

Twelve-Month Tenant Outcomes for Persons Housed by NY/NY III's Supportive Housing for Active Substance Users

The third paper from CASAHOPESSM



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Addiction and Substance Abuse
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Executive Summary

Finding a way to stably house homeless persons with substance use problems is critical to solving the overall problem of homelessness. However, there is considerable debate regarding the best way to accomplish this goal. In recent decades the dominant approach has been a continuum of care model in which homeless persons with substance use disorders pass through a series of programs based on their progress towards sobriety. More recently, cities across the United States have been adopting a form of supportive housing, broadly defined as housing linked with social services, that moves tenants directly from the streets or shelters into housing, with no requirements regarding mental health or substance use treatment. This model is called 'Housing First'. While the ability of Housing First to effectively house the chronically homeless has been established by multiple studies, more research is needed on the impact of this housing on tenants without serious mental illness (SMI) as well as tenants who use substances other than or in addition to alcohol. The Conrad N. Hilton Foundation has funded CASAHOPESM (Housing Opportunities Program Evaluation) to address some of these gaps in the Housing First literature by evaluating unique harm reduction supportive housing units created under the New York/New York III (NY/NY III) agreement.

In November 2005, Mayor Bloomberg and Governor Pataki announced the NY/NY III agreement, a \$1 billion commitment between the City and State to develop 9,000 new units of supportive housing in New York City. This agreement funded housing for nine target populations, one of which, often referred to as 'Population E', is defined as chronically homeless individuals for whom substance use is a primary barrier to independent living. For the purposes of this paper, 'Population E' will also be used to refer to the specific programs providing supportive housing to this group. Local housing providers received funding to offer over 500 units of scattered-site housing (i.e., housing units dispersed in apartment buildings throughout the area rather than highly concentrated in one building, which is called congregate housing) for Population E. An additional 250 units of congregate housing for Population E are being developed, but are not being evaluated by CASAHOPE.

Tenants of these nine scattered-site Population E housing programs are not required to be abstinent from alcohol and drugs or to participate in substance abuse treatment prior to or during housing. The primary objective of these programs is not to decrease tenant substance use, but to stably house tenants while motivating them to make better mental and physical health choices, including choices that reduce substance-related harm in their lives. Accordingly, CASAHOPE is an evaluation of housing stability in the context of tenant substance use.

CASAHOPE aims to capitalize on the opportunity this initiative presents to determine: (1) whether non-abstinence based supportive housing programs can keep this population from returning to the streets or shelters; (2) which program features (among

those implemented) appear most promising; and (3) the extent of the resources (e.g., costs) and organizational capacity (e.g., staff training) required to implement such programs. We have partnered with the Corporation for Supportive Housing (CSH) to evaluate program implementation and provide technical assistance to the Population E housing providers.

The CASAHOPE evaluation uses data from multiple sources: tenants, program staff, key stakeholders, and government administrative databases. Our first paper, *Characteristics of Persons Housed by NY/NY III's Supportive Housing for Active Substance Users*, established a baseline description of tenants entering housing. Our second paper, *Unlocking the Door: An Implementation Evaluation of Supportive Housing for Active Substance Users in New York City*, presents the findings of our implementation evaluation conducted in partnership with the Corporation for Supportive Housing. Subsequent papers will address service utilization and the costs of housing Population E tenants. The focus of the current paper is 12-month tenant outcomes across key domains. All CASAHOPE papers are available at www.casacolumbia.org/CASAHOPE.

As part of the evaluation, 12-month follow-up interviews were conducted with 287 tenants. In addition, case managers completed logs reporting on tenant status for the first 12 months of housing tenure for 351 tenants. These interviews and logs captured data on physical health, mental health, substance use, substance abuse treatment, employment, criminal justice involvement, services receipt, and satisfaction with housing.

Detailed findings are presented herein. In sum, we found the following outcomes for tenants after 12 months of housing:

Housing Retention

- Eighty-eight percent of baseline interview participants remained housed for at least one-year.
- The only client-level factor related to a significant increase in the risk of tenant discharge from housing was case manager report of whether or not a tenant experienced 'consequences of substance use' (i.e., directly related money problems, harm to one's physical appearance, damage to relationships with families and friends, loss of interest in activities or hobbies, legal troubles, and/or behavior that jeopardizes housing) in at least one month during the first year of housing.
- Tenants of programs rated by CASAHOPE's implementation evaluation as 'inconsistent' were significantly more likely to be discharged than tenants of programs rated as 'very or satisfactorily consistent'.
- Nearly one half of follow-up survey respondents expected to permanently live in NY/NY III housing, suggesting high levels of perceived housing stability.

Alcohol and Drug Use

- There was no significant change between baseline and follow-up interviews in tenant alcohol use or the proportion of tenants with a MINI diagnosis for alcohol disorders.
- There was a 5% decrease in tenant drug use and an 11% decrease in the number of tenants who met MINI criteria for drug disorders between baseline and follow-up interviews.
- One-third of tenants reported participating in substance use treatment programs during the follow-up period.

Physical Health

- Tenants reported that their physical health remained the same from baseline to follow-up. This was confirmed by case manager report.
- Case managers also observed no substantial change over time in tenants' ability to perform activities of daily living. Case managers rated tenants' ability to do most tasks as moderately or considerably able.

Mental Health

- Tenants reported that their mental health remained the same from baseline to follow-up. This was confirmed by case manager report.

Criminal Justice

- In total, about one-quarter of the population was arrested, detained, or incarcerated during the follow-up period.
- Case managers observed that the percent of tenants with criminal justice involvement remained consistent over the course of the follow-up period.

Employment

- Approximately, one-third of tenants reported working during the follow-up period; case managers reported that the number of tenants who held a job in any given month remained around 10%.
- Ill health or physical disability was the number one barrier to work cited by tenants at both baseline and follow-up.

Receipt of Services

- When tenants were asked what services they wanted and what services they received, in critical areas—physical health, mental health, and substance use—the reported receipt of services was very near to tenant report of need. The largest gap between tenant need and services receipt was reported in employment services.

Satisfaction

- Across the board, tenants reported high levels of satisfaction with their supportive housing program. The three items with the highest satisfaction ratings were: the cost of the apartment, rules around drug or alcohol use in the apartment, and the availability of case managers. The three items with the lowest satisfaction ratings were: the condition of the apartment, the proximity of the apartment to family or friends, and the amount of time it took for apartment repairs to be done.
- Nearly three-quarters of the sample reported high levels of openness about substance use with their case manager and confidence in their case manager's ability to understand their substance-related goals.

Conclusions

Overall, these findings indicate that individuals who actively use drugs or alcohol can be stably housed without a precondition of treatment attendance. While actively substance using homeless individuals have historically been viewed as not being 'housing-ready', we found no association between type or amount of substance use and housing retention. Only case manager report of 'consequences of substance use' in any month during the first year of housing was related to a significant increase in the risk of discharge. We found no evidence of worsening substance use, physical health, mental health, or criminal justice involvement over the first year of housing. In general, tenants reported receiving the services they needed as well as high levels of satisfaction with their case management and housing.

Previous studies have generally focused on homeless adults with serious mental illness or only alcohol abusing tenants, thus limiting comparison to our results because of differences in target population. However, broadly speaking, findings of good housing stability as well as stable substance use and health are similar to those previously reported for supportive housing programs (Mares & Rosenheck, 2010; Padgett, Gulcur, & Tsemberis, 2006; Pearson, Locke, Montgomery, & Buron, 2009).

As some have suggested, a "tolerable" level of on-going substance use may be an acceptable societal compromise in return for effectively housing this population (Collins et al., 2012; Mares & Rosenheck, 2010). This compromise may be all the more compelling if cost savings can be demonstrated. Future reports will describe the results of a cost-effectiveness analysis using administrative data to investigate tenant service utilization, both pre and post housing as well as evaluated against a matched comparison group that did not receive housing.

CHAPTER I

INTRODUCTION

In November 2005, Mayor Bloomberg and Governor Pataki announced the New York/New York III (NY/NY III) agreement, a \$1 billion commitment between the City and State to develop 9,000 new units of housing linked with supportive services, known as supportive housing, in New York City. NY/NY III is larger in scope than the previous two NY/NY agreements and is the first to include housing for people *without* serious mental illness (SMI). While the expanded target populations of NY/NY III signal the City and State's belief in supportive housing as an effective intervention, the optimism behind supportive housing is most clearly demonstrated by the inclusion of housing for actively substance using homeless individuals without SMI, often referred to as 'Population E'. For the purposes of this paper, 'Population E' will also be used to refer to the specific programs providing supportive housing to these individuals. This housing was included in NY/NY III in response to the overcrowding of city shelters by substance using homeless individuals, a group that is typically seen having difficulty completing substance abuse treatment.

Local housing providers received funding to offer over 500 units of scattered-site housing (i.e., housing units dispersed in apartment buildings throughout the City) and 250 units of congregate housing (i.e., housing units highly concentrated in one building) in New York City for Population E. Population E housing uses a Housing First approach and does not require tenants to enter substance abuse treatment or stop using alcohol or drugs. Whereas there are a number of programs in the country that have moved away from sobriety as a prerequisite for housing, this is the first large-scale, urban investment in supportive housing for this population.

The Conrad N. Hilton Foundation has funded CASAHOPE (Housing Opportunities Program Evaluation) to evaluate the scattered-site supportive housing for Population E. CASAHOPE aims to capitalize on the opportunity this initiative presents to determine whether non-abstinence based supportive housing programs can keep substance using homeless persons without SMI from returning to the streets or shelters; which program features (among those implemented) appear most promising; and the resources (e.g., costs) and organizational capacity (e.g., staff training) required to implement such programs. The evaluation has 3 broad components: 1) collecting data directly from housing tenants; 2) interviewing program staff and key government stakeholders to assess lessons learned during implementation; and 3) analyzing government administrative data to track tenant use of public services. We have partnered with the Corporation for Supportive Housing (CSH) to evaluate program implementation and to provide technical assistance to the Population E providers.

This paper is the third in a series from CASAHOPE. All released CASAHOPE papers are available at www.casacolumbia.org/CASAHOPE. Our first paper, *Characteristics of*

Persons Housed by NY/NY III's Supportive Housing for Active Substance Users, provides a baseline description of tenants entering housing. Our second paper, *Unlocking the Door: An Implementation Evaluation of Supportive Housing for Active Substance Users in New York City*, presents the findings of our implementation evaluation conducted in partnership with the Corporation for Supportive Housing. Papers that follow will describe changes in tenant utilization of government services and associated economic impacts. The current paper will focus on results from the 12-month follow-up interview with tenants conducted by CASAHOPE research staff in 2008 and 2009. In addition, this paper reports results from logs completed by case managers every month for the first year tenants were housed.

Literature Review

Finding a way to stably house homeless persons with substance use problems is critical to solving the overall problem of homelessness. There is, however, considerable debate regarding the best way to accomplish this goal. In recent decades the dominant approach has been a continuum of care model in which homeless persons with substance use disorders pass through a series of programs based on their progress towards sobriety (Kertesz, Crouch, Milby, Cusimano, & Schumacher, 2009). Under this model, the typical path to housing requires clients to (1) be willing and able to be abstinent from drugs and/or alcohol, (2) access services through a shelter or street-outreach team, (3) attend abstinence-based treatment, including detox and long-term residential programs, (4) complete treatment and move into transitional housing, and then, (5) locate permanent housing. More recently, cities across the country have been adopting a different form of supportive housing that moves tenants directly from the streets or shelters into housing, with no requirements regarding mental health or substance use treatment. This model is called 'Housing First'.

Housing First programs have demonstrated generally promising outcomes in the areas of housing stability, health, and well-being. Perhaps the most studied program is Pathways to Housing in New York City. Pathways to Housing offers immediate housing with no requirements around sobriety or treatment to persons with serious mental illness (SMI). Support services are usually provided by a multidisciplinary approach such as Assertive Community Treatment (ACT) available 24 hours a day, 7 days a week. An observational study comparing outcomes for those entering Pathways To Housing verses usual care, which was a multi-stepped abstinence-based approach, found that five-year retention rates in housing were much better among the Housing First group (88%) than among those who received usual care (47%) (Tsemberis & Eisenberg, 2000). In a randomized controlled trial comparing Pathways to Housing with a control group that received usual care, those in the Housing First arm of the study had better housing stability, fewer psychiatric hospitalizations, and reported higher perceived choice than the control group (Gulcur, Stefancic, Shinn, Tsemberis, & Fischer, 2003; Padgett, Gulcur, & Tsemberis, 2006; Tsemberis, Gulcur, & Nakae, 2004). No differences were found in substance use or psychiatric symptoms between the groups, leading investigators to

conclude that Housing First programs offer tenants a chance at stable housing without worsening psychiatric or substance misuse symptoms.

