

Survey # _____

COMPREHENSIVE NEEDS STUDY

City where respondent is now staying: _____

(Office Use Only – Case #: _____)

Date:

Interviewer: _____

INTRODUCTION TO RESPONDENT

(Hello, I'm _____ representing the Equal Justice Task Force. We're doing a study of important issues facing Montana households today.)

The study covers areas like housing, health care, and employment, and the findings will suggest ways to improve available services. We need people, such as you, to help. I am hoping that you will assist me by answering some questions about these topics. Whatever you tell me will be completely confidential. The study will only show answers from many people together, unless you specifically consent to allow us to use some of the information you provide.

May I begin?

In this survey we're concerned with things that happened to people in your household, that is, the people who live with you on a more or less regular basis, in the last twelve months, that is from (today's date, 2002) to the present. As I describe each situation, please tell me whether it occurred during any part of the last 12 months.

First, let's talk about housing.

1. During any part of the last twelve months, did (any of) you rent your home or live in a home provided by your employer?

Yes

No

1

2

(CONTINUE)

(SKIP TO Q. 4)

2. Did (any of) you experience unsafe or unhealthy conditions in a place you were renting? For example there was no hot water, electricity, or working plumbing; cockroaches, mice, or rats; electrical problems, broken appliances, poor security, peeling paint, leaky roof, or broken windows that the landlord didn't fix?

Yes	No
(RECORD FIRST INCIDENT AS INCIDENT A. IF THERE WAS ANOTHER SEPARATE INCIDENT, ALSO MARK INCIDENT B) Incident A 1 Incident B 2	3
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.)	(GO TO Q. 3)

INCIDENT

A: _____

B: _____

3. In the last twelve months, did (any of) you have a major problem with a landlord or public housing authority? For example, a serious dispute about rent, the terms of the lease, or the security deposit; being locked out, evicted or threatened with eviction; being harassed by the landlord; or being unfairly denied public housing or transfer to another public housing unit , or other problem?

Yes	No
Incident A 1	Incident B 2
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.	
(GO TO Q. 4)	

INCIDENT

A: _____

B: _____

4. In the last twelve months did (any of) you own or live in a mobile home or trailer?

Yes	No
1	2
(CONTINUE)	(SKIP TO Q. 6)

5. In the last twelve months were there any serious problems related to the renting or purchase of a mobile home, or renting a lot for the mobile home? For example, did you have any problems with financing, warranties, fees, new rules and restrictions, access to utilities, leases, eviction or other problem?

Yes	No
Incident A 1	Incident B 2
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.	
(GO TO Q. 6)	

INCIDENT

A: _____

B: _____

6. In the last twelve months have you had any difficulties getting or keeping utilities like telephone, water, electricity or gas?

(FOR CLARIFICATION,IF ASKED:) For example an unreasonable deposit policy that made it hard to get service, a dispute over charges or payments, or a utility being improperly shut off , request for an unreasonable deposit, or other problem?

Yes		No
Incident A 1	Incident B 2	3
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		(GO TO Q. 7)

INCIDENT

A: _____

B: _____

7. Discrimination in housing can mean a lot of things, like being denied housing, being told you should live in certain neighborhoods, or having trouble getting financing for a home in a certain neighborhood. In the last twelve months, did (any of) you face discrimination in housing because of race, sex, disability, source of income, having children, members of the household, sexual orientation, or any other reason that you believe may have been unlawful?

Yes		No
Incident A 1	Incident B 2	3
PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		(GO TO Q. 8)

INCIDENT

A: _____

B: _____

8. These days it is sometimes hard for people to get and hold onto housing. Was there ever a time in the last twelve months when you (or anyone else in your present household) were homeless or staying in a shelter for the homeless?

Yes 1

No 2

9. During that time did (any of) you have to move in temporarily with another household because you didn't have your own place to live?

Yes 1

No 2

10. In the last twelve months did anyone move in temporarily with (you/your household) because they had no place to live?

Yes 1

No 2

11. At the present time, how many people including yourself now live in your household, whether they are related to you or not? Please count everyone who lives there half the time or more, including babies and small children and anyone who usually lives there but is away. (CIRCLE NUMBER OF HOUSEHOLD MEMBERS IN CHART BELOW.)

