counseling to assist with job-related problems)   BASE: ALL **<G8>** | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. Assistance finding childcare **<G9>**   BASE: ALL | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. Assistance paying for childcare **<G10>**   BASE: ALL | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. Assistance with transportation **<G11>**   BASE: ALL | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. Computer training **<G12>**   BASE: ALL | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. Assistance in obtaining public benefits (food stamps, healthcare, energy assistance, etc.)   BASE: ALL **<G13>** | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. Healthcare provided on site at a program where you live(d) **<G14>**   BASE: ALL | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. Help to address a stressful or traumatic experience   BASE: ALL **<G15>** | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. Mental health evaluation/assessment **<G16>**   BASE: ALL | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. Outpatient mental health therapy **<G17>**   BASE: ALL | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. 12-Step substance abuse programs **<G18>**   BASE: ALL | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| **Services for Children** | |
| 1. Developmental screening/testing **<G19>**   BASE: ALL | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. Early intervention **<G20>**   BASE: ALL | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. After school tutoring **<G21>**   BASE: ALL | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. Summer programs/camp **<G22>**   BASE: ALL | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. Help to enroll in Head Start **<G23>**   BASE: ALL | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. Help to deal with schools, teachers for your child **<G24>**   BASE: ALL | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. Help to deal with juvenile justice system, jails, and courts. **<G25>**   BASE: ALL | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| **Parent/Family Life/Life Skills** |  |
| 1. Money management, budgeting **<G26>**   BASE: ALL | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. Assistance with daily living (i.e. help with time management, goal-setting) **<G27>**   BASE: ALL | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. Parenting support groups **<G28>**   BASE: ALL | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. Family reunification services (getting your kids back) **<G29>**   BASE: ALL | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. Legal services related to civil or criminal matters   BASE: ALL **<G30>** | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. Case management **<G31>**   BASE: ALL | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. Assessment of parent and child needs **<G32>**   BASE: ALL | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |
| 1. Assistance with basic needs (food, clothing)   BASE: ALL**<G33>** | YES 1  NO 2  REFUSED 7  DON’T KNOW 8 |

Now I would like you to think back to any services you’ve received from [NAME OF PROGRAM TO WHICH THE FAMILY WAS RANDOMLY ASSIGNED IF RARESULT=SUB, PBTH OR CBRR; OR SHELTER NAME IF RA\_RESULT=UC OR A3A=NO]]. I would like to ask you about your experience with that program***.***

BASE: ALL

1. For each of the following statements, tell me if you strongly agree, agree, disagree, strongly disagree, or aren’t sure.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Strongly Agree** | **Agree** | **Disagree** | **Strongly Disagree** | **REF** | **DK** |
| G34a. I feel/felt the staff at [NAME OF PROGRAM] care about me. **<G34\_1>** Base: all | 1 | 2 | 3 | 4 | 7 | 8 |
| G34b. When I talk/talked to the staff at [NAME OF PROGRAM], I feel that they listen carefully. **<G34\_2>** Base: all | 1 | 2 | 3 | 4 | 7 | 8 |
| G34c. It is/was hard to get the staff at [NAME OF PROGRAM] to listen to me. **<G34\_3>**  Base: all | 1 | 2 | 3 | 4 | 7 | 8 |
| G34d. I do/did not think the staff at [NAME OF PROGRAM] cares much about me **<G34\_4>** Base: all | 1 | 2 | 3 | 4 | 7 | 8 |
| G34e Staff treat/treated clients as if they were children **<G34\_5>** Base: all | 1 | 2 | 3 | 4 | 7 | 8 |
| G34f. I feel/felt respected by the staff at [NAME OF PROGRAM] **<G34\_6>**  Base: all | 1 | 2 | 3 | 4 | 7 | 8 |
| G34g. Staff ac/acted as if each client is of great value to [NAME OF PROGRAM] **<G34\_7>** Base: all | 1 | 2 | 3 | 4 | 7 | 8 |
| G34h. Staff act/acted as if they do not respect clients. **<G34\_8>** Base: all | 1 | 2 | 3 | 4 | 7 | 8 |

Now I am going to ask you about the [IF RARESULT=PBTH, SUB, CBRR: NAME OF PROGRAM TO WHICH R was RANDOMLY ASSIGNED; IF RARESULT=UC OR IF A3a = no : shelter] where you stayed or that helped you with your housing.