Similarly, an exploratory study of three Housing First programs for persons with mental illness—Downtown Emergency Service Center (DESC), Reaching Out and Engaging to Achieve Consumer Health (REACH), and Pathways to Housing—conducted by the U.S. Department of Housing and Urban Development concluded that Housing First is a viable approach for housing chronically homeless persons with mental illness and co-occurring substance use disorders (Pearson, Locke, Montgomery, & Buron, 2009). While there were no substantial trends related to psychiatric or substance misuse symptoms, all three programs achieved positive outcomes in the areas of housing stability and housing tenure, with some exception for tenants who had previously been living on the streets. Additionally, in a 2005 study, Canadian investigators profiled thirteen programs that housed actively substance using homeless persons in Canada, the United States, and the United Kingdom (Kraus, Goldberg, & Serge, 2005). The programs ranged in target population specifics (SMI, non-SMI, drinkers, drug users, etc.) and housing design (permanent, transitional, scattered site, congregate, etc.), but all thirteen utilized a Housing First model. All programs reported that their tenants had undergone positive changes in the areas of housing stabilization, income, physical and mental health, and substance use. Almost all programs identified safe and secure housing as a key factor in helping tenants move towards abstinence or reduce the negative consequences of their substance use. Furthermore, a study of the U.S. Interagency Council on Homelessness' pilot program called the Collaborative Initiative to Help End Chronic Homelessness (CICH), found that chronically homeless adults with various disabling conditions, including substance use disorders, provided with supportive housing modeled after Housing First experienced significant improvement in clinical, social, and quality of life outcomes as well as housing stability (Mares & Rosenheck, 2010). Among baseline drug users crack, cocaine, and marijuana use decreased by 28–50% over the follow-up period.

Recently, a study of Seattle's 1811 Eastlake, a project-based (i.e., congregate setting) Housing First program that targets chronically homeless persons with severe alcohol problems and high utilization of costly health care services, reported a reduction in alcohol consumption and alcohol-related problems among those who received the Housing First intervention (Collins et al., 2012). The longer tenants stayed in housing, the larger the decrease in alcohol consumption. The authors argue that these findings do not support the 'enabling hypothesis' used by critics of Housing First who claim that non-abstinence-based housing supports tenants' chaotic substance use.

These studies have established the potential of Housing First for many substance-using groups. Nevertheless, more research is needed for tenants without SMI, tenants who use substances other than alcohol, and programs that don't use either ACT teams or project-based approaches. CASAHOPE intends to add to the scientific evidence around the Housing First model through our evaluation of Population E's scattered-site

supportive housing for individuals with a range of substance use and severity. The current paper provides results from 12-month follow-up interviews with Population E tenants conducted by CASAColumbia™ research staff in 2008 and 2009, as well as case manager logs collected monthly between 2008 and 2010 for each participant's first year of housing. Key tenant characteristics and outcomes for tenants who have received 12 months of supportive housing will be described.

CHAPTER II

METHODS

The Sample

Two hundred and eighty-seven participants completed twelve-month follow-up interviews between 2009 and 2010, representing 80% of the 358 tenants who were interviewed at baseline. Of the 71 tenants who did not complete the follow-up interview, 9 (13%) were deceased, 28 (39%) refused to participate in the interview, and 34 (48%) were discharged from housing before being housed for a year.

In addition, between 2008 and 2010, program case managers were asked to complete a 17-item log every month for the first 12 months of a tenant's housing tenure. In total, 4,205 logs were collected for 352 study participants. Six participants would not consent to have the research team collect information from their case managers.

The original eligibility criteria for Population E required that tenants be chronically homeless single adults with a substance abuse disorder that was a primary barrier to independent living and who also had a disabling clinical condition. Chronic homelessness was defined as living in a shelter or on the street for at least 12 out of the last 24 months or 2 out of the last 4 years, not necessarily consecutively. The disabling clinical condition was defined as any clinical condition serious enough to be a barrier to independent living, such as a physical illness (e.g., heart problems, Hepatitis C, and diabetes), mental health issues (including depression, mood, and anxiety disorders but not severe and mental health issues), cognitive impairments or developmental disabilities. On April 13, 2009, the eligibility requirements were changed: (1) potential tenants no longer needed a disabling clinical condition to be considered for Population E and (2) the definition of chronic homelessness was changed to include individuals who have been homeless only 6 of the previous 12 months.

Formal selection criteria for the CASAHOPE study were as follows: participants were included if they were housed by one of the nine Population E housing programs after the NY/NY III agreement was signed. Ninety-four tenants in Population E had already been housed prior to NY/NY III through pre-existing scattered-site programs and were grandfathered into Population E. These tenants were not interviewed for this study, as they had been stably housed for over one year when the study began. To collect a more representative sample, the three programs housing more than 60 tenants apiece were each limited to roughly 60 tenant interviews. For the baseline interview, sample size from each program ranged from 7-62 tenants. We did not conduct follow-up interviews or collect case manager logs from the one program that supplied 7 tenants for the baseline interview. For the 12-month follow-up interview, we did not interview study participants who had been discharged from housing before 12 months.

Procedures

Tenants who had participated in the study baseline interview were contacted by letter, telephone call, and/or home visit and invited to participate in the 12-month follow-up interview. Tenants who consented were interviewed by trained staff, on average 11.5 months after their baseline interview. Tenants could choose to have the 45-minute interview conducted in their homes or any other location including coffee shops, restaurants, or parks. Participants were compensated for their time with a choice of public transit vouchers or gift cards to restaurants, movie theaters, and stores with an approximate value of \$25 for those who completed the interview at or near home and \$50 for those who traveled to complete the interview.

In addition, case managers were asked to complete a 17-item log every month for the first 12 months of a tenant's housing tenure. Case managers completed the paper-and-pencil logs at the end of every month and they or their program were reimbursed \$5 for each completed log returned to study staff. All logs were then entered into a secure database by research assistants. All procedures were reviewed and approved by the governing Institutional Review Board (IRB) at CASA.

Measurement

Participants were administered a battery of standardized measures by trained interviewers (Appendix A). Measures were selected to assess: a) substance use, b) physical health, c) mental health, d) housing stability, e) employment, f) satisfaction with housing, and g) services receipt. Assessments for substance use problems included contemplation ladders for readiness to abstain from alcohol and drugs (Hogue, A., Dauber, S., & Morgenstern, J., 2010), prior treatment history, the alcohol and drug abuse and dependence modules of the Mini-International Neuropsychiatric Interview (MINI; Sheehan et al., 1998), and select questions from the Alcohol Use Disorders Identification Test (AUDIT; Saunders, Aasland, Babor, De La Fuente, & Grant, 1993) and the Drug Use Questionnaire (DUQ; Hien & First, 1991). Physical and mental health were assessed using the SF-12 health status questionnaire (SF-12; Ware, Kosinski, & Keller, 1996). Partial measures were administered from the Treatment Services Review (TSR; McLellan, Alterman, Cacciola, Metzger, & O'Brien, 1992), contemplation ladder for job readiness (modified from Biener & Abrams, 1991; Rustin & Tate, 1993), and Job Skills Inventory and Barriers to Employment (modified from Danziger, et al., 2002). Satisfaction with housing was assessed using a modified version of the satisfaction questionnaire from New York City's Department of Health and Mental Hygiene's tenant survey (DOHMH, 2009). Tenants were also asked whether or not they wanted and/or received services for money management, employment, health, substance use, entitlements, family, and activities of daily living.

The monthly log completed by case managers was a 17-item questionnaire that asked about the following events in the past month: 1) the number of times the tenant was contacted by the case manager, 2) number and type of services tenant was referred to and/or received, 3) rating of ability to perform activities of daily living, 4) rating of physical and mental health, 5) number of visits to the emergency room and overnight hospital stays, 6) type of substance used and consequences of substance use, 7) rating of stage of change, 8) employment, 9) number of arrests or incarcerations, 10) rating of engagement with program, 11) reasons for discharge, and 12) rating of the case manager's confidence in the accuracy of the information reported in the log. The complete log can be found in Appendix B.

Implementation Ratings

In partnership with the Corporation for Supportive Housing, we conducted an assessment of program implementation using eleven program components that are particular to supportive housing for chronically homeless individuals whose substance use is a primary barrier to independent living. These eleven "stakeholders' components" (described in detail in *Unlocking the Door*, which is available for download at www.casacolumbia.org/CASAHOPE) were uncovered through a review of the planning documents, the Request for Proposals, Program Standards, and the interviews conducted with stakeholders. Specifically, the Population E programs were assessed around the degree to which they incorporated each of these eleven components. Based on this assessment, the nine programs were rated as very consistent, satisfactorily consistent, or inconsistent with incorporating the components identified by stakeholders into their programs. All procedures involving data collection for this evaluation were reviewed and approved by the governing Institutional Review Board (IRB) at CASAColumbia.

In the following chapters we will report the 12-month results for the following outcome categories: housing retention, alcohol and drug use, physical and mental health, criminal justice, employment, receipt of services, and tenant satisfaction.

CHAPTER III

HOUSING RETENTION

Table 1. Length of stay in housing at the time of provider reporting (n=358).

	No.	%
< 6 months	14	4
6-12 months	29	8
12-24 months	218	65
> 24 months	83	23

Table 2. Cox proportional hazards model of risk of tenant discharge from housing program (n=349).

Covariate	Hazard ratio
Case manager reported consequences of substance use	2.5*
Age 30-50†	0.72
Age > 50	1
Female	1.5
African-American‡	0.75
Latino	0.75
Other race	0.86
Arrested, detained, or incarcerated 30 days prior baseline interview	1.3
SF-12 Physical health composite score at baseline	1
SF-12 Mental health composite score at baseline	1

*Statistically significant, $p < 0.001$

† Reference group = age 18 - 29

‡Reference group = white

Table 3. Tenant discharge according to provider fidelity to the principles of harm reduction and supportive housing (n=358).

Program implementation rating	No. in housing	No. discharged	% discharged
Inconsistent	59	28	47%
Very or satisfactorily consistent	299	61	20%

Table 4. Length of time tenants expect to remain housed under Population E (n=287).

	No.	%
< 6 months	2	1
6 months – 1 year	13	5
1–2 years	23	8
2-5 years	30	10
5-10 years	13	5
> 10 years	3	1
Never move	123	43
Don't know	80	28

Eighty-eight percent of tenants who participated in our study remained housed for at least one year. At the end of the assessment period in October 2010, 65% of study participants had been housed at least one to two years and an additional 23% had been housed more than two years (Table 1). We employed a Cox proportional hazards model to understand the relation between length of stay in housing and tenant socio-demographics, physical health, mental health, and substance use. Case manager report of “consequences of substance use” (e.g., directly related money problems, harm to one’s physical appearance, damage to relationships with families and friends, loss of interest in activities or hobbies, legal troubles, and/or behavior that jeopardizes housing) in any month during the first year of housing was the only factor shown to be related to a significant increase in the risk of discharge from housing (Table 2). Among the 89 tenants who were discharged during our assessment period, one-third left the program of their own volition and almost one-half were discharged due to non-compliance with the policies of the housing provider (14%), incarceration (16%), or death (13%). Length of stay in housing was also associated with ratings of provider implementation regarding the principles of harm reduction and supportive housing. A significantly lower proportion of tenants were discharged from six programs rated as ‘very or satisfactorily consistent’ than three programs rated as ‘inconsistent’ (Table 3).

The majority (80%) of the 358 tenants who entered the study elected to participate in the follow-up survey. Among follow-up survey respondents, about one-third did not know how long they expected to stay in the NY/NY III program but nearly one-half expected to remain in the supportive housing program permanently (Table 4). Independent housing in the long-term was a goal for about one-third of the follow-up sample.

CHAPTER IV

ALCOHOL AND DRUG USE

Table 5. Substance use characteristics (n=287).

	Baseline		Follow-up		
	No.	%	No.	%	
MINI alcohol abuse or dependence diagnosis	107	37	107	37	
Six or more drinks on one occasion monthly, weekly, or daily	91	32	91	33	
MINI drug abuse or dependence diagnosis	11	39	80	28	
Drug use 30 days prior to interview*	Cannabis	71	25	64	22
	Cocaine	41	14	30	10
	Heroin	11	4	7	2

*Drug categories not mutually exclusive

Table 6. Type of treatment program attended 30 days prior to the follow-up interview (n=73).

	No.	%
Alcohol and/or drug only	36	49
Methadone only	21	29
Alcohol and/or drug and methadone	16	22

Table 7. Type of treatment program attended in the 12 months prior to the follow-up interview (not mutually exclusive, n=110).

	No.	%
Detox	22	20
Outpatient	95	86
Inpatient	7	6
Methadone	39	35

Table 8. Self-help group attendance at least 1 day in the 30 days prior to interview (n=287).

	No.	%
Baseline	63	22
Follow-up	45	16

Table 9. Tenants motivated to quit drinking or using drugs.

