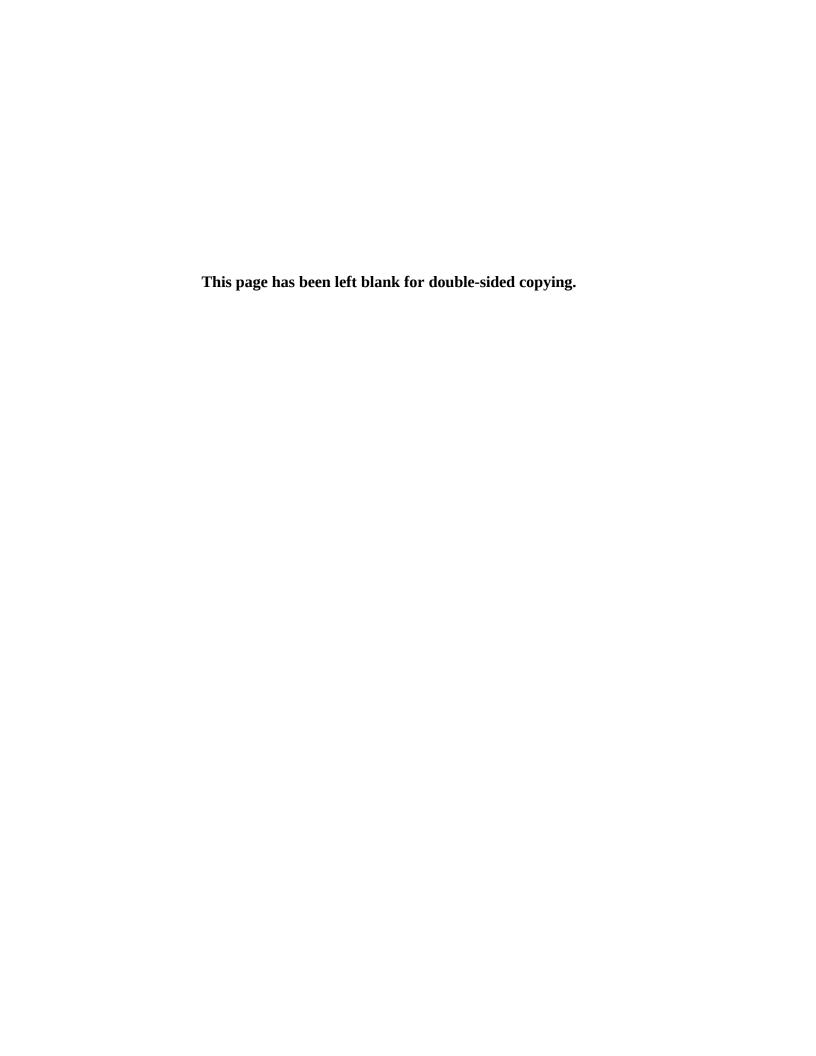
## ATTACHMENT B BASELINE DATA COLLECTION



OMB No.: XXXX-XXXX Expiration Date: XX/XX/20XX



# Evaluation of Employment Coaching for TANF and Related Populations

#### **Baseline Data Collection**

June 7, 2017

#### **PUBLIC VERSION**

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#### i. INTRODUCTION

#### ALL

[PROGRAM NAME] is participating in the Evaluation of Employment Coaching for TANF and Related Populations, a national study being conducted by the U.S. Department of Health and Human Services. The study is being done to learn more about whether providing people with a coach to assist them with setting and meeting goals helps them get and keep a job. The study will also help us learn whether there are ways to make the [coaching/program] work better. The U.S. Department of Health and Human Services has asked researchers from Mathematica Policy Research and its partner, Abt Associates, to assist with the study. We invite you to be a part of the study.

All study participants will be in one of two groups: (1) those who are offered [coaching/PROGRAM NAME's services], and (2) those who are not but are still eligible to receive [regular case management/referrals to other services in the community]. The study will compare outcomes for people in each group.

A computer will randomly select which group you will be in. The computer works like a flip of a coin—assignment to a group is random. This procedure makes sure that assignments to the groups are fair. Everyone who agrees to participate in the study has the same chance of being placed into either group. The chance of being able to receive [coaching/PROGRAM NAMEservices] is not influenced by what you say to us or your answers to the questions you will be asked when you apply. [I/NAME OF STAFF MEMBER] will let you know which group you are assigned to at the end of the application process.

If you are not randomly selected to [receive coaching/participate in PROGRAM NAME], you are still eligible to [receive regular case management services/a list of other services in the community].

If you decide to be in the study, I will ask you to answer some questions today. I will ask you questions about yourself, your family, your employment history, and your receipt of public assistance. These questions will take about 20 minutes to answer.

In about [NUMBER] months and again in [NUMBER] months, the researchers will send you an invitation with a user ID and password so that you can complete a follow-up survey online, which should take about one hour. If the researchers don't hear from you, then they will contact you by phone or in person. You will be asked about topics such as the services you received from [PROGRAM NAME] or other providers in the community, your employment, and your earnings. If you are in the program, you may also be asked to participate in other study activities, such as a two-hour in-person interview and video recording of one or more of your coaching sessions to be reviewed by members of the research team.

If you agree to be part of the study, it means you are giving permission for our program to share information with the researchers about the services you receive from the program. The researchers may use information you provide to consult directories of contact information to help them contact you about completing the follow-up surveys and verify your identity. The researchers may also contact federal and state agencies for information about your employment and earnings and your receipt of benefits from such programs as Temporary Assistance for Needy Families (TANF) and unemployment insurance. The researchers may request this information for two years before and up to 10 years after you enroll in the study.

Everything you tell the researchers will be used for research purposes only, unless the researchers are required by law to release it for some other purpose. All data will be kept securely and the researchers will not share your individual data with [PROGRAM NAME], the TANF agency, or federal officials. Nobody will ever publish your name in connection with the information you provide. Instead, information about you will be combined with information about other people in the study, so researchers can describe the overall program effects and participants' experiences.

