ATTACHMENT B

BASELINE DATA COLLECTION

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Evaluation of Employment Coaching for TANF and Related Populations

Baseline Data Collection

June 7, 2017

PUBLIC VERSION

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i

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 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.

- i1. Do you agree to participate in the Evaluation of Employment Coaching for TANF and Related Populations?
 - O YES.....1

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

A. CONTACT INFORMATION 1

ALL			
A1.	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).	., ARE
PACT	INSTRUCTION:	PLEASE ASK FOR MIDDLE NAME OF CLIENT	
		FIRST NAME	
	(STRING 50)		
		MIDDLE NAME	
	(STRING 20)		
		LAST NAME	
1a.		ire that we call you by the correct name. Do you go by another n	ame?
ALL A1a. PACT	I want to make su O YES O NO O DON'T KNOW O REFUSED		a me? A2 A2 A2
A1a. PACT	I want to make su YES NO DON'T KNOW REFUSED 01	ire that we call you by the correct name. Do you go by another n 	A2 A2
A1a. PACT A1A=1 A1b.	I want to make su YES NO DON'T KNOW REFUSED 01 Please spell that	ire that we call you by the correct name. Do you go by another n 	A2 A2
A1a. PACT	I want to make su YES NO DON'T KNOW REFUSED 01 Please spell that (STRING 50)	Ire that we call you by the correct name. Do you go by another n 	A2 A2

2.	What is your date of birth? 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). I ect? PROGRAMMER: IF R CONFIRMS THEY ARE <18 YEARS OLD, GO TO ENI	
ALL.		
3.	What is your Social Security number? (000-999) (00-99) (000-9999) (0000-99999)	
ACT	 O DON'T KNOW O REFUSED 	
ALL.		
4.	What is your home telephone number? Image: Description of the system of the s	d
ALL.		
5a. ^{ACT}	 Do you have a cell phone? YES NO DON'T KNOW REFUSED 	0 B1 d B1

A5a=(01
A5b.	What is your cell phone number?
PACT	CELL PHONE
	(201-989) (200-999) (0000-9999)
	O DON'T KNOWd
	• REFUSEDr
A5a=0	01
A6.	Is it okay for us to text you at this number? Message and data rates may apply.
30 Mth J3	• YES
	• NO
	O DON'T KNOWd
	• REFUSEDr
ALL	
A7.	What is another phone number where you can be reached?
	PHONE NUMBER
	(201-989) (200-999) (0000-9999)
30 Mth J3	O DON'T KNOWd
	O REFUSEDr

B. DEMOGRAPHIC AND SOCIOECONOMIC CHARACTERISTICS

elf-a	dministered: The next questions are about your background.	
\LL		
1.	Are you Hispanic, Latino, or of Spanish origin?	
	O YES	1
	O NO, NOT OF HISPANIC, LATINO OR SPANISH ORIGIN	0
	O DON'T KNOW	d
	• REFUSED	r
LL		
2.	What 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
	U WHITE	5
	OTHER (SPECIFY)	
	Specify (STRING (NUM))	
		d
		r
	IF OTHER SPECIFY (99): SPECIFY OTHER RACE	
L.		
8.	How do you describe yourself?	
	Select one only	
	O Male	1
	O Female, or	
	• Would you describe yourself in some other way?	3
	Specify (STRING (NUM))	
	O DON'T KNOW	d