	Baseline		Follow-up	
	No.	%	No.	%
Positive MINI drug diagnosis at baseline (n=111)	78	70	83	75
Positive MINI alcohol diagnosis at baseline (n=107)	49	46	61	57

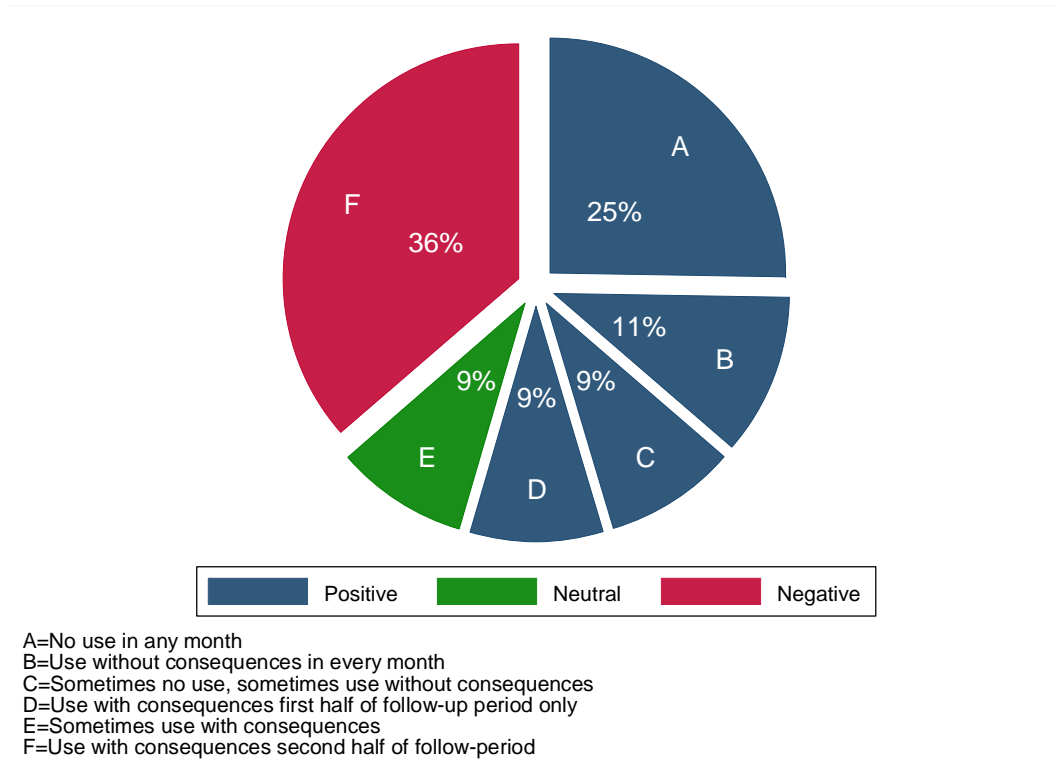
There was no difference in the proportion of tenants with a MINI diagnosis for alcohol abuse or dependence from baseline to follow-up (Table 5). Approximately one-third of tenants reported being heavy drinkers at baseline and follow-up, again suggesting that there is no significant difference over time in tenant use of alcohol (Table 5). Heavy drinking was defined as having 6 or more drinks at one time at least once per month.

Between the baseline and follow-up interviews, there was an 11% decrease in the number of tenants who met MINI criteria for drug abuse or dependence (Table 5). The decrease in drug use was noticed for cannabis, cocaine, and heroin (Table 5). Overall, there was a 7% decrease in use of any drug in the 30 days prior to interview.

At the one year follow-up, one-fourth of tenants reported being in outpatient treatment. Among tenants who were in treatment, half were prescribed methadone while the other half were in traditional alcohol or drug treatment programs (Table 6). During the year prior to the follow-up interview one-third of tenants had participated in treatment. Treatment types reported were detox (20%), methadone (35%), outpatient (86%), and inpatient (6%; Table 7). There was a 6% decline in tenants reporting attending self-help groups between baseline and follow-up (Table 8). For tenants with a baseline drug diagnosis, motivation to quit using drugs increased by 5% from baseline to follow-up (Table 10). For tenants with a baseline alcohol diagnosis, motivation to quit drinking increased by 9% from baseline to follow-up (Table 9).

Case managers were asked to evaluate whether tenants were experiencing negative consequences of drug use for each month tenants were housed. Case managers were instructed that negative consequences might include money related problems, harm to tenant's physical appearance, and behavior that jeopardizes housing. In general, there was a 10% increase in tenants using substances with consequences at the 1-year follow-up. There were, however, myriad trajectories noticed for individual tenants. At the two extremes, case managers reported that 25% of the sample did not use substances any month they were housed while 15% used with consequences every month (Figure 1). A substantial minority used substances at some point during the follow-up period without observed consequences (22%) but for a similar percentage of tenants, the consequences of use emerged in the latter half of the follow-up period (20%).

Figure 1. Case manager logs: Percent of tenants who experienced positive, neutral, or negative patterns in case manager reported consequences of substance use



CHAPTER V

PHYSICAL AND MENTAL HEALTH

Table 12. Case manager logs: Percent of tenants moderately or considerably able to perform a given activity of daily living.

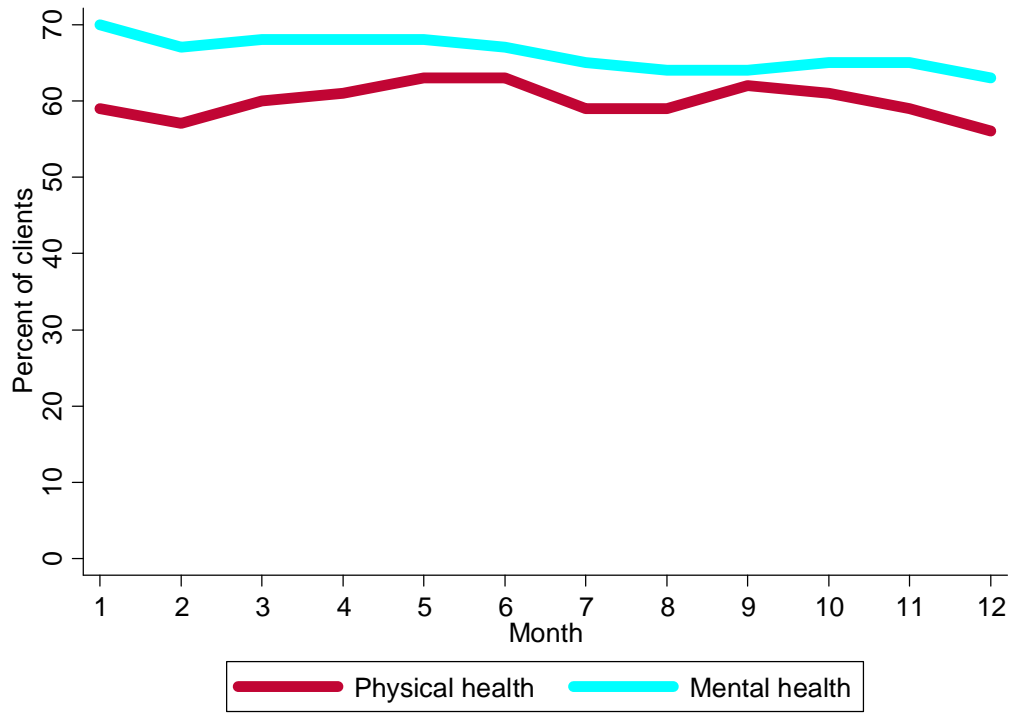
month	telephone	laundry	shopping	travel	food	medications	housekeeping	finances	illness
1	96	94	93	96	91	90	90	79	86
6	95	93	92	94	92	90	90	80	82
12	94	87	87	91	90	87	88	77	82

Utilizing the SF-12 Health Survey, it was determined that the mean mental health composite score (MCS) of the sample at follow-up (47.5) is not substantially different than the mean for the general U.S. population (50.7). Moreover, the MCS did not substantially change between the baseline (47.9) and follow-up interviews. For psychological conditions, tenants reported a 10% increase in doctor’s office visits, but no change in taking prescription medication. In a given month, case managers reported more than two-thirds of tenants to be in “excellent, very good or good” mental health (Figure 3).

Tenants’ mean physical health composite score (PCS) was substantially lower than the mean for the general U.S. population (50) at both baseline (41.5) and follow-up (41.5). This indicates that our research population was notably less healthy than the average American. There was a 5% increase in doctor’s office visits and no increase in the number of tenants taking medication for a physical health condition. In a given month, case managers reported about 60% of tenants to be in “excellent, very good or good” physical health (Figure 3).

There was no substantial change over time in case managers’ ratings of tenants’ ability to perform activities of daily living (Table 12). Interestingly, case managers rated tenants’ ability to do most tasks as moderately or considerably able. Relative to other activities, ability to manage illness or finances were lowest rated.

Figure 3. Case manager logs: Percent of tenants in excellent, very good, or good physical or mental health



CHAPTER VI

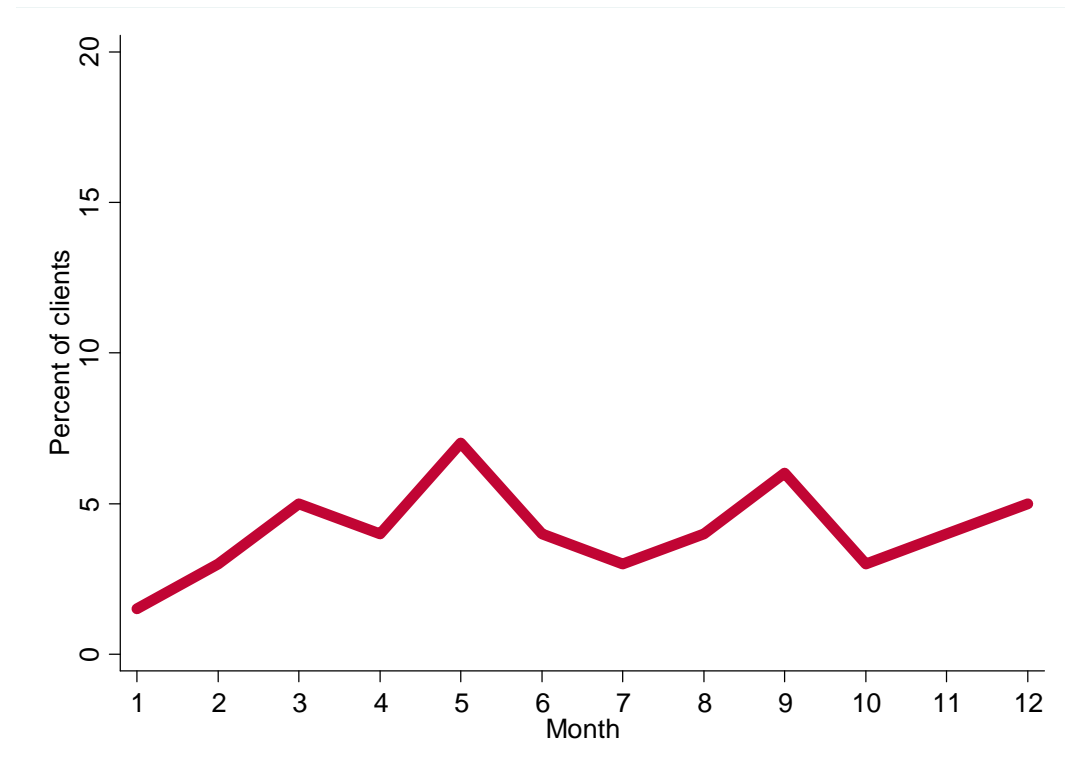
CRIMINAL JUSTICE

Table 13. Tenants on probation or parole (n=287).

	No.	%
Baseline	11	4
Follow-up	9	3

There was no substantial change the number of participants on probation or parole at the time of interview (Table 13.). However, it should be noted that 10 tenants were discharged due to arrest and did not complete a follow-up interview. In total, about one-quarter of the population was arrested, detained or incarcerated during the follow-up period, whereas one-third of tenants were arrested, detained or incarcerated in the 12 months prior to the baseline interview. Case managers observed that the percent of tenants with criminal justice involvement remained relatively low, but consistent, over the course of the follow-up period (Figure 4).

Figure 4. Case manager logs: Percent of tenants arrested, detained or incarcerated in a given month



CHAPTER VII

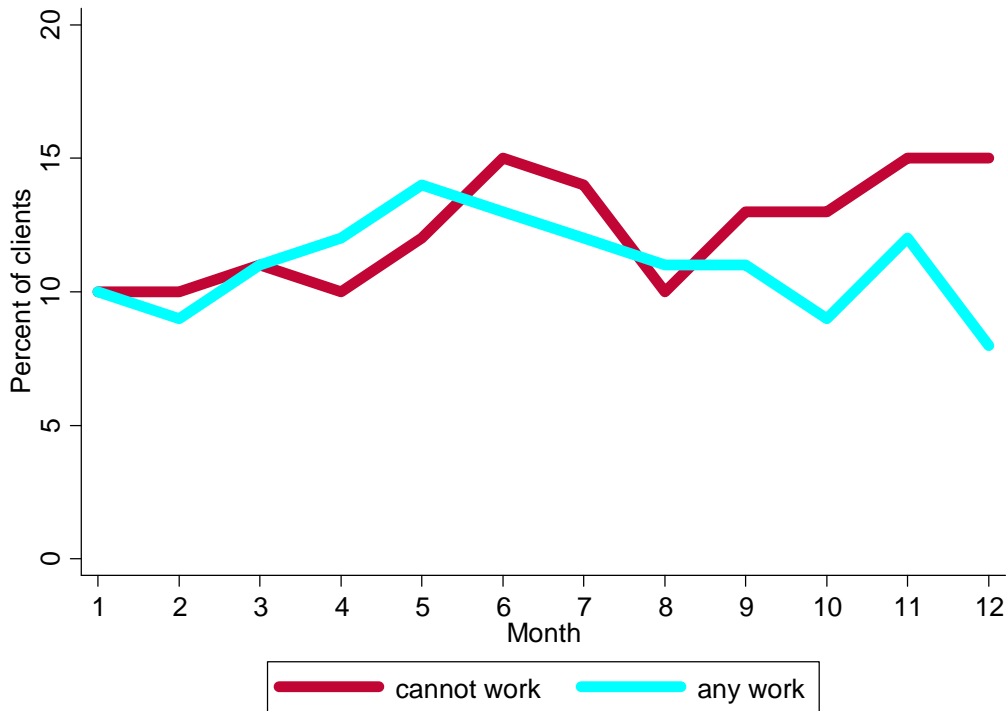
EMPLOYMENT

Table 14. Tenant involvement with job training, educational program, or WEP (n=287).