To help us protect your privacy, the researchers have obtained a Certificate of Confidentiality from the National Institutes of Health. With this Certificate, the researchers cannot be forced to disclose information that may identify you, even by a court subpoena, in any federal, state, or local civil, criminal, administrative, legislative, or other proceedings. The researchers will use the Certificate to resist any demands for information that would identify you, with one exception. The Certificate of Confidentiality does not prevent the researchers from disclosing information that would identify you as a participant in the research project if you tell the interviewers anything that suggests you are very likely to harm yourself, that you are planning to hurt another person or child, or that someone is likely to harm you.

You should understand that a Certificate of Confidentiality does not prevent you or a member of your family from voluntarily releasing information about yourself or your involvement in this research. If an insurer, employer, or other person obtains your written consent to receive research information, then the researchers may not use the Certificate to withhold that information.

You may or may not benefit personally from participating in this study, but your participation in the study could help in improving services offered in the future to other people like you.

There are very minimal risks associated with participating in the study. You may feel uncomfortable answering some questions, but you can always refuse to answer those questions if you wish, and it will not change your participation in the program or the study. Although researchers will take many steps to protect all study information, there is a small risk that non-researchers could see it, including information about your employment and earnings and TANF benefits. In addition, representatives from the U.S. Department of Health and Human Services and New England Institutional Review Board may inspect and have access to confidential information as they ensure your rights as a study participant are protected.

You will not receive a token of appreciation today, but you will receive a token of appreciation for completing the follow-up surveys. The researchers will send you an invitation once we are ready to start a follow-up survey. The invitation will contain all the information you need to participate. For each of the two follow-up surveys you will receive a \$35 gift card as a token of appreciation if you complete the survey within four weeks of receiving the invitation. If you complete the survey later than four weeks after receiving the invitation, you will receive a \$25 gift card as a token of appreciation for completing the survey.

We hope you will want to be in the study but your participation is strictly voluntary. If you participate in the study, the researchers will ask you to participate in surveys, will collect some data on you from [PROGRAM NAME] and federal and state agencies, and may ask you to participate in other data collection activities. However, you will never be required to answer questions in the survey, participate in an interview, or be videotaped. If you decide now that you do not want to participate in the study, the researchers will not collect any information about you. However, you cannot [receive coaching/participate in PROGRAM NAME] if you do not participate in the study. Either way, it will not affect your access to TANF or other public benefits.

If you agree to be in the study now, you can withdraw from the study later. However, if you withdraw from the study and were assigned to the group that [receives coaching services/participates in PROGRAM NAME], you will no longer be able to [receive coaching/participate in PROGRAM NAME]. By agreeing now to be in the study, even if later you tell us you want to withdraw from the study, you are authorizing researchers to use information that was collected about you before you withdrew. To withdraw from the study, you must call Mathematica's help line and provide a written letter or email confirming that you no longer want to be in the study.

If you have any questions you can call Mathematica toll-free at 1-8XX-XXX-XXXX.

11.	Related Populations?	na
	O YES1	

PROCEED WITH THE INTERVIEW.	0 END  IF RESPONDENT REFUSES TO BE IN THE STUDY THEN DO NOT
	PROCEED WITH THE INTERVIEW.

#### A. CONTACT INFORMATION 1

ALL							
<b>A1</b> .	What is your full name? Please spell that for me.						
	INSTRUCTION:	CONFIRM LAST NAME GIVEN IS THEIR FULL LEGAL NAME (i.e. THERE TWO LAST NAMES OR HYPHENATED LAST NAME).	e., ARE				
PACT	INSTRUCTION:	PLEASE ASK FOR MIDDLE NAME OF CLIENT					
		FIRST NAME					
	(STRING 50)						
		MIDDLE NAME					
	(STRING 20)						
		LAST NAME					
	(STRING 50)	LAST NAME					
ALL	(STRING 50)	LAST NAME					
	, , ,		uomo2				
	I want to make su	LAST NAME  ure that we call you by the correct name. Do you go by another n	ame?				
\1a.	I want to make su	ure that we call you by the correct name. Do you go by another n	name?				
<b>11a.</b>	I want to make su  O YES	ure that we call you by the correct name. Do you go by another n					
41a.	I want to make su  O YES O NO	ure that we call you by the correct name. Do you go by another n	A2				
<b>11a.</b>	I want to make su  O YES O NO O DON'T KNOW O REFUSED	ure that we call you by the correct name. Do you go by another n	A2 A2				
A1a.	I want to make su  O YES O NO O DON'T KNOW O REFUSED	ure that we call you by the correct name. Do you go by another n	A2 A2				
<b>\1a.</b> PACT  A1A=	I want to make su  O YES O NO O DON'T KNOW O REFUSED	ure that we call you by the correct name. Do you go by another n	A2 A2				
A1A= A1A=	I want to make su  O YES O NO O DON'T KNOW O REFUSED	name for me.	A2 A2				
A1A= A1A=	I want to make su  O YES O NO O DON'T KNOW O REFUSED  Foll  Please spell that  (STRING 50)	name for me.	A2 A2				

ALL		
A2.	What is your date of birth?	
PACT PACT	DATE OF BIRTH  MONTH DAY YEAR  (01-12) (01-31) (1918-2001)	
	T CHECK: IF OUT OF RANGE < 18 YEARS OLD; I recorded (fill A2 ANSWER). Is that ect? PROGRAMMER: IF R CONFIRMS THEY ARE <18 YEARS OLD, GO TO END.	t
ALL		
A3.	What is your Social Security number?           (000-999)         (000-999)           O DON'T KNOW         d           O REFUSED         r	
ALL		
A4.	What is your home telephone number?	
PACT	HOME TELEPHONE (201-989) (200-999) (0000-9999)	
ALL		
A5a.	Do you have a cell phone?         O YES	B1 B1 B1

5

	A5a=01		
b.	What is your cell phone number?		
г	CELL PHONE		
	(201-989) (200-999) (0000-9999)		
	O DON'T KNOWd		
	O REFUSEDr		
A5a=0	1		
۸6.	Is it okay for us to text you at this number? Message and data rates may apply.		
Mth J3	O YES1		
	0ON C		
	DON'T KNOWd		
	O REFUSEDr		
ALL			
۸7.	What is another phone number where you can be reached?		
	PHONE NUMBER		
	(201-989) (200-999) (0000-9999)		
Mth J3	O DON'T KNOWd		
	O REFUSEDr		

