**11 - 6 Month Follow-up Survey for Sites Testing Employment Intervention**

Building Bridges and Bonds

6-Month Follow-up Survey

OMB Control No.: xxxx-xxxx

 Expiration Date: xx/xx/xxxx

**Table of Contents**

**Introduction…………………………………………………………………………………………………………………………………4**

**Module A: Service Receipt and Participation……………………………………………………………………..…………7**

**Module B: Employment………………………………………………………………….…………….………..…………………..16**

**Module C: Criminal Justice…………….…………………………………………………..….….………………………………..35**

**Module D: Income and Well-being.………………..…………………………………….…….……..……………………….38**

**Module E: Cognitive and Behavioral.………………………………………….….………….………………………………..42**

**Module F: Child Support..….….….….….….….….….….….….……....……….…....…….………….……………………..53**

**Module G: Parenting.………………………………………………………………….….…..….…………………………………...57**

**Module H: Co-Parenting.…………………………………………………..………….………….………….……………………...66**

**Module I: Respondent Contact Information……………………………………….…….………………………………....68**

***CAPI PROGRAM ONLY:***

**[INTERVIEWER: DO NOT READ]**

**P1: HOW IS THE SURVEY BEING ADMINISTERED:**

1. **BY PHONE [SKIP TO INTRO]**
2. **IN-PERSON – NON-INCARCERATED [SKIP TO INTRO]**
3. **IN-PERSON – INCARCERATED**

**P2: IF INCARCERATED, HOW WAS THE DATA COLLECTED:**

1. **CELLPHONE CALL TO PHONE CENTER**
2. **CAPI SURVEY CONDUCTED ON LAPTOP**
3. **PAPER SURVEY**

Hello. My name is \_\_\_\_\_\_\_\_\_\_\_\_\_. I am here/calling from Abt SRBI on behalf of the Building Bridges and Bonds study. Could I please speak with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_?

**INTERVIEWER: IF NECESSARY, READ: “(RESPONDENT) has agreed to help with a study on fatherhood programs in (CATI: INSERT SITE LOCATION).**

**INTERVIEWER: IF FIRST PERSON WAS NOT REPONDENT AND NOW TALKING TO RESPONDENT, READ: “**Hello. My name is \_\_\_\_\_\_\_\_\_\_\_\_\_. I am here/calling from Abt SRBI. I’m contacting/calling you about the Building Bridges and Bonds study you joined about 6-9 months ago.”

Thank you for taking the time to speak with me today.

I am conducting interviews with people who agreed to be in a study about a program called Cognitive Behavioral Intervention for Justice Involved Individuals Seeking Employment offered at [SITE PROGRAM NAME]. The study is called Building Bridges and Bonds or B3 for short. It is funded by the U.S. Department of Health and Human Services and my company, Abt SRBI, is conducting this survey. You may have received a letter recently about the B3 study.

You entered the study in [RA Month, RA Year].  Your participation in this study will help policy-makers better understand how to help people find and keep jobs. This interview will include questions about your employment, well-being, parenting and co-parenting relationships, involvement with the criminal justice system, and child support. I will also ask your thoughts and opinions about how to handle various situations.

This interview should only take about 40 minutes.  [IF P1=3: SKIP THIS SENTENCE] [FOR CAPI VERSION: I] We will mail or e-mail [IF P1=2; give] you a $35 gift card [IF P1=2; money order] as a “thank you” for completing the interview.

Before we begin, I’d like to confirm that I am speaking with the correct person.

S1.

In order to do so, could you please give me your date of birth?

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MONTH RANGE 1-12

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DAY RANGE 1-31

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ YEAR RANGE 1930-2005

PROGRAMMER: VALIDATE AGAINST DOB FROM SAMPLE. IF DOB CONFIRMED, SET DOBCONF = 1 AND SKIP TO INFORMED CONSENT, ELSE SET DOBCONF=2.

S2.

Again, to confirm that I am speaking with the correct person, could you please give me the last four digits of your social security number?

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

PROGRAMMER: VALIDATE LAST 4 SSN FROM SAMPLE. IF SSN4 CONFIRMED, SET SSNCONF = 1 AND SKIP TO INFORMED CONSENT, ELSE SET SSNCONF = 2.

FAIL\_SCREENER

IF DOBCONF=2 and SSNCONF =2, SAY:

Thank you for taking the time to answer these questions. The information you provided does not match our records. I will need to check with my supervisor to determine how to resolve this issue. If we are able to do so, I will give you a call back.”

INFORMED CONSENT

Thank you for confirming this information with me.

Before we begin the survey, I would like to assure you that all of your responses on this survey will be kept private to the extent permitted by the law; the research staff has been trained in protecting private information and your name will not appear in any written reports we produce. All of the study results will be reported for groups of individuals; no results will be analyzed or reported for individuals.

Your responses to these questions are also completely voluntary. That means you may choose not to answer any question, or you may stop the interview if you wish, but we hope you don’t. Your responses to these questions will in no way affect your participation in the [PROGRAM NAME] program or affect your receipt of any kinds of public benefits or services.

According to the Paperwork Reduction Act, public reporting burden for this collection of information is estimated to average 40 minutes per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this collection is xxxx-xxxx and it expires xx/xx/xxxx. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Erika Lundquist; 16 E 34th St, MDRC, 19th Floor, New York, NY 10016; (212) 340-8605; Attn: OMB-PRA (XXXX-XXXX).

[FOR CAPI: ELIMINATE THE FOLLOWING SENTENCE ABOUT MONITORING] And finally, this interview might be monitored or recorded for quality control purposes. Do I have your consent to continue?

1 YES

2 NO [READ TERMINATION SCRIPT]

**PRIVACY1**

[IF INTERVIEW IS WITH INCARCERATED RESPONDENT (P1=3), SKIP TO PRIVACY 3]

[IF INTERVIEW OVER THE PHONE]:

Thank you. Before we start with the main survey, I want to ask an additional question to ensure we properly keep you response private.

Are you currently living in a work release center or half-way house?

1 YES – IN A WORK RELEASE CENTER OR HALFWAY HOUSE

2 NO [SKIP TO PRIVACY3]

7 DK [SKIP TO PRIVACY3]

8 REF [SKIP TO PRIVACY3]

[IF INTERVIEW IN PERSON AND RESPONDENT NOT INCARCERATED]:

INTERVIEWER: ARE YOU CURRENTLY SPEAKING TO RESPONDENT ON SITE IN A WORK RELEASE CENTER OR HALFWAY HOUSE?

1 YES – IN A WORK RELEASE CENTER OR HALFWAY HOUSE

2 NO [SKIP TO PRIVACY3]

7 DK [SKIP TO PRIVACY3]

8 REF [SKIP TO PRIVACY3]

PRIVACY2

We want to make sure that you are in a place where you can answer questions without concerns of risk and that no one with authority over you is influencing your decision to participate in this survey. We also want to make sure that your conversation is not being monitored by anybody with authority over you. If at any point you feel uncomfortable telling me information, just let me know and we will stop the interview.

INTERVIEWER: IF RESPONDENT IS HESITANT ABOUT PROCEEDING, TRY TO UNDERSTAND AND ADDRESS HIS/HER CONCERN.

STOP INTERVIEW AND SCHEDULE CALLBACK IF APPROPRIATE.

REMEMBER TO LEAVE HELPFUL NOTES FOR NEXT INTERVIEWER.

1 CONTINUE

2 STOP INTERVIEW [ASSIGN DISPOSTION TO RECONTACT]

PRIVACY3

Okay then.

[IF RESPONDENT IS INCARCERATED THEN ADD:] Before we begin, some of the questions in this survey may not be applicable given your current living situation. Please do your best to answer the questions.

[FOR ALL RESPONDENTS]: Let’s begin the survey.

1 [SKIP TO SECTION A]

TERMINATION SCRIPT

Thank you for taking the time to speak with me today. I’m sorry that you aren’t able to participate in our study. If you change your mind and decide you would like to participate, please call XXX-XXX-XXXX.

# Module A: Service Receipt and Participation

Aside from any services your received at [B3 program] or [name of its formal partners], we would like to learn about other services you received in your community. Please do not include services from [B3 program] or [name of its formal partners] in your responses.

**A1.** Excluding help from [B3 program] or [name of its formal partners], since [RA month, RA year] did you receive help to develop or improve your parenting skills?

1 YES

 2 NO [SKIP TO A2]

 7 DON’T KNOW [SKIP TO A2]

 8 REFUSED [SKIP TO A2]

**A1a.** Can you name the providers that helped you?

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

VERBATIM

97 DON’T KNOW

98 REFUSED

**A1b.** How many times did you receive help to develop or improve your parenting skills since [RA month, RA year]?

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

 VERBATIM

 97 DON’T KNOW

 98 REFUSED

**A1c.** Was the help you received to develop or improve your parenting skills delivered most often in a workshop/group setting or one-on-one with a case manager or other staff?

1 Workshop/group setting

 2 One-on-one with case manager or other staff

 7 DON’T KNOW

 8 REFUSED

**A1d.** Did you complete this program?

              1 YES

              2 NO

              7 DON’T KNOW

 8 REFUSED

**A2.** Excluding any help that you got from [B3 program] or [names of its formal partners], since [RA month, RA year] did you receive assistance to help you to improve your communication and relationship with your child or children’s other parent or legal guardian?

1 YES

 2 NO [SKIP TO A3]

 7 DON’T KNOW [SKIP TO A3]

 8 REFUSED [SKIP TO A3]

**A2a.** Can you name the providers that helped you?

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

 VERBATIM

 97 DON’T KNOW

 98 REFUSED

**A2b.** How many times did you receive help related to improving your communication and relationship with your child or children’s other parent or legal guardian since [RA month, RA year]?

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

 VERBATIM

 97 DON’T KNOW

 98 REFUSED

**A2c.** Was the assistance you received to help you improve your communication and relationship with your child or children’s other parent or legal guardian most often in a workshop/group setting or one-on-one with a case manager or other staff?

 1 Workshop/group setting

 2 One-on-one with case manager or other staff

 7 DON’T KNOW

 8 REFUSED

**A2d.** Did you complete this program?

              1 YES

              2 NO

              7 DON’T KNOW

 8 REFUSED

**A3.** Excluding help from [B3 program] or [name of its formal partners], since [RA month, RA year], did you receive help to find or keep a job, or help you deal with problems that interfered with your ability to work?

PROBES: this could include help preparing a resume, filling out a job application, preparing for a job interview, deciding what jobs to look for, looking for jobs, help with transportation, or help obtaining work clothes or supplies.

 1 YES

 2 NO [SKIP TO A4]

 7 DON’T KNOW [SKIP TO A4]

 8 REFUSED [SKIP TO A4]

**A3a**. Can you name the providers that helped you?

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

 VERBATIM

 97 DON’T KNOW

 98 REFUSED

**A3b.** How many times did you receive help to get or keep a job since [RA month, RA year]?

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

 VERBATIM

 97 DON’T KNOW

 98 REFUSED

**A3c.** Was the help you received find or keep a job most often delivered in a workshop/group setting or one-on-one with a case manager or other staff?

 1 Workshop/ group setting

 2 One-on-one with a case manager or other staff

 7 DON’T KNOW

 8 REFUSED

**A3d.** Did you complete this program?

              1 YES

              2 NO

              7 DON’T KNOW

 8 REFUSED

**A4.** Excluding help from [B3 program] or [name of its formal partners], since [RA month, RA year] did you receive substance abuse services?

PROBES: this could include detoxification, outpatient substance abuse treatment, medicinal treatment such as methadone, residential treatment, or self-help groups such as Alcoholics Anonymous or Narcotics Anonymous.

 1 YES

 2 NO [SKIP TO A5]

 7 DON’T KNOW [SKIP TO A5]

 8 REFUSED [SKIP TO A5]

**A4a.** Can you name the providers that helped you?

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

 VERBATIM

 97 DON’T KNOW

 98 REFUSED

**A4b.** How many times did you receive substance abuse services since [RA month, RA year]?

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

 VERBATIM

 97 DON’T KNOW

 98 REFUSED

**A4c.** Was the substance abuse service most often delivered in a workshop/group setting or one-on-one with a case manager or other staff member?