34.	Wh	nat is the highest level of education you have completed?	
A += 1	IFI	RESPONDENT SAYS "HIGH SCHOOL," PROBE: Did you receive a diplom	na or GEI
A tailored NF	Se	elect one only	
	0	DID NOT COMPLETE HIGH SCHOOL OR GED	1
	0	HIGH SCHOOL: DIPLOMA (NOT GENERAL EDUCATION DEVELOPMENT OR GED)	2
	О	GENERAL EDUCATION DEVELOPMENT OR GED	3
	О	SOME COLLEGE BUT NO DEGREE	4
	О	2-YEAR OR 3-YEAR COLLEGE DEGREE (ASSOCIATE'S DEGREE)	5
	О	4-YEAR COLLEGE DEGREE (BACHELOR'S DEGREE)	6
	0	GRADUATE OR PROFESSIONAL DEGREE (e.g., MA, MBA, Ph.D., JD, MD)	7
	О	NEVER ATTENDED SCHOOL	8
	О	DON'T KNOW	d
	О	REFUSED	r
A I I			
ALL			
35. СР		nat is your current marital status—are you now married, separated, divor dowed, or have you never been married?	ced,
35.	wio		ced,
35. СР	wia Se	dowed, or have you never been married?	
35. СР	wia Se	dowed, or have you never been married? elect one only	1
35. СР	wic Se O	dowed, or have you never been married? elect one only MARRIED	1 2
35. СР	wic Se O	dowed, or have you never been married? elect one only MARRIED SEPARATED	1 2 3
35. ср	wic Se O O O	dowed, or have you never been married? elect one only MARRIED SEPARATED DIVORCED	1 2 3
35. СР		dowed, or have you never been married? Elect one only MARRIED SEPARATED DIVORCED WIDOWED	1 2 3 4 5
35. СР		dowed, or have you never been married? elect one only MARRIED SEPARATED DIVORCED WIDOWED NEVER MARRIED	1 2 3 4 5 d

Staff-administered: Now I would like to ask you some questions about the people who live with you.

Self-administered: The next questions are about people who live with you.

36.	How many adults age 18 or older <u>currently</u> live in <u>your</u> household at least half the time? Please include yourself.
	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 include biological, adopted, foster, step, and any other children.
	CHILDREN
	(0-99)
	(0-99) Q DON'T KNOWd
	(0-99) O DON'T KNOWd O REFUSEDr
ALL	O DON'T KNOWd
	O DON'T KNOWd
	O DON'T KNOWd O REFUSEDr
The n	 O DON'T KNOW
The n	 O DON'T KNOW
The n	 DON'T KNOW
The n	 DON'T KNOW
The n	 DON'T KNOW
The n	 DON'T KNOW
The n	 DON'T KNOW
The n	 DON'T KNOW

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

C. EMPLOYMENT STATUS AND BARRIERS

C1.		
SPED	Are you currently working for pay?	_
	Working for pay can include regular paid jobs, odd jobs, temporary jobs, work do your own business, "under the table" work, or any other types of work you have for pay.	done ir done
	O YES	C4
	O NO0	
	O DON'T KNOWd	
	• REFUSEDr	
C1 NE	1	
C2.	In the past 30 days have you worked for pay?	
J ed for =	PROBE: Please include any regular paid jobs, odd jobs, temporary jobs, work in own business, "under the table" work, or any other types of work you have done	
	• YES1	C4
	O NO0	
	O DON'T KNOWd	
	O REFUSEDr	
C2 NE	1	
C3.	In what month and year did you last work for pay?	
	PROBE: Please include any regular paid jobs, odd jobs, temporary jobs, work in jown business, "under the table" work, or any other types of work you have done	
	MONTH YEAR	C4
	(1-12) (1957-2017)	
	O NEVER WORKED FOR PAY0	C5
	O DON'T KNOWd	C4

	ow much [do/did] you get paid before taxes and deductions, at this job?
ре	ROBE: If your pay [varies/varied], please provide an average amount. If you are pa r job or for completing a particular task, please tell us the total amount you usuall ade per week or per month while doing this type of work.
ре	THE RESPONDENT DOES NOT PROVIDE A PAY PERIOD THEN PROBE: And, is the r hour, per week, per month, once every two weeks, twice a month, per year, by/daily, or something else?
IN	STRUCTION: ACCEPT MOST CONVENIENT PAY PERIOD.
\$4 DA	STRUCTION: IF ANSWER IS GREATER THAN \$50 PER HOUR, \$2000 PER WEEK, 000 ONCE EVERY 2 WEEKS, \$4000 TWICE A MONTH, \$100,000 PER YEAR, \$400 AY/DAILY, OR \$8000 MONTH, SAY: "I recorded [c4 and c4 amount answer]. Is that rrect?"
	 0-999,999.99) AMOUNT
,	
S	elect one only
0	
0	PER WEEK2
0	MONTH
0	ONCE EVERY TWO WEEKS4
0	TWICE A MONTH5
0	PER YEAR6
0	DAY/DAILY
	OTHER (SPECIFY)
Sp	ecify (STRING 100)
0	DON'T KNOWd
	REFUSEDr