	No.	%
Baseline	59	21
Follow-up	62	22

Approximately one-third of tenants reported any work during the follow-up period. At baseline, the top three barriers to getting and keeping work were ill health or physical disability (36%), lack of education or training (11%), and availability of work (6%). The top three barriers at follow-up were ill health or physical disability (41%), lack of education or training (11%), and availability of work (9%). Involvement in job training, welfare work programs, or educational programs did not substantially change from baseline to follow-up interview. Two-thirds of tenants reported low motivation for employment. It would seem that regardless of their expressed motivation, many tenants looked for work during the follow-up period. Specifically, 45% searched for employment and the average period of time spent searching was 16 weeks. Case managers reported that the number of tenants claiming physical disability increased over time, while the number of tenants who held any job remained around 10%.

Figure 5. Case manager logs: Percent of tenants who worked on or off the books in a given month or were unable to work due to disability.



CHAPTER VIII

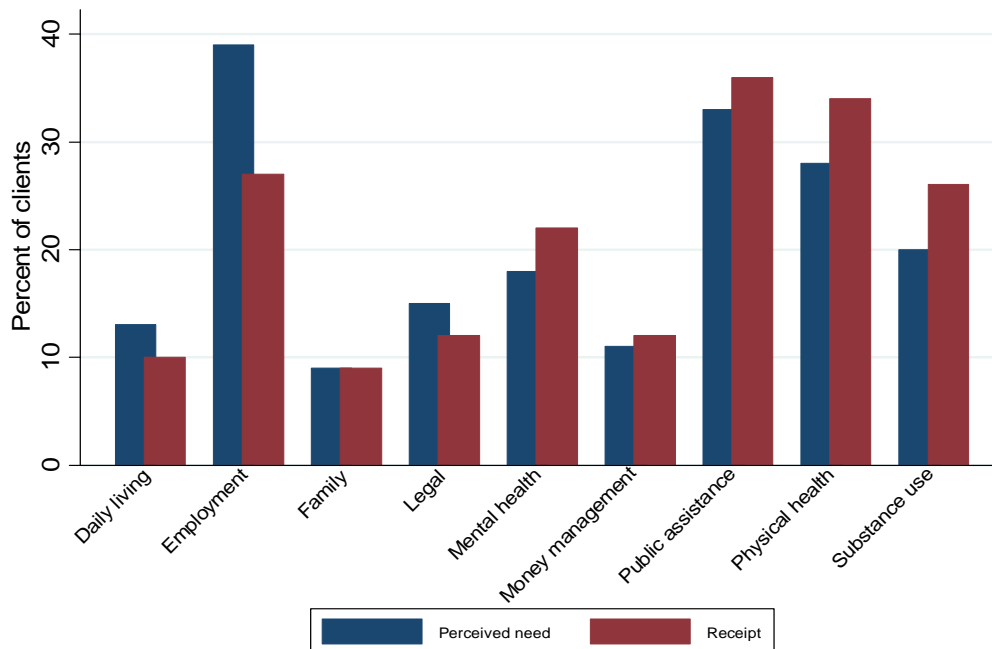
RECEIPT OF SERVICES

Table 15. Case manager logs: Number of tenants who received each service during the follow-up period (n=287).

	Employment	Public assistance	Legal	Physical health	Mental health	Substance use
total	171	257	91	234	148	169
in-house/both	26	98	14	32	53	53
out-house/both	169	243	87	230	128	159
Percent of tenants	60	90	32	82	52	59

The largest discrepancy between tenant needs and services received was reported in employment services. But in other critical areas—physical health, mental health, and substance use—the receipt of services was greater than tenant demand (Figure 6). The majority of services were not administered directly by the housing provider (i.e., out-of-house, Table 15). At follow-up there was a 14% decrease in tenants who said that their basic needs (e.g., shelter, food, etc.) were unmet.

Figure 6. Tenant’s perceived need for services and services received during the follow-up period (n=287).



CHAPTER IX

TENANT SATISFACTION

Table 16. Tenant satisfaction with housing services at follow-up (n=287).

Service	% Satisfied
Cost of Apartment	92
Rules around Drug or Alcohol Use in Apartment	92
Availability of Case Manager	92
Current Housing Overall	88
Proximity to Stores and Transport	87
Privacy from Program	87
Application/Intake Process	87
Rules around What Can be Done in Apartment	86
Amount of Choice over Services	84
Program Groups and Activities	82
Case Manager's Ability to Help Substance Use	78
Choice of Apartment	77
Safety of Apartment	76
Condition of Apartment	72
Proximity to Family or Friends	67
Amount of time for Apartment Repairs	53

Table 17. Tenant report of case manager relationship at follow-up (n=287).

	% Quite a Bit- Extremely
Mutual Trust and Respect with CM	81
Overall confidence in CM ability to help	78
Confidence in CM ability to understand tenant and tenant's goals	77
Openness about drug or alcohol	75
Confidence in CM ability to understand goals related to substance use	73

The majority of tenants were satisfied with the housing services they received (Table 16). Tenants were least satisfied with how providers responded to their request for apartment repairs. About three-fourths of tenants report high levels of alliance with their case manager (Table 17).

CHAPTER X

DISCUSSION

Study results provide further support to the argument that chronically homeless individuals who actively use substances can be stably housed in supportive housing without requirements regarding substance abuse treatment. Behavior that would warrant eviction varied by program; however, tenants were generally required to meet twice a month with program representatives, contribute 30% of their income to rent (this was often covered by public assistance's rental assistance, which required an active public assistance case), and follow the rules of their lease regarding apartment upkeep. While 63% of study participants reported using alcohol or drugs at follow-up, the high retention rate of 88% at one year suggests that substance-using tenants are able to achieve the stability needed to maintain residency in housing. Further, supportive housing without substance treatment preconditions does not appear to exacerbate substance use or lead to worsening health. Comparison of these outcomes with previous studies that have generally focused on homeless adults with serious mental illness or alcohol-abusing tenants only is limited because of differences in target population. However, broadly speaking, findings of good housing stability as well as stable substance use and health are similar to those previously reported for supportive housing programs (Mares & Rosenheck, 2010; Padgett, Gulcur, & Tsemberis, 2006; Pearson, Locke, Montgomery, & Buron, 2009).

Housing Retention

While substance-using homeless individuals have historically been viewed as not being 'housing-ready', we found no association between substance use, including type or amount of substances, and housing retention. Only case manager reports of "consequences of substance use" (e.g., directly related money problems, harm to one's physical appearance, damage to relationships with families and friends, loss of interest in activities or hobbies, legal troubles, and/or behavior that jeopardizes housing) in any month during the first year of housing was related to a significant increase in the risk of discharge. Thus, while many tenants used substances and did not experience any related consequences, a small portion of those who drank or used drugs did experience substance-related consequences that put them at higher risk of discharge. Discharge was also associated with our ratings of successful provider implementation regarding the principles of harm reduction and supportive housing. A significantly lower proportion of tenants were discharged from programs rated as 'very or satisfactorily consistent' than programs rated as 'inconsistent'. This further suggests that NY/NY III housing for this population, when implemented as intended, was able to stably house substance-using tenants.

Alcohol and Drug Use

While many express concern that housing active substance users in programs without abstinence requirement might worsen tenants' alcohol and drug use (Kertesz et al.,

2009), we found no evidence that this was the case. In fact, we observed an 11% decrease in substance use disorder diagnoses and a 5% drop in the number of tenants reporting substance use from baseline to the 12-month follow-up interview. Interestingly, we did not see similar changes with alcohol use, which remained stable from baseline to follow-up. This stability in alcohol use is similar to many studies (Mares & Rosenheck, 2010; Padgett, Gulcur, & Tsemberis, 2006; Pearson, Locke, Montgomery, & Buron, 2009), but can be contrasted with the substantial decrease in alcohol use reported by tenants of a congregate-setting Housing First program that targeted high users of alcohol-related public services (Collins et al, 2012). This difference could be because tenants with alcohol problems may respond better to congregate setting than scattered-site supportive housing, or because tenants using high levels of public services may have more severe alcohol abuse and may respond more markedly to supportive housing services.

It is also important to note that although housing for Population E does not require substance use treatment, one-third of tenants reported participating in treatment in the follow-up period. Some of this treatment attendance may have been a result of individual mandates from New York City's public assistance program for entitlements receipt. It is also possible that tenants may have attended substance use treatment as a personal choice. This approach to supportive housing maintains that tenants should be encouraged to make their own healthful choices about services, which may or may not include enrollment in substance abuse treatment. In fact, in contrast to self-reports by the tenants, case managers reported that 59% of tenants received substance use services during the first year of housing. This number is higher than that reported by the tenants and likely includes the client-centered interventions performed by the case managers themselves, such as motivational interviewing around substance use, which tenants might not generally describe as a 'service'.

Mental and Physical Health

No significant changes were found in tenant reports of mental or physical health over time. On average, tenant self-reported mental health was similar to that of the general self-reporting population in the United States, whereas tenant self-reported physical health was worse than that of the self-reporting general population. We would expect similar mental health and poorer physical health ratings compared to the general U.S. population, as this housing targeted chronically homeless individuals with a disabling health condition, but not severe mental illness. These findings were corroborated by case manager report. Case managers also observed no substantial change over time in tenants' ability to perform activities of daily living. Case managers rated tenants as moderately or considerably able to do most tasks, suggesting that although these tenants had compromised physical health, they were able to function adequately in independent housing. The stability of tenant health symptoms over the first year of housing is similar to findings in other supportive housing studies (Gulcur, Stefancic, Shinn, Tsemberis, & Fischer, 2003; Mares & Rosenheck, 2010; Padgett, Gulcur, &

Tsemberis, 2006; Pearson, Locke, Montgomery, & Buron, 2009; Tsemberis, Gulcur, & Nakae, 2004).

Criminal Justice

In total, about one-quarter of the population was arrested, detained, or incarcerated during the follow-up period, whereas one-third of tenants were arrested, detained, or incarcerated in the 12 months prior to the baseline interview. Case managers observed that the percentage of tenants with criminal justice involvement remained relatively low, but consistent, over the course of the follow-up period. Future reports from CASAHOPE will use administrative data from the New York City Department of Corrections to investigate changes in tenant jail use from two years before to two years after housing, as well as compare study tenants to a group of similar but un-housed individuals.

Employment

Approximately, one-third of tenants reported working during the follow-up period, whereas case managers reported that the number of tenants who held a job in any given month remained around 10%. These findings suggest that tenants' work may be mostly temporary jobs and not steady employment. Involvement in job training, public assistance's work program, or an educational program did not substantially change from baseline to follow-up interview. Ill health or physical disability was the number one barrier to work cited by tenants at both baseline and follow-up. Efforts to find employment for this population should address the underlying health problems keeping many tenants from working.

Receipt of Services

Both tenant and case manager reports suggested that tenants received many services in the first year of housing; however, the percentages of tenants who received each type of service varied depending on the source of the data. This discrepancy may be due to differences in question administration. Tenants were asked retrospectively about services they had received since entering the program, while case managers reported services on a monthly basis for the first year of housing. In addition, case managers likely defined service receipt more broadly than tenants. For example, case managers reported that 90% of tenants received services related to public assistance, whereas only 42% of tenants reported receiving these services. This discrepancy may be due to differing interpretations of 'service'. For example, a case manager may report that a public assistance-related service was provided if he or she helped a tenant complete an application for Social Security Income, while a tenant might consider this a routine part of his or her housing program and not a separate service. It is also possible that case managers over-reported service provision in an attempt to cast a favorable light on their program.

When tenants were asked what services they wanted and what services they received, in critical areas—physical health, mental health, and substance use—the perceived

receipt of services was very near to tenant report of need. The largest gap between tenant need and services receipt was reported in employment services. It is possible that programs are not providing adequate employment services to tenants, tenants are not sufficiently voicing their interest in employment services to case managers, or there are not appropriate employment services referrals for tenants with multiple disabling conditions.

Tenant Satisfaction

Across the board, tenants reported high levels of satisfaction with their supportive housing program. They were most satisfied with the cost of the apartment (92% satisfied or very satisfied), rules around drug or alcohol use in the apartment (92%), and the availability of their case manager (92%). They reported the lowest levels of satisfaction with the condition of their apartment (72% satisfied or very satisfied), the proximity of their apartment to family or friends (67%), and the amount of time it took for apartment repairs to be done (53%). Eighty-eight percent reported being satisfied or very satisfied with their housing overall. In addition, most tenants reported high levels of trust, respect, and confidence in their case managers. Nearly three-quarters of the tenants reported high levels of openness about substance use with their case manager and confidence in the case manager's ability to understand their goals regarding management of their substance use.