 1 Workshop/group setting

 2 One-on-one with case manager or other staff member

 7 DON’T KNOW

 8 REFUSED

**A4d.** Did you complete this program?

              1 YES

              2 NO

              7 DON’T KNOW

 8 REFUSED

**A5.** Excluding help from [B3 program] or [name of its formal partners], since [RA month, RA year] did you participate in any program to learn how patterns of thinking can affect your behavior or the choices you make? Sometimes these services are called cognitive-behavioral services.

 1 YES

 2 NO [SKIP TO A6]

 7 DON’T KNOW [SKIP TO A6]

 8 REFUSED [SKIP TO A6]

**A5a.** Can you tell me the name of this program or programs? Mark all the apply. Was it…

 1 Thinking for a Change

2 Reasoning and Rehabilitation

3 Moral Reconation Therapy

4 Aggression Replacement Training

5 Interpersonal Problem Solving

6 Cognitive Interventions Program

7 Courage to Change

 8 Other (SPECIFY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

 97 DON’T KNOW

 98 REFUSED

**A5b.** Did you participate in these cognitive-behavioral services while in jail or prison?

 1 YES

 2 NO

 3 I have never been to jail or prison

 7 DON’T KNOW

 8 REFUSED

**A5c.** How many times did you receive these services to teach you about how changing your thoughts can lead you to act differently or make different choices in your life since [RA month, RA year]?

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

 VERBATIM

 97 DON’T KNOW

 98 REFUSED

**A5d.** Were these services most often delivered in a workshop/group setting or one-on-one with a case manager or other staff member?

 1 Workshop/group setting

 2 One-on-one with case manager or other staff member

 7 DON’T KNOW

 8 REFUSED

**A5e.** Did you complete a cognitive-behavioral program?

              1 YES

              2 NO

              7 DON’T KNOW

 8 REFUSED

Now I want to ask you about your overall experience with the [B3 organization].

**A6.** Are you still receiving support from [B3 organization]?

 1 YES [SKIP TO A7a]

 2 NO

 7 DON’T KNOW

 8 REFUSED

**A6a** What is the main reason you stopped going to [B3 organization]?Was it that,

 1 The program was finished

 2 I got what I needed before the program was finished

 3 I did not like the program or service

 4 I did not learn anything new

 5 I had other commitments

 6 Transportation or coordination issues

 7 Got a job

 8 Other (SPECIFY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

 97 DON’T KNOW

 98 REFUSED

**A6b.** How often are you still in touch with staff at [B3 organization]?

1 Every day or almost every day

2 3 or 4 times per week

3 1 or 2 times per week

4 2 or 3 times in the past month

5 Once in the past month

6 Less than once a month

7 Not at all

 97 DON’T KNOW

 98 REFUSED

**A6c.** How often are you still in touch with other fathers from [B3 organization]?

1 Every day or almost every day

2 3 or 4 times per week

3 1 or 2 times per week

4 2 or 3 times in the past month

5 Once in the past month

6 Less than once a month

7 Not at all

 97 DON’T KNOW

 98 REFUSED

These next questions are about your overall experiences with the [B3 organization].

**A7a.** Thinking back on all the support and services you received from [B3 organization], how helpful was the program to you on a scale from 1 – 10 where 1 is not very helpful and 10 is very helpful?

 1 2 3 4 5 6 7 8 9 10

Not very helpful Very helpful

 97 DON’T KNOW

 98 REFUSED

**A7b.** Think back to all the times that the [B3 staff] contacted you – either by phone, email, text, or another way – how satisfied are you with the amount of contact from staff? Answer using a scale from 1 to 10, where 1 is you heard from them too much and 10 is you did not hear from them enough.

 1 2 3 4 5 6 7 8 9 10

Did not hear from them enough Heard from them too much

 97 DON’T KNOW

 98 REFUSED

**A7c.** How would you rate the instructors and staff at [B3 organization] at understanding who you are and where you are coming from?

 1 Excellent

 2 Very good

 3 Good

 4 Fair

 5 Poor

 7 DON’T KNOW

 8 REFUSED

IF RANDOM ASSIGNMENT = PROGRAM GROUP THEN GO TO A8A; IF RANDOM ASSIGNMENT = CONTROL GROUP THEN GO TO B1.

**A8a**. While you were involved in the [CBE] program, how often did you use the skills were you learning between the program sessions?

 1 Every day or almost every day

 2 At least once a week

 3 At least once a month

 4 Less than once a month

 5 Never

 7 DON’T KNOW

 8 REFUSED

**A8b.** Nowadays, how often do you use the skills or strategies you learned in the [CBE] program sessions?

 1 Every day or almost every day

 2 At least once a week

 3 At least once a month

 4 Less than once a month

 5 Never

 7 DON’T KNOW

 8 REFUSED

**Module B: Employment**

**B1**. How much you have worked since [RA month, RA Year]? Please include any work that was paid for in cash, or work done in exchange for meals, clothing, a place to live, or something else. This could include on-the-books or off-the-books work, self-employment, temporary work, work as a day laborer, or working side jobs. Was it …

1 all the time

2 most of the time

3 half the time

4 some of the time

5 seldom

6 never

7 DON’T KNOW

8 REFUSED

**B2.** Can you tell me, in weeks or months, how much you have worked since [RA month, RA Year]?

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

 AMOUNT OF TIME (Wks/Months)

 97 DON’T KNOW [SKIP TO B4]

 98 REFUSED [SKIP TO B4]

**B3**. Just to confirm, was that…

1 weeks

2 months

3 or some other time period (SPECIFY\_\_\_\_\_)

7 DON’T KNOW

8 REFUSED

**B4.** Were you working in [RA month, RA Year]?

 1 YES [SKIP TO B6]

 2 NO

 7 DON’T KNOW

 8 REFUSED

**B5.** Thinking of the first job you started working at after [RA month, RA Year], when did this job start?

INTERVIEWER PROBE FOR SEASON IF DON’T KNOW MONTH.

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

 MM (RANGE: 1-12)/ YYYY (RANGE: 1950-current year)

 13 WINTER

 14 SPRING

 15 SUMMER

 16 FALL

 01/1950 BEFORE OR ON JANUARY 1950

97/9997 DON’T KNOW

 98/9998 REFUSED

**B6**. Do you currently have a job? This includes permanent full-time or part-time jobs, or temporary, transitional or seasonal jobs.

 1 YES [SKIP TO B8]

 2 NO

 7 DON’T KNOW

 8 REFUSED

**B7.**  Just to be sure, have you done any work in the past 2 weeks for pay? This could be any work that was paid for in cash, or work done in exchange for meals, clothing, a place to live, or something else. It could be on-the-books or off-the-books work, self-employment, temporary work, work as a day laborer, or workingside jobs.

1 YES

 2 NO [SKIP TO B33]

 7 DON’T KNOW [SKIP TO B33]

8 REFUSED [SKIP TO B33]

**B8.** IF B6 =1 READ VERSION 1. ELSE READ VERSION 2.

VERSION 1: How many days in the past 2 weeks did you work for pay? Please include any work that was paid for in cash, or work done in exchange for meals, clothing, a place to live, or something else. It could include on-the-books or off-the-books work, self-employment, temporary work, work as a day laborer, or working side jobs.

VERSION 2: How many days in the past 2 weeks did you work?

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

 NUMBER OF DAYS (RANGE: 0-14)

96 MORE THAN 14 DAYS

97 DON’T KNOW

98 REFUSED

**B9.** How many jobs do you currently have? This includes permanent full-time or part-time jobs, temporary, transitional, or seasonal jobs, any other work that was paid for in cash, or work done in exchange for meals, clothing, a place to live, or something else.

INTERVIEWER: SELF-EMPLOYMENT OR TEMPORARY OR “TEMP” WORK IN THE SAME FIELD COUNTS AS ONE JOB. DAY LABORER WORK COUNTS AS ONE JOB.

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

 NUMBER OF JOBS (RANGE: 1- 10)

96 MORE THAN 10

 97 DON’T KNOW

 98 REFUSED

**B10.** IF NUMBER OF JOBS IN B9 = 1, SKIP TO B13

Thinking of all your current jobs, how many hours did you usually work per week in the last month? Please consider all hours, including any extra hours, overtime, work you did at home, and so forth.

INTERVIEWER: IF SCHEDULE IS IRREGULAR OR VARIES: How many hours did you work in the last week you worked at these jobs?

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

 NUMBER OF HOURS (RANGE: 1 to 80)

 96 OVER 80 HOURS PER WEEK

 97 DON’T KNOW

 98 REFUSED

**B11**.How much did you earn from all of these jobs in the last week? Please include regular pay, tips, commissions, and overtime pay.

 $ \_\_\_ \_\_\_ , \_\_\_ \_\_\_ \_\_\_ . \_\_\_ \_\_\_

 AMOUNT (RANGE: .01-to 99,999.94) [SKIP TO B12]

99999.95 MORE THAN $99,999.94

99999.96 WORK DONE IN EXCHANGE FOR MEALS, CLOTHING, A PLACE TO LIVE, OR SOMETHING ELSE [SKIP TO B13]

99999.97 DON’T KNOW

 99999.98 REFUSED

**B11a.** In the last week, did you earn  ...

1    $1 to $99

2    $100 to $249

3    $250 to $499

4    $500 to $749

5    $750 to $999

6    $1,000 or more

7    DON'T KNOW [SKIP TO B13]

8    REFUSED [SKIP TO B13]

**B12.** Was that…

 1 before taxes, or

 2 after taxes

 7 DON’T KNOW

 8 REFUSED

**B13**. IF B9 >1 OR B9 = DON’T KNOW, REFUSED, READ VERSION 1. ELSE READ VERSION 2.

VERSION 1: Now please think about the job where you worked the most hours in the past 2 weeks. What is the name of this employer?

VERSION 2: What is your employer’s name?

INTERVIEWER INSTRUCTION:

IF HOURS ARE THE SAME: Who have you worked for the longest?

IF NECESSARY: This is simply to help make later questions more clear. We will not contact your employer. If you would like, you can tell me your job title instead.

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

 NAME OF EMPLOYER

 96 SELF EMPLOYED

 97 DON’T KNOW

 98 REFUSED

**B14**. IF B13 = DON’T KNOW, REFUSED, READ VERSION 1. ELSE READ VERSION 2.

VERSION 1: I’d like to ask you some questions about the job that you worked at for the most hours in the last two weeks. When did this job start?

VERSION 2: I’d like to ask you some questions about that job. When did this job start?

INTERVIEWER PROBE FOR SEASON IF DON’T KNOW MONTH.

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

 MM (RANGE: 1-12 / YYYY (RANGE: 1950-current year)

 13 WINTER

 14 SPRING

 15 SUMMER

 16 FALL

 01/1950 BEFORE OR ON JANUARY 1950

97/9997 DON’T KNOW

 98/9998 REFUSED

**B15.** Which of the following best describes this work? Is it…

1 a permanent job

2 a temporary, transitional, or seasonal job that is not permanent

3 a series of day labor or odd jobs (work where you have to find new jobs on a regular basis in order to get paid), or

4 something else (SPECIFY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

 7 DON’T KNOW

 8 REFUSED

**B16.** What kind of work do you do?

INTERVIEWER PROBE: What are your job duties or typical tasks?

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

 TYPE OF JOB

 97 DON’T KNOW

 98 REFUSED

**B17.** SKIP IF B13 = 96.

Are you self-employed or do you own your own business?

1 YES

2 NO

7 DON’T KNOW

 8 REFUSED

**B18.** Are taxes deducted from your pay for this job?

1 YES

2 NO

 7 DON’T KNOW

 8 REFUSED

**B19.** Is this job…

 1 full-time work (which means 35 hours or more per week)

2 part-time work (which means less than 35 hours per week)

3 work where the hours vary substantially from week to week

 7 DON’T KNOW

 8 REFUSED

**B20.** Which of the following best describes your usual weekly work schedule at your job during the last month? Please mark all that apply. Did you work…

INTERVIEWER: IF R HAS NOT WORKED AT THE JOB FOR A FULL MONTH: If you have worked for less than one month, please describe your schedule for the weeks you have worked so far.