5. I for	bo bet	the past <u>30 days</u> , how much money did you make from work? Please includ nuses, commissions, and regular overtime pay and count all money you re- fore taxes and deductions. If you held more than one job, include your total m all of your work during the past 30 days.	ceived
	(1	AMOUNT	C7
	0	 DON'T KNOW	d C6
	О	REFUSED	r C6
C5=d	OR	r	
6.	Sta	ff-administered: I just need to know a range. Can you tell me if it was	
d for	Se	lf-administered: We just need to know a range. Was it	
	Se	elect one only	
	0	\$0 - \$500,	1
	О	\$501 - \$1,000,	2
	0	\$1,001 to \$2,000,	3
	О	\$2,001 to \$3,000,	4
	О	\$3,001 to \$4,000,	5
	О	\$4,001 to \$5,000, or	6
	О	More than \$5,000?	7
	0	DON'T KNOW	d
	О	REFUSED	r
C1 O	R C2	2=1	
F C1	= 1,	FILL "DO"; IF C2=1, FILL "DID"	
7.	Ho job	w many hours (do/did) you usually work per week at your current or most r ?	ecent
	Se	elect one only	
	О	1-19 hours,	1
	О	20-34 hours,	2
	О	35-44 hours,	3
	0	45 hours or more	4
	0	DON'T KNOW	d
	О	REFUSED	r

ALL



Staff-administered: Now I am going to read you a list of things that some people find challenging in finding and keeping a good job.

Please tell me if the following has made it not at all hard, a little hard, somewhat hard, very hard, or extremely hard for you to find or keep a good job in the past year.

[FILL a-g]. Would you say that made it not at all hard, a little hard, somewhat hard, very hard, or extremely hard for you to find or keep a good job in the past year?

INSTRUCTION: IF NEEDED READ RESPONSE CATEGORIES FOR B-G

Self-administered: The next set of questions are about things that some people find challenging in finding and keeping a good job.

Would you say that [FILL a-g] made it not at all hard, a little hard, somewhat hard, very hard, or extremely hard for you to find or keep a good job in the past year?

					Selec	t one per ro	SW	
		NOT AT ALL	A LITTLE	SOMEWHA T	VERY	EXTREMELY	DK	REF
a.	Not having reliable transportation	O 0	$_{1}\mathbf{O}$	2 Q	з О	4 Q	\mathbf{O} b	r O 1
b.	Not having good enough childcare or family help	O 0	1 O	2 Q	з О	4 Q	\mathbf{O} b	C 1
C.	Not having the right clothes or tools for work	O 0	1 O	2 Q	з О	4 Q	\mathbf{O} b	r O 1
d.	Not having the right skills or education	O 0	$_{1}\mathbf{O}$	2 O	3 O 6	4 O	\mathbf{O} b	C 1
e.	Having a criminal record	O 0	$_{1}\mathbf{O}$	2 Q	3 О	4 Q	\mathbf{O} b	C 1
f.	A lack of jobs available in your area	O 0	$_{1}\mathbf{O}$	2 Q	3 О	4 O	\mathbf{O} b	C 1
g.	Not being able to do certain kinds or amounts of work, training, or school work because of your health	0 0	1 Q	2 Q	з О	4 🔾	\mathbf{O} b	C n

ALL

C9.

Do you currently have a valid driver's license? By valid we mean that it not expired, and has not been suspended or taken away.

0	YES	1
О	NO	0
О	DON'T KNOW	d
0	REFUSED	r

C9a. In the past six months, have you ever not been able to apply to a job because you didn't have a valid driver's license? Mathematica developed YES 0 YES 0 NO 0 DON'T KNOW 0 REFUSED	ALL	
developed O YES	C9a.	
O DON'T KNOWd		O YES
		O NO0
O REFUSEDr		O DON'T KNOWd
		• REFUSEDr