These high satisfaction and alliance ratings suggest that case managers are successfully engaging with a majority of tenants. Engagement is particularly important to supportive housing with the goal of harm reduction. It is theorized that the ability of programs to effectuate positive outcomes for this population is dependent upon the delivery of appropriate services, which is improved as case managers gain the trust of tenants. Trust can be gained when programs demonstrate that they can respond to expressed service or housing needs to the satisfaction of tenants. A feedback loop is created in which service receipt and trust build on one another and contribute significantly to tenant housing stability. Thus, while we found no significant change in tenant substance use or health outcomes one year into housing, high levels of tenant satisfaction may lead to positive outcomes after a longer period of retention in housing.

Limitations

Findings are limited by the study design, which assessed substance-using homeless persons without serious mental illness (SMI) housed in New York City, and thus can be generalized only to similar areas. It is also important to note that the tenants housed in this program may not be representative of all potentially program-eligible persons in New York City. While Population E housing is low-threshold housing, prospective tenants need to be both accessible to outreach workers who are familiar with the program and capable of attending an initial interview with provider staff. More impaired or disenfranchised individuals may not have been able or willing to navigate this

process. In addition, study data were generated primarily from tenant self-report assessments, many of which required retrospective recall by the clients. Self-report of substance use can be particularly prone to reporting bias. Similarly, study data gained from case manager reports may be biased due to case managers, consciously or subconsciously, wanting to make their programs look as good as possible.

Conclusion

Our findings indicate that individuals who actively use drugs or alcohol can maintain stable lives when housed without a precondition of treatment attendance. As Mares and Rosenheck (2010) suggest, a “tolerable” level of on-going substance use may be an acceptable societal compromise in return for effectively housing this population. This compromise may be all the more appealing if positive patterns in public service utilization (e.g. decrease in expensive crisis services, increase in preventive services) can be demonstrated. Future reports will describe the results of a cost-effectiveness analysis using administrative data to investigate tenant service utilization, both pre and post housing, as well as evaluated against a matched comparison group that did not receive housing.

REFERENCES

- Biener, L., Abrams, D.B. (1991). The Contemplation Ladder: Validation of a measure of readiness to consider smoking cessation. *Health Psychology, 10*(5), 360-365.
- Collins, S.E., Malone, D.K., Clifasefi, S.L., Ginzler, J.A., Garner, M.G., Burlingham, B., ...Larimer, M.E. (2012). Project-based housing first for chronically homeless individuals with alcohol problems: Within-subjects analyses of 2-year alcohol trajectories. *American Journal of Public Health, 102* (3), 511-519.
- Danziger, S., Corcoran, M., Danziger, S., Heflin, C., Kalil, A., Levine, J., ... Tolman, R. (2002). Barriers to the employment of welfare recipients. Ann Arbor, MI: Population Studies Center. Retrieved from <http://www.psc.isr.umich.edu/pubs/pdf/rr02-508.pdf>
- Gulcur, L., Stefancic, A., Shinn, M., Tsemberis, S., & Fischer, S. N. (2003). Housing, hospitalization, and cost outcomes for homeless individuals with psychiatric disabilities participating in continuum of care and housing first programmes. *Journal of Community & Applied Social Psychology, 13*, 171-186.
- Hien, D. A., & First, M. (1991). Drug Use Questionnaire. Unpublished scale, Columbia College of Physicians and Surgeons, New York State Psychiatric Institute.
- Hogue, A., Dauber, S., & Morgenstern, J. (2010). Validation of a contemplation ladder in an adult substance use disorder sample. *Psychology of Addictive Behaviors, 24*(1), 137-144.
- Kertesz, S. G., Crouch, K., Milby, J. B., Cusimano, R. E., & Schumacher, J. E. (2009). Housing First for homeless persons with active addiction: Are we overreaching? *The Milbank Quarterly, 87*(2), 495-534.
- Kraus, D., Goldberg, M., & Serge, L. (2005). *Homelessness, housing, and harm reduction: Stable housing for homeless people with substance use issues*. Ottawa, Canada: Canada Mortgage and Housing Corporation. Retrieved from <http://www.cmhc-schl.gc.ca/odpub/pdf/65088.pdf?fr=1297369694109>
- Mares, A. S., & Rosenheck, R. A. (2010). Twelve-month client outcomes and service use in a multisite project for chronically homelessness adults. *The Journal of Behavioral Health Services & Research, 37*(2), 167-183.
- McLellan, A. T., Alterman, A. I., Cacciola, J., Metzger, D., & O'Brien, C. P. (1992). A new measure of substance abuse treatment: Initial studies of the Treatment Services Review. *The Journal of Nervous and Mental Disease, 180*(2), 101-110.
- Milby, J., Schumacher, J., Raczynski, J., Caldwell, E., Engle, M., Michael, M., & Carr, J. (1996). Sufficient conditions for effective treatment of substance abusing homeless persons. *Drug and Alcohol Dependence, 43*(1-2), 39-47.
- New York City Human Resources Administration (2009). *New York/New York III Agreement Progress Report Through August 31, 2009*. New York: New York City Human Resources Administration.

- Padgett, D. K., Gulcur, L., & Tsemberis, S. (2006). Housing First services for people who are homeless with co-occurring serious mental illness and substance abuse. *Research on Social Work Practice, 16*(1), 74-83.
- Pearson, C. L., Locke, G., Montgomery, A. E., & Buron, L. (2007). The applicability of housing first models to homeless persons with serious mental illness: Final report. Washington, D.C.: United States Department of Housing and Urban Development, Office of Policy Development and Research. Retrieved from <http://www.huduser.org/publications/homeless/hsgfirst.html>.
- Rustin, T.A., Tate, J.C. (1993). Measuring the stages of change in cigarette smokers. *Journal of Substance Abuse Treatment, 10*(2), 209-220.
- Saunders, J. B., Aasland, O. G., Babor, T. F., De La Fuente, J. R., & Grant, M. (1993). Development of the Alcohol Use Disorders Identification Test (AUDIT): WHO collaborative project on early detection of persons with harmful alcohol consumption-II. *Addiction, 88*(6), 1993.
- Sheehan, D. V., Lecrubier, Y., Sheehan, K. H., Amorim, P., Janavs, J., Weiller, E., ... Dunbar, G. C. (1998). The Mini-International Neuropsychiatric Interview (M.I.N.I.): The development and validation of a structured diagnostic psychiatric interview for DSM-IV and ICD-10. *The Journal of Clinical Psychiatry, 59*(suppl 20), 22-33.
- Tsemberis, S., & Eisenberg, R. F. (2000). Pathways to Housing: Supported housing for street-dwelling homeless individuals with psychiatric disabilities. *Psychiatric Services, 51*(4), 487-493.
- Tsemberis, S., Gulcur, L., & Nakae, M. (2004). Housing First, consumer choice, and harm reduction for homeless individuals with a dual diagnosis. *American Journal of Public Health, 94*(4), 651-656.
- Ware, J. E., Kosinski, M., & Keller, S. D. (1996). A 12-item short-form health survey: Construction of scales and preliminary tests of reliability and validity. *Medical Care, 34*(3), 220-233.

Q1-2. Participant's ID number

Q3. Interviewer: What are the client's initials?

Q4. Interviewer: What borough does the client live in?

- 0 = Brooklyn
- 1 = Bronx
- 2 = Manhattan
- 3 = Queens
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q5. Interviewer: Who is the client's housing provider?

- 1 = BRC
- 2 = The Bridge
- 3 = CAMBA
- 4 = Common Ground
- 5 = The Doe Fund
- 6 = Project Renewal
- 7 = Turning Point-Discipleship
- 8 = Urban Pathways
- 9 = VOA
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q6. Interviewer: When did the client move in to Category E housing?

- 1/1/2006 - 1/1/2010 = mm/dd/yyyy
- 2097 = Don't Know (Year)
- 2098 = Refuse to Answer (Year)
- 2099 = Not Applicable (Year)

Q7. Of drugs and alcohol, which is a bigger problem for you?

- 0 = Neither
- 1 = Drugs
- 2 = Alcohol
- 3 = Both are equal
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q8. When was the last time you had a drink?

- 1 = Past 30 days
- 2 = 1 month to 6 months ago
- 3 = 6 months to 1 year ago
- 4 = 1 to 2 years ago
- 5 = Over 2 years ago
- 6 = Client has never had a drink
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q9. During the past 30 days, how many days did you have 3 or more drinks of alcohol (including beer and wine) in one sitting?

- 0 - 30 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q10. How many drinks containing alcohol do you have on a typical day when you are drinking?

- 0 = Does not drink
- 1 = 1 or 2
- 2 = 3 or 4
- 3 = 5 or 6
- 4 = 7, 8, or 9
- 5 = 10 or more
- 8 = Refuse to Answer
- 9 = Not Applicable

Q11. How often do you have six or more drinks on one occasion?

- 0 = Never
- 1 = Less than monthly
- 2 = Monthly
- 3 = Weekly
- 4 = Daily or almost daily
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q12. Please select the response which best describes how you currently feel about your drinking.

- 1 = I do not have a problem with drinking, and I do not intend to cut down or quit now.
- 2 = I might have a problem with drinking, but I do not intend to cut down or quit now.
- 3 = I am thinking about cutting down on my drinking, but I am not thinking about quitting drinking altogether.
- 4 = I am thinking about quitting drinking altogether, but I still have not made any definite plans.
- 5 = I am close to making a decision to quit drinking alcohol.
- 6 = I have decided to quit drinking alcohol, at least for now.
- 7 = I have decided to quit drinking alcohol and plan never to drink again.
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q13. In the past 12 months, have you had 3 or more alcoholic drinks in one sitting?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q14. In the past 12 months did you have 3 or more drinks in one sitting on 3 or more occasions?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q15. In the past 12 months did you need to drink more in order to get the same effect that you got when you first started drinking?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q16. In the past 12 months when you cut down your drinking, did your hands shake, did you sweat or feel agitated? Did you drink to avoid these symptoms or to avoid being hungover, for example, "the shakes," sweating, or agitation?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q17. In the past 12 months during times when you drank alcohol, did you end up drinking more than you planned when you started?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q18. In the past 12 months have you tried to reduce or stop drinking alcohol but failed?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q19. In the past 12 months on the days that you drank, did you spend substantial time in obtaining alcohol, drinking, or recovering from the effects of alcohol?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

- Q20.** In the past 12 months did you spend less time working, enjoying hobbies, or being with others because of your drinking?
- 0 = No
 - 1 = Yes
 - 7 = Don't Know
 - 8 = Refuse to Answer
 - 9 = Not Applicable
- Q21.** In the past 12 months have you continued to drink even though you knew that the drinking caused you health or mental problems?
- 0 = No
 - 1 = Yes
 - 7 = Don't Know
 - 8 = Refuse to Answer
 - 9 = Not Applicable
- Q22.** In the past 12 months, have you been intoxicated, high, or hungover more than once when you had other responsibilities at school, at work, or at home? Did this cause any problems?
- Interviewer: Code this item YES only if this caused problems.**
- 0 = No
 - 1 = Yes
 - 8 = Refuse to Answer
 - 9 = Not Applicable
- Q23.** In the past 12 months, were you intoxicated more than once in any situation where you were physically at risk, for example, driving a car, riding a motorbike, using machinery, boating, etc?
- 0 = No
 - 1 = Yes
 - 8 = Refuse to Answer
 - 9 = Not Applicable
- Q24.** In the past 12 months, did you have legal problems more than once because of your drinking, for example, an arrest or disorderly conduct?
- 0 = No
 - 1 = Yes
 - 8 = Refuse to Answer
 - 9 = Not Applicable

Q25. In the past 12 months, did you continue to drink even though your drinking caused problems with your family or other people?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q26. When was the last time you used?

- 1 = Past 30 days
- 2 = 1 month to 6 months ago
- 3 = 7 months to 1 year ago
- 4 = 1 year to 2 years ago
- 5 = Over 2 years ago
- 6 = Client has never used drugs
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q27. In the past 30 days, were there any days that you used marijuana?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q28. How many days in the past 30 have you used Marijuana?

- 1 - 30 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q29. In the past 30 days, were there any days that you used cocaine/crack?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q30. How many days in the past 30 have you used cocaine/crack?

- 1 - 30 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q31. In the past 30 days, were there any days that you used heroin?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q32. How many days in the past 30 have you used Heroin?

- 1 - 30 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q33. Have you used needles (a set of "works") to shoot drugs in the past 30 days?

- 0 = No
- 1 = Yes: for cocaine
- 2 = Yes: for heroin
- 3 = Yes: For cocaine and heroin
- 8 = Refuse to Answer
- 9 = Not Applicable

Q34. In the past 30 days, were there any days that you used illegal or non-prescribed methadone?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q35. How many days in the past 30 have you used illegal or non-prescribed Methadone?