#### B. DEMOGRAPHIC AND SOCIOECONOMIC CHARACTERISTICS

Α	re you Hispanic, Latino, or of Spanish origin?	
C	YES	1
C	NO, NOT OF HISPANIC, LATINO OR SPANISH ORIGIN	0
C	DON'T KNOW	d
C	REFUSED	r
_		
V	/hat is your race?	
	Select all that apply	
	AMERICAN INDIAN OR ALASKA NATIVE	1
	ASIAN	2
	BLACK OR AFRICAN AMERICAN	3
	NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER	4
	WHITE	5
	OTHER (SPECIFY)	99
S	pecify (STRING (NUM))	
	DON'T KNOW	d
	REFUSED	r
IF	OTHER SPECIFY (99): SPECIFY OTHER RACE	
Н	ow do you describe yourself?	
] ;	Select one only	
	Male	1
C		
C	Would you describe yourself in some other way?	3
S	pecify (STRING (NUM))	
C	DON'T KNOW	d
C	REFUSED	r

ALL	-			
B4.	Wł	nat is the highest level of education you have completed?		
	IF	RESPONDENT SAYS "HIGH SCHOOL," PROBE: Did you receive a diploma or GED	?	
COBRA tailored for TANF	S	elect one only		
	0	DID NOT COMPLETE HIGH SCHOOL OR GED1		
	O	HIGH SCHOOL: DIPLOMA (NOT GENERAL EDUCATION DEVELOPMENT OR GED)2		
	O	GENERAL EDUCATION DEVELOPMENT OR GED3		
	0	SOME COLLEGE BUT NO DEGREE4		
	0	2-YEAR OR 3-YEAR COLLEGE DEGREE (ASSOCIATE'S DEGREE)5		
	0	4-YEAR COLLEGE DEGREE (BACHELOR'S DEGREE)6		
	O	GRADUATE OR PROFESSIONAL DEGREE (e.g., MA, MBA, Ph.D., JD, MD)7		
	0	NEVER ATTENDED SCHOOL8		
	0	DON'T KNOWd		
	O	REFUSEDr		
ALL				
<b>B5.</b>		nat is your current marital status—are you now married, separated, divorced, dowed, or have you never been married?		
	S	elect one only		
	0	MARRIED1		
	0	SEPARATED2		
	0	DIVORCED3		
	0	WIDOWED4		
	0	NEVER MARRIED5		
	0	DON'T KNOWd		
	0	REFUSEDr		

8

כיוד -	dministered. The payt questions are shout records who live with you
	dministered: The next questions are about people who live with you.
ALL	
B6.	How many adults age 18 or older <u>currently</u> live in <u>your</u> household at least half the time? Please include yourself.
	The second control of
•	ADULTS
	(1-99)
	INTERVIEWER: IF THE RESPONDENT SAYS "0" THEN REMIND THEM THAT THEY SHOULD INCLUDE THEMSELVES IN THIS TOTAL.
	O DON'T KNOWd
	O REFUSEDr
ALL	
B7.	How many children under age 18 live with you at least half the time? This includes
	biological, adopted, foster, step, and any other children.
	CHILDREN
	(0-99)
	O DON'T KNOWd
	O REFUSEDr
ALL	
	ext question is about where you live
The n	ext question is about where you live.
	ext question is about where you live.  Do you currently own your home or apartment or have a mortgage, rent it, pay som amount toward rent, live rent free with a friend or relative, or do you have some oth arrangement?
The n	Do you currently own your home or apartment or have a mortgage, rent it, pay som amount toward rent, live rent free with a friend or relative, or do you have some oth
The n	Do you currently own your home or apartment or have a mortgage, rent it, pay som amount toward rent, live rent free with a friend or relative, or do you have some oth arrangement?
The n	Do you currently own your home or apartment or have a mortgage, rent it, pay som amount toward rent, live rent free with a friend or relative, or do you have some oth arrangement?  OWN OR HAVE MORTGAGE
The n	Do you currently own your home or apartment or have a mortgage, rent it, pay som amount toward rent, live rent free with a friend or relative, or do you have some oth arrangement?  OWN OR HAVE MORTGAGE
The n	Do you currently own your home or apartment or have a mortgage, rent it, pay som amount toward rent, live rent free with a friend or relative, or do you have some oth arrangement?  OWN OR HAVE MORTGAGE
The n	Do you currently own your home or apartment or have a mortgage, rent it, pay som amount toward rent, live rent free with a friend or relative, or do you have some oth arrangement?  OWN OR HAVE MORTGAGE
The n	Do you currently own your home or apartment or have a mortgage, rent it, pay som amount toward rent, live rent free with a friend or relative, or do you have some oth arrangement?  OWN OR HAVE MORTGAGE
The n	Do you currently own your home or apartment or have a mortgage, rent it, pay som amount toward rent, live rent free with a friend or relative, or do you have some oth arrangement?  OWN OR HAVE MORTGAGE
The n	Do you currently own your home or apartment or have a mortgage, rent it, pay som amount toward rent, live rent free with a friend or relative, or do you have some oth arrangement?  OWN OR HAVE MORTGAGE
The n	Do you currently own your home or apartment or have a mortgage, rent it, pay som amount toward rent, live rent free with a friend or relative, or do you have some oth arrangement?  OWN OR HAVE MORTGAGE

DON'T KNOWd REFUSEDr	
IF OTHER SPECIFY (99): What is the other arrangement?	

ALL

B9. The next questions are about sources of income and other support that you and other members of your household may have received in the past month.

In the past month, have you or anyone in your household received any income from [fill statements a-j]?