	HOUSEHOLD SIZE	INCOME CUT-OFF FOR Q. 12		
		ANNUAL	MONTHLY	WEEKLY
	1	11075	923	213
	2	14925	1244	288
	3	18775	1564	361
	4	22625	1885	401
	5	26475	2206	509
	6	30325	2527	583
	7	34175	2848	657
	8	38025	3168	731
per extra person	9+	3850	321	74

(SEE CHART IN Q. 11. USE ANNUAL INCOME FIGURE CORRESPONDING TO HOUSEHOLD SIZE IN Q. 11 FOR NEXT QUESTION)

12. Now, thinking again about all the people in your household including yourself, would you say that your total combined gross income from all sources is above or below **(ANNUAL INCOME FROM CHART IN Q. 11)**? Please count gross income from all sources, like earnings from work or odd jobs, retirement income, interest and dividends, and various benefit programs such as TANIF, SSI, and Social Security.

(IF REFUSED OR DON'T KNOW, REASSURE R OF CONFIDENTIALITY AND EXPLAIN THAT INFORMATION WILL BE USED ONLY TO COMPARE THE PROBLEMS AND RESOURCES AVAILABLE TO PEOPLE IN DIFFERENT INCOME GROUPS. IF DON'T KNOW, PROBE FOR R'S BEST GUESS AND USE CATEGORY 4, IF VOLUNTEERED. SHOW R MONTHLY AND WEEKLY FIGURES CORRESPONDING TO HOUSEHOLD SIZE, IF HELPFUL.)

(Go to Question 13)	Above	1
(Go to Question 14)	Below	2
(Go to Question 14)	Equal	3
(Go to Question 14)	Not sure: right around (INCOME)	4
(THANK R AND END INTERVIEW)	Refused	7
(THANK R AND END INTERVIEW)	Don't know	8

IF YOU CIRCLED 1 IN QUESTION 12, PLEASE REFERENCE THE CHART BELOW FOR QUESTION 13. THIS WILL IDENTIFY PEOPLE WHO ARE IN THE MODERATE INCOME CLUSTER

	HOUSEHOLD SIZE	INCOME CUT-OFF FOR Q. 13		
		ANNUAL	MONTHLY	WEEKLY
	1	22150	1846	462
	2	29850	2488	622
	3	37550	3129	782
	4	45250	3771	942
	5	52590	4413	1103
	6	60650	5054	1263
	7	68350	5696	1424
	8	76050	6338	1584
per extra person	9+	83750	6979	1744

13. Would you say that your total combined gross income from all sources is above or below (ANNUAL INCOME FROM CHART ABOVE)?

(THANK R AND END INTERVIEW)	Above	1
(CONTINUE)	Below	2
(CONTINUE)	Equal	3
(CONTINUE)	Not sure: right around (<u>INCOME</u>)	4
(THANK R AND END INTERVIEW)	Refused	7
(THANK R AND END INTERVIEW)	Don't know	8

14. In the past twelve months did (any of) you live in a neighborhood where you felt the police weren't doing a reasonable job at keeping crime, drug use, or other serious problems near your home under control? For example, the police didn't come when called, there weren't enough police, the police were abusive or harrassed residents, or any other major problems?

Yes		No
Incident A 1	Incident B 2	3
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		(GO TO Q. 15)

INCIDENT

A: _____

B: _____

15. Now I am going to ask you about some situations that can come up in families. Again, I'll be asking about the last 12 months and about problems affecting anyone living in your household. Did (any of) you need legal advice or help related to family issues such as: separation, divorce or annulment; child custody, visitation or support; paternity, alimony, grandparent's rights; division of property; or the payment of debts or other family issue?

Yes		No
1	Incident A 2	Incident B 2
		3
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		(GO TO QUESTION 16)

INCIDENT

A: _____

B: _____

Now I am going to ask you some questions that relate to older people.

16. In the last twelve months did you suspect or know that an elderly person (over 70 years) in the household, including yourself, was being emotionally, physically or sexually abused, neglected or taken advantage of financially? For example, was that elderly person yelled at or hit by a caretaker or other person, had money or property stolen from him or her, were left alone when unable to take care of him/herself, or otherwise abused, neglected, or taken advantage of financially?

Yes		No
1	Incident A 1	Incident B 2
		3
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		(GO TO Q. 17)

INCIDENT

A: _____

B: _____

17. In the last twelve months have (any of) you lived in a nursing facility, boarding home, adult family home or other group care setting?

Yes	No
1	2
(CONTINUE)	(SKIP TO Q. 19)

18. Did that person experience any of the following problems:

		Incident	
		A	B
a.	Were things brought into the facility, like clothes, personal belongings, hearing aids, teeth or other items, lost, misplaced or given to someone else?	1	1
b.	Did that person receive the wrong medication, or not receive medicine or health care that he/she was supposed to?	2	2
c.	Was that person unreasonably prevented from seeing people or participating in activities?	3	3
d.	Was that person told he/she couldn't do things unless he or she acted better or differently?	4	4
e.	Was the person's room changed or moved over his/her objections?	5	5
f.	Was there any other serious problem related to living in the facility?	6	6
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.			