1. During the time that you [lived at program/were helped by program], tell me how much say you had in choosing each of the following:

BASE: ALL

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| BASE: ALL <G35A> - <G35J> ↓↓ | **No Say** | **Not Much Say** | **A Lot of Say** | **I Made the Choice** | **REF** | **DK** |
| G35a. The place you live **<G35\_1>** | 1 | 2 | 3 | 4 | 7 | 8 |
| G35b. Decorating and furnishing **<G35\_2>** | 1 | 2 | 3 | 4 | 7 | 8 |
| G35c. Who could come over **<G35\_3>** | 1 | 2 | 3 | 4 | 7 | 8 |
| G35d. When they could come over **<G35\_4>** | 1 | 2 | 3 | 4 | 7 | 8 |
| G35e Whether to have overnight guests**<G35\_5>** | 1 | 2 | 3 | 4 | 7 | 8 |
| G35f. When caseworkers or other staff could come to see you **<G35\_6>** | 1 | 2 | 3 | 4 | 7 | 8 |
| G35g. What services you received **<G35\_7>** | 1 | 2 | 3 | 4 | 7 | 8 |
| G35h. Whether or not you must participate in services. **<G35\_8>** | 1 | 2 | 3 | 4 | 7 | 8 |
| G35i. Whether you could come and go at any time without having to notify people **<G35\_9>** | 1 | 2 | 3 | 4 | 7 | 8 |
| G35j. Whether you lived in a building where other formerly homeless people lived **<G35\_10>** | 1 | 2 | 3 | 4 | 7 | 8 |

### Module 8: Contact Information to support possible additional follow-up

###### SECTION R: RESPONDENT CONTACT INFORMATION

Before we complete this portion of the interview, I would also like to make sure I have your contact information recorded correctly. BASE : ALL

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Your first name is? **<R1.>** | |  |  | | --- | --- | |  |  | |  |
| **<R1A>** Your last name is last name? **<R1B>** | |  |  | | --- | --- | |  |  | |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Does your name have a suffix? **<R1C>** | |  |  | | --- | --- | |  |  | |  |

**<R2> BASE; ALL**

Do you have a mailing address? This could be an address like a PO Box or a place were you get mail regularly.

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

**BASE: <R2> = 1 YES NOTE : IF R2 = YES THEN AT LEAST 1 OF <R3> - <R3E> IS ANSWERED**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| What is the street address/ PO Box Number? <R3> | |  |  | | --- | --- | |  |  | |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Is there a complex/building name? <R3A> | |  |  | | --- | --- | |  |  | |  |
| Is there an apartment number? <R3B> | |  |  | | --- | --- | |  |  | |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| In what city? <R3C> | |  |  | | --- | --- | |  |  | |  |
| In what state? <R3D> | |  |  | | --- | --- | |  |  | |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| What is the zip code? <R3E> | |  |  | | --- | --- | |  |  | |  |

**<R4> BASE: ALL**

Do you have a phone number were we can reach? This can be your cell phone or work number.

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

**BASE: R4 = 1. Note: If R4 = 1 , at least one of R5A – R5E = packed .**

**<R5>** What is phone number, starting with the area code?

**<R5A>** HOME 

**<R5B>** CELL 

**<R5C>** SHELTER 

**<R5D>** WORK 

**<R5E>** OTHER 

**<R6>** Do you have an email address?

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

**<R7>** What is your email address? **BASE: R6 = 1 YES**



To help us be able to get back in touch with you in the future, we would like to review the names, telephone numbers and addresses of two people we talked about last time we spoke who will always know how to reach you. This information will be kept strictly confidential and will only be used if we are unable to contact you.

**ASK IF WE HAVE CONTACT 1 IN SAMPLE**

1. When we last spoke on [RA MMYYY or Last Intvw MMYYYY] you said that [CONTACT #1] was a person who would always know where you are and how to reach you. Is [CONTACT#1] still a person who does not live with you and will always know how to contact you?