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

D1.	F f S	Staff-administered: Now I am going to ask yo Please tell me if you strongly disagree, disag following statements. Self-administered: The next set of questions Please indicate if you strongly disagree, disa following statements.	ree, agree are about	e, or stror employn	ngly ag nent-re	ree with t lated beh	he aviors	s.
				Select	one pei	r row		
			STRONGLY DISAGREE	DISAGREE	AGREE	STRONGLY AGREE	DK	REF
ED FROM SETTING	a.	I set long-term employment goals that I hope to achieve within a year, such as finding a job, finding a better job, getting promoted, or enrolling in further education	\mathbf{O}_1	2 🔾	3 O E	4 Q	\mathbf{O} b	r O
ED FROM SETTING	b.	l set specific short-term goals that will allow me to achieve my long-term employment goals	1 O 1	2 O	SΟ	4 O	${f O}$ b	C 1
ED FROM	c.	I know I need to get a job or a better job and really <i>think I should</i> work on finding one	1 0	2 O	SΟ	4 Q	${f O}$ b	C 1
TED FROM	d.	I guess being out of work is not good, but there is <i>nothing I can do</i> about it right now	1 Q	2 🔾	з О	4 Q	O b	r O 1
		a, D1b: Noonan, P.M., & Gaumer Erickson, A.S. (2017). T erpersonal competencies in any classroom. Thousand Oaks			aching in	trapersonal a	and	

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	
mauca	□ Select one only	
	O Every day or almost every day,1	
	O A few times a week,2	
	• A few times a month,	
	O About once a month4	
	O Only a few times, or	
	O Hardly ever or never?6	
	O RESPONDENT DIDN'T HAVE A JOB OR A JOB-RELATED APPOINTMENT0	
	O DON'T KNOWd	
	• REFUSEDr	

D 2	LL							
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? Wo you say that the following behaviors have been a problem never, sometimes, or often?								
**N	IOTE: The specific wording of items D3.1a-I and D3.2					rvey		
	because the items are adapted and reproduced Psychological Assessment Resources, Inc., 162							
	33549. Further reproduction is prohibited withou	it permiss	ion by PAR, Ir	IC.				
		[Selec	t one per	row	1		
Fo	or Review Only, Do NOT Copy	NEVER	SOMETIMES	OFTEN	DK	REF		
a.	Item 25 **SEE NOTE ABOVE	O 0	1 O	2 O	\mathbf{O} b	C n		
b.	Item 49	O ₀	1 O	2 Q	\mathbf{O} b	r O 1		
c.	Item 52	O 0	1 O	2 O	\mathbf{O} b	C 1		
d.	Item 6	O ₀	1 O	2 O	\mathbf{O} b	\mathbf{O} n		
e.	Item 71	O 0	\mathbf{O}_{1}	2 O	\mathbf{O} b	O 1		
f.	Item 75	C ₀	\mathbf{O}_{1}	2 O	\mathbf{O} b	\mathbf{O} n		
g.	Item 24	O ₀	\mathbf{O}_{1}	2 Q	\mathbf{O} b	C 1		
h.	Item 53	O 0	1 O	2 Q	\mathbf{O} b	r O 1		
i.	Item 9	O 0	1 O	2 Q	\mathbf{O} b	r O 1		
j.	Item 15 -edited	O 0	1 O 1	2 O	\mathbf{O} b	C 1		
	Item 63 - edited	o O	$_{1}\mathbf{O}$	2 O	\mathbf{O} b	r O		
k.		••						

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					
		NEVER	SOMETIMES	OFTEN	DK	REF	
a.	Item 28	O 0	1 O 1	2 🔾	\mathbf{O} b	r O	
b.	Item 69	••••••••••••••••••••••••••••••••••••••	1 O 1	2 Q	\mathbf{O} b	r O 1	
C.	Item 1	• • • • •	1 O 1	2 🔾	\mathbf{O} b	C 1	
d.	Item 72	• • • •	1 O	2 🔾	\mathbf{O} b	\mathbf{O} n	
e.	Item 23	• • • • •	1 O 1	2 🔾	\mathbf{O} b	C 1	
f.	Item 50	••••••••••••••••••••••••••••••••••••••	1 O	2 🔾	\mathbf{O} b	\mathbf{O} n	
g.	Item 64	••••••••••••••••••••••••••••••••••••••	1 O	2 O	\mathbf{O} b	C 1	
h.	Item 70 -edited	C ₀	$_{1}\mathbf{O}$	2 O	\mathbf{O} b	C 1	