CODE ONE RESPONSE PER **ROW** YES NO DK REF Temporary Assistance for Needy Families, or TANF (this is also known as welfare)..... 0 d 1 r b. Supplemental Security Income, or SSI..... 1 0 d Social Security Disability Insurance, or SSDI..... C. 1 0 d d. Food stamps or SNAP..... Women, Infants, and Children, or WIC..... 0 d e. 1 Unemployment Insurance..... f. 1 0 d Housing choice vouchers, Section 8, project-based rental assistance, public housing, housing where an agency helps you pay the rent, or other housing assistance..... 0 1 d r

# C. EMPLOYMENT STATUS AND BARRIERS The next questions are about work you ha

ALL					
C1.	Are you currently working for pay?				
CSPED	Working for pay can include regular paid jobs, odd jobs, temporary jobs, work done your own business, "under the table" work, or any other types of work you have do for pay.				
	O YES	1 C			
	O NO	0			
	O DON'T KNOW	d			
	O REFUSED	r			
C1 N	JE 1				
C2.	In the past 30 days have you worked for pay?				
NJ red for IF	PROBE: Please include any regular paid jobs, odd jobs, temporary jobs, work own business, "under the table" work, or any other types of work you have do				
	O YES	1 C			
	O NO	0			
	O NO	-			
		d			
C2 N	O DON'T KNOW	d			
C2 N C3.	O DON'T KNOW	d			
	O DON'T KNOW	d r			
	O DON'T KNOW  REFUSED  In what month and year did you last work for pay?  PROBE: Please include any regular paid jobs, odd jobs, temporary jobs, work	d r			
	O DON'T KNOW  O REFUSED  In what month and year did you last work for pay?  PROBE: Please include any regular paid jobs, odd jobs, temporary jobs, work own business, "under the table" work, or any other types of work you have do MONTH YEAR	in you one.			
	O DON'T KNOW	in you one.			

C3 NI	E 0	)			
	= 1, FILL "DO" AND "VARIES"; IF C2=1, FILL "DID" "VARIED"				
AND					
C4.	Но	low much [do/did] you get paid before taxes and deducti	ons, at this job?		
,	pe	PROBE: If your pay [varies/varied], please provide an aver er job or for completing a particular task, please tell us t nade per week or per month while doing this type of wor	he total amount you usually		
	pe	F THE RESPONDENT DOES NOT PROVIDE A PAY PERIC er hour, per week, per month, once every two weeks, tw ay/daily, or something else?			
	INS	NSTRUCTION: ACCEPT MOST CONVENIENT PAY	PERIOD.		
	\$40 DA	NSTRUCTION: IF ANSWER IS GREATER THAN \$50 PER I 4000 ONCE EVERY 2 WEEKS, \$4000 TWICE A MONTH, \$ DAY/DAILY, OR \$8000 MONTH, SAY: "I recorded [c4 and c4 orrect?"	100,000 PER YEAR, \$400		
	`	(0-999,999.99) AMOUNT			
		Select one only	_		
	0				
	0				
	0	TWICE A MONTH	5		
	O	PER YEAR	6		
	O	DAY/DAILY	7		
	$\mathbf{O}$	OTHER (SPECIFY)	99		
	Sp	Specify (STRING 100)			
	$\mathbf{C}$	DON'T KNOW	d		
	O	REFUSED	r		

C5.	In the past 30 days, how much money did you make from vectors, commissions, and regular overtime pay and coubefore taxes and deductions. If you held more than one job from all of your work during the past 30 days.	nt all money you received
NF	AMOUNT	C7
	(1	
	O DON'T KNOW	d C6
	O REFUSED	r C6
C5=c	i OR r	
C6.	_Staff-administered: I just need to know a range. Can you to	ell me if it was
NJ red for	Self-administered: We just need to know a range. Was it	•
NF	Select one only	
	<b>O</b> \$0 - \$500,	1
	O \$501 - \$1,000,	2
	O \$1,001 to \$2,000,	3
	O \$2,001 to \$3,000,	4
	O \$3,001 to \$4,000,	5
	O \$4,001 to \$5,000, or	6
	O More than \$5,000?	7
	O DON'T KNOW	d
	O REFUSED	r
C1 O	PR C2=1	
IF C1	L = 1, FILL "DO"; IF C2=1, FILL "DID"	
C7.	How many hours (do/did) you usually work per week at you job?	ur current or most recent
ailored IF	Select one only	
	O 1-19 hours,	1
	O 20-34 hours,	2
	O 35-44 hours,	3
	O 45 hours or more	
	O DON'T KNOW	
	Q REFUSED	

AL									
C8.		a to	read	VOU.	a list of	thing	s that son	ne nec	nnle fin
CSPEI tailored	challenging in finding and keeping a				a iist oi	unng	s that son	ie pec	ppie iii
TANF								hat ha	ırd, ver
	[FILL a-g]. Would you say that made hard, or extremely hard for you to fire							hard,	very
	INSTRUCTION: IF NEEDED READ RE	ESPO	NSE	CATE	GORIES	FOR	B-G		
	Self-administered: The next set of que challenging in finding and keeping a				out thing:	s that	some peo	ple fin	d
	Would you say that [FILL a-g] made hard, or extremely hard for you to fi							hard, v	very
						Selec	t one per ro	)W	
			NOT AT ALL	A LITTLE	SOMEWHA T	VERY	EXTREMELY	DK	REF
ι.	Not having reliable transportation		<b>O</b> 0	1 <b>O</b>	2 <b>Q</b>	3 <b>O</b>	4 <b>Q</b>	C <sub>b</sub>	<b>C</b> n
).	Not having good enough childcare or family help		<b>C</b> 0	O 1	2 <b>Q</b>	Оε	4 <b>O</b>	<b>C</b> b	<b>O</b> 1
).	Not having the right clothes or tools for work		<b>C</b> 0	O 1	2 <b>Q</b>	Оε	4 <b>O</b>	C <sub>b</sub>	<b>C</b> 1
d.	Not having the right skills or education		<b>O</b> 0	1 <b>O</b> 1	2 <b>O</b>	<b>O</b> ε	4 <b>O</b>	$\mathbf{C}$ b	$\mathbf{C}$ n
Э.	Having a criminal record		<b>O</b> 0	1 <b>O</b> 1	2 <b>O</b>	Оε	4 <b>O</b>	$\mathbf{C}$ b	$\mathbf{C}_{1}$
	A lack of jobs available in your area		<b>O</b> 0	1 <b>O</b> 1	2 <b>O</b>	Оε	4 <b>O</b>	$\mathbf{C}$ b	$\mathbf{C}$ n
g.	Not being able to do certain kinds or amounts of work, training, or school we because of your health		<b>C</b> 0	1 O	2 <b>Q</b>	3 <b>O</b>	4 <b>O</b>	C <sub>b</sub>	<b>C</b> 1
AL	1								
C9.	Do you currently have a valid driver			By va	alid we m	nean t	hat it not e	xpired	i,
PED	and has not been suspended or take		-					1	
	O NO								
	O NO								
	• DOIN I KINOVV		• • • • • • • • • • • • • • • • • • • •					u	