- 1 - 30 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q36. In the past 30 days, were there any days that you used Crystal Meth (Tina, Ice, Meth, Speed, Crank, Methamphetamine)?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q37. How many days in the past 30 have you used Crystal Meth (Tina, Ice, Meth)?

- 1 - 30 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q38. Please select the response which best describes how you currently feel about your drug use.

- 1 = I do not have a problem with drugs, and I do not intend to cut down or quit now.
- 2 = I might have a problem with drugs, but I do not intend to cut down or quit now.
- 3 = I am thinking about cutting down on drug use, but I am not thinking about quitting drugs altogether.
- 4 = I am thinking about quitting using drugs altogether, but I still have not made any definite plans.
- 5 = I am close to making a decision to quit using drugs.
- 6 = I have decided to quit using drugs, at least for now.
- 7 = I have decided to quit using drugs and plan never to use drugs again.
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q39. In the past 12 months, did you take any of these drugs more than once to get high, to feel better, or to change your mood?

Heroin, methadone(illegal), other opiates/analgesics (percocet, diluaded), barbiturates, other sedatives (valium, librium, xanax), cocaine, amphetamines, cannabis, hallucinogens, or inhalants.

- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q40. Which substance has caused you the most serious problems, such as problems with family, friends, or the law; problems feeling dependent on the drug, or health or emotional problems?

- 3 = Heroin
- 4 = Methadone, illegal
- 5 = Other opiates/analgesics
- 6 = Barbiturates, all routes
- 7 = Other sedatives/hypnotics/tranquilizers
- 8 = Cocaine
- 9 = Amphetamines
- 10 = Cannabis
- 11 = Hallucinogens
- 12 = Inhalants
- 98 = Refuse to Answer
- 99 = Not Applicable

Q41. Considering the [Response to Q40], in the past 12 months, have you found that you needed to use more [Response to Q40] to get the same effect that you did when you first started taking it?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q42. When you reduced or stopped using [Response to Q40], did you have withdrawal symptoms (aches, shaking, fever, weakness, nausea, sweating, heart pounding, difficulty sleeping, or feeling agitated, anxious, irritable, or depressed) Did you use and drug(s) to keep yourself from getting sick (withdrawal symptoms) or so that you would feel better?

Interviewer: If "Yes" to either question, code as "Yes"

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q43. Considering the [Response to Q40], in the past 12 months have you often found that when you used [Response to Q40], you often ended up taking more than you thought you would?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q44. Considering the [Response to Q40], in the past 12 months have you tried to reduce or stop taking [Response to Q40], but failed?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q45. Considering the [Response to Q40], in the past 12 months on the days that you used [Response to Q40], did you spend substantial time (> 2 hours) in obtaining, using or in recovering from [Response to Q40], or thinking about [Response to Q40]?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q46. Considering the [Response to Q40], in the past 12 months did you spend less time working, enjoying hobbies, or being with others because of your [Response to Q40] use?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q47. Considering the [Response to Q40], in the past 12 months have you continued to use [Response to Q40] even though it caused you health or mental problems?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q48. Considering your use of [Response to Q40], in the past 12 months, have you felt intoxicated, high, or hungover from [Response to Q40] more than once, when you had responsibilities at school, work, or at home? Did this cause any problem?

Interviewer: Code YES only if caused problems.

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q49. Have you been high, or intoxicated from [Response to Q40] in the past 12 months, more than once in any situation where you were physically at risk, (for example, driving a car, riding a motorbike, using machinery, boating, etc.)?

Interviewer: If "Yes" to either question, code as "Yes"

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q50. Considering the [Response to Q40], in the past 12 months did you have legal problems more than once because of your drug use, for example, an arrest or disorderly conduct?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q51. Considering the [Response to Q40], in the past 12 months did you continue to use [Response to Q40] even though it caused problems with your family or other people?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q52. Since your last interview have you been in treatment for alcohol or drug abuse? Treatment includes detox, outpatient, residential, or methadone maintenance, but not NA or AA.

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q53. How many times have you been treated for alcohol or drug abuse since your last interview? Please count all episodes of detox, rehab, outpatient, residential, and methadone maintenance. Do not count NA or AA.

- 0 - 60 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q54. What kind of treatment program(s) were you in?

What kind of treatment program(s) were you in?: **Detox**

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

What kind of treatment program(s) were you in?: **Outpatient**

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

What kind of treatment program(s) were you in?: **Inpatient/Residential**

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

What kind of treatment program(s) were you in?: **Methadone Maintenance**

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q55. In the past 30 days, have you been in OUTPATIENT treatment for alcohol or drug abuse? Treatment includes methadone maintenance, even if it's just picking up the methadone and not attending any other programmatic services, but not NA or AA.

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q56. What kind of treatment program are you in?

- 1 = Drug and/or alcohol treatment only
- 2 = Methadone Maintenance Only
- 3 = Both: Drug and/or alcohol AND Methadone
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q57. How many days per week are you typically expected to attend the outpatient drug and/or alcohol treatment program?

- 0 - 96 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q58. How many hours per day are you typically expected to attend the outpatient drug and/or alcohol treatments program(s)?

- 0 - 96 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q59. In the past 30 days, how many days did you actually attend the outpatient drug and/or alcohol treatments program(s)?

- 0 - 96 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q60. In the past 30 days, how many days did you attend the methadone maintenance program(s)?

- 0 - 96 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q61. In the past 30 days, how many days did you take methadone?

- 0 - 96 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q62. In your lifetime, how many years have you taken legal methadone as a form of drug treatment?

- 0 - 96 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q63. Have you attended any self-help groups such as AA, NA, CMA, or CA since your last interview?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q64. How many days have you attended self-help groups such as AA, NA, CMA, CA in the past 30 days?

- 0 - 30 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q65. How many months did you attend at least one AA/NA meeting in the 12 months prior to the past 30 days?

- 0 - 13 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q66. Have you met with a professional or participated in a formal group that suggested you could continue to use alcohol and/or drugs as long as you used safely? This may be called "Harm Reduction" and would include switching the type of drug you use, using with different people, using clean needles, or using in different places.

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q67. Since your last interview, how often have you met with a professional or participated in a formal group that suggested you could continue to use alcohol and/or drugs as long as you used safely?

- 0 = Never
- 1 = Yearly
- 2 = Monthly
- 3 = Weekly
- 4 = Daily
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q68. Tell me more about the professional or formal group that suggested you could continue to use alcohol and/or drugs as long as you used safely. **NOTE: Pilot question. Try to get a sense of what kind of interactions the client is having. With whom is the client meeting? What is the setting?**

Q69. In general would you say your health is:

- 1 = Excellent
- 2 = Very Good
- 3 = Good
- 4 = Fair
- 5 = Poor
- 8 = Refuse to Answer
- 9 = Not Applicable

Q70. During a typical day, does your health now limit you in moderate activities: such as moving a table, pushing a vacuum cleaner, bowling or playing golf?

- 1 = Yes, limited a lot.
- 2 = Yes, limited a little.
- 3 = No, not limited at all.
- 8 = Refuse to Answer
- 9 = Not Applicable

Q71. During a typical day, does your health now limit you in climbing several flights of stairs?

- 1 = Yes, limited a lot.
- 2 = Yes, limited a little.
- 3 = No, not limited at all.
- 8 = Refuse to Answer
- 9 = Not Applicable

Q72. During the past 4 weeks, how much of the time have you accomplished less than you would like as a result of your physical health?

- 1 = All of the Time
- 2 = Most of the time
- 3 = Some of the time
- 4 = A little of the time
- 5 = None of the time
- 8 = Refuse to Answer
- 9 = Not Applicable

Q73. During the past 4 weeks, how much of the time were you limited in the kind of work or other activities as a result of your physical health?

- 1 = All of the Time
- 2 = Most of the time
- 3 = Some of the time
- 4 = A little of the time
- 5 = None of the time
- 8 = Refuse to Answer
- 9 = Not Applicable

Q74. During the past 4 weeks, how much of the time have you accomplished less than you would like as a result of emotional problems (such as feeling depressed or anxious)?

- 1 = All of the Time
- 2 = Most of the time
- 3 = Some of the time
- 4 = A little of the time
- 5 = None of the time
- 8 = Refuse to Answer
- 9 = Not Applicable

Q75. During the past 4 weeks, how much of the time did you not do work or other activities as carefully as usual as a result of any emotional problems (such as feeling depressed or anxious)?

- 1 = All of the Time
- 2 = Most of the time
- 3 = Some of the time
- 4 = A little of the time
- 5 = None of the time
- 8 = Refuse to Answer
- 9 = Not Applicable

Q76. During the past 4 weeks, how much did pain interfere with your normal work (including both work outside the home and housework)?

- 1 = Not at all
- 2 = A little bit
- 3 = Moderately
- 4 = Quite a bit
- 5 = Extremely
- 8 = Refuse to Answer
- 9 = Not Applicable

Q77. How much of the time during the past 4 weeks have you felt calm and peaceful?

- 1 = All of the Time
- 2 = Most of the time
- 3 = Some of the time
- 4 = A little of the time
- 5 = None of the time
- 8 = Refuse to Answer
- 9 = Not Applicable

Q78. How much of the time during the past 4 weeks did you have a lot of energy?

- 1 = All of the Time
- 2 = Most of the time
- 3 = Some of the time
- 4 = A little of the time
- 5 = None of the time
- 8 = Refuse to Answer
- 9 = Not Applicable

Q79. How much of the time during the past 4 weeks have you felt downhearted and blue?

- 1 = All of the Time
- 2 = Most of the time
- 3 = Some of the time
- 4 = A little of the time
- 5 = None of the time
- 8 = Refuse to Answer
- 9 = Not Applicable

Q80. During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities (like visiting friends, relatives, etc.)?

- 1 = All of the Time
- 2 = Most of the time
- 3 = Some of the time
- 4 = A little of the time
- 5 = None of the time
- 8 = Refuse to Answer
- 9 = Not Applicable

Q81. Do you have any chronic medical problems which continue to interfere with your life?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q82. Please specify up to 3 chronic medical problems you have which continue to interfere with your life.

Medical ASI Specify Chronic Problems: **Allergies (all types)**

- 0 = No
- 1 = Yes
- 98 = Refuse to Answer
- 99 = Not Applicable

Medical ASI Specify Chronic Problems: **Asthma**

- 0 = No
- 1 = Yes
- 98 = Refuse to Answer
- 99 = Not Applicable

Medical ASI Specify Chronic Problems: **Arthritis (joint pain)**

- 0 = No
- 1 = Yes
- 98 = Refuse to Answer
- 99 = Not Applicable

Medical ASI Specify Chronic Problems: **Back Pain (or other back issues)**

- 0 = No
- 1 = Yes
- 98 = Refuse to Answer
- 99 = Not Applicable

Medical ASI Specify Chronic Problems: **Cardio: Heart Problems**

- 0 = No
- 1 = Yes
- 98 = Refuse to Answer
- 99 = Not Applicable

Medical ASI Specify Chronic Problems: **Cardio: Hypertension**

- 0 = No
- 1 = Yes
- 98 = Refuse to Answer
- 99 = Not Applicable

Medical ASI Specify Chronic Problems: **Diabetes**

- 0 = No
- 1 = Yes
- 98 = Refuse to Answer
- 99 = Not Applicable

Medical ASI Specify Chronic Problems: **Foot problems**

- 0** = No
- 1** = Yes
- 98** = Refuse to Answer
- 99** = Not Applicable

Medical ASI Specify Chronic Problems: **Hearing Problems (including tinnitus)**

- 0** = No
- 1** = Yes
- 98** = Refuse to Answer
- 99** = Not Applicable

Medical ASI Specify Chronic Problems: **Hepatitis (any types)**

- 0** = No
- 1** = Yes
- 98** = Refuse to Answer
- 99** = Not Applicable

Medical ASI Specify Chronic Problems: **HIV**

- 0** = No
- 1** = Yes
- 98** = Refuse to Answer
- 99** = Not Applicable

Medical ASI Specify Chronic Problems: **Liver Problems (including cirrhosis)**

- 0** = No
- 1** = Yes
- 98** = Refuse to Answer
- 99** = Not Applicable

Medical ASI Specify Chronic Problems: **Seizures (for any reason)**

- 0** = No
- 1** = Yes
- 98** = Refuse to Answer
- 99** = Not Applicable

Medical ASI Specify Chronic Problems: **Ulcers (Gastrointestinal)**

- 0** = No
- 1** = Yes
- 98** = Refuse to Answer
- 99** = Not Applicable

Medical ASI Specify Chronic Problems: **Vision Problems (cataracts, glaucoma)**

- 0 = No
- 1 = Yes
- 98 = Refuse to Answer
- 99 = Not Applicable

Medical ASI Specify Chronic Problems: **Wounds (chronic wounds that do not heal)**

- 0 = No
- 1 = Yes
- 98 = Refuse to Answer
- 99 = Not Applicable

Medical ASI Specify Chronic Problems: **Other**

- 0 = No
- 1 = Yes
- 98 = Refuse to Answer
- 99 = Not Applicable

Q83. If chronic problems are 'other' or need more specification, please specify up to 2 chronic medical problems you have which continue to interfere with your life.

Q84. In the past 30 days, have you seen a professional at an office or clinic to help you with emotional or psychological difficulties?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q85. How many days in the past 30 days have you seen a professional at an office or in a clinic to help you with emotional or psychological difficulties?