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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
	le to do things as well as most	1 O 1	2 🔾	3 О	4 O	\mathbf{O} b	O 1
Rosenberg Self Esteem Scale b. I certain	nly feel useless at times	$_{1}\mathbf{O}$	2 Q	з О	4 O	\mathbf{O} b	r O 1
Rosenberg Self Esteem Scale	ll, I tend to feel that I am a failure.	$_{1}\mathbf{O}$	2 Q	\mathbf{O}_{ϵ}	4 O	\mathbf{O} b	C 1

ALL			
F	PROBE: Is there an apa	ı receive your mail? artment number?	
	Street Address 1:		(STRING (NUM)) (STRING (NUM))
	City:		(STRING (NUM)) (STRING (NUM))
((STRING (NUM)) d r
ALL			
(DON'T KNOW		IL ADDRESS 0 d r

3a.	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 you 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?				
		FIRST NAME				
	(STRING 50)					
	(STRING 1)	MIDDLE INITIAL				
	(STRING 50)	LAST NAME				
	. ,		d E			
	O REFUSED		r E			
E3a I	NE D OR R					
	What is (his/her) address?					
		umber?				
3b.	What is (his/her) address?	umber? (STRING (NUM))				
3b.	What is (his/her) address? PROBE: Is there an apartment n					
3b.	What is (his/her) address? PROBE: Is there an apartment no Street Address 1:	(STRING (NUM))				
3b.	What is (his/her) address? PROBE: Is there an apartment not Street Address 1: Street Address 2:	(STRING (NUM)) (STRING (NUM))				
3b.	What is (his/her) address? PROBE: Is there an apartment new Street Address 1: Street Address 2: City:	(STRING (NUM)) (STRING (NUM)) (STRING (NUM))				
E3a 3b.	What is (his/her) address? PROBE: Is there an apartment nertical Street Address 1: Street Address 2: City: State: Zip:	(STRING (NUM)) (STRING (NUM)) (STRING (NUM)) (STRING (NUM))				

E3a NE D OR R

E3a NE D OR R			
E3c. What is (his/her) relation	ship to you?		
Select one only			
P O SPOUSE/PARTNER			.1
O MOTHER			2
O FATHER			3
O SISTER/BROTHER			.4
O GRANDMOTHER/GR/	NDFATHER		.5
O SON/DAUGHTER			. 6
			.99
	(ST	,	
O DON'T KNOW			d
O REFUSED			r
IF OTHER SPECIFY (99): ENTER	OTHER RELATIONS		
E3a NE D OR R			
E3d. What is (his/her) home te	ephone number?		
(201-989) (200-999) (00		ELEPHONE	
. , , , ,			.1
O REFUSED			.r
E3a NE D OR R			
E3e. Does (he/she) have a cel	phone?		
P O YES			1
O NO			.0 E3ę
O DON'T KNOW			.d E3ç
O REFUSED			r E3ç