In the past six months, have you ever not bee didn't have a valid driver's license?	n able to apply to a job because you
O YES	1
O NO	0
O DON'T KNOW	d
O REFUSED	r

#### D. GOAL SETTING, GOAL PURSUIT, AND SELF-REGULATION SKILLS

#### ALL IF C1 = 1 THEN DO NOT ASK D. D1. Staff-administered: Now I am going to ask you about employment-related behaviors. Please tell me if you strongly disagree, disagree, agree, or strongly agree with the following statements. Self-administered: The next set of questions are about employment-related behaviors. Please indicate if you strongly disagree, disagree, agree, or strongly agree with the following statements. Select one per row STRONGLY STRONGLY DISAGREE DISAGREE **AGREE AGREE** DK REF I set long-term employment goals that I ADAPTED FROM GOAL SETTING hope to achieve within a year, such as 1**Q** finding a job, finding a better job, getting 2 **O** 3 **O** 4 **O** $\mathbf{O}_{\mathsf{b}}$ r Opromoted, or enrolling in further education..... ADAPTED FROM b. I set specific short-term goals that will allow me to achieve my long-term 1 O 2 **Q** 3 **O** $\mathbf{O}_{\mathsf{b}}$ 4 **Q** r Oemployment goals..... ADAPTED FROM LASER c. I know I need to get a job or a better job and really think I should work on finding 4 **O** $\mathbf{O}_{\mathsf{b}}$ r O1 O 2 **O** 3 **O** one..... d. I guess being out of work is not good, but ADAPTED FROM there is *nothing I can do* about it right 1 **Q** 2 **Q** 3 **O** 4 **Q** $\mathbf{O}_{\mathsf{b}}$ $r\mathbf{O}$ now..... D1a, D1b: Noonan, P.M., & Gaumer Erickson, A.S. (2017). The skills that matter: Teaching intrapersonal and

D1a, D1b: Noonan, P.M., & Gaumer Erickson, A.S. (2017). The skills that matter: Teaching intrapersonal and interpersonal competencies in any classroom. Thousand Oaks, CA: Corwin.

ALL

D2. In the past 6 months, how often have you been late for a job or a job-related appointment like an interview or meeting with a program worker? Would you say...

Select one only

O	Every day or almost every day,	1
O	A few times a week,	2
O	A few times a month,	3
O	About once a month	4
0	Only a few times, or	5
O	Hardly ever or never?	6
0	RESPONDENT DIDN'T HAVE A JOB OR A JOB-RELATED APPOINTMENT.	0
0	DON'T KNOW	d
O	REFUSED	r

A 1 1		
ALL		
· ·		

D3.1. Now we are going to discuss behaviors more generally.

During the past month, how often has each of the following behaviors been a problem? Would
you say that the following behaviors have been a problem never, sometimes, or often?

\*\*NOTE: The specific wording of items D3.1a-I and D3.2a-h are not shown on this copy of the survey because the items are adapted and reproduced by special permission of the Publisher, Psychological Assessment Resources, Inc., 16204 North Florida Avenue, Lutz, Florida 33549. Further reproduction is prohibited without permission by PAR, Inc.

#### Select one per row

F	For Review Only, Do NOT Copy		SOMETIMES	OFTEN	DK	REF
a.	Item 25 **SEE NOTE ABOVE	o O	1 <b>O</b> 1	2 <b>Q</b>	C <sub>b</sub>	C n
b.	Item 49	<b>C</b> 0	<b>O</b> 1	2 <b>Q</b>	$\mathbf{C}$ b	$\mathbf{C}$ n
C.	Item 52	C 0	1 <b>O</b> 1	2 <b>O</b>	$\mathbf{C}$ b	$\mathbf{C}$ n
d.	Item 6	C 0	1 <b>O</b> 1	2 <b>O</b>	$\mathbf{C}$ b	$\mathbf{C}$ n
e.	Item 71	C 0	O 1	2 <b>Q</b>	$\mathbf{C}$ b	$\mathbf{C}$ n
f.	Item 75	C 0	1 <b>O</b> 1	2 <b>O</b>	$\mathbf{C}$ b	$\mathbf{C}$ n
g.	Item 24	<b>O</b> <sub>0</sub>	1 O	2 <b>Q</b>	$\mathbf{C}$ b	$\mathbf{C}$ n
h.	Item 53	<b>O</b> <sub>0</sub>	1 O	2 <b>Q</b>	$\mathbf{C}$ b	$\mathbf{C}$ n
i.	Item 9	O 0	1 O	2 <b>O</b>	$\mathbf{C}$ b	$\mathbf{C}$ n
j.	Item 15 -edited	C 0 ···	1 <b>O</b> 1	2 <b>O</b>	$\mathbf{C}$ b	$\mathbf{C}$ n
k.	Item 63 - edited	C 0	1 <b>O</b> 1	2 <b>O</b>	$\mathbf{C}$ b	$\mathbf{C}$ n
I.	Item 2	<b>C</b> 0	O <sub>1</sub>	2 <b>Q</b>	$\mathbf{C}$ b	$\mathbf{C}$ n

D3.2. During the past month, how often has each of the following behaviors been a problem? Would you say that the following behaviors have been a problem never, sometimes, or often?