- 1 - 30 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q86. Since your last interview, did you visit an emergency room for help with emotional or psychological difficulties?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q87. How many days since your last interview have you gone to the Emergency Room for help with emotional or psychological difficulties?

- 1 - 30 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q88. Since your last interview, have you been hospitalized for emotional or psychological difficulties?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q89. How many times were you hospitalized for emotional or psychological difficulties since your last interview?

- 0 - 96 = range
- 98 = Refuse to Answer
- 99 = Not Applicable

Q90. Since your last interview, have you been prescribed medications for emotional or psychological difficulties?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q91. Are you currently taking any medications for emotional or psychological difficulties?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q92. How many days in the past 30 did you take medication for any emotional or psychological difficulties?

- 1 - 30 = range
- 98 = Don't Know
- 99 = Refuse to Answer

Q93. In the past 30 days, did you visit a doctor's office or a medical clinic for help with a physical medical condition?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q94. How many days in the past 30 days did you visit a doctor's office or a medical clinic for help with a physical medical condition?

- 1 - 30 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q95. Since your last interview, did you visit an emergency room for help with a physical medical condition?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q96. How many days since your last interview have you gone to the Emergency Room for help with a physical medical condition?

- 1 - 30 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q97. Since your last interview, did you stay overnight in a hospital for help with a physical medical condition?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q98. How many days did you stay overnight in a hospital for help with a physical medical condition since your last interview?

- 1 - 30 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q99. Are you currently taking any prescribed medication on a regular basis for a physical medical condition?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q100. How many days in the past 30 did you take medication for a physical medical condition?

- 1 - 30 = range
- 98 = Don't Know
- 99 = Refuse to Answer

Q101. Are you currently on probation or parole?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q102. Since your last interview, have you been incarcerated?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q103. Since your last interview, how many days were you incarcerated?

- 0 - 540 = range
- 998 = Refuse to Answer
- 999 = Not Applicable

Q104. Since your last interview, have you been arrested or detained (but not incarcerated)?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q105. Since your last interview, how many times have you been arrested or detained (but not incarcerated)?

- 0 - 96 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q106. Since entering the program, have you had any significant time (other than incarceration, but including long hospitalizations etc.) that you spent away from home?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q107. Where did you spend that time?

Q108. Do you have a roommate?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q109. Would you prefer to live with or without a roommate?

- 1 = With
- 2 = Without
- 3 = No preference
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q110. Please look at the responses and choose the one that most closely describes your thoughts and feelings about a getting full-time job today. **NOTE TO INTERVIEWER:** For the Job ladder, if client is working part time on or off books, ask about interest in getting a **FULL-TIME** job. (e.g. I am not interested in having a full-time job, and don't intend to look for one at this time; I might like to have a full-time job in the future, but I am not currently looking for one; etc.)

- 1 = I am not interested in having a job, and I do not intend to look for it at this time.
- 2 = I might like to have a job in the future, but I am not currently looking for it.
- 3 = I would like to have a job now, but I am not currently looking for it
- 4 = I would like to have a job now, and I intend to start looking for it soon
- 5 = I would like to have a job now, and I have done something in the last month to get it
- 6 = I would like to have a job now, and I have done something this past week to get it
- 7 = Client is working full-time ON the books
- 8 = Client is working full-time OFF the books
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q111. No work available in line of work or area?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q112. Couldn't find work?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q113. Lack necessary school, training, skills or experience.

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q114. Employers think too young or too old.

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q115. Other types of discrimination?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q116. Child care problems?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q117. Family responsibilities?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q118. In school or other training?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q119. Ill health, physical disability?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q120. Transportation problems?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q121. Own mental health problem or depression?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q122. Child's mental or physical health problem?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q123. Own drug or alcohol problem?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q124. Legal problems?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q125. Do not need to work?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q126. Do not want to work?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q127. Could not make enough money or find a job with enough benefits to make it worthwhile?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q128. Other reason?

- 0 = No
- 1 = Yes
- 8 = Refuse to Answer
- 9 = Not Applicable

Q129. What is the other challenge you have to getting or keeping work?

Q130. Reason Number 1?

- 1 = No work available in line of work
- 2 = Couldn't find work
- 3 = Lack necessary school, training, skills or experience
- 4 = Employers think too young or too old
- 5 = Other types of discrimination
- 6 = Child care problems
- 7 = Family responsibilities
- 8 = In school or other training
- 9 = Ill health, physical disability
- 10 = Transportation problems
- 11 = Own mental health problem or depression
- 12 = Child's mental or physical health problem
- 13 = Own drug or alcohol
- 14 = Legal problems
- 15 = Do not need to work
- 16 = Do not want to work
- 17 = Could not make enough money...
- 18 = Other reason
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q131. Reason Number 2?

- 1 = No work available in line of work
- 2 = Couldn't find work
- 3 = Lack necessary school, training, skills or experience
- 4 = Employers think too young or too old
- 5 = Other types of discrimination
- 6 = Child care problems
- 7 = Family responsibilities
- 8 = In school or other training
- 9 = Ill health, physical disability
- 10 = Transportation problems
- 11 = Own mental health problem or depression
- 12 = Child's mental or physical health problem
- 13 = Own drug or alcohol
- 14 = Legal problems
- 15 = Do not need to work
- 16 = Do not want to work
- 17 = Could not make enough money...
- 18 = Other reason
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q132. Reason Number 3?

- 1 = No work available in line of work
- 2 = Couldn't find work
- 3 = Lack necessary school, training, skills or experience
- 4 = Employers think too young or too old
- 5 = Other types of discrimination
- 6 = Child care problems
- 7 = Family responsibilities
- 8 = In school or other training
- 9 = Ill health, physical disability
- 10 = Transportation problems
- 11 = Own mental health problem or depression
- 12 = Child's mental or physical health problem
- 13 = Own drug or alcohol
- 14 = Legal problems
- 15 = Do not need to work
- 16 = Do not want to work
- 17 = Could not make enough money...
- 18 = Other reason
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q133. Reason Number 4?

- 1 = No work available in line of work
- 2 = Couldn't find work
- 3 = Lack necessary school, training, skills or experience
- 4 = Employers think too young or too old
- 5 = Other types of discrimination
- 6 = Child care problems
- 7 = Family responsibilities
- 8 = In school or other training
- 9 = Ill health, physical disability
- 10 = Transportation problems
- 11 = Own mental health problem or depression
- 12 = Child's mental or physical health problem
- 13 = Own drug or alcohol
- 14 = Legal problems
- 15 = Do not need to work
- 16 = Do not want to work
- 17 = Could not make enough money...
- 18 = Other reason
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q134. Reason Number 5?

- 1 = No work available in line of work
- 2 = Couldn't find work
- 3 = Lack necessary school, training, skills or experience
- 4 = Employers think too young or too old
- 5 = Other types of discrimination
- 6 = Child care problems
- 7 = Family responsibilities
- 8 = In school or other training
- 9 = Ill health, physical disability
- 10 = Transportation problems
- 11 = Own mental health problem or depression
- 12 = Child's mental or physical health problem
- 13 = Own drug or alcohol
- 14 = Legal problems
- 15 = Do not need to work
- 16 = Do not want to work
- 17 = Could not make enough money...
- 18 = Other reason
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q135. Since moving into your housing, have you participated in an education program (e.g., GED, ESL, ABE, college, reading/literacy)?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q136. How many days in the past 30 did you spend in an education program (e.g., GED, ESL, ABE, college, reading/literacy)?

- 0 - 30 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q137. Since moving into housing, have you participated in job search or job training (e.g., SAP, ESP, Begin Program, Special Pops, InVEST, POISED)?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q138. How many days in the past 30 did you spend in job search or job training (e.g., SAP, ESP, Begin Program, Special Pops, InVEST, POISED)?

- 0 - 30 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q139. Since moving into housing, have you participated in a WEP (Work Experience Program) assignment?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q140. How many days in the past 30 did you spend in WEP (Work Experience Program)?

- 0 - 30 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q141. In the past 30 days have you experienced significant problems obtaining basic life needs, other than housing; such as satisfactory childcare, food, clothing, etc.

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q142. How many days in the past 30 days have you experienced significant problems obtaining basic life needs, other than housing; such as satisfactory childcare, food, clothing, etc.

- 1 - 30 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q143. How much money did you receive from SSI/SSDI/VA in the past 30 days?

- 0 - 10000 = range
- 99997 = Don't Know
- 99998 = Refuse to Answer
- 99999 = Not Applicable

Q144. How many months did you receive SSI/SSDI/VA in 12 months prior to the past 30 days?

- 0 - 12 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q145. How much money in food stamps did you receive in the past 30 days?

- 0 - 10000 = range
- 99997 = Don't Know
- 99998 = Refuse to Answer
- 99999 = Not Applicable

Q146. How many months did you receive food stamps in 12 months prior to the past 30 days?

- 0 - 12 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q147. How much money did you receive from welfare (PA) in the past 30 days?

- 0 - 10000 = range
- 99997 = Don't Know
- 99998 = Refuse to Answer
- 99999 = Not Applicable

Q148. How many months did you receive welfare (PA) in 12 months prior to the past 30 days?

- 0 - 12 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q149. How much money did you receive from Worker's Compensation in the past 30 days?

- 0 - 10000 = range
- 99997 = Don't Know
- 99998 = Refuse to Answer
- 99999 = Not Applicable

Q150. How many months did you receive Worker's Compensation in 12 months prior to the past 30 days?

- 0 - 12 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q151. How much money did you receive from family or friends in the past 30 days?

- 0 - 10000** = range
- 99997** = Don't Know
- 99998** = Refuse to Answer
- 99999** = Not Applicable

Q152. How many months did you receive money from family or friends in 12 months prior to the past 30 days?

- 0 - 12** = range
- 97** = Don't Know
- 98** = Refuse to Answer
- 99** = Not Applicable

Q153. Did you receive a significant amount of money (over \$100) in the past year from any source that I haven't mentioned yet?

- 0** = No
- 1** = Yes
- 7** = Don't Know
- 8** = Refuse to Answer
- 9** = Not Applicable

Q154. What was this source of money?

Q155. How much money did you receive from OTHER in the past 30 days?

- 0 - 10000** = range
- 99997** = Don't Know
- 99998** = Refuse to Answer
- 99999** = Not Applicable

Q156. How many months did you receive money from OTHER in 12 months prior to the past 30 days?

- 0 - 12** = range
- 97** = Don't Know
- 98** = Refuse to Answer
- 99** = Not Applicable

Q157. Since moving into housing, have you been sanctioned by public assistance? **NOTE to interviewer: If client does not receive PA (i.e. food stamps, rental assistance, or cash assistance), choose "Not Applicable".**

- 0** = No
- 1** = Yes
- 7** = Don't Know
- 8** = Refuse to Answer
- 9** = Not Applicable

Q158. Did you have any jobs since your last interview?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q159. When was the last time you worked regularly (this could be on or off the books and full or part-time)?

- 1 = 1-2 years ago
- 2 = 2-3 years ago
- 3 = 3-5 years ago
- 4 = 5-10 years ago
- 5 = Over 10 years ago
- 6 = Never worked regularly
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q160. What type of job did you most recently hold?

Q161. When did you start this job?

- 1/1/2007 - 1/1/2011 = mm/dd/yyyy
- 2097 = Don't Know (Year)
- 2098 = Refuse to Answer (Year)
- 1/1/1999 = Not Applicable (Year)

Q162. When did you end this job? Note to interviewer: If client is still working for this employer, choose "Not Applicable".

- 1/1/2007 - 1/1/2011 = mm/dd/yyyy
- 2097 = Don't Know (Year)
- 2098 = Refuse to Answer (Year)
- 1/1/1999 = Not Applicable (Year)

Q163. Including overtime, how many hours per week (do/did) you work on this job?

- 0 - 96 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q164. Would you describe this job as:

- 1 = Full-time
- 2 = Part-time hours most weeks
- 3 = Seasonal work
- 4 = Work for a "temp" agency
- 5 = An occasional odd job
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q165. What (is/was) your wage? Please include tips, commissions, and regular overtime pay.

- 0 - 10000 = range
- 99997 = Don't Know
- 99998 = Refuse to Answer
- 99999 = Not Applicable

Q166. (Is/Was) that:

- 1 = Per hour
- 2 = Per week
- 3 = Every 2 weeks
- 4 = Twice a month
- 5 = Once a month
- 6 = By the job
- 7 = Some other way
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q167. How was your wage calculated?

Q168. (Is/Was) that before or after taxes?

- 1 = Before
- 2 = After
- 3 = Not Applicable (Off the Books)
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q169. Approximately how many jobs did you have with this employer since your last interview? If job is "some other way" choose Not Applicable.

- 0 - 96 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q170. Did your employer make available a health plan or medical insurance, including any offered at cost to you?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q171. Did you have any other jobs since your last interview?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q172. What type of job did you hold before the one we just spoke about?

Q173. When did you start this job?

- 1/1/2007 - 1/1/2011 = mm/dd/yyyy
- 2097 = Don't Know (Year)
- 2098 = Refuse to Answer (Year)
- 1/1/1999 = Not Applicable (Year)

Q174. When did you end this job? Note to interviewer: If client is still working for this employer, choose "Not Applicable".