P ○ DON'T H ○ REFUSE E3a NE D OR R E3g. What (201-989) P ○ ○ DON'T H ○ REFUSE E3a NE D OR R E3a NE D OR R E3a NE D OR R (STRING 50) P ○ DON'T H ○ DON'T H ○ DON'T H ○ REFUSE E3h. What is (his ○ DON'T H ○ REFUSE	ED at is (his/her) work telep (200-999) (0000-9999) RK NUMBER (NOW ED s/her) email address?	TELEPHONE	
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○ REFUSE E3a NE D OR R What E3g. What (201-989) (201-989) ○ NO WOR ○ DON'T F ○ REFUSE E3a NE D OR R (201-989) ○ NO WOR ○ DON'T F ○ REFUSE E3a NE D OR R (STRING 50) P ○ DON'T F ○ REFUSE	ED at is (his/her) work telep (200-999) (0000-9999) RK NUMBER (NOW ED s/her) email address?	hone number? TELEPHONE 1 d r	
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P O NO WOI O DON'T H O REFUSE E3a NE D OR R E3h. What is (his (STRING 50 P O O DON'T H O DOR R E3h. What is (his P O O DON'T H O DON'T H O DON'T H O REFUSE E3h NE 0, D, OR R E3h NE 0, D, OR R	RK NUMBER KNOW ED S/her) email address?	1 d r EMAIL ADDRESS	
P O NO WOI O DON'T H O REFUSE E3a NE D OR R E3h. What is (his (STRING 50 P O O DON'T H O DOR R E3h. What is (his P O O DON'T H O DON'T H O DON'T H O REFUSE E3h NE 0, D, OR R E3h NE 0, D, OR R	RK NUMBER KNOW ED S/her) email address?	1drEMAIL ADDRESS	
O NO WOR O DON'T H O REFUSE E3a NE D OR R E3h. What is (his (STRING 50 O DON'T H O DON'T H O DON'T H O REFUSE E3h NE 0, D, OR R	<now ED S/her) email address?</now 	d	
O REFUSE E3a NE D OR R E3h. What is (his (STRING 50 P O DON'T H O DON'T H O REFUSE E3h NE 0, D, OR R	ED s/her) email address?		
E3a NE D OR R E3h. What is (his (STRING 50 P O DON'T H O DON'T H O REFUSE E3h NE 0, D, OR R	s/her) email address?	EMAIL ADDRESS	
E3h. What is (his (STRING 50) (STRING 50) (STRING 50) (STRING 50) (STRING 50) (STRING 50) (STRING)		
(STRING 50 (STRING 50 DON'T H O DON'T H O REFUSH E3h NE 0, D, OR R)		
 DON'T H DON'T H DON'T H REFUSH 			
 DON'T H DON'T H DON'T H REFUSH E3h NE 0, D, OR R 			
 DON'T H DON'T H DON'T H REFUSH 			
O DON'T H O REFUSE E3h NE 0, D, OR R	HAVE ONE		
O REFUSE E3h NE 0, D, OR R		0	E3a
E3h NE 0, D, OR R	-	d	E3a
	ED	r	E3a
E3i. Does (he/sh	2		
	ne) have another email a	address?	
(STRING 50))	EMAIL ADDRESS	
-		0	
		d	
		r	

L34	NE D OR R		
E4a.	What is the full name of the s	second person we should contact?	
		FIRST NAME	
	(STRING 50)		
		MIDDLE INITIAL	
	(STRING 1)		
		LAST NAME	
	(STRING 50)		
P		d	EN
	O REFUSED	r	EN
E4a	NE D OR R		
E4b.	What is (his/her) address?		
	PROBE: Is there an apartment numb	per?	
PACT	Street Address 1:	(STRING (NUM))	
	Street Address 2:	(STRING (NUM))	
	Street Address 2:	(STRING (NUM)) (STRING (NUM))	
	City:	(STRING (NUM))	
	City:	(STRING (NUM)) (STRING (NUM)) (STRING (NUM))	
	City:	(STRING (NUM)) (STRING (NUM))	

E4a NE D OR R

-	hat is (his/her) relationship to you?	
S	Select one only	
° 0	SPOUSE/PARTNER1	
0	MOTHER2	
0	FATHER	
0	SISTER/BROTHER4	
0	GRANDMOTHER/GRANDFATHER5	
0	SON/DAUGHTER6	
0	FRIEND7	
0	OTHER (SPECIFY)	
Sp	pecify (STRING 50)	
0	DON'T KNOWd	
0	REFUSEDr	
E4a NE D	D OR R	
E4d. W	hat is (his/her) home telephone number?	
	HOME TELEPHONE	
(2	201-989) (200-999) (0000-9999)	
(2 •		
0	NO LANDLINE	
	NO LANDLINE	
E4a NE [NO LANDLINE	_
E4a NE [NO LANDLINE	E4g
E4a NE E	NO LANDLINE	E4g E4g
E4a NE [NO LANDLINE	

Ξ4f.	Can I have that number? (201-989) (200-999) (0000-9999) TELEPHONE	
P] O DON'T KNOWd O REFUSEDr	
E4a	NE D OR R	
∃4g. ⊳	What is (his/her) work telephone number? (201-989) (200-999) O NO WORK NUMBER	
	• REFUSEDr	
E 40	NE D OR R	
⊑4a E4h.		
-411.	What is (his/her) email address?	
	EMAIL ADDRESS	
	(STRING 50)	
>	O DON'T HAVE ONE0	E4a
	DON'T KNOWd	E4a
	• REFUSEDr	E4a
E4h	NE D OR R	
4i.	Does (he/she) have another email address?	
	EMAIL ADDRESS (STRING 50)	
	O NO0	
0	O DON'T KNOWd	
	• REFUSEDr	