Select one per row

				- I		
		NEVER	SOMETIMES	OFTEN	DK	REF
a.	Item 28	C 0	O 1	2 <b>Q</b>	C <sub>b</sub>	<b>C</b> n
b.	Item 69	<b>C</b> 0	O 1	2 <b>O</b>	$\mathbf{C}$ b	$\mathbf{C}$ n
C.	Item 1	<b>C</b> 0	Oı	2 <b>Q</b>	$\mathbf{C}$ b	$\mathbf{C}$ n
d.	Item 72	C 0	Oı	2 <b>O</b>	$\mathbf{C}$ b	$\mathbf{C}$ n
e.	Item 23	<b>O</b> 0	O <sub>1</sub>	2 <b>Q</b>	$\mathbf{C}$ b	$\mathbf{C}_1$
f.	Item 50	<b>O</b> 0	O <sub>1</sub>	2 <b>O</b>	$\mathbf{C}$ b	$\mathbf{C}$ n
g.	Item 64	<b>C</b> 0	$\mathbf{O}_{\mathtt{1}}$	2 <b>O</b>	$\mathbf{C}$ b	$\mathbf{C}$ n
h.	Item 70 -edited	C 0	$\mathbf{O}_{1}$	2 <b>Q</b>	$\mathbf{C}$ b	$\mathbf{C}$ n

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D4. Staff-administered: Next, I'm going to read a list of opinions people have about themselves. After I read each one, I want you to tell me whether you strongly disagree, disagree, agree, or strongly agree.

Self-administered: The next set of items are a list of opinions people have about themselves. Indicate whether you strongly disagree, disagree, agree, or strongly agree with each one.

Select one per row

			STRONGLY DISAGREE	DISAGREE	AGREE	STRONGLY AGREE	DK	REF
Rosenberg Self Esteem Scale	a.	I am able to do things as well as most people	1 <b>Q</b>	2 <b>Q</b>	3 <b>O</b>	4 <b>Q</b>	C b	C n
Rosenberg Self Esteem Scale	b.	I certainly feel useless at times	O <sub>1</sub>	2 <b>Q</b>	Oε	4 <b>O</b>	C <sub>b</sub>	<b>C</b> 1
Rosenberg Self Esteem Scale	c.	All in all, I tend to feel that I am a failure.	10	2 <b>Q</b>	$\mathbf{O}_{\epsilon}$	4 <b>O</b>	<b>O</b> b	<b>C</b> 1

ALL		
E1.	What is your address?	
	PROBE: Where do you receive your mail?	
	PROBE: Is there an apartment number?	
	Street Address 1:	(STRING (NUM))
	Street Address 2:	(STRING (NUM))
	City:	(STRING (NUM))
	State:	(STRING (NUM))
	Zip:	(STRING (NUM))
	O DON'T KNOW	d
	O REFUSED	r
ALL		
E2.	What is your email address?	_
Р		
	(STRING 50)	ADDRESS
	O DON'T HAVE ONE	0
	O DON'T KNOW	d
	O REFUSED	r

ALL	
<b>E3a.</b> P A C T	Mathematica would like to contact you in about 6 to 12 months to see how you are doing. In case Mathematica has trouble reaching you, Mathematica would like to have the names of three people who would most likely know where you are or who yo keep in close contact with, such as a grandmother or grandfather, other relative, or friend. Mathematica will not contact these people for any other reason.
	What is the full name of the first person we should contact?
	FIDOT NAME
	(STRING 50) FIRST NAME
	MIDDLE INITIAL
	(STRING 1)
	LAST NAME
	(STRING 50)
	O DON'T KNOWd EN
	O REFUSEDr EN
E3a I	NE D OR R
E3b.	What is (his/her) address?
	PROBE: Is there an apartment number?
PACT	Street Address 1: (STRING (NUM))
	Street Address 2: (STRING (NUM))
	City: (STRING (NUM))
	State: (STRING (NUM))
	Zip: (STRING (NUM))
	O DON'T KNOWd
	O REFUSEDr

E3a N	E D OR R		
E3c.	What is (his/her) relationship to you?		
	Select one only		
Р	O SPOUSE/PARTNER	1	
	O MOTHER	2	
	O FATHER	3	
	O SISTER/BROTHER	4	
	O GRANDMOTHER/GRANDFATHER	5	
	O SON/DAUGHTER	6	
	O FRIEND	7	
	O OTHER (SPECIFY)	99	
	Specify (S		
	O DON'T KNOW	d	
	O REFUSED	r	
E3a N	E D OR R		
E3d.	What is (his/her) home telephone number?		
	(201-989) (200-999) (0000-9999)	TELEPHONE	
Р	O NO LANDLINE	1	
	O DON'T KNOW	d	
	O REFUSED	r	
E3a N	E D OR R		
E3e.	Does (he/she) have a cell phone?		
Р	<b>O</b> YES	1	
	O NOON C	0	E3g
	O DON'T KNOW	d	E3g
	O REFUSED	r	E3g