INCIDENT

A: _____

B: _____

19. In the last twelve months was any adult in your household abused by a spouse or intimate partner?

Yes		No
Incident A 1	Incident B 2	3
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		(GO TO Q. 20)

INCIDENT

A: _____

B: _____

20. In the last twelve months were (any of) you the parent or guardian of a child under the age of 18, including biological, adoptive, step-, or foster children, whether or not that child lives in the household?

Yes	No
1 (CONTINUE)	2 (SKIP TO Q. 28)

21. In the last twelve months did (any of) you have problems with the child welfare authorities, suspicions about child abuse or neglect, or a problem with foster care?

Yes		No
Incident A 1	Incident B 2	3
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		(GO TO Q. 22)

INCIDENT

A: _____

B: _____

22. Were any of the children we've been discussing between 5-18?

Yes	No
1	2
(CONTINUE)	(SKIP TO Q.28)

23. Did any of the children participate in a school hot lunch or breakfast program?

Yes	No
1	2
(CONTINUE)	(SKIP TO Q. 25)

24. Did those children pay full price for the hot lunch or breakfast at school?

Yes 1
No 2

25. In the past twelve months did (any of) you have significant trouble enrolling a child in school, believe that the child was placed in a class below his or her level, have problems getting special classes or services the child needed, or have other problems getting appropriate educational services?

Yes		No
Incident A 1	Incident B 2	3
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		(GO TO Q. 26)

INCIDENT

A: _____

B: _____

26. In the last twelve months did any of these children have truancy or disciplinary problems that you believe were handled unfairly or improperly by school officials or the police?

Yes		No
Incident A 1	Incident B 2	3
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		(GO TO Q. 27)

INCIDENT

A: _____

B: _____

27. In the last twelve months did any of these children have serious problems at school that made it difficult for him or her to get an education? For example, the school was dangerous and students were not adequately protected, students were treated unfairly or unequally, the education that was offered was seriously inadequate, or other problem (specify)?

Yes		No
Incident A 1	Incident B 2	3
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		(GO TO Q. 28)

INCIDENT

A: _____

B: _____

28. In the last twelve months, did (any of) you need help with making or changing a will, estate planning, setting up a trust, obtaining Medicaid coverage for nursing home care, making sure loved ones will be provided for after your death, or administering an estate or dealing with an inheritance problem that arose after someone died?

Yes		No
Incident A 1	Incident B 2	3
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		(GO TO Q. 29)

INCIDENT

A: _____

B: _____

29. In the last twelve months, did (any of) you feel that you needed to get help for an adult who could not handle his or her own affairs, have a guardian and/or conservator appointed for that person, or change a guardianship arrangement that was already in place?

Yes		No
Incident A 1	Incident B 2	3
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		(GO TO Q.30)

INCIDENT

A: _____

B: _____

30. In the last twelve months, did (any of) you find that you wanted to provide in advance for a time when you might not be able to make important decisions about your finances, medical treatment, or other important matters, by signing a document like a power of attorney or living will?

Yes	No
Incident A 1	Incident B 2
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.	
(GO TO Q. 31)	

INCIDENT

A: _____

B: _____

31. In the twelve months, do you believe (any of) you were not hired because of unfair hiring practices or discrimination based on race, national origin, marital status, parental status, sex, disability, immigration status, religion, sexual orientation or anything else?

Yes	No
1	2
(CONTINUE)	(SKIP TO Q. 33)

32. What do you believe was the basis for the unfair treatment or discrimination? **Mark all that apply**

	Incident A	Incident B
Race	01	01
National origin/Ethnicity	02	02
Sex	03	03
Marital Status	04	04
Parental Status	05	05
Age	06	06
Sexual orientation	07	07
Disability	09	09
Religion	10	10
Immigration status	11	11
Other (SPECIFY:)	77	77
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		

INCIDENT

A: _____

B: _____

33. In the last twelve months were (any of) you unfairly denied workers compensation benefits or did (any of) you have to fight for them?

Yes		No
Incident A 1	Incident B 2	3
PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		(GO TO Q. 34)

INCIDENT

A: _____

B: _____

34. In the past 12 months did (any of) you receive any income from work?

Yes	No
1	2
(CONTINUE)	(SKIP TO Q. 40)

35. Did (any of) you have any serious problems with getting paid? For example, problems with pay rates (minimum wage or promised pay), collecting pay, withholding for taxes, garnished wages or other problem (specify)?

Yes		No
Incident A 1	Incident B 2	3
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		(GO TO Q. 36)

INCIDENT

A: _____

B: _____

36. In the last twelve months did (any of) you have a major problem with work benefits such as vacation, sick leave, or health insurance, either because the benefits were not what the employer promised or it was very difficult to use them?