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

**ASK IF WE HAVE CONTACT 2 IN SAMPLE**

1. When we last spoke on [RA MMYYY or Last Intvw MMYYYY] you said that [CONTACT #2] was a person who would always know where you are and how to reach you. Is [CONTACT#2] still a person who does not live with you and will always know how to contact you?

YES ❑1

NO ❑2

REFUSED ❑7

DON’T KNOW ❑8

**CAPI: IF H1 AND H2= YES SKIP TO H4**

**IF NO: CONTACT #1:**

**PROMPT FOR NAME IF NAME NO CONTACT 1 OR H1 = [2,7,8]**

1. Could you please tell me the name of a person who does not live with you and will always know how to contact you?

YES ❑1

NO ❑2 **SKIP TO H4**

REFUSED ❑7 **SKIP TO H4**

DON’T KNOW ❑8 **SKIP TO H4**

H3a. What is his/her first name?

H3b. What is his/her middle name?

H3c. What is his/her last name?

H3d. Does his/her name have a suffix?

**IF NO: CONTACT #2:**

**PROMPT FOR NAME IF (NO CONTACT2 AND H3 = 1) OR (NO CONTACT2 AND H1 = 1) OR H2 = 2,7,8**

1. Could you please tell me the name of another person who does not live with you and will always know how to contact you?

YES ❑1

NO ❑2 **SKIP TO CLOSING**

REFUSED ❑7 **SKIP TO CLOSING**

DON’T KNOW ❑8 **SKIP TO CLOSING**

**H5-H8 verify Contact info for contact1 if H1 = 1**

**H5- H8 Get New Contact Info for Contact1 if H3 =1**

1. IF CONTACT #1 CONFIRMED ASK: Is [CONTACT #1]’s address still:  
   IF CONTACT #1 IS NEW ASK: What is (his/her) street address?

H5a. Is there a complex/building name?

H5b. Is there an apartment number?

H5c. In what city?

H5d. In what state?

H5e. What is the zip code?

1. What is (his/her) home phone number, starting with the area code?

Telephone # with area code: (\_\_\_\_\_\_\_) \_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_

1. What is (his/her) cell phone number, starting with the area code?

Telephone # with area code: (\_\_\_\_\_\_\_) \_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_

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

**ASK IF H3 = 1**

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

Friend ❑1

Relative ❑2

OTHER (SPECIFY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) ❑95

REFUSED ❑97

DON’T KNOW ❑98

### CONTACT #2:

**H10-H13 > Verify Contact Info for Contact2 if H2 = 1**

**H10-H13 > Get New Contact Info for Contact2 if H4 = 1**

1. IF CONTACT #2 CONFIRMED ASK: Is [CONTACT #2]’s address still:

IF CONTACT #2 IS NEW ASK: What is (his/her) street address?

H10a. Is there a complex/building name?

H10b. Is there an apartment number?

H10c. In what city?

H10d. In what state?

H10e. What is the zip code?

1. What is (his/her) home phone number, starting with the area code?

Telephone # with area code: (\_\_\_\_\_\_\_) \_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_

1. What is (his/her) cell phone number, starting with the area code?

Telephone # with area code: (\_\_\_\_\_\_\_) \_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_

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

**ASK IF H4 = 1**

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

Friend ❑1

Relative ❑2

OTHER (SPECIFY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) ❑95

REFUSED ❑97

DON’T KNOW ❑98

Thank you very much for your time today.

IF CONDUCTION INTERVIEW OVER THE PHONE: We will mail your $60 incentive payment. You should receive it within one week.

**INTERVIEWER: PLEASE CONFIRM MAILING ADDRESS AND BEST TELEPHONE NUMBER ON FACESHEET TO MAKE SURE THE PAYMENT IS MAILED TO THE CORRECT ADDRESS.**

**CAPI: Please add after closing text and before exiting case.**

**FIELD INTERVIEWER: PLEASE RECORD LANGUAGE OF THE INTERVIEW:**

**1 ENGLISH**

**2 SPANISH**

**FIELD INTERVIWER ; PLEASE RECORD MODE OF INTERVIEW**

**1 IN PERSON**

**2 OVER THE PHONE**