E3f.	Can I have that number?		
	TELEPHONE		
	(201-989) (200-999) (0000-9999)		
Р	O DON'T KNOW	d	
	O REFUSED	r	
E3a	NE D OR R		
E3g.	What is (his/her) work telephone number?		
	[201-989) (200-999) (0000-9999)		
Р	O NO WORK NUMBER	1	
	O DON'T KNOW	d	
	O REFUSED	r	
E3a l	NE D OR R		
	NE D OR R		
	What is (his/her) email address?		
	What is (his/her) email address?  EMAIL ADDRESS		
E3h.	What is (his/her) email address?  EMAIL ADDRESS (STRING 50)		
E3h.	What is (his/her) email address?  EMAIL ADDRESS  (STRING 50)  O DON'T HAVE ONE		E3a
E3h.	What is (his/her) email address?  EMAIL ADDRESS  (STRING 50)  O DON'T HAVE ONE  O DON'T KNOW	d	E3a
E3h.	What is (his/her) email address?  EMAIL ADDRESS  (STRING 50)  O DON'T HAVE ONE	d	
<b>E3h.</b> ₽	What is (his/her) email address?  EMAIL ADDRESS  (STRING 50)  O DON'T HAVE ONE  O DON'T KNOW	d	E3a
E3h.	What is (his/her) email address?  EMAIL ADDRESS  (STRING 50)  O DON'T HAVE ONE	d	E3a
E3h.	What is (his/her) email address?  EMAIL ADDRESS  (STRING 50)  O DON'T HAVE ONE  O DON'T KNOW  O REFUSED  NE 0, D, OR R  Does (he/she) have another email address?	d	E3a
E3h.	What is (his/her) email address?  EMAIL ADDRESS  (STRING 50)  O DON'T HAVE ONE  O DON'T KNOW  NE 0, D, OR R  Does (he/she) have another email address?  EMAIL ADDRESS	d	E3a
E3h. E3h ∣	What is (his/her) email address?  EMAIL ADDRESS  (STRING 50)  O DON'T HAVE ONE	r	E3a
<b>E3h.</b>	What is (his/her) email address?  EMAIL ADDRESS  (STRING 50)  O DON'T HAVE ONE  O DON'T KNOW  O REFUSED  NE 0, D, OR R  Does (he/she) have another email address?  EMAIL ADDRESS  (STRING 50)	dr	E3a

### **SECOND CONTACT** E3a NE D OR R E4a. What is the full name of the second person we should contact? FIRST NAME (STRING 50) MIDDLE INITIAL (STRING 1) LAST NAME (STRING 50) O DON'T KNOW......d **END** O REFUSED.....r **END** E4a NE D OR R E4b. What is (his/her) address? PROBE: Is there an apartment number? PACT Street Address 1: (STRING (NUM)) (STRING (NUM)) Street Address 2: City: (STRING (NUM)) (STRING (NUM)) State: (STRING (NUM)) Zip: O DON'T KNOW......d O REFUSED.....r

E4a N	IE D OR R	
E4c.	What is (his/her) relationship to you?	
	Select one only	
Р	O SPOUSE/PARTNER1	
	O MOTHER2	
	O FATHER3	
	O SISTER/BROTHER4	
	O GRANDMOTHER/GRANDFATHER5	
	O SON/DAUGHTER6	
	O FRIEND7	
	O OTHER (SPECIFY)99	
	Specify (STRING 50)	
	O DON'T KNOWd	
	O REFUSEDr	
<b>-</b> 4.		
E4a N	IE D OR R	
E4d.	What is (his/her) home telephone number?	
	HOME TELEPHONE	
	(201-989) (200-999) (0000-9999)	
Р	O NO LANDLINE	
'	O DON'T KNOWd	
	O REFUSEDr	
E4a N	IE D OR R	
E4e.	Does (he/she) have a cell phone?	
	O YES1	
Р	O NO	E4g
	O DON'T KNOWd	E4g
	O REFUSEDr	E4g

E4f.	Can I have that number?	TI EDUONE	
	(201-989) (200-999) (0000-9999)	ELEPHONE	
Р	· · · · · · · · · · · · · · · · · · ·	d	
<u> </u>		r	
E4a i	NE D OR R		
E4g.	What is (his/her) work telephone	number?	
J			
	(201-989) (200-999) (0000-9999)		
	O NO WORK NUMBER	1	
Р	O DON'T KNOW	d	
	O REFUSED	r	
E4a I	NE D OR R		
E4h.	What is (his/her) email address?		
	(STRING 50)	EMAIL ADDRESS	
	O DON'T HAVE ONE	0	E4a
Р	O DON'T KNOW		E4a
	O REFUSED	r	E4a
E4h I	NE D OR R		
E4i.	Does (he/she) have another email addre	ss?	
		EMAIL ADDDECC	
	(STRING 50)	EMAIL ADDRESS	
	O NO	0	
	O DON'T KNOW	d	
Р	O DON 1 KNOW		

## THIRD CONTACT E4a NE D OR R E5a. What is the full name of the third person we should contact? FIRST NAME (STRING 50) MIDDLE INITIAL (STRING 1) LAST NAME (STRING 50) O DON'T KNOW......d **END** O REFUSED.....r **END** E5a NE d OR r E5b. What is (his/her) address? PROBE: Is there an apartment number? Street Address 1: (STRING (NUM)) Street Address 2: (STRING (NUM)) City: (STRING (NUM)) (STRING (NUM)) State: (STRING (NUM)) Zip: O DON'T KNOW......d O REFUSED.....r