 1 daytime shifts

 2 evening shifts (6 P.M. - 11 P.M.)

 3 night shifts (11 P.M.-7 A.M.)

 4 weekend shifts

 5 an irregular schedule, that is one that changed from day to day or week to week

 7 DON’T KNOW

 8 REFUSED

**B21.** How far in advance do you usually know your work schedule for this job?

1 One week or less

2 Between 1 and 2 weeks

3 Between 2 and 3 weeks

4 Between 3 and 4 weeks

5 4 weeks or more

6 My work schedule doesn’t usually change from week to week

7 DON’T KNOW

8 REFUSED

**B22.** Which of the following statements best describes how your working hours are decided? By working hours we mean the time you start and finish work, and not the total hours you work per week or month.

1 Starting and finishing times are decided by my employer and I cannot change them on my own

2 Starting and finishing times are decided by my employer but with my input

3 I can decide the time I start and finish work, within certain limits

4 I am entirely free to decide when I start and finish work

5 When I start and finish work depends on things outside of my control and outside of my employer’s control.

7 DON’T KNOW

8 REFUSED

**B23.** In the last month, how many hours did you usually work per week at this job? Please consider all hours, including any extra hours, overtime, work you did at home, and so forth. Please do not include weeks in which you missed work because of illness or vacation.

INTERVIEWER: IF SCHEDULE IS IRREGULAR OR VARIES: How many hours did you work in the last week you worked at this job?

INTERVIEWER: IF R HAS NOT WORKED AT THE JOB FOR A FULL MONTH: If you have worked for less than one month, please think of the hours in the weeks you have worked so far.

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

 NUMBER OF HOURS (RANGE: 1 to 80)

 96 OVER 80 HOURS PER WEEK

 97 DON’T KNOW

 98 REFUSED

**B24**. In the last month, what is the greatest number of hours you’ve worked in a week at this job?

INTERVIEWER: IF NEEDED: Please consider all hours, including any extra hours, overtime, work you did at home, and so forth.

INTERVIEWER: IF R HAS NOT WORKED AT THE JOB FOR A FULL MONTH: If you have worked for less than one month, please think of the hours in the weeks you have worked so far.

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

 NUMBER OF HOURS (RANGE: 1 to 80)

 96 OVER 80 HOURS PER WEEK

 97 DON’T KNOW

 98 REFUSED

**B25.** In the last month, what is the fewest number of hours you’ve worked in a week at this job?

INTERVIEWER: IF NEEDED: Please do not include weeks in which you missed work because of illness or vacation.

INTERVIEWER: IF R HAS NOT WORKED AT THE JOB FOR A FULL MONTH: If you have worked for less than one month, please think of the hours in the weeks you have worked so far.

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

 NUMBER OF HOURS (RANGE: 1 to 80)

 96 OVER 80 HOURS PER WEEK

 97 DON’T KNOW

 98 REFUSED

**B26.** How are you paid for this work? Is it…

1 by check or direct deposit

2 in cash

3 done in exchange for meals, or clothing, or a place to live, or

4 in some other way (SPECIFY\_\_\_\_\_\_\_\_\_\_\_\_\_)

7 DON’T KNOW

8 REFUSED

**B27.** Which of the following best describes your employer? Your employer is the company, program or individual who hired you to do this work and who pays you for this work. Please mark all that apply. Is your employer…

1 a staffing or temp agency

2 an employment or fatherhood program

3 the company or individual the work is being done for

4 someone else (SPECIFY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

 7 DON’T KNOW

 8 REFUSED

**B28.** How did you get this job? Did you…

              1 apply for a job at a company or program that you work for,

              2 apply for work at  a staffing or temp agency,

3 show up to a location where people come to look for workers that can help with a particular job, or

              4 do something else? (SPECIFY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

 7 DON’T KNOW

 8 REFUSED

**B29**. SKIP TO B31 IF B26 = 3 OR 4.

How much did you earn from this job in the last week? Please include regular pay, tips, commissions, and overtime pay.

 $ \_\_\_ \_\_\_ , \_\_\_ \_\_\_ \_\_\_ . \_\_\_ \_\_\_

 AMOUNT (RANGE: .01-to 99,999.94) [SKIP TO B30]

 99999.95 MORE THAN $99,999.94

 99999.97 DON’T KNOW

 99999.98 REFUSED

**B29a.** In the last week, did you earn  ...

1    $1 to $99

2    $100 to $249

3    $250 to $499

4    $500 to $749

5    $750 to $999

6    $1,000 or more

7    DON'T KNOW [SKIP TO B31]

8    REFUSED [SKIP TO B31]

**B30.** Was that…

1 before taxes, or

 2 after taxes

 7 DON’T KNOW

 8 REFUSED

**B31.**Some employers offer health insurance for their employees, but sometimes workers don’t participate or receive health coverage due to cost or other reasons. For this job, would you say:

1 no health insurance is available

2 health insurance is available, but you don’t participate, or

3 you are covered by health insurance made available by your employer

7 DON’T KNOW

8 REFUSED

**B32.**Which of the following other benefits are available to you on your job?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | YES | NO | DON’TKNOW | REFUSED |
| a. Sick days with full pay? | 1 | 2 | 7 | 8 |
| b. Paid vacation? | 1 | 2 | 7 | 8 |
| c. Paid holidays? | 1 | 2 | 7 | 8 |
| d. Dental benefits, including any offered at a cost to you? | 1 | 2 | 7 | 8 |
| e. A retirement or 401K plan? | 1 | 2 | 7 | 8 |
| f. Tuition reimbursement?  | 1 | 2 | 7 | 8 |

[SKIP TO B62]

**B33.** IF B6 AND B7 = NO:

Did you work at any jobs since [RA month, RA Year]? Again, this could be any work that was paid for in cash, or work done in exchange for meals, clothing, a place to live, or something else. It could include on-the-books or off-the-books work, self-employment, temporary work, work as a day laborer, or working side jobs.

 1 YES

 2 NO [SKIP TO B62]

 7 DON’T KNOW [SKIP TO B62]

 8 REFUSED [SKIP TO B62]

**B34.** Since [RA month, RA Year], how many jobs have you had?

INTERVIEWER: SELF-EMPLOYMENT OR TEMPORARY OR “TEMP” WORK IN THE SAME FIELD COUNTS AS ONE JOB. DAY LABORER WORK COUNTS AS ONE JOB.

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

 NUMBER OF JOBS (RANGE: 1- 20)

 96 MORE THAN 20

 97 DON’T KNOW

 98 REFUSED

**B35.** Since [RA month, RA Year], what job did you work at for the most weeks? What is that employer’s name?

IF NECESSARY: This is simply to help make later questions more clear. We will not contact your employer. If you would like, you can tell me your job title instead.

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

 EMPLOYER’S NAME

 96 SELF-EMPLOYED

 97 DON’T KNOW

 98 REFUSED

**B36**. How long did you work at that job?

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

 LENGTH OF TIME AT JOB

 97 DON’T KNOW

 98 REFUSED

**B37**. Just to confirm, was that…

1 weeks

2 months, or

3 some other time period (SPECIFY\_\_\_\_\_)

7 DON’T KNOW

8 REFUSED

**B38:** When did that job end?

INTERVIEWER PROBE FOR SEASON IF DON’T KNOW MONTH.

INTERVIEWER INSTRUCTION: IF DATE IS BEFORE[RA MONTH, RA YEAR], ASK HIM IF THERE WAS A JOB HE WORKED AT AFTER THIS JOB. IF SO, GO BACK TO B37 AND ASK ABOUT THIS OTHER JOB.

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

MM (RANGE: 1-12)/ YYYY (RANGE: 1950-current year)

 13 WINTER

 14 SPRING

 15 SUMMER

 16 FALL

 01/1950 BEFORE OR ON JANUARY 1950

97/9997 DON’T KNOW

 98/9998 REFUSED

**B39.** Why did you stop working at this job?

1 lost job or laid off

2 quit job [SKIP TO B39b]

3 temporary job that ended [SKIP TO B40]

4 some other reason (SPECIFY\_\_\_\_\_\_\_\_\_\_\_\_\_) [SKIP TO B40]

 7 DON’T KNOW [SKIP TO B40]

 8 REFUSED [SKIP TO B40]

**B39a.** How did you lose the job?

1 fired,

2 laid off,

3 company relocated/went out of business, [SKIP TO B40]

4 something else (SPECIFY\_\_\_\_\_\_\_\_\_\_\_\_\_) [SKIP TO B40]

 7 DON’T KNOW

8 REFUSED

**B39a.1** Why were you fired or laid off?

INTERVIEWER: DON’T READ RESPONSES. MARK ALL THAT APPLY.

1 company downsized [SKIP TO B40]

2 conflicts with staff or coworkers [SKIP TO B40]

3 drug or alcohol use [SKIP TO B40]

4 missing work/showing up late [SKIP TO B40]

5 poor performance [SKIP TO B40]

6 stealing or other misconduct [SKIP TO B40]

7 unable to work because of injury, illness or disability, incarcerated, family responsibilities,

transportation [SKIP TO B40]

8 some other reason (SPECIFY\_\_\_\_\_\_\_\_\_\_\_\_\_) [SKIP TO B40]

97 DON’T KNOW [SKIP TO B40]

 98 REFUSED [SKIP TO B40]

**B39b.** Why did you quit?

INTERVIEWER: DON’T READ RESPONSES. MARK ALL THAT APPLY.

1 got a new/different job

2 conflicts with staff or coworkers

3 workplace conditions (schedule, pay, etc)

4 did not like the job

5 going to school

6 unable to work because of injury, illness or disability, incarcerated, family responsibilities,

transportation

7 wasn’t interested in working

8 some other reason (SPECIFY\_\_\_\_\_\_\_\_\_\_\_\_\_)

97 DON’T KNOW

 98 REFUSED

**B40**. When did this job start?

INTERVIEWER PROBE FOR SEASON IF DON’T KNOW MONTH.

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

 MM (RANGE: 1-12)/ YYYY (RANGE: 1950-current year)

 13 WINTER

 14 SPRING

 15 SUMMER

 16 FALL

 01/1950 BEFORE OR ON JANUARY 1950

97/9997 DON’T KNOW

 98/9998 REFUSED

**B41.** Which of the following best describes this work? Was it…

1 a permanent job

2 a temporary, transitional, or seasonal job that was not permanent

3 a series of day labor or odd jobs (work where you had to find new jobs on a regular basis in order to get paid), or

4 something else (SPECIFY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

 7 DON’T KNOW

 8 REFUSED

**B42.** What kind of work did you do?

INTERVIEWER PROBE: What were your job duties or typical tasks?

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

 TYPE OF JOB

 97 DON’T KNOW

 98 REFUSED

**B43.** SKIP IF B35 = 96.

Were you self-employed or did you own your own business?

1 YES

2 NO

7 DON’T KNOW

 8 REFUSED

**B44.** Were taxes deducted from your pay for this job?

1 YES

2 NO

 7 DON’T KNOW

 8 REFUSED

**B45.** Was this job…

 1 full-time work (which means 35 hours or more per week)

2 part-time work (which means less than 35 hours per week)

3 work where the hours varied substantially from week to week

 7 DON’T KNOW

 8 REFUSED

**B46.** Which of the following best describes your usual weekly work schedule when you left this job? Please mark all that apply. Did you work …

 1 daytime shifts

 2 evening shifts (6 P.M. - 11 P.M.)

 3 night shifts (11 P.M.-7 A.M.)

 4 weekend shifts

 5 an irregular schedule, that is one that changed from day to day or week to week

 7 DON’T KNOW

 8 REFUSED

**B47.** How far in advance did you usually know your work schedule for this job?

1 One week or less

2 Between 1 and 2 weeks

3 Between 2 and 3 weeks

4 Between 3 and 4 weeks

5 4 weeks or more

6 My work schedule doesn’t usually change from week to week

7 DON’T KNOW

8 REFUSED

**B48.** Which of the following statements best describes how your working hours were decided? By working hours we mean the time you started and finished work, and not the total hours you worked per week or month.