Yes		No
Incident A 1	Incident B 2	3
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		(GO TO Q. 37)

INCIDENT

A: _____

B: _____

37. In the last twelve months were (any of) you treated unfairly or discriminated against by an employer. For example, denied a promotion or raise at work, or disciplined, unfairly fired, or given undesirable work assignments because the employer discriminated or treated people unfairly, or other?

Yes	No
1	2
(CONTINUE)	(SKIP TO Q. 39)

38. What do you believe was the basis for the discrimination or unfair treatment—race, sex, age, disability, marital status, nationality, religion, sexual orientation, parental status, or something else? **MARK ALL THAT APPLY.**

	Incident A	Incident B
Race	01	01
National origin/Ethnicity	02	02
Sex	03	03
Race/ethnicity and sex	04	04
Marital Status	05	05
Parental Status	06	06
Age	07	07
Sexual orientation	09	09
Disability	10	10
Religion	11	11
Immigration status	12	12
Other (SPECIFY:)	77	77
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		

INCIDENT

A: _____

B: _____

39. Did (any of) you experience any other major difficulties on the job such as sexual harassment, unhealthy or unsafe working conditions, union problems, reporting violations of unsafe working conditions or employment law?

Yes		No
Incident A 1	Incident B 2	3
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		(GO TO Q. 40)

INCIDENT

A: _____

B: _____

40. In the last twelve months did (any of) you work as a migrant farm worker or a seasonal farm worker?

Yes	No
1	2
(CONTINUE)	(SKIP TO Q. 44)

41. Was the work done in the local area or did the farm worker leave the area to look for work?

- Worked in area 1
- Migrated 2

42. Did you/the farm worker experience problems with: working conditions (exposure to pesticide, no drinking water or toilets, other); poor pay or no pay; taxes not being withheld; unsafe or inadequate housing; inadequate health care, no or poor schooling for children; unfair rules or restrictions by employer, labor contractor or housing provider; or getting documents needed to work?

Yes	No
1	2
(CONTINUE)	(SKIP TO Q. 44)

43. What was the problem? (MARK ALL THAT APPLY. IF MULTIPLE PROBLEMS RELATED TO A SINGLE INCIDENT, PROBE FOR THE ONE R CONSIDERS MOST SERIOUS)

	Incident A	Incident B
<u>Working conditions</u> (e.g., pesticide exposure, unavailability of drinking water or toilets)	01	01
Not receiving proper <u>pay</u>	02	02
Forced to buy things from your employer	03	03
Employer not paying <u>social security taxes</u>	04	04
Unsafe or seriously inadequate <u>housing</u>	05	05
Inadequate <u>health care</u>	06	06
Inadequate <u>schools</u> or schools that are hard for children to get to	07	07
Unreasonable rules and <u>restrictions</u> proposed by an employer, labor contract or housing provider	08	08
Getting <u>documents</u> needed to work	09	09
Other (SPECIFY:)	77	77
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		

INCIDENT

A: _____

B: _____

44. During the last twelve months, did (any of) you face discrimination because of a disability or serious health condition such as losing your job, having difficulty working, or not being able to go to a restaurant, house of worship, or other public place because modifications like wheelchair ramps weren't made?

Yes	No
1	2
(CONTINUE)	(SKIP TO Q. 46)

45. Did that involve discrimination because of disability, discrimination because of a serious health condition, or inability to use public places because necessary modifications weren't made?

	Incident A	Incident B
<u>Discrimination</u> by employer, health insurer, etc., because of <u>disability</u> (including being fired, workplace modifications not made, losing coverage)	01	01
Discrimination by employer, health insurer, etc., because of <u>serious health condition</u> (e.g., cancer, AIDS) (including being fired, losing coverage)	02	02
<u>Difficulty using public facilities</u> because necessary accommodations not made	03	03
<u>Other</u> discrimination based on disability or serious health problem	77	77
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.)		

INCIDENT

A: _____

B: _____

46. Many people participate in government programs that provide payments or benefits for themselves and their families such as Social Security for the disabled, retirees, widows or children, Supplemental Security Income, Medicare, Medicaid, Indian Health Care, welfare (TANIF, BIA or tribal, or General Assistance in Yellowstone County), Low Income Energy Assistance Program, public housing, or food stamps. At any time during the last twelve months, did anyone living in this household apply for or receive any such benefits from a government program?