E4a	NE D OR R			
E5a.	What is the full name of the t	hird person we sł	nould contact?	
		FIRST NAM	F	
	(STRING 50)		L	
		MIDDLE INI	TIAL	
	(STRING 1)			
		LAST NAME	1	
P	(STRING 50)		d	
	O DON'T KNOW			END END
ГГа	NE d OR r			
Р	Street Address 1:			

E5c.	What is (his/her) relationship to you?	
	Select one only	
Р	O SPOUSE/PARTNER	1
	O MOTHER	2
	O FATHER	3
	• SISTER/BROTHER	4
	• GRANDMOTHER/GRANDFATHER	5
	• SON/DAUGHTER	6
	• FRIEND	7
	• OTHER (SPECIFY)	
	Specify (STRING	
	O DON'T KNOW	d
	• REFUSED	r
E5a N	NE d OR r	
E5d.	What is (his/her) home telephone number?	
		PHONE
	(201-989) (200-999) (0000-9999)	
Р		1
	O DON'T KNOW	d
	Q REFUSED	
		r
E5a M		r
	NE d OR r	r
	NE d OR r Does (he/she) have a cell phone?	
E5e.	NE d OR r Does (he/she) have a cell phone? O YES	
	NE d OR r Does (he/she) have a cell phone? • YES • NO	1 0 E5g
E5e.	NE d OR r Does (he/she) have a cell phone? O YES	1 0 E5g
E5e.	NE d OR r Does (he/she) have a cell phone? • YES • NO	1 0 E5g d E5g
E5e.	NE d OR r Does (he/she) have a cell phone? O YES O NO O DON'T KNOW O REFUSED	1 0 E5g d E5g
E5e. ₽ E5e=	NE d OR r Does (he/she) have a cell phone? O YES O NO O DON'T KNOW O REFUSED 1	1 0 E5g d E5g
E5e. ₽ E5e=	NE d OR r Does (he/she) have a cell phone? YES NO DON'T KNOW REFUSED 1 Can I have that number?	1 0 E5g d E5g
E5e. ₽ E5e=	NE d OR r Does (he/she) have a cell phone? O YES O NO O DON'T KNOW O REFUSED 1 Can I have that number? TELEPHONE	1 0 E5g d E5g
E5e. ₽	NE d OR r Does (he/she) have a cell phone? O YES O NO O DON'T KNOW O REFUSED 1 Can I have that number? (201-989) (200-999) (0000-9999)	1 0 E5g d E5g r E5g
E5e. ₽ E5e= E5f.	NE d OR r Does (he/she) have a cell phone? O YES O NO O DON'T KNOW O REFUSED 1 Can I have that number? TELEPHONE	1 0 E5g d E5g r E5g

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E5g.	What is (his/her) work telephone number?	
	TELEPHONE	
	(201-989) (200-999) (0000-9999)	
Ρ		
	O DON'T KNOWd	
	• REFUSEDr	
E5a	NE d OR r	
E5h.	What is (his/her) email address?	
	(STRING 50) EMAIL ADDRESS	
Р	\bigcirc O DON'T HAVE ONE	END
	O DON'T KNOWd	END
	• REFUSEDr	END
E5h		
	NE 0, d, OR r	
	NE 0, d, OR r Does (he/she) have another email address?	
	Does (he/she) have another email address?	
E5i.	Does (he/she) have another email address?	
E5i.	Does (he/she) have another email address? EMAIL ADDRESS	
E5i.	Does (he/she) have another email address? EMAIL ADDRESS	
E5i.	Does (he/she) have another email address? EMAIL ADDRESS O NO	
E5i. ₽	Does (he/she) have another email address? EMAIL ADDRESS NO	
E5h E5i. ₽	Does (he/she) have another email address? EMAIL ADDRESS NO	
₽	Does (he/she) have another email address? EMAIL ADDRESS NO	
₽	Does (he/she) have another email address? EMAIL ADDRESS NO	
₽	Does (he/she) have another email address? EMAIL ADDRESS NO	
E5i. ₽	Does (he/she) have another email address? EMAIL ADDRESS NO	
E5i. ₽	Does (he/she) have another email address? EMAIL ADDRESS NO	
₽	Does (he/she) have another email address? EMAIL ADDRESS NO	
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