1 Starting and finishing times were decided by my employer and I could not change them on my own

2 Starting and finishing times were decided by my employer but with my input

3 I could decide the time I started and finished work, within certain limits

4 I was entirely free to decide when I started and finished work

5 When I started and finished work depended on things outside of my control and outside of my employer’s control.

7 DON’T KNOW

8 REFUSED

**B49.**In the last month you worked at this job, how many hours per week did you usually work at this job? Please consider all hours, including any extra hours, overtime, work you did at home, and so forth. Please do not include weeks in which you missed work because of illness or vacation.

INTERVIEWER: IF SCHEDULE WAS IRREGULAR OR VARIED: How many hours did you work in the last week you worked at this job?

INTERVIEWER: IF R DID NOT WORK AT THE JOB FOR A FULL MONTH: If you worked at this job for less than a month, please think of the hours per week when you were there.

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

 NUMBER OF HOURS (RANGE: 1 to 80)

 96 OVER 80 HOURS PER WEEK

 97 DON’T KNOW

 98 REFUSED

**B50**. In the last month you worked at this job, what was the greatest number of hours you worked in a week at this job?

INTERVIEWER: IF NEEDED: Please consider all hours, including any extra hours, overtime, work you did at home, and so forth.

INTERVIEWER: IF R DID NOT WORK AT THE JOB FOR A FULL MONTH: If you worked for less than one month, please think of the hours in the weeks you did work.

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

 NUMBER OF HOURS (RANGE: 1 to 80)

 96 OVER 80 HOURS PER WEEK

 97 DON’T KNOW

 98 REFUSED

**B51.** In the last month you worked at this job, what was the fewest number of hours you worked in a week at this job?

INTERVIEWER: IF NEEDED: Please do not include weeks in which you missed work because of illness or vacation.

INTERVIEWER: IF R DID NOT WORK AT THE JOB FOR A FULL MONTH: If you worked for less than one month, please think of the hours in the weeks you did work.

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

 NUMBER OF HOURS (RANGE: 1 to 80)

 96 OVER 80 HOURS PER WEEK

 97 DON’T KNOW

 98 REFUSED

**B52.** How were you paid for this work? Was it…

1 by check or direct deposit

2 in cash

3 done in exchange for meals, or clothing, or a place to live, or

4 in some other way (SPECIFY\_\_\_\_\_\_\_\_\_\_\_\_\_)

7 DON’T KNOW

8 REFUSED

**B53.** Which of the following best describes your employer? Your employer is the company, program or individual who hired you to do this work and who paid you for this work. Please mark all that apply. Was your employer…

1 a staffing or temp agency

2 an employment or fatherhood program

3 the company or individual the work was being done for

4 someone else (SPECIFY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

 7 DON’T KNOW

 8 REFUSED

**B54.** How did you get this job? Did you…

              1 apply for a job at a company or program that you work for,

              2 apply for work at  a staffing or temp agency,

3 show up to a location where people come to look for workers that can help with a particular job, or

              4 do something else? (SPECIFY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

 7 DON’T KNOW

8 REFUSED

**B55**. SKIP TO B57 IF B52 = 3 OR 4.

How much did you earn from this job in the last week you worked at this job? Please include regular pay, tips, commissions, and overtime pay.

 $ \_\_\_ \_\_\_ , \_\_\_ \_\_\_ \_\_\_ . \_\_\_ \_\_\_

 AMOUNT (RANGE: .01-to 99,999.94) [SKIP TO B56]

99999.95 MORE THAN $99,999.94

99999.97 DON’T KNOW

 99999.98 REFUSED

**B55a.** In the last week you worked there, did you earn  ...

1    $1 to $99

2    $100 to $249

3    $250 to $499

4    $500 to $749

5    $750 to $999

6    $1,000 or more

7    DON'T KNOW [SKIP TO B57]

8    REFUSED [SKIP TO B57]

**B56.** Was that…

 1 before taxes, or

 2 after taxes

 7 DON’T KNOW

 8 REFUSED

**B57.** Some employers offer health insurance for their employees, but sometimes workers don’t participate or receive health coverage due to cost or other reasons. For this job, would you say:

1 no health insurance was available

2 health insurance was available, but you didn’t participate, or

3 you were covered by health insurance made available by your employer

7 DON’T KNOW

8 REFUSED

**B58.** Which of the following other benefits were available to you on your job?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | YES | NO | DON’TKNOW | REFUSED |
| a. Sick days with full pay? | 1 | 2 | 7 | 8 |
| b. Paid vacation? | 1 | 2 | 7 | 8 |
| c. Paid holidays? | 1 | 2 | 7 | 8 |
| d. Dental benefits, including any offered at a cost to you? | 1 | 2 | 7 | 8 |
| e. A retirement or 401K plan? | 1 | 2 | 7 | 8 |
| f. Tuition reimbursement?  | 1 | 2 | 7 | 8 |

**B59.**Is this job, for [EMPLOYER NAME], the most recent job that you have had?

1 YES [SKIP TO B62]

2 NO

7 DON’T KNOW

8 REFUSED

**B60:** When did your most recent job end?

INTERVIEWER PROBE FOR SEASON IF DON’T KNOW MONTH.

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

MM (RANGE: 1-12)/ YYYY (RANGE: 1950-current year)

 13 WINTER

 14 SPRING

 15 SUMMER

 16 FALL

01/1950 BEFORE OR ON JANUARY 1950

97/9997 DON’T KNOW

 98/9998 REFUSED

**B61**. When did this job start?

INTERVIEWER PROBE FOR SEASON IF DON’T KNOW MONTH.

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

 MM (RANGE: 1-12)/ YYYY (RANGE: 1950-current year)

 13 WINTER

 14 SPRING

 15 SUMMER

 16 FALL

 01/1950 BEFORE OR ON JANUARY 1950

97/9997 DON’T KNOW

 98/9998 REFUSED

**B62.** Are you currently looking for a job?

 1 YES

 2 NO [SKIP TO B64]

 7 DON’T KNOW [SKIP TO B64]

 8 REFUSED [SKIP TO B64]

**B63**. How long have you been looking for a job? Would you say:

1 Less than a week [SKIP TO B65]

2 More than a week, but less than a month [SKIP TO B65]

3 Between a month and six months [SKIP TO B65]

4 Longer than six months [SKIP TO B65]

 7 DON’T KNOW [SKIP TO B65]

 8 REFUSED [SKIP TO B65]

**B64**. Why aren’t you looking for a job?

INTERVIEWER: DON’T READ RESPONSES. MARK ALL THAT APPLY.

1 You own a business

2 You already have a job

3 You’re on vacation

4 Due to illness

5 Due to a temporary layoff

6 You’re in school or a training program

7 You’re disabled

8 You don’t want to or need to work

9 You believe no work is available

10 You have transportation problems

11 You are incarcerated

12 You have legal issues

13 It doesn’t pay to work

14 You just found a job

15 Some other reason (SPECIFY\_\_\_\_\_\_\_\_)

97 DON’T KNOW

98 REFUSED

# B65. Some people experience challenges that make it hard to find or keep a good job.

How much do the following make it hard for you to find or keep a job?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not at all | A little | A lot | DON’T KNOW | REFUSED |
| a. Do not have reliable transportation  | 1 | 2 | 3 | 7 | 8 |
| b. Do not have right clothes for a job (including uniforms)  | 1 | 2 | 3 | 7 | 8 |
| c. Do not have documentation for legal employment (e.g., birth certificate)  | 1 | 2 | 3 | 7 | 8 |
| d. Do not have good enough childcare or family help  | 1 | 2 | 3 | 7 | 8 |
| e. Have a criminal record  | 1 | 2 | 3 | 7 | 8 |
| f. Do not have the right skills or education for good jobs  | 1 | 2 | 3 | 7 | 8 |
| g. Have substance use or mental health problems  | 1 | 2 | 3 | 7 | 8 |

# Module C: Criminal justice

The next few questions ask about your involvement with the criminal justice system.

**C1**. At any time since [RA month, RA Year], have you been on parole or probation?

 1 YES

 2 NO [SKIP TO C5]

 7 DON’T KNOW [SKIP TO C5]

 8 REFUSED [SKIP TO C5]

**C2.** Since [RA month, RA Year], have you been sanctioned or have you violated the conditions of your supervision? By sanction or violation, we mean that your parole or probation officer determined that you broke the rules of your parole/probation.

 1 YES

 2 NO [SKIP TO C4]

 7 DON’T KNOW [SKIP TO C4]

 8 REFUSED [SKIP TO C4]

**C3**. When was the LAST TIME your parole/probation officer issued a sanction or technical violation?

INTERVIEWER PROBE FOR SEASON IF DON’T KNOW MONTH.

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

MM (RANGE: 1-12) /YYYY (RANGE: RA YEAR--current year)

13 Winter

14 Spring

15 Summer

16 Fall

 01/2000 before RA YEAR

 97/9997 DON’T KNOW

 98/9998 REFUSED

**C4**. Was your parole or probation ever revoked since [RA month, RA Year]?

 1 YES

 2 NO

 7 DON’T KNOW

 8 REFUSED

**C5**. At any time since [RA month, RA Year], have you been arrested?

 1 YES

 2 NO [SKIP TO C8]

 7 DON’T KNOW [SKIP TO C8]

 8 REFUSED [SKIP TO C8]

**C6.** Since [RA month, RA Year], how many times have you been arrested?

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

 NUMBER OF TIMES

 97 DON’T KNOW

 98 REFUSED

**C7:** When was your last arrest?

INTERVIEWER PROBE FOR MONTH IF DON’T KNOW EXACT DATE.

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

MM (RANGE: 1-12)/ YYYY (RANGE: RA YEAR current year)

01/2000 BEFORE RA YEAR

97/9997 DON’T KNOW

 98/9998 REFUSED

**C8.** At any point since [RA month, RA Year], have you spent time in prison or jail? Don’t include time spent in halfway houses or work release centers.

 1 Yes, local or county jail

 2 Yes, state or federal prison

 3 Yes, both jail and prison

 4 No [SKIP TO D1]

 7 DON’T KNOW [SKIP TO D1]

 8 REFUSED [SKIP TO D1]

**C9.**What was the total amount of time that you spent incarcerated in prison and jail since [RA month, RA Year]? Don’t include time spent in halfway houses or work release centers.

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

 AMOUNT OF TIME (RANGE: 1- [Current Date-RADATE])

 996 MORE THAN [Current Date-RADATE]

 997 DON’T KNOW [SKIP TO C11]

 998 REFUSED [SKIP TO C11]

C10. CONFIRM UNIT OF TIME: Was that days, week, months, or years?

IF NEEDED: Total time in both prison and jail for all charges and sentences.

RECORD BOTH TIME THEN TIME UNITS

1 Days

2 Weeks

 3 Months

 4 Years

 7 DON’T KNOW

 8 REFUSED

**C11.** When were you last released from prison or jail?

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

MM (RANGE: 1-12) /YYYY (RANGE: RA YEAR--current year)

13 Winter

14 Spring

15 Summer

16 Fall

 01/2000 before RA YEAR

 97/9997 DON’T KNOW

 98/9998 REFUSED

[CREATE VARIABLE THAT CALCULATES DAYS SINCE RELEASE CALLED #DAYS\_SINCE\_RELEASE. ASSUME THE RELEASE WAS ON THE LAST DAY OF THE MONTH. IF 97/9997 OR 98/9998 SELECTED, #DAYS\_SINCE\_RELEASE SHOULD BE BLANK (MISSING). IF NO YEAR GIVEN, ASSUME THE MOST RECENT OCCURANCE OF THE GIVEN MONTH. IF A SEASON IS GIVEN RATHER THAN A MONTH, USE THE LAST DAY OF THE FOLLOWING MONTHS FOR CALCULATION: WINTER=JANUARY (01), SPRING=APRIL (04), SUMMER=JULY (07) AND FALL=OCTOBER (10).]

**C12.** How much time did you spend incarcerated in halfway houses or work release centers since [RA month, RA Year]?

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

 AMOUNT OF TIME (RANGE: 0-[Current Date-RADATE])

 996 MORE THAN [Current Date-RADATE]

 997 DON’T KNOW [SKIP TO D1]

 998 REFUSED [SKIP TO D1]

C13. CONFIRM UNIT OF TIME: Was that days, week, months, or years?