Yes (If yes, which)	No	Don't know
1	2	3
(GO TO Chart)	(GO TO Q. 47)	(GO TO Q. 47)

(MARK EACH BENEFIT THAT APPLIES)

Social Security for the disabled (SSD) If "yes", is SSD for a <u>mental</u> or <u>physical</u> disability? (circle one)	01
Supplemental Security Income (SSI)	02
Other Social Security (e.g., for retirees or widows)	03
Welfare for families or individuals (e.g., TANF, BIA or tribal)	04
Medicare	05
Medicaid	06
Food stamps	07
Indian Health Service Benefits	08
LIHEAP Assistance (Low Income Energy Assistance Program)	09
County Medical in Yellowstone County	10

47. In the last twelve months, did (any of) you have any serious problems with a benefit program such as being discouraged from applying, not told how to apply, having a benefit denied or cut unfairly, being expected to meet unreasonable requirements to get the benefit, being punished unfairly for supposedly not following the rules, being told you have to pay back money you'd previously received, or not being given information about how the process works or how to appeal a decision?

Yes	No
1	2
(CONTINUE)	(SKIP TO Q. 49)

48. Which benefit was that? (MARK ALL THAT APPLY. IF MULTIPLE PROBLEMS RELATED TO A SINGLE INCIDENT, PROBE FOR THE ONE R CONSIDERS MOST SERIOUS)

	Incident A	Incident B
Social Security for the disabled	01	01
Supplemental Security Income (SSI)	02	02
Other Social Security (e.g., for retirees or widows)	03	03
Welfare for families or individuals (e.g., TANF/Work First, General Assistance (GAU))	04	04
Medicare	05	05
Medicaid	06	06
Food stamps	07	07
Indian Health Service Benefits	08	08
LIHEAP Assistance	09	09
County Medical (Yellowstone County only)	10	10
Public Housing	11	11
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		

INCIDENT

A: _____

B: _____

49. Now I'd like to ask you about health care,

In the last twelve months, were (any of) you unable to get satisfactory health care because of discrimination based on race, disability, income, being unable to find a provider who would accept Medicaid, Medicare, or other insurance, or not having insurance, or some other reason?

Yes	No
Incident A 1	Incident B 2
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.	
	3 (GO TO Q. 50)

INCIDENT

A: _____

B: _____

50. In the past 12 months did (any of) you have a major problem with health insurance coverage such as a dispute concerning charges, payments, or insurance coverage for health care, prescription drugs, medical equipment or supplies or obtaining health or personal care, a caregiver, or respite help?

Yes	No
1	2
(CONTINUE)	(SKIP TO Q. 52)

51. Was the problem or dispute about charges; payments; coverage by private health insurance, Medicare, or Medicaid; or something else?

	Incident A	Incident B
Charges	01	01
Payments	02	02
Private insurance	03	03
Medicare	04	04
Medicaid	05	05
Indian Health Service	06	06
Other (including some <u>combination</u> of the above) (SPECIFY:)	77	77
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		

INCIDENT

A: _____

B: _____

52. In the last twelve months were (any of) you faced with violations of a patient’s or family’s basic rights concerning: informed consent to medical procedures, access to medical records with reasonable or no charge, decisions about health matters, confidentiality of medical information, or the medical treatment itself?

Yes		No
Incident A 1	Incident B 2	3
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS “INCIDENT A” AND “INCIDENT B”, ETC.		(GO TO Q. 53)

INCIDENT

A: _____

B: _____

53. In the last year did (any of) you have a serious problem with federal, state, or local taxes such as a tax audit, having a serious dispute with the IRS or state or local tax people, having difficulty collecting the earned income tax credit, or having a tax problem that required help to understand or handle?

Yes		No
Incident A 1	Incident B 2	3
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS “INCIDENT A” AND “INCIDENT B”, ETC.		(GO TO Q. 54)

INCIDENT

A: _____

B: _____

54. In the last twelve months were (any of) you denied a loan, mortgage, credit card, or other credit because of false information in the credit report or discrimination based on race, disability, sex, source of income, or anything else?

Yes		No
Incident A 1	Incident B 2	3
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.)		(GO TO Q. 55)

INCIDENT

A: _____

B: _____

55. In the last twelve months did (any of) you have a major problem with a creditor? For example, like harassing phone calls or other improper collection or repossession practice, a serious dispute about charges or fees, or not being able to reach agreement about repaying the debt?

Yes		No
Incident A 1	Incident B 2	3
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.)		<input type="text"/> (GO TO Q. 56)

INCIDENT

A: _____

B: _____

56. Have (any of) you had any of the following money problems?

	Incident A	Incident B
Couldn't pay for doctor or other health care	01	01
Choosing one necessity (food, health care, utilities) over another due to lack of money	02	02
Paying for necessities with a credit card	03	03
Other (including some <u>combination</u> of the above) (SPECIFY:)	77	77
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.)		