٥.	What is (his/her) relationship to you?		
	Select one only		
1	SPOUSE/PARTNER	1	
	O MOTHER	2	
	O FATHER	3	
	O SISTER/BROTHER	4	
	O GRANDMOTHER/GRANDFATHER	5	
	O SON/DAUGHTER	6	
	O FRIEND	7	
	O OTHER (SPECIFY)	99	
	Specify (STRING 50)		
	O DON'T KNOW	d	
	O REFUSED	r	
E5a	NE d OR r		
	NE U OIX I		
5d.	What is (his/her) home telephone number?		
5d.			
5d.	What is (his/her) home telephone number?		
	What is (his/her) home telephone number?  HOME TELEPHONE	1	
	What is (his/her) home telephone number?  HOME TELEPHONE (201-989) (200-999) (0000-9999)		
	What is (his/her) home telephone number?  HOME TELEPHONE (201-989) (200-999) (0000-9999)  NO LANDLINE	d	
,	What is (his/her) home telephone number?  HOME TELEPHONE (201-989) (200-999) (0000-9999)  NO LANDLINE  O DON'T KNOW	d	
E5a	What is (his/her) home telephone number?  HOME TELEPHONE (201-989) (200-999) (0000-9999)  NO LANDLINE DON'T KNOW REFUSED	d	
E5a	What is (his/her) home telephone number?  HOME TELEPHONE  (201-989) (200-999) (0000-9999)  NO LANDLINE  DON'T KNOW  REFUSED	d r	
E5a	What is (his/her) home telephone number?  HOME TELEPHONE (201-989) (200-999) (0000-9999)  NO LANDLINE DON'T KNOW REFUSED  NE d OR r  Does (he/she) have a cell phone?	d r	E5g
E5a	What is (his/her) home telephone number?  HOME TELEPHONE (201-989) (200-999) (0000-9999)  NO LANDLINE  DON'T KNOW  REFUSED  NE d OR r  Does (he/she) have a cell phone?  YES	d r 1	·
E5a	What is (his/her) home telephone number?  HOME TELEPHONE (201-989) (200-999) (0000-9999)  NO LANDLINE  DON'T KNOW  REFUSED  NE d OR r  Does (he/she) have a cell phone?  YES  NO	d r 1 0	E5g E5g E5g
<b>≣5e.</b>	What is (his/her) home telephone number?  HOME TELEPHONE  (201-989) (200-999) (0000-9999)  NO LANDLINE  DON'T KNOW  REFUSED  NE d OR r  Does (he/she) have a cell phone?  YES  NO  DON'T KNOW  REFUSED  REFUSED	d r 1 0	E5g
E5a <b>≣5e.</b>	What is (his/her) home telephone number?  HOME TELEPHONE  (201-989) (200-999) (0000-9999)  NO LANDLINE  DON'T KNOW  REFUSED  NE d OR r  Does (he/she) have a cell phone?  YES  NO  DON'T KNOW  REFUSED	d r 1 0	E5g
E5a <b>≣5e.</b>	What is (his/her) home telephone number?  HOME TELEPHONE (201-989) (200-999) (0000-9999)  NO LANDLINE	d r 1 0	E5g
E5a <b>≣5e.</b>	What is (his/her) home telephone number?	d r 1 0	E5g
E5a	What is (his/her) home telephone number?  HOME TELEPHONE (201-989) (200-999) (0000-9999)  NO LANDLINE	d 1 0 d	E5g

O DON'T KNOW	(201-989) (200-999) (0000-9999)  NO WORK NUMBER	(201-989) (200-999) (0000-9999)  NO WORK NUMBER	5g.	What is (his/her) work telephone number?	
O NO WORK NUMBER	O NO WORK NUMBER	O NO WORK NUMBER		TELEPHONE	
O DON'T KNOW	O DON'T KNOW	O DON'T KNOW		(201-989) (200-999) (0000-9999)	
○ REFUSED	E5a NE d OR r  E5h. What is (his/her) email address?  EMAIL ADDRESS  (STRING 50)  DON'T HAVE ONE	E5a NE d OR r  E5h. What is (his/her) email address?  EMAIL ADDRESS  (STRING 50)  DON'T HAVE ONE	Р	O NO WORK NUMBER	
E5a NE d OR r  Sh. What is (his/her) email address?  EMAIL ADDRESS  (STRING 50)  O DON'T HAVE ONE	E5h. What is (his/her) email address?  EMAIL ADDRESS  (STRING 50)  DON'T HAVE ONE	E5a NE d OR r  E5h. What is (his/her) email address?  EMAIL ADDRESS  (STRING 50)  DON'T HAVE ONE 0 END  REFUSED r END  E5h NE 0, d, OR r  E5i. Does (he/she) have another email address?  EMAIL ADDRESS  EMAIL ADDRESS  O DON'T KNOW d  REFUSED r		O DON'T KNOWd	
EMAIL ADDRESS  (STRING 50)  O DON'T HAVE ONE	ESh. What is (his/her) email address?  EMAIL ADDRESS  (STRING 50)  DON'T HAVE ONE	ESh. What is (his/her) email address?  EMAIL ADDRESS  (STRING 50)  DON'T HAVE ONE		O REFUSEDr	
EMAIL ADDRESS  (STRING 50)  O DON'T HAVE ONE	EMAIL ADDRESS  (STRING 50)  O DON'T HAVE ONE	EMAIL ADDRESS  (STRING 50)  O DON'T HAVE ONE	E5a l	NE d OR r	
(STRING 50)  O DON'T HAVE ONE	(STRING 50)  DON'T HAVE ONE	(STRING 50)  DON'T HAVE ONE	Ξ5h.	What is (his/her) email address?	
(STRING 50)  O DON'T HAVE ONE	(STRING 50)  DON'T HAVE ONE	(STRING 50)  DON'T HAVE ONE			
O DON'T HAVE ONE	DON'T HAVE ONE	DON'T HAVE ONE			
O DON'T KNOW	O DON'T KNOW	O DON'T KNOW	P		END
© REFUSED	E5h NE 0, d, OR r  E5i. Does (he/she) have another email address?  EMAIL ADDRESS  O NO	E5h NE 0, d, OR r  E5i. Does (he/she) have another email address?  EMAIL ADDRESS  O NO			
E5h NE 0, d, OR r  5i. Does (he/she) have another email address?  EMAIL ADDRESS  O NO	E5h NE 0, d, OR r  E5i. Does (he/she) have another email address?  EMAIL ADDRESS  O NO	E5h NE 0, d, OR r  E5i. Does (he/she) have another email address?  EMAIL ADDRESS  O NO			
EMAIL ADDRESS  O NO	E5i. Does (he/she) have another email address?  EMAIL ADDRESS  NO	E5i. Does (he/she) have another email address?  EMAIL ADDRESS  NO			
EMAIL ADDRESS  O NO	EMAIL ADDRESS  O NO	EMAIL ADDRESS  O NO			
O NO	O NO	O NO	E5i.	Does (he/she) have another email address?	
O NO	O         NO	O         NO		EMAIL ADDDESS	
O DON'T KNOWd  REFUSEDr	O DON'T KNOWd  REFUSEDr	O DON'T KNOWd  REFUSEDr	P		
O REFUSEDr	O REFUSEDr	O REFUSEDr			
ND. Those are all of the questions I have. Thank you for your time.	END. Those are all of the questions I have. Thank you for your time.	END. Those are all of the questions I have. Thank you for your time.			
ND. Those are all of the questions I have. Thank you for your time.	ND. Those are all of the questions I have. Thank you for your time.	ND. Those are all of the questions I have. Thank you for your time.			
			END.	Those are all of the questions I have. Thank you for your time.	