IF NEEDED: Total time in both halfway houses and work release centers for all charges and sentences.

RECORD BOTH TIME THEN TIME UNITS

1 Days

2 Weeks

 3 Months

 4 Years

 7 DON’T KNOW

 8 REFUSED

# Module D: Income and Well-being

Now I would like to ask you some questions about your income.

**D1.** In [PRIOR MONTH], did you receive income or assistance from any of the following sources?

|  | YES | NO | DON’T KNOW | REFUSED |
| --- | --- | --- | --- | --- |
| 1. A job?
 | 1 | 2 | 7 | 8 |
| b. SSI or Supplemental Security Income | 1 | 2 | 7 | 8 |
| c. SSDI or Social Security Disability Insurance | 1 | 2 | 7 | 8 |
| d. Unemployment insurance | 1 | 2 | 7 | 8 |
| e. Worker’s compensation or disability | 1 | 2 | 7 | 8 |
| f. Cash from family and friends who live outside of your household | 1 | 2 | 7 | 8 |
| g. Housing choice voucher, also known as Section 8 | 1 | 2 | 7 | 8 |
| h. Food stamps - also known as Supplemental Nutrition Assistance Program or SNAP | 1 | 2 | 7 | 8 |
|  i. Other (Please Specify) | 1 | 2 | 7 | 8 |

**D2.** Was there any other source of income you, yourself, received in [PRIOR MONTH] that we haven’t talked about?

 1 YES

 2 NO [SKIP TO D4]

 7 DON’T KNOW [SKIP TO D4]

 8 REFUSED [SKIP TO D4]

**D3.** What was that other income?

IF NEEDED: Was it from a government program we haven’t talked about, a loan, or something else?

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

 SOURCE

 97 DON’T KNOW

 98 REFUSED

**D4.** Thinking of all of the income received by you in [PRIOR MONTH], including all the sources we just talked about, what was the total income for you in [PRIOR MONTH]? Please don’t include tax refunds in your answer.

ROUND TO NEAREST WHOLE DOLLAR.

IF NECESSARY: Your best estimate is fine.

IF DON’T KNOW OR REFUSED: All information you provide is confidential and will in no way affect your eligibility or access to benefits or programs. Also, some individuals or families may not have income during certain periods so an answer of “zero” is OK.

 $ \_\_\_, \_\_\_ \_\_\_ \_\_\_

 AMOUNT (RANGE 0-9995) [SKIP TO D6]

9996 GREATER THAN $9995 [SKIP TO D6]

9997 DON’T KNOW

 9998 REFUSED

**D5.** Would you say it was…

1 None

2 $500 or less

3 Over $500 to $1,000

4 Over $1,000 to $1,500

5 Over $1,500 to $2,000

6 Over $2,000 to $2,500

7 Over $2,500?

97 DON’T KNOW [SKIP TO D7]

98 REFUSED [SKIP TO D7]

**D6.** Just to confirm, is that …

 1 before taxes, or

 2 after taxes?

 7 DON’T KNOW

 8 REFUSED

**D7**. Did you or will you file a tax return for your earnings last year?

 1 YES

 2 NO [SKIP TO D9]

 7 DON’T KNOW

 8 REFUSED

**D8.** The federal government has a special rule that allows working people who make less than about 50 thousand dollars a year to take advantage of something called the Earned Income Tax Credit, or EITC. They can claim the Earned Income Tax Credit by filling out a special form called Schedule EIC when they fill out their income taxes, or they can fill out a special form with their employer.

Did you or will you claim the Earned Income Tax Credit for your earnings last year?

 1 YES

 2 NO

 7 DON’T KNOW

 8 REFUSED

**D9.** Would you say that your income…

1 stays the same each month

2 varies a little month by month

3 varies a lot month by month

7 DON’T KNOW

8 REFUSED

**D10.**Since [RA month, RA Year], for about how many months did you have no income?

1 Zero months

2 One or two months

3 Three months or more

7 DON’T KNOW

8 REFUSED

**D11.** Since [RA month, RA Year], about how many months did you run out of money between paychecks, or before the end of the month?

1 Zero months [SKIP TO D13]

2 One or two months

3 Three months or more

7 DON’T KNOW

8 REFUSED

**D12**. What was the main reason why you ran out of money? Please select one answer.

1 You were unemployed

2 You couldn’t get enough hours of work from your employer

3 You had a reduction or termination of benefits (like Unemployment Insurance or disability)

4 You had a large bill or other expense to pay

5 You helped a family member or friend

6 You were incarcerated

7 Some other reason (SPECIFY\_\_\_\_\_\_\_\_\_\_\_)

97 DON’T KNOW

98 REFUSED

**D13.** The next question is about your health coverage. In [PRIOR MONTH] were you covered by any form of health insurance?

 1 YES

 2 NO [SKIP TO D15]

 7 DON’T KNOW [SKIP TO D15]

 8 REFUSED [SKIP TO D15]

**D14**. What types of health insurance were you covered by?

INTERVIEWER: DO NOT PROMPT. MARK ALL THAT APPLY.

 1 Medicaid

 2 Employer based

 3 Cobra

 4 Health exchange

5 Self paid private insurance

 6 Insurance paid by someone else

 7 Other (SPECIFY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

 97 DON’T KNOW

 98 REFUSED

**D15**. Now I’d like to talk to you about your housing arrangement. What is your current housing arrangement? Do you…

1 Own your own home or apartment

2 Rent your home or apartment

3 Live rent-free (a relative or someone else rents/owns the home)

4 Live and pay rent to a relative or someone else who rents/owns the home

5 Live in a shelter, halfway house, or treatment center

6 Live on the streets, or in a car, abandoned building, or other place not meant for sleeping

7 Other (SPECIFY\_\_\_\_\_\_\_\_\_\_\_\_\_)

97 DON’T KNOW

98 REFUSED

**D16.** Are you currently in school or college?

 1 YES

 2 NO [SKIP TO D18]

 7 DON’T KNOW [SKIP TO D18]

 8 REFUSED [SKIP TO D18]

**D17.** What is your current grade?

1 Less than 9th grade

2 9th grade

3 10th grade

4 11th grade

5 12th grade

6 College

7 DON’T KNOW

8 REFUSED

**D18.** Are you currently taking any education or training classes? This could include: ABE, GED, or ESL courses, or any job skills training.

 1 YES

 2 NO [SKIP TO E1]

 7 DON’T KNOW [SKIP TO E1]

 8 REFUSED [SKIP TO E1]

**D19.**  What type of degree or certification are you working towards?

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

 TYPE OF DEGREE

 97 DON’T KNOW

 98 REFUSED

# Module E: Cognitive and Behavioral

Now I'd like to talk about how you deal with stressful events or situations such as loss of a job, problems at work, problems with the law, conflicts with your child or co-parent, conflicts with your landlord or people you live with, or something else. I am going to read you a list of things that people do sometimes to handle or cope with these kinds of situations. Please think about a recent stressful situation and tell us how much you did each of these things.

**E1.** Did you think about a plan for what you could do to change the situation?

1 I didn’t do this at all

2 I did this a little bit

3 I did this a lot

 7 DON’T KNOW

 8 REFUSED

**E2**. Did you get help or advice from other people about what to do?

1 I didn’t do this at all

2 I did this a little bit

3 I did this a lot

 7 DON’T KNOW

 8 REFUSED

**E3.** Did you try to see the situation in a different way, to make it seem more positive?

1 I didn’t do this at all

2 I did this a little bit

3 I did this a lot

 7 DON’T KNOW

 8 REFUSED

**E4**. Did you think about a strategy or steps to take about the situation?

1 I didn’t do this at all

2 I did this a little bit

3 I did this a lot

 7 DON’T KNOW

 8 REFUSED

**E5**. Did you get comfort and understanding from someone about the situation?

1 I didn’t do this at all

2 I did this a little bit

3 I did this a lot

 7 DON’T KNOW

 8 REFUSED

**E6**. Did you blame others for what happened?

1 I didn’t do this at all

2 I did this a little bit

3 I did this a lot

 7 DON’T KNOW

 8 REFUSED

**E7**. Did you take action to make the situation better?

1 I didn’t do this at all

2 I did this a little bit

3 I did this a lot

 7 DON’T KNOW

 8 REFUSED

**E8.** Overall, how well did you maintain self-control in this situation, on a scale from 1 to 5 with 1 being not at all well and 5 being very well:

 1 2 3 4 5

Not at all well Very Well

 7 DON’T KNOW

 8 REFUSED

**E9.** What type of stressful situation were you thinking about in your responses to the previous questions?

1 Problems at work/with supervisor

2 Problems with the law

3 Conflicts with co-parent

4 Conflicts/issues with child

5 Conflicts with landlord or people you live with

6 Something else (Specify \_\_\_\_\_\_\_)

 7 DON’T KNOW

 8 REFUSED

**E10**. In the past month, how often did you experience situations or conflicts with others that caused you stress such as problems at work, problems with the law, conflicts with a co-parent or child, conflicts with your landlord or people you live with, or anything else that caused you stress?

1 Never

2 Rarely

3 Sometimes

4 Often

 7 DON’T KNOW

 8 REFUSED

I am going to read a number of statements that describe ways in which people might act and think in stressful situations. For each one, try to think about how often the statement is true for you.

[THE ITEMS BELOW ARE DRAWN FROM A VARIETY OF SCALES AND SHOULD BE PRESENTED TO RESPONDENTS IN A RANDOMIZED ORDER.]

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  | **Rarely** | **Sometimes** | **Often** | **DON’T KNOW** | **REFUSED** |
| **E11.** | I can always manage to solve difficult problems if I try hard enough. | 1 | 2 | 3 | 7 | 8 |
| **E12.** | If someone opposes me, I can work to come to a good solution. | 1 | 2 | 3 | 7 | 8 |
| **E13.** | It is easy for me to stick to my aims and accomplish my goals. | 1 | 2 | 3 | 7 | 8 |
| **E14.** | I am confident that I could deal efficiently with unexpected events. | 1 | 2 | 3 | 7 | 8 |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  | **Rarely** | **Sometimes** | **Often** | **DON’T KNOW** | **REFUSED** |
| **E15.** | Thanks to my resourcefulness, I know how to handle unforeseen situations. | 1 | 2 | 3 | 7 | 8 |
| **E16.** | I can solve most problems if I invest the necessary effort. | 1 | 2 | 3 | 7 | 8 |
| **E17.** | I can remain calm when facing difficulties because I can rely on my coping abilities.  | 1 | 2 | 3 | 7 | 8 |
| **E18.** | When I am confronted with a problem, I can usually find several solutions.  | 1 | 2 | 3 | 7 | 8 |
| **E19.** | If I am in trouble, I can usually think of a solution. | 1 | 2 | 3 | 7 | 8 |
| **E20.** | I can usually handle whatever comes my way.  | 1 | 2 | 3 | 7 | 8 |
| **E21.** | I generally like to see things through to the end.  | 1 | 2 | 3 | 7 | 8 |
| **E22.** | Unfinished tasks really bother me. | 1 | 2 | 3 | 7 | 8 |
| **E23.** | Once I get going on something I hate to stop.  | 1 | 2 | 3 | 7 | 8 |
| **E24.** | I finish what I start.  | 1 | 2 | 3 | 7 | 8 |
| **E25.** | My thinking is usually careful and purposeful. | 1 | 2 | 3 | 7 | 8 |
| **E26.** | I like to stop and think things over before I do them. | 1 | 2 | 3 | 7 | 8 |
| **E27.** | I tend to value and follow a rational, "sensible", approach to things.  | 1 | 2 | 3 | 7 | 8 |
|  |  | **Rarely** | **Sometimes** | **Often** | **DON’T KNOW** | **REFUSED** |
| **E28.** | I usually think carefully before doing anything.  | 1 | 2 | 3 | 7 | 8 |
| **E29.** | When my first efforts to solve a problem fail, I become uneasy about by ability to handle a situation.  | 1 | 2 | 3 | 7 | 8 |
| **E30.** | Sometimes I do not stop and take time to deal with my problems, but just kind of muddle ahead.  | 1 | 2 | 3 | 7 | 8 |
| **E31.** | Even though I work on a problem, sometimes I feel like I am groping or wandering, and am not getting down to the real issue.  | 1 | 2 | 3 | 7 | 8 |
| **E32.** | I make snap judgments and later regret them.  | 1 | 2 | 3 | 7 | 8 |
| **E33.** | Sometimes I get so charged up emotionally that I am unable to consider many ways of dealing with my problems.  | 1 | 2 | 3 | 7 | 8 |
| **E34.** | I consider how my actions will affect others.  | 1 | 2 | 3 | 7 | 8 |
| **E35.** | I plan ahead.  | 1 | 2 | 3 | 7 | 8 |
| **E36.** | I think about what may happen as a result of my actions.  | 1 | 2 | 3 | 7 | 8 |
| **E37.** | It is hard for me to make decisions.  | 1 | 2 | 3 | 7 | 8 |
| **E38.** | I think of several different ways to solve a problem.  | 1 | 2 | 3 | 7 | 8 |
|  |  | **Rarely** | **Sometimes** | **Often** | **DON’T KNOW** | **REFUSED** |
| **E39.** | I analyze problems by looking at all the choices.  | 1 | 2 | 3 | 7 | 8 |
| **E40.** | I make decisions without thinking about consequences.  | 1 | 2 | 3 | 7 | 8 |
| **E41.** | I make good decisions.  | 1 | 2 | 3 | 7 | 8 |
| **E42.** | I think about what causes my current problems.  | 1 | 2 | 3 | 7 | 8 |

Now, I’d like to talk about feelings you may have about how things are going.