INCIDENT

A: _____

B: _____

57. In the last twelve months did (any of) you have a problem with a contract such as signing a contract without understanding it, needing advice about signing a contract, not being able to get out of a contract after having second thoughts, or getting into a serious dispute about what a contract required?

Yes		No
Incident A 1	Incident B 2	3
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		(GO TO Q. 58)

INCIDENT

A: _____

B: _____

58. In the last twelve months did (any of) you spend money to buy something or have some work done and then find you didn't get what you paid for and the seller or contractor failed to make things right?

Yes		No
Incident A 1	Incident B 2	3
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		(GO TO Q. 59)

INCIDENT

A: _____

B: _____

59. Did (any of) you have problems with a loan that you found out later had really harsh terms for repayment or an extremely high interest rate like a car title loan, a payday loan, or consolidation loan?

Yes		No
Incident A 1	Incident B 2	3
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		(GO TO Q. 60)

INCIDENT

A: _____

B: _____

I have just a few questions about violations of people's rights.

60. In the last twelve months, did (any of) you experience harassment by the police or have a home, car, or other personal belongings searched or taken by the police without good reason?

Yes		No
Incident A 1	Incident B 2	3
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		(GO TO Q.61)

INCIDENT

A: _____

B: _____

61. Does anyone living in your household usually speak a language other than English while at home?

Yes (INDICATE LANGUAGE(S):)		No
American sign language	1	
Cambodian	2	
Crow	3	
French	4	
Hmong	5	
Laotian	6	
Other Native American (PLEASE SPECIFY) _____	7	
Russian	9	
Spanish	10	
Ukrainian	11	
Vietnamese	12	
Other (PLEASE SPECIFY) _____	13	
		(SKIP TO 63)

62. In the last twelve months did (any of) you have a serious problem because of a difficulty with communicating in the spoken English language? For example, not being able to defend your rights, not being allowed to speak your native language, finding it difficult to deal with government agencies, or having trouble getting work, housing, education, health care, or benefits?

Yes		No
Incident A 1	Incident B 2	3
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		(GO TO Q. 63)

INCIDENT

A: _____

B: _____

63. Did anyone in your household who was born outside the United States as a citizen of another country arrive in the United States within the past 5 years?

Yes	No
1	2
(CONTINUE)	(SKIP TO Q. 68)

64. Does that person intend to make the United States his or her permanent place of residence?

Yes 1
No 2

65. In the last twelve months, did (any of) you have an immigration problem, such as with becoming a citizen, becoming legal or getting a green card, bringing a family member to the United States legally, obtaining political asylum, avoiding deportation, getting amnesty, or a similar matter?

Yes	No
1	2
(CONTINUE)	(SKIP TO Q. 67)

66. What kind of problem was it? (MARK ALL THAT APPLY. IF MULTIPLE PROBLEMS RELATED TO A SINGLE INCIDENT, PROBE FOR THE ONE R CONSIDERS MOST SERIOUS)

	Incident A	Incident B
Deportation	01	01
Political asylum	02	02
Becoming legal or getting a green card	03	03
Bringing a family member to the United States legally	04	04
Amnesty	05	05
Becoming a citizen	06	06
Other	77	77
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		

INCIDENT

A: _____

B: _____

67. Did (any of) you have any other serious problem because of being an immigrant?

(For clarification, if asked:) For example, like being taken advantage of by an employer, landlord, or someone else or not getting benefits because you couldn't get information about them or were afraid to apply?

Yes		No
Incident A 1	Incident B 2	3
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		(GO TO Q. 68)

INCIDENT

A: _____

B: _____

68. Are you or is anyone in your household an American Indian?

Yes	No
1	2
(CONTINUE)	(SKIP TO Q. 71)

69. Do you live on a reservation or within 25 miles of your reservation or a reservation with which you have close ties?

Yes 1
 No 2

70. In the last twelve months, did (any of) you experience any of the following problems:

	A	B
a. A serious dispute with a government agency like the Bureau of Indian Affairs, the Indian Health Service, Indian child welfare or a tribe?	1	2
b. Problems related to tribal recognition?	1	2
c. A dispute related to fishing or hunting rights or to owning or using tribal land?	1	2
d. Other treaty violations or threats to tribal sovereignty?	1	2
e. Problems related to living off the reservation?	1	2
f. Problems with tribal affiliation or enrollment?	1	2
g. Problem arising out of ownership or use of trust land such as problems with lessee, BIA accounting for lease income, or dealing with co-owners?	1	2
h. Discrimination because of tribal affiliation	1	2
i. Any other problem related to being an American Indian (specify)	1	2
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		

INCIDENT

A: _____

B: _____

71. At any time in the last twelve months were (any of) you in an institution which you were not free to leave whenever you wished to do so such as a jail, prison, or mental health hospital or other?