In the last month, how often have you…

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | **Never** | **Almost Never** | **Sometimes** | **Fairly Often** | **Very Often** | **DON’T KNOW** | **REFUSED** |
| **E43.** | … been upset because of something that happened unexpectedly? | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| **E44.** | … felt that you were unable to control the important things in your life? | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| **E45.** | … felt nervous and "stressed"? | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| **E46.** | … felt confident about your ability to handle your personal problems? | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| **E47.** | … felt that things were going your way? | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| **E48.** | … found that you could not cope with all the things that you had to do? | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| **E49.** | … been able to control irritations in your life? | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| **E50.** | … felt that you were on top of things? | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| **E51.** | … been angered because of things that were outside of your control? | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| **E52.** | … felt difficulties were piling up so high that you could not overcome them?  | 1 | 2 | 3 | 4 | 5 | 7 | 8 |

**E53.** How would you rate the amount of control you have over your work or your ability to find work these days?

 1 No control at all

 2 Very little control

 3 Some control

 4 A lot of control

 7 DON’T KNOW

 8 REFUSED

**E54.** How would you rate the amount of control you have over your financial situation these days?

 1 No control at all

 2 Very little control

 3 Some control

 4 A lot of control

 7 DON’T KNOW

 8 REFUSED

Now I’d like to talk about some events that may or may not have ever happened to you while working at a job or looking for a job. We are interested in how people think about why things happen. I’m going to read an event and two possible explanations for why the event happened and I’d like you to tell me which explanation you think is more likely.

**E55.** The first event is that you get a promotion at work. Which of these is the more likely explanation?

 1 The boss really likes you.

 2 You are very good at your job.

 7 DON’T KNOW

 8 REFUSED

**E56.** You apply for a job and don't get it. Which is the more likely explanation?

 1 You just can't get a break.

 2 The employer found someone who was a better fit for the job.

 7 DON’T KNOW

 8 REFUSED

**E57.** Your boss complements your work. Which is the more likely explanation?

 1 You tried very hard to do a good job.

 2 Your boss is a nice person.

 7 DON’T KNOW

 8 REFUSED

**E58.** You asked your supervisor for more hours and he told you that there wasn’t any extra work available. Which is the more likely explanation?

1 Your boss doesn’t like you.

 2 Your boss can’t assign extra hours right now.

 7 DON’T KNOW

 8 REFUSED

**E59.** You are bored and frustrated at work. Which is the more likely explanation?

1 You are in bad mood.

 2 Your job is boring and tedious.

 7 DON’T KNOW

 8 REFUSED

**E60.** You apply for a job that you really want and you get it. Which is the more likely explanation?

1 You made a good impression during your interview.

 2 You got lucky.

 7 DON’T KNOW

 8 REFUSED

**E61.** Your boss writes you up for something that you didn’t do. Which is the more likely explanation?

1 Your boss made a mistake.

 2 Your boss is out to get you.

 7 DON’T KNOW

 8 REFUSED

**E62.** A co-worker that you don’t know very well invites you to their Super Bowl party. Which is more likely?

1 You seem like a pleasant and fun person.

 2 They had to invite you because they invited everyone else at work.

 7 DON’T KNOW

 8 REFUSED

**E63.** Youwere assigned a task to do at work and weren’t able to finish it on time. Which is the more likely explanation?

1 The amount of time you were given to do the task wasn’t long enough.

 2 You didn’t understand how to do the work.

 7 DON’T KNOW

 8 REFUSED

**E64.** After a week working at a new job, one of your co-workers praises you for how fast you have learned how to do the job. Which is the more likely explanation?

1 You worked really hard at learning your new job.

 2 Your co-worker is trying to get on your good side.

 7 DON’T KNOW

 8 REFUSED

[IF R HAS NOT WORKED IN THE PAST MONTH, SKIP TO E66]

**E65.** In the past month, how often did you do something that could or did get you into trouble at work?

 1 Never

 2 Rarely

 3 Sometimes

 4 Often

7 DON’T KNOW

8 REFUSED

**E66**. In the last month, how often did you have problems getting a job, showing up to work, or keeping a job because of your alcohol or drug use?

 1 Never

 2 Rarely

 3 Sometimes

 4 Often

7 DON’T KNOW

8 REFUSED

**E67**. In the last month, how often did you have problems getting along with family or friends because of your alcohol or drug use?

 1 Never

 2 Rarely

 3 Sometimes

 4 Often

7 DON’T KNOW

8 REFUSED

**E68.** In the last month, did you ever decide to give up on finding a job?

 1 YES

 2 NO

7 DON’T KNOW

8 REFUSED

[IF R HAS NOT WORKED SINCE RAD, SKIP TO F1]

**E69.** Since [RA month, RA year], how often did you do something that could or did get you fired from a job?

 1 Never

 2 Rarely

 3 Sometimes

 4 Often

7 DON’T KNOW

8 REFUSED

**E70.** Since [RA month, RA year], how often did you become frustrated and walk off the job?

 1 Never

 2 Rarely

 3 Sometimes

 4 Often

7 DON’T KNOW

8 REFUSED

**Module F: Child Support**

The next few questions are about support you provide for your children. As a reminder, none of your responses from this survey will be shared with program staff or government agencies.

**F1**. Are you required by a court or state agency to pay child support for any children?

 1 YES

 2 NO [SKIP TO F9]

 7 DON’T KNOW [SKIP TO F9]

 8 REFUSED [SKIP TO F9]

**F2**. How many children are you required to pay child support for? Include any children for whom you are required to pay arrears or make back payments.

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

NUMBER OF CHILDREN (RANGE = 1-20)

 96 MORE THAN 20

 97 DON’T KNOW

 98 REFUSED

**F3.** What is the amount of your regularly scheduled required payment through the child support system?

IF NEEDED: This is the total for all of your children.

INTERVIEWER: ROUND TO NEAREST DOLLAR

 $\_\_\_\_\_ , \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_

 AMOUNT PAID (RANGE 1 to 9995)

 9996 $9,996 or more

 9997 DON’T KNOW [SKIP TO F5]

9998 REFUSED [SKIP TO F5]

**F4**. Is that…

1 per week,

 2 every other week,

 3 per month, or

 4 some other time period (SPECIFY\_\_\_\_\_\_\_\_)

 7 DON’T KNOW

 8 REFUSED

**F5.** Last month, did you pay the full amount of the payment ordered by the court or state agency?

 1 YES [SKIP TO F7]

 2 NO

 7 DON’T KNOW

 8 REFUSED

**F6.** How much child support did you actually pay through the child support system last month?

INTERVIEWER: ROUND TO NEAREST DOLLAR

 $\_\_\_\_\_ , \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_

 AMOUNT PAID (RANGE 0 to 9995)

 0000 $0 or None

 9996 $9,996 or more

 9997 DON’T KNOW

9998 REFUSED

**F7**. How much back child support do you owe?

1 None

2 less than $1,000

3 $1,000 to $4,999

4 $5,000 to $9,999

5 $10,000 to $14,999

6 $15,000 or more

7 DON’T KNOW

8 REFUSED

**F8.** Since [RA month, RA Year] has the state decreased the amount of back child support that you owe?

 1 YES

 2 NO

 3 I did not owe any back child support since [RA month, RA Year].

 7 DON’T KNOW

 8 REFUSED

**F9.** In the past 6 months, did your regularly scheduled child support payment amount go up, stay the same, or go down?

1 Amount went up

2 Amount stayed the same

3 Amount went down

7 Don't Know

8 Decline to Answer

**F10.** Do you have any children, of any age, who don’t live with you all of the time?

 1 Yes

 2 No [SKIP TO G1]

 7 Don’t Know [SKIP TO G1]

 8 Decline to Answer [SKIP TO G1]

**F11.** Not counting any child support required by a court, in the past 30 days did you provide cash for any of your children that do not live with you all the time?

 1 YES

 2 NO [SKIP TO F12]

 7 DON’T KNOW [SKIP TO F12]

 8 REFUSED [SKIP TO F12]

**F12.** Not counting any child support required by a court, in the past 30 days, approximately how much cash did you provide?

INTERVIEWER: ROUND TO NEAREST DOLLAR

 $ \_\_\_\_ , \_\_\_\_ \_\_\_\_ \_\_\_\_

 AMOUNT (1 to 9995)

 0000 $0 or None,

 9996 $9,996 or more

 9997 DON’T KNOW

 9998 REFUSED

**F13.** How many children did this cover?

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

 NUMBER OF CHILDREN (RANGE =1-20)

 96 More than 20

 97 DON’T KNOW

 98 REFUSED

**F14.** During the past month did you provide help with any of the following for any of your children that do not live with you all the time?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | YES | NO | DON’T KNOW | REFUSED |
| a. Buying food | 1 | 2 | 7 | 8 |
| b. Purchasing clothing or diapers | 1 | 2 | 7 | 8 |
| c. Paying for or providing child care or babysitting | 1 | 2 | 7 | 8 |
| d. Paying for medicine or health care | 1 | 2 | 7 | 8 |
| e. Helping with bills or payments | 1 | 2 | 7 | 8 |
| f. Buying toys, books, or school supplies | 1 | 2 | 7 | 8 |
| g. Paying for or providing transportation to daycare, school, appointments, or other activities | 1 | 2 | 7 | 8 |

#

# Module G: Parenting

[IF NO FOCAL CHILD WAS IDENTIFIED AT BASELINE, SKIP MODULE G.]

IF FOCAL CHILD WAS IDENTIFIED BY NAME AT BASELINE, READ: A few months ago, you indicated that you had a child [AGE] years old named [NAME OF CHILD]. We would like to ask you some questions about your relationship with [NAME OF CHILD].

IF FOCAL CHILD WAS IDENTIFIED AT BASELINE, BUT A NAME WAS NOT GIVEN, READ: A few months ago, you indicated that you had a child [AGE] years old and you answered several questions about this child. We would again like to ask you some questions about your relationship with this child.

 [IF CHILD IS DECEASED, INTERVIEWER SAYS: “I am so sorry for your loss.” THEN SKIP TO END]

**G1.** [IF FOCAL CHILD WAS IDENTIFIED BY NAME AT BASELINE, SKIP TO G2.]

To make it easier to discuss your relationship with your child, please tell me the name of this child.

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

 NAME OF CHILD [SKIP TO G2]

7 DON’T KNOW

8 REFUSED

**G1a**. Okay, I understand. Would you be willing to share the initials of your child?

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

 INITIALS OF CHILD

7 DON’T KNOW

8 REFUSED

[IF THE RESPONDENT REFUSED TO GIVE THE NAME OF HIS CHILD ((G1 = 7 OR 8 AND G1a = 7 OR 8) THEN READ: “In the next set of questions, your child will be referred to as Jessie.”]

[IF FOCAL CHILD WAS NOT IDENTIFIED BY NAME AT BASELINE, THE RESPONSE to G1, OR G1a WILL BE ENTERED INTO THE “[NAME OF CHILD]” FIELD AND FILLED IN WHENEVER THE SURVEY REFERENCES “[NAME OF CHILD]”. IF THE RESPONDENT REFUSED TO GIVE THE NAME OF HIS CHILD ((G1 = 7 OR 8 AND G1a = 7 OR 8) THEN “Jessie” WILL BE ENTERED INTO THE “[NAME OF CHILD]” FIELD AND FILLED IN WHENEVER THE SURVEY REFERENCES “[NAME OF CHILD]”. ]

**G2.** Do you live with [NAME OF CHILD]’s mother?

1 YES

2 NO

7 DON’T KNOW

8 REFUSED

**G3.** Does [NAME OF CHILD] live with you all or most of the time?

1 YES

2 NO [SKIP TO G4]

7 DON’T KNOW [SKIP TO G4]

8 REFUSED [SKIP TO G4]

**G3a.** What is the name of [NAME OF CHILD]’s mother?

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

 NAME OF CHILD’S MOTHER [SKIP TO G14]

 7 DON’T KNOW

 8 REFUSED

**G3a1.** What are the initials of [NAME OF CHILD]’s mother?

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

 INITIALS OF CHILD’S MOTHER [SKIP TO G14]

 7 DON’T KNOW [SKIP TO G14]

 8 REFUSED [SKIP TO G14]

[IF (G3a = 7 OR 8) AND (G3a1 = 7 OR 8) THEN READ: “In this interview, [NAME OF CHILD]’s mother will be referred to as Alex.”]

**G4.** [IF MOTHER/GUARDIAN WAS NOT IDENTIFIED BY NAME AT BASELINE, SKIP TO G4a.]

A few months ago, you indicated that [NAME OF MOTHER/GUARDIAN] was the primary guardian for [NAME OF CHILD]. Is this still true?

1 YES [SKIP TO G5]

2 NO

7 DON’T KNOW

8 REFUSED

**G4a.** Who does [NAME OF CHILD] usually live with?

1 Biological mother

2 Grandparent(s) [GO TO G4b1]

3 Other relative(s) [GO TO G4b1]

4 Friend [GO TO G4b1]

5 Foster care [GO TO G4b1]

6 Adoptive parent [GO TO G4b1]

7 DON’T KNOW [GO TO G4b1]

8 REFUSED [GO TO G4b1]

**G4a1.** What is the name of [NAME OF CHILD]’s mother?

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

 NAME OF CHILD’S MOTHER [SKIP TO G5]

 7 DON’T KNOW

 8 REFUSED

**G4a2.** What are the initials of [NAME OF CHILD]’s mother?

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

 INITIALS OF CHILD’S MOTHER [SKIP TO G5]

 7 DON’T KNOW [SKIP TO G5]

 8 REFUSED [SKIP TO G5]

[IF (G4a1 = 7 OR 8) AND (G4a2 = 7 OR 8) THEN READ: “In this interview, [NAME OF CHILD]’s mother will be referred to as Alex.”]

**G4b1.** What is the name of [NAME OF CHILD]’s legal guardian? [IF CLARIFICATION IS NEEDED, INTERVIEWER MAY SAY, “By legal guardian I mean the person who is usually responsible for taking care of [NAME OF CHILD].”

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

 NAME OF CHILD’S GUARDIAN [SKIP TO G5]

 7 DON’T KNOW

 8 REFUSED

**G4b2.** What are the initials of [NAME OF CHILD]’s legal guardian?

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

 INITIALS OF CHILD’S GUARDIAN

 7 Don’t Know

 8 Decline to Answer

[IF (G4b1 = 7 OR 8) AND (G4b2 = 7 OR 8) THEN READ: “In this interview, [NAME OF CHILD]’s guardian will be referred to as Alex.”]

[IF G4 IS NOT EQUAL TO 1, THE RESPONSE to G3a, G3a1, G4a1, G4a2, G4b1, OR G4b2 WILL BE ENTERED INTO THE “[NAME OF MOTHER/GUARDIAN]” FIELD AND FILLED IN WHENEVER THE SURVEY REFERENCES “[NAME OF MOTHER/GUARDIAN]”. IF THE RESPONDENT REFUSED TO GIVE THE NAME OF THE MOTHER OR GUARDIAN (((G3a = 7 OR 8) AND (G3a1 = 7 OR 8)) OR ((G4a1 = 7 OR 8) AND (G4a2 = 7 OR 8)) OR ((G4b1 = 7 OR 8) AND (G4b2 = 7 OR 8))) THEN “Alex” WILL BE ENTERED INTO THE “[NAME OF MOTHER/GUARDIAN]” FIELD AND FILLED IN WHENEVER THE SURVEY REFERENCES “[NAME OF MOTHER/GUARDIAN]”.]

**G5.** How long does it usually take for you to get from your home to [NAME OF CHILD]’s home?

1 Less than 10 minutes

 2 10-19 minutes

 3 20-39 minutes

 4 40-59 minutes

 5 1 to 2 hours

 6 More than 2 hours

 7 I have never been to my child’s current home

97 DON’T KNOW

98 REFUSED

**G6.** In the past 30 days, how often did you talk on the phone; send letters, cards or texts, use FaceTime, Facebook, or other social media with [NAME OF CHILD]?

1 Every day or almost every day

2 3 or 4 times per week

3 1 or 2 times per week

4 2 or 3 times in the past month

5 Once in the past month

6 Not at all

7 [NAME OF CHILD] IS TOO YOUNG FOR THIS

97 DON’T NKOW

98 REFUSED

**G7**. When did you last see [NAME OF CHILD] in person?

1 Within the last week

2 Between 7 – 14 days ago

3 Between 15 – 29 days ago

4 1 – 2 months ago [SKIP TO G10]

5 3 – 6 months ago [SKIP TO G10]

6 More than 6 months ago [SKIP TO G10]

97 DON’T KNOW

 98 REFUSED

**G8**. In the past 30 days, how often did you see [NAME OF CHILD] in person?

1 Every day or almost every day

2 3 or 4 times per week

3 1 or 2 times per week

4 2 or 3 times in the past month

5 Once in the past month

6 Not at all

7 DON’T KNOW

8 REFUSED

**G9.** In the past 30 days, how many times did [NAME OF CHILD] spend the night with you?

1 Every day or almost every day

2 3 or 4 times per week

3 1 or 2 times per week

4 2 or 3 times in the past month

5 Once in the past month

6 Not at all

7 DON’T KNOW

8 REFUSED

**G10.** IF G5 = 7, SKIP TO G11.

When you spend time with [NAME OF CHILD], how often are you at the home where [NAME OF CHILD] usually lives?

 1 Always or almost always

 2 Often

 3 Sometimes

 4 Rarely

 5 Never

 7 DON’T KNOW

 8 REFUSED

**G11.** [IF G2=YES, THEN SKIP TO G12]

If you have a spouse or partner that is not [NAME OF CHILD]’s mother, how encouraging or discouraging is your spouse or partner of your involvement with [NAME OF CHILD]?

1 Very discouraging

2 Somewhat discouraging

3 Neutral

4 Somewhat encouraging

5 Very encouraging

 0 I do not have a spouse or partner

7 DON’T KNOW

8 REFUSED

**G12.** In general, how satisfied are you with the amount of time you spend with [NAME OF CHILD]?

1 Very satisfied

2 Somewhat satisfied

3 Not satisfied

7 DON’T KNOW

8 REFUSED

Now we are going to list some things that can make it hard for fathers to spend time with their children. Thinking about the past month, please let me know how often you think each of the following statements applied to you.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | Often | Sometimes | Never | DOES NOT APPLY | DON’T KNOW | REFUSED |
| G13a | My work or school schedule made it hard for me to spend time with [NAME OF CHILD] | 1 | 2 | 3 |  | 7 | 8 |
| G13b | Car problems or lack of transportation made it hard for me to spend time with [NAME OF CHILD] | 1 | 2 | 3 |  | 7 | 8 |
| G13c | Not having a stable place to live made it hard for me to spend time with [NAME OF CHILD] | 1 | 2 | 3 |  | 7 | 8 |
| G13d | [IF G2=YES, THEN SKIP TO G13j.] It was hard to spend time with [NAME OF CHILD] because their mother’s spouse or boyfriend did not want me around. | 1 | 2 | 3 | 9 | 7 | 8 |
| G13e | A court order or legal restriction made it hard for me to spend time with [NAME OF CHILD]. | 1 | 2 | 3 | 9 | 7 | 8 |

In this next section, I am going to ask you some more questions about your current relationship with [NAME OF CHILD].

**G14.** Do you feel that your relationship with [NAME OF CHILD] is…

1 Very good

2 Somewhat good

3 Not too good

7 DON’T KNOW

8 REFUSED

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | Always or almost always | Often | Sometimes | Rarely | Never | DON’T KNOW | REFUSED |
| G15. | How often do you feel disappointed with [NAME OF CHILD]? | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| G16. | How often do you feel proud of [NAME OF CHILD]? | 1 | 2 | 3 | 4 | 5 | 7 | 8 |
| G17. | How often do you feel angry or irritated with [NAME OF CHILD]? | 1 | 2 | 3 | 4 | 5 | 7 | 8 |

Please answer each of the upcoming questions by indicating how strongly you agree or disagree with the idea expressed.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | Strongly Agree | Agree | Disagree | Strongly disagree | DON’T KNOW | REFUSED |
| G18a. | [If #KIDS = 1 THEN ASK G18a; ELSE IF #KIDS > 1 THEN ASK G18b.] My relationship with [NAME OF CHILD] is more important than anything else in my life.  | 1 | 2 | 3 | 4 | 7 | 8 |
| G18b. | My relationships with my children are more important to me than anything else in my life. | 1 | 2 | 3 | 4 | 7 | 8 |
| G19. | Being the father of [NAME OF CHILD] is a big part of who I am. | 1 | 2 | 3 | 4 | 7 | 8 |
| G20. | I will always want to be meaningfully involved in [NAME OF CHILD]’s life. | 1 | 2 | 3 | 4 | 7 | 8 |
| G21. | Other things in my life are more important to me than my relationship with [NAME OF CHILD]. | 1 | 2 | 3 | 4 | 7 | 8 |
| G22. | Sometimes other interests and responsibilities of mine have to come before my relationship with [NAME OF CHILD]. | 1 | 2 | 3 | 4 | 7 | 8 |
| G23. | I can see myself losing interest in [NAME OF CHILD] a few years from now. | 1 | 2 | 3 | 4 | 7 | 8 |
| G24. | Not being a part of my child’s life would be one of the worst things that could happen to me | 1 | 2 | 3 | 4 | 7 | 8 |

**G25.** Sometimes things come up that get in the way of plans to spend time with children. How often do you have to cancel plans with [NAME OF CHILD]?

 1 Often

 2 Sometimes

 3 Rarely

 4 Never

 7 DON’T KNOW

 8 REFUSED

I have a few more questions about your relationship with [NAME OF CHILD].