Yes	No
1	2
(CONTINUE)	(SKIP TO Q. 73)

72. At any time in the last twelve months while you (the household member(s)) were in the institution did you have serious difficulty with any of the following situations?

	Incident A	Incident B	No
a. Access to adequate medical treatment?	1	1	6
b. Access to legal material?	2	2	
c. Serious threat to your personal safety?	3	3	
d. Interference with your religious practice	4	4	
e. Disciplinary action which you believe was unfair or arbitrary?	5	5	
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.)			(GO TO Q. 73)

INCIDENT

A: _____

B: _____

73. Other than what we've already talked about, in the last twelve months, were (any of) you discriminated against because of race, age, sex, marital status, sexual orientation, source of income, disability, or anything else?

Yes		No
Incident A 1	Incident B 2	3
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		(GO TO Q. 74)

INCIDENT

A: _____

B: _____

74. This question concerns the courts. We are not interested in crimes, but in CIVIL legal actions. A civil case means anything **other** than being charged with a crime or a traffic violation. Civil cases could range from fairly routine situations like an uncontested divorce to a jury trial. The cases could be in state, federal or tribal courts.

In the last twelve months, other than what we have already talked about, were (any of) you involved in any kind of civil court action, whether or not you actually appeared in court?

Yes		No
Incident A 1	Incident B 2	3
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		(GO TO Q. 75)

INCIDENT

A: _____

B: _____

75. In the past 12 months did (any of) you appear or receive notice to appear at a formal administrative hearing in front of an administrative law judge or administration officer. For instance, a hearing about your eligibility for benefits such as Social Security, SSI unemployment or welfare, a hearing about whether a permit should be granted or revoked, or about whether you're allowed to use your house or other property in certain ways?

Yes		No
Incident A 1	Incident B 2	3
PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		(GO TO Q. 76)

INCIDENT

A: _____

B: _____

76. Other than what we have already talked about, during the last twelve months, did (any of) you need help from a lawyer, whether or not you actually got help or tried to get it?

Yes		No
Incident A 1	Incident B 2	3
(PLACE SEQUENTIAL NUMBER(S) FOR EACH DISTINCT INCIDENT REPORTED IN THE BOX AT THE RIGHT. PROBE FOR DETAILS OF THIS SPECIFIC SITUATION AND RECORD INFORMATION BELOW. IF MORE THAN ONE DISTINCT INCIDENT RELATED TO THIS QUESTION, CLEARLY MARK AS "INCIDENT A" AND "INCIDENT B", ETC.		(GO TO INTERVIEWER CHECKPOINT)

INCIDENT

A: _____

B: _____

INTERVIEWER CHECKPOINT

GO BACK THROUGH THE SURVEY AND LOCATE ALL THE PLACES WHERE YOU RECORDED AN INCIDENT. EACH DISTINCT INCIDENT SHOULD BE NUMBERED SEQUENTIALLY. COMPLETE A SUPPLEMENT FOR EACH INCIDENT, AND THEN CONTINUE WITH Q.77. YOU DO NOT NEED TO FILL OUT MORE THAN 5 SUPPLEMENTS. IF YOU HAVE RECORDED MORE THAN 5 INCIDENTS, SEE CHART IN USERS MANUAL (P. 10) TO DETERMINE WHICH 5 INCIDENTS NEED TO HAVE A SUPPLEMENT COMPLETED.

77. If you needed legal help with a civil matter in the future:

	YES	NO	DK
a. Are you aware of a service in your area that makes referrals to lawyers?	1	2	--
b. Are you aware of any free <u>civil</u> legal services for people who can't afford a lawyer?	1	2	8
c. Are you aware of a toll free number that you can call for legal advice and representation if you are low income?	1	2	
d. Are you aware of any internet sites where you can get information about legal matters?	1	2	
e. Are you eligible for free legal services?	1	2	8
f. Are you aware of a small claims court where people can go to have their cases heard without having an attorney?	1	2	--

Finally I have just a few more questions.