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | A great deal | Somewhat | A little bit | Not at all | DON’T KNOW | REFUSED |
| G26. | If you were not able to see [NAME OF CHILD] in the next month, how much would you miss (him/her)? | 1 | 2 | 3 | 4 | 7 | 8 |
| G27. | How much influence do you think you have on [NAME OF CHILD]’s life right now? | 1 | 2 | 3 | 4 | 7 | 8 |
| G28. | How much influence do you think you will have on [NAME OF CHILD]’s life over the long-term? | 1 | 2 | 3 | 4 | 7 | 8 |

**Module H: Co-parenting**

You have reached the last section of the survey. Thank you for your time and patience. The next set of questions is about your relationship with [NAME OF MOTHER/GUARDIAN]. Please think about [NAME OF MOTHER/GUARDIAN] when answering these questions and let us know if you strongly agree, agree, disagree, or strongly disagree with each of the following statements.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | Strongly Agree  | Agree | Disagree | Strongly Disagree | DON’T KNOW | REFUSED |
| H1. | [NAME OF MOTHER/GUARDIAN] tells me I am doing a good job or otherwise lets me know I am being a good father.  | 1 | 2 | 3 | 4 | 7 | 8 |
| H2. | [NAME OF MOTHER/GUARDIAN] makes negative comments, jokes, or sarcastic comments about the way I am as a parent. | 1 | 2 | 3 | 4 | 7 | 8 |
| H3. | [NAME OF MOTHER/GUARDIAN] contradicts the decisions I make about [NAME OF CHILD]. | 1 | 2 | 3 | 4 | 7 | 8 |
| H4. | [NAME OF MOTHER/GUARDIAN] turns to other people to parent [NAME OF CHILD] even though I am an engaged father. | 1 | 2 | 3 | 4 | 7 | 8 |
| H5. | [NAME OF MOTHER/GUARDIAN] undermines me as a father. | 1 | 2 | 3 | 4 | 7 | 8 |
| H6. | [NAME OF MOTHER/GUARDIAN] makes it hard for me to spend time with [NAME OF CHILD]. | 1 | 2 | 3 | 4 | 7 | 8 |
| H7. | [NAME OF MOTHER/GUARDIAN] makes it hard for me to talk with [NAME OF CHILD]. | 1 | 2 | 3 | 4 | 7 | 8 |
| H8. | [NAME OF MOTHER/GUARDIAN] and I have conflicts about scheduling time or activities with [NAME OF CHILD].  | 1 | 2 | 3 | 4 | 7 | 8 |
|  |  | **Strongly Agree**  | **Agree** | **Disagree** | **Strongly Disagree** | **DON’T KNOW** | **REFUSED** |
| H9. | [NAME OF MOTHER/GUARDIAN] and I are a good parenting team. | 1 | 2 | 3 | 4 | 7 | 8 |
| H10. | [NAME OF MOTHER/GUARDIAN] and I discuss the best way to meet [NAME OF CHILD]’S needs.  | 1 | 2 | 3 | 4 | 7 | 8 |
| H11. | [NAME OF MOTHER/GUARDIAN] and I share information about [NAME OF CHILD] with each other.  | 1 | 2 | 3 | 4 | 7 | 8 |
| H12. | [NAME OF MOTHER/GUARDIAN] asks about my opinions on issues related to parenting.  | 1 | 2 | 3 | 4 | 7 | 8 |
| H13. | [NAME OF MOTHER/GUARDIAN] and I have conflicts about scheduling. | 1 | 2 | 3 | 4 | 7 | 8 |
| H14. | [NAME OF MOTHER/GUARDIAN] and I argue about who should make decisions about [NAME OF CHILD].  | 1 | 2 | 3 | 4 | 7 | 8 |
| H15. | [NAME OF MOTHER/GUARDIAN] and I try to manage the amount of conflict we have about [NAME OF CHILD]. | 1 | 2 | 3 | 4 | 7 | 8 |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | Strongly Agree  | Agree | Disagree | Strongly Disagree | DON’T KNOW | REFUSED |
| H16. | [NAME OF MOTHER/GUARDIAN] and I make threats to each other when we can't get along in our roles as parents. | 1 | 2 | 3 | 4 | 7 | 8 |
| H17. | [NAME OF MOTHER/GUARDIAN] and I are able to resolve conflicts or arguments over [NAME OF CHILD]. | 1 | 2 | 3 | 4 | 7 | 8 |

# Module I: Respondent Contact Information

I1.

At this time we’d like to just confirm some information about you. The information we confirm now will help us be able to get back in touch with you if we need to in the future.  [IF INTERVIEW OVER THE PHONE READ: It will also ensure that your incentive payment is sent to the correct address.]

I have your name listed as [READ AND CONFIRM SPELLING OF [RESPONDENT NAME]. Is that correct?

YES, ALL CORRECT 1

NO, CORRECT FIRST NAME 2

NO, CORRECT MIDDLE NAME 3

NO, CORRECT LAST NAME 4

NO, CORRECT SUFFIX 5

DON’T KNOW 7

REFUSED 8

I2.

Could you please tell me how to spell your name?

I2a.

FIRST: What is your first name?

I2b.

MIDDLE: What is your middle name?

I2c.

LAST: What is your last name?

I2d.

SUFFIX: Is there anything after your last name, like Jr. or Sr.?

I3.

Our records show that your current address is [RESPONDENT ADDRESS]. Is this correct?

YES, ALL OF THAT IS CORRECT 1

NO–UPDATE STREET 2

NO–UPDATE APARTMENT/UNIT 3

NO–UPDATE CITY 4

NO–UPDATE STATE 5

NO–UPDATE ZIP 6

DON’T KNOW 7

REFUSED 8

I3a.

 STREET: What is your current street address?

I3b.

 APT: What is the apartment number?

I3c.

 CITY: In what city do you live?

I3d.

 STATE: In what state do you live?

I3e.

 ZIP: What is your zip code?

**I4.** Would you prefer that the $35 gift card be sent to your current address or is there another address I should send it to?

YES, SEND TO CURRENT ADDRESS [SKIP TO I5] 1

NO, SEND TO DIFFERENT ADDRESS [ASK I4a through I4d] 2

I4a. What is the street address and apartment number you would like use to send the check to?

 STREET ADDRESS APT OR UNIT #

I4b. In what city?

 CITY

I4c. In what state?

 STATE

I4d. What is the zip code?

 ZIP

[IF INTERVIEW IS IN PERSON SKIP TO I6]

I5.

I called you at [RESPONDENT PHONE NUMBER]. Is this the best number to reach you at?

YES 1 [SKIP TO I7]

NO 2

DON’T KNOW 7 [SKIP TO I7]

REFUSED 8 [SKIP TO I7]

I6.

What is your home phone number, starting with area code?

(\_\_\_\_) \_\_\_\_\_-\_\_\_\_\_\_\_\_

DON’T KNOW 7

REFUSED 8

I7.

Do you have a cell phone number?

YES 1

NO 2 [SKIP TO I8]

DON’T KNOW 7 [SKIP TO I8]

REFUSED 8 [SKIP TO I8]

I7a.

What is your cell phone number, starting with area code?

(\_\_\_\_) \_\_\_\_\_-\_\_\_\_\_\_\_\_

DON’T KNOW 7 [SKIP TO I8A]

REFUSED 8 [SKIP TO I8A]

I7b.

Do we have your permission to contact you on your cell phone via text message?

YES 1

[IF YES, INFORM THE R THAT STANDARD TEXT MESSAGING RATES APPLY AND “WE HOPE THE $35 GIFT CARD WE’RE GIVING YOU WILL HELP PAY BACK ANY COSTS FOR RECEIVING TEXT MESSAGES.”]

NO 2 [SKIP TO I8A]

DON’T KNOW 7 [SKIP TO I8A]

REFUSED 8 [SKIP TO I8A]

I7c.

Do we have your permission to contact you on that number via automated text message?

YES 1

NO 2

DON’T KNOW 7

REFUSED 8

I8A.

Are there any other additional numbers we could use to reach you?

YES 1

NO 2 [SKIP TO I9]

DON’T KNOW 7 [SKIP TO I9]

REFUSED 8 [SKIP TO I9]

I8Aa.

What is that phone number, starting with area code?

(\_\_\_\_) \_\_\_\_\_-\_\_\_\_\_\_\_\_

DON’T KNOW 7

REFUSED 8

I8Ab.

What type of number is that?

Work 1

School 2

Friend 3

Relative 4

Clergy 5

Something else 6

DON’T KNOW 7

REFUSED 8

I8B.

Are there any other additional numbers we could use to reach you?

YES 1

NO 2 [SKIP TO I9]

DON’T KNOW 7 [SKIP TO I9]

REFUSED 8 [SKIP TO I9]

I8Ba.

What is that phone number, starting with area code?

(\_\_\_\_) \_\_\_\_\_-\_\_\_\_\_\_\_\_

DON’T KNOW 7

REFUSED 8

I8Bb.

What type of number is that?

Work 1

School 2

Friend 3

Relative 4

Clergy 5

Something else 6

DON’T KNOW 7

REFUSED 8

I8C.

Are there any other additional numbers we could use to reach you?

YES 1

NO 2 [SKIP TO I9]

DON’T KNOW 7 [SKIP TO I9]

REFUSED 8 [SKIP TO I9]

I8Ca.

What is that phone number, starting with area code?

(\_\_\_\_) \_\_\_\_\_-\_\_\_\_\_\_\_\_

DON’T KNOW 7

REFUSED 8

I8Cb.

What type of number is that?

Work 1

School 2

Friend 3

Relative 4

Clergy 5

Something else 6

DON’T KNOW 7

REFUSED 8

I9.

Do you have an email address?

YES 1

NO 2 [SKIP TO I10]

DON’T KNOW 7 [SKIP TO I10]

REFUSED 8 [SKIP TO I10]

I9a.

What is your email address?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_@\_\_\_\_\_\_\_\_\_\_\_\_ . \_\_\_\_\_\_\_\_\_

DON’T KNOW 7

REFUSED 8

I10.

Do you have a Facebook Account?

YES 1

NO 2 [SKIP TO I11]

DON’T KNOW 7 [SKIP TO I11]

REFUSED 8 [SKIP TO I11]

**I10A.**

May we contact you at your Facebook account in the future?

YES 1

NO 2 [SKIP TO I11]

DON’T KNOW 7 [SKIP TO I11]

REFUSED 8 [SKIP TO I11]

**I10B.**

What is your Facebook account name?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I11.**

What is the best way for me to reach you in the future? Would you prefer that I call you on the phone, send you a letter in the mail, send you an email, or should I call someone else?

PHONE 1

LETTER 2

EMAIL 3

SOMEONE ELSE 4

FACEBOOK ACCOUNT 5

DON’T KNOW 7

REFUSED 8

[ASK I11A IF I11=1 and I6<>7, 8 and I7<>2,7,8 and I8\_1<>2,7,8]

**I11A.**

What is the best phone number to call you at? Is it your home phone or your cell phone number, or [IF I8Ab=1,2,3,4,5,6: [INSERT I8Ab RESPONSE] number or [IF I8Bb=1,2,3,4,5,6: [INSERT I8Bb RESPONSE] number or [IF I8Cb=1,2,3,4,5,6 [INSERT I8Cb RESPONSE] number; IF I8Ab=6: LEAVE BLANK]?

HOME PHONE 1

CELL PHONE 2

WORK 3

SCHOOL 4

FRIEND 5

RELATIVE 6

CLERGY 7

SOMETHING ELSE 8

DON’T KNOW 97

REFUSED 98

END

CATI VERSION:

DO NOT READ: FIELD INTERVIEWER PRESENT

 1 – YES [SKIP TO ALT ENDING]

 2 – NO [CONTINUE]

CAPI VERSION:

IF RESPONDENT IS BEING INTERVIEWED IN PERSON AND HE IS NOT INCARCERATED (P1=2), SKIP TO CAPI IN-PERSON ENDING

IF RESPONDENT IS BEING INTERVIEWED IN PERSON AND HE IS INCARCERATED (P1=3), SKIP TO CAPI INCARCERATED ENDING

Exit

Thank you very much for participating in this survey you will receive your $35 gift card in about four to six weeks [CAPI: one to two weeks]. Thank you again and have a good day/evening.

ALT ENDING:

Thank you very much for participating in this survey.  Please hand the phone back to the interviewer so I can confirm that we have completed the survey.  The interviewer will then be able to give you your $35 gift card.  Thank you and have a good day/evening.

CAPI IN-PERSON ENDING:

Thank you very much for participating in this survey. Here is your $35 money order as a “Thank you” for completing the interview. Have a good day/evening.

CAPI INCARCERATED ENDING:

Thank you very much for participating in this survey. [DESCRIBE THE PROTOCOL FOR HANDLING THE INCENTIVE BASED ON THE AGREED UPON METHOD OF COMPENSATION]