78. (ASK, IF NECESSARY:) Your sex is:

male 1
female 2

79. How old were you on your last birthday?

(AGE IN YEARS ON LAST BIRTHDAY) _____

80. Which of the following best describes you:

White	1
black, or African-American	2
Mexican, Chicano, Hispanic or Latino origin	3
American Indian, Aleut, or Eskimo (SPECIFY TRIBAL AFFILIATION:)	4
Asian or Pacific Islander	5
(DO NOT READ:) OTHER (SPECIFY:)	6

81. How many members of your household are 70 years of age or older? _____

82. Do you have reasonably reliable and reasonably private access to the following?

(READ EACH AND CIRCLE ANY THAT APPLY)

Computer	Internet	Email	Telephone	Cell phone	Fax	Cable TV	None
1	2	3	4	5	6	7	(SKIP TO Q.84)

83. Where do you normally use the devices you mentioned using?

(ASK ONLY ABOUT TECHNOLOGIES MENTIONED IN Q. 82. ON CHART BELOW CIRCLE LOCATION OF MOST FREQUENT USE.)

	Home	Work	Library	School	Other
a. Computer	1	2	3	4	77
b. Internet	1	2	3	4	77
c. Email	1	2	3	4	77
d. Telephone	1	2	3	4	77
e. Cell phone	1	2	3	4	77
f. Fax	1	2	3	4	77
g. Cable Television	1	2	3	4	77

84. Out of anyone in your household, what is the highest number of years of education any individual was able to complete? _____

85. Does your household have a permanent address, a post office box, or another address where you can depend on getting private mail?

Yes 1

No 2

As I said at the beginning of this interview, the information you have provided to me is completely confidential, and will not be released in any way that would identify you individually. Some of the situations you have described might be useful in trying to help people like you have more help with legal problems in the future. Would you be willing to be contacted at a later date by people working on these issues to discuss how you could help with improving access to justice in Montana? Of course, it is entirely up to you whether you agree to do so.

(DO NOT PRESSURE R TO AGREE TO BE CONTACTED. IF R VOLUNTARILY AGREES, COMPLETE A WAIVER OF CONFIDENTIALITY FORM, AND THEN CONTINUE.)

86. Before we finish, I need to look over the questionnaire quickly to be sure that I have completed this interview properly. Please excuse me for a few minutes while I check.

INTERVIEWER:

REVIEW ANSWERS TO OPEN-ENDED QUESTIONS:

- **ARE ALL OPEN-ENDED ANSWERS CLEAR, COMPLETE, AND LEGIBLE?**

IF YOU FIND ERRORS, BEFORE LEAVING, ASK RESPONDENT TO ANSWER ANY MISSED QUESTIONS, THEN READ:)

These are all the questions I have. Thank you very much for taking part in this survey. Have a nice (day/evening).

INTERVIEWER OBSERVATIONS

87. **WITH REASONABLE CERTAINTY, DOES THIS RESPONDENT REPRESENT OF ANY OF THE FOLLOWING DEMOGRAPHIC CHARACTERISTICS?**

- PHYSICAL DISABILITY 1
- MENTAL OR DEVELOPMENTAL DISABILITY 2
- SENIOR CITIZEN (OVER 70) 3
- DOMESTIC ABUSE SURVIVOR 4
- MIGRANT OR SEASONAL WORKER 5
- HOMELESS PERSON 6
- INCARCERATED ADULT 7
- IMMIGRANT 8
- RESERVATION BASED NATIVE AMERICAN 9
- OFF-RESERVATION BASED NATIVE AMERICAN 10
- MODERATE-INCOME 11
- LOW-INCOME, BUT NONE OF THE ABOVE 12

88. **ESTIMATE THE RESPONDENT’S UNDERSTANDING OF THE INTERVIEW AND PERCEIVED EASE OF RECALL.**

	UNDER- STANDING	RECALL
NO DIFFICULTY	1	1
A LITTLE DIFFICULTY	2	2
A FAIR AMOUNT OF DIFFICULTY	3	3
A LOT OF DIFFICULTY	4	4

VERY COOPERATIVE	1
FAIRLY COOPERATIVE	2
NOT VERY COOPERATIVE	3
OPENLY HOSTILE	4

90. PLEASE INDICATE ANY TOPICS ABOUT WHICH THE RESPONDENT SEEMED INHIBITED OR UNCOMFORTABLE IN PROVIDING INFORMATION.

91. PLEASE MAKE A NOTE OF ANYTHING ELSE YOU FEEL WILL BE HELPFUL FOR UNDERSTANDING THIS INTERVIEW.

92. I certify that I administered this interview face-to-face with the selected respondent, and that I will keep all information obtained during the interview confidential.

INTERVIEWER SIGNATURE: _____

I INTERVIEWED THIS PERSON IN _____ COUNTY, MT

PLEASE, ASAP!! MAIL THIS AND ALL COMPLETED SUPPLEMENTS TO:

ANN GILKEY
STATE BAR OF MONTANA
PO BOX 577
HELENA, MT 59624

THANK YOU FOR YOUR HELP WITH MONTANA'S LEGAL NEEDS STUDY!!