- 1/1/2007 - 1/1/2011 = mm/dd/yyyy
- 2097 = Don't Know (Year)
- 2098 = Refuse to Answer (Year)
- 1/1/1999 = Not Applicable (Year)

Q175. Including overtime, how many hours per week (do/did) you work on this job?

- 0 - 96 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q176. Would you describe this job as:

- 1 = Full-time
- 2 = Part-time hours most weeks
- 3 = Seasonal work
- 4 = Work for a "temp" agency
- 5 = An occasional odd job
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q177. What (is/was) your wage? Please include tips, commissions, and regular overtime pay.

- 0 - 10000** = range
- 99997** = Don't Know
- 99998** = Refuse to Answer
- 99999** = Not Applicable

Q178. (Is/Was) that:

- 1** = Per hour
- 2** = Per week
- 3** = Every 2 weeks
- 4** = Twice a month
- 5** = Once a month
- 6** = By the job
- 7** = Some other way
- 97** = Don't Know
- 98** = Refuse to Answer
- 99** = Not Applicable

Q179. How was your wage calculated?

Q180. (Is/Was) that before or after taxes?

- 1** = Before
- 2** = After
- 3** = Not Applicable (Off the Books)
- 7** = Don't Know
- 8** = Refuse to Answer
- 9** = Not Applicable

Q181. Approximately how many jobs did you have with this employer since your last interview? If job is "some other way" choose Not Applicable.

- 0 - 96** = range
- 97** = Don't Know
- 98** = Refuse to Answer
- 99** = Not Applicable

Q182. Did your employer make available a health plan or medical insurance, including any offered at cost to you?

- 0** = No
- 1** = Yes
- 7** = Don't Know
- 8** = Refuse to Answer
- 9** = Not Applicable

Q183. Did you have any other jobs since your last interview?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q184. What type of job did you hold before the one we just spoke about?

Q185. When did you start this job?

- 1/1/2007 - 1/1/2011 = mm/dd/yyyy
- 2097 = Don't Know (Year)
- 2098 = Refuse to Answer (Year)
- 1/1/1999 = Not Applicable (Year)

Q186. When did you end this job? Note to interviewer: If client is still working for this employer, choose "Not Applicable".

- Unlimited - Unlimited = mm/dd/yyyy
- 2097 = Don't Know (Year)
- 2098 = Refuse to Answer (Year)
- 1/1/1999 = Not Applicable (Year)

Q187. Including overtime, how many hours per week (do/did) you work on this job?

- 0 - 96 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q188. Would you describe this job as:

- 1 = Full-time
- 2 = Part-time hours most weeks
- 3 = Seasonal work
- 4 = Work for a "temp" agency
- 5 = An occasional odd job
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q189. What (is/was) your wage? Please include tips, commissions, and regular overtime pay.

- 0 - 10000 = range
- 99997 = Don't Know
- 99998 = Refuse to Answer
- 99999 = Not Applicable

Q190. (Is/Was) that:

- 1 = Per hour
- 2 = Per week
- 3 = Every 2 weeks
- 4 = Twice a month
- 5 = Once a month
- 6 = By the job
- 7 = Some other way
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q191. How was your wage calculated?

Q192. (Is/Was) that before or after taxes?

- 1 = Before
- 2 = After
- 3 = Not Applicable (Off the Books)
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q193. Approximately how many jobs did you have with this employer since your last interview? If job is "some other way" choose **Not Applicable**.

- 0 - 96 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q194. Did your employer make available a health plan or medical insurance, including any offered at cost to you?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q195. Since you moved into housing, have you looked for work?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q195FWBA9. Altogether, how many weeks did you look for work on your most recent job search?

- 0 - 300 = range
- 997 = Don't Know
- 998 = Refuse to Answer
- 999 = Not Applicable

Q196. During this search, were you offered a job that you did not accept?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q197. On a scale of 0 to 10, rate how you feel about getting full-time, off the books work at this time.

- 0 = No desire to get full-time, off the books work
- 1 - 9 = unlabelled scale points
- 10 = Greatest desire to get full-time, off the books work
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q198. On a scale of 0 to 10, rate how you feel about getting full-time, on the books work at this time.

- 0 = No desire to get full-time, on the books work
- 1 - 9 = unlabelled scale points
- 10 = Greatest desire to get full-time, on the books work
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q199. On a scale of 0 to 10, rate how successful you expect to be in getting full-time, on the books work at this time. Be realistic, based on your past experiences and your present strength of motivation.

- 0 = Lowest expectation of success
- 1 - 9 = unlabelled scale points
- 10 = Greatest expectation of success
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q200. On a scale of 0 to 10, rate how difficult you think it will be to get full-time, on the books work at this time.

- 0 = Least amount of difficulty
- 1 - 9 = unlabelled scale points
- 10 = Greatest amount of difficulty
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q201. About how many family members (including spouse) and friends, lovers or partners would you say you regularly have contact with? By regularly, we mean you see them or talk on the phone with them once or more every couple of weeks.

- 0 - 96 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q202. How many of these people you just mentioned rarely or never drink?

- 0 - 96 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q203. How many of these people you just mentioned are in recovery from a drinking problem?

- 0 - 96 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q204. How many of these people you just mentioned are light or social drinkers?

- 0 - 96 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q205. How many of these people you just mentioned are heavy drinkers and/or problem drinkers?

- 0 - 96 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q206. How many of these people you just mentioned do you not know about their drinking?

- 0 - 96 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q207. How many of these people rarely or never use drugs?

- 0 - 96 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q208. How many of these people are in recovery from a drug problem?

- 0 - 96 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q209. How many of these people use drugs occasionally?

- 0 - 96 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q210. How many of these people are heavy drug users or have a drug problem?

- 0 - 96 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q211. How many of these people do you not know about their drug use?

- 0 - 96 = range
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q212. Overall, how have your relationships with social supports, such as friends and family, changed since you moved into this housing?

- 1 = Relationships have gotten worse
- 2 = Relationships have stayed the same
- 3 = Relationships have gotten better
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q213. Overall, how satisfied are you with the amount of choice you had over the apartment you live in?

- 1 = Very Satisfied
- 2 = Satisfied
- 3 = Neutral
- 4 = Dissatisfied
- 5 = Very Dissatisfied
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q214. How satisfied are you with how close you live to family or friends?

- 1 = Very Satisfied
- 2 = Satisfied
- 3 = Neutral
- 4 = Dissatisfied
- 5 = Very Dissatisfied
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q215. How satisfied are you with how close you live to stores and public transportation?

- 1 = Very Satisfied
- 2 = Satisfied
- 3 = Neutral
- 4 = Dissatisfied
- 5 = Very Dissatisfied
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q216. How satisfied are you with the safety of your apartment?

- 1 = Very Satisfied
- 2 = Satisfied
- 3 = Neutral
- 4 = Dissatisfied
- 5 = Very Dissatisfied
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q217. How satisfied are you with the amount of privacy and independence you have from the staff at the housing program?

- 1 = Very Satisfied
- 2 = Satisfied
- 3 = Neutral
- 4 = Dissatisfied
- 5 = Very Dissatisfied
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q218. How satisfied are you with the condition or state of repair of your apartment?

- 1 = Very Satisfied
- 2 = Satisfied
- 3 = Neutral
- 4 = Dissatisfied
- 5 = Very Dissatisfied
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q219. How satisfied are you with the amount of time it takes to get repairs done in your apartment?

- 1 = Very Satisfied
- 2 = Satisfied
- 3 = Neutral
- 4 = Dissatisfied
- 5 = Very Dissatisfied
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q220. How satisfied were you with the ease of the application/intake process?

- 1 = Very Satisfied
- 2 = Satisfied
- 3 = Neutral
- 4 = Dissatisfied
- 5 = Very Dissatisfied
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q221. Have you had a hard time paying your rent since you began with this housing program?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q222. How often have you had difficulty paying your rent?

- 0 = Never
- 1 = Rarely
- 2 = Sometimes
- 3 = Often
- 4 = Always
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q223. Has this difficulty ever been a result of PA being too little or being cut off?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q224. Has this difficulty ever been a result of rent being too high?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q225. Has this difficulty ever been a result of alcohol use?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q226. Has this difficulty ever been a result of drug use?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q227. Has this difficulty ever been a result of not being able to find work?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q228. Has this difficulty ever been a result of family obligations?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q229. Has this difficulty ever been a result of some other reason?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q230. What was the other reason?

Q231. How much is your monthly rent?

- 0 - 2000 = range
- 9997 = Don't Know
- 9998 = Refuse to Answer
- 9999 = Not Applicable

Q232. How does your rent get paid to your housing program?

- 0 = Other
- 1 = PA/SSI pays my program directly
- 2 = I pay my program with a check/money order
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q233. What is the other way your rent is paid?

Q234. How satisfied are you with the cost of your apartment?

- 1 = Very Satisfied
- 2 = Satisfied
- 3 = Neutral
- 4 = Dissatisfied
- 5 = Very Dissatisfied
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q235. Is there a time limit on how long you can live in your apartment? (Mark yes or no only if client is sure, otherwise mark "Don't Know")

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q236. If you wanted could you change apartments without losing your services (i.e. remaining in the same program)? (Mark yes or no only if client is sure, otherwise mark "Don't Know")

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q237. Did your housing program ask you not to drink in your apartment?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q238. Did your housing program ask you not to use drugs in your apartment?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q239. How satisfied are you with the rules regarding drug or alcohol use in the apartment?

- 1 = Very Satisfied
- 2 = Satisfied
- 3 = Neutral
- 4 = Dissatisfied
- 5 = Very Dissatisfied
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q240. In general how satisfied are you with the rules about what you can and cannot do in your housing?

- 1 = Very Satisfied
- 2 = Satisfied
- 3 = Neutral
- 4 = Dissatisfied
- 5 = Very Dissatisfied
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q241. Overall, how satisfied are you with your current housing?

- 1 = Very Satisfied
- 2 = Satisfied
- 3 = Neutral
- 4 = Dissatisfied
- 5 = Very Dissatisfied
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q242. Have you switched/moved apartments since you've been housed by this program?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q243. When, if ever, do you expect to move out of the program (this would include staying in your current apartment but no longer receiving services or subsidies from the housing program)? NOTE to interviewer: If client does not know when they expect to move out, but does expect to move out someday, encourage the client to choose his/her best guess. If client really can't guess, choose 'Don't Know'.

- 1 = Within the next 6 months
- 2 = 6 months to 1 year
- 3 = 1 to 2 years
- 4 = 2 to 5 years
- 5 = 5 to 10 years
- 6 = More than 10 years
- 7 = Never
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q244. I'd like to know a little more about why you expect to move out in the next 6 months, but I only have a small amount of space to write in. Could you tell me as briefly as you can, why you expect to move?

Q245. What do you think your next housing arrangement will be?

- 0 = Other
- 1 = Different supported housing
- 2 = Own house/apartment
- 3 = Friends or Family
- 4 = Hospital
- 5 = Shelter
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q246. If other, what type of housing?

Q247. Do you have regular contact with any case managers that are not part of your housing program? This might include case managers from the shelter or from a street-to-home project? By regular contact, we mean, you see them or speak to them on the phone at least once a month.

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q248. How many case managers have you had at HOUSING PROGRAM since you entered?

- 0 - 96 = range**
- 97 = Don't Know**
- 98 = Refuse to Answer**
- 99 = Not Applicable**

Q249. How long have you been working with your current case manager?

- 1 = Less than 1 month**
- 2 = 1 to 3 months**
- 3 = 4 to 6 months**
- 4 = 7 months or more**
- 7 = Don't Know**
- 8 = Refuse to Answer**
- 9 = Not Applicable**

Q250. In the past 30 days, how many times have you had contact with your housing program? Contact would include being visited at home by program staff, speaking on the phone with program staff, or your visiting the program offices.

- 0 - 96 = range**
- 97 = Don't Know**
- 98 = Refuse to Answer**
- 99 = Not Applicable**

Q251. How satisfied are you with the availability of your case manager?

- 1 = Very Satisfied**
- 2 = Satisfied**
- 3 = Neutral**
- 4 = Dissatisfied**
- 5 = Very Dissatisfied**
- 7 = Don't Know**
- 8 = Refuse to Answer**
- 9 = Not Applicable**

Q252. Do you have a number you can call anytime if you needed to reach staff at your housing program?

- 0 = No**
- 1 = Yes**
- 7 = Don't Know**
- 8 = Refuse to Answer**
- 9 = Not Applicable**

Q253. How much do you and your case manager trust and respect one another?

- 0 = Not at all
- 1 = A little bit
- 2 = Moderately
- 3 = Quite a bit
- 4 = Extremely
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q254. How confident are you in your case manager's ability to understand you and your goals (i.e. be on the same page)?

- 0 = Not at all
- 1 = A little bit
- 2 = Moderately
- 3 = Quite a bit
- 4 = Extremely
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q255. Overall how confident are you in your case manager's ability to help you?

- 0 = Not at all
- 1 = A little bit
- 2 = Moderately
- 3 = Quite a bit
- 4 = Extremely
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q256. How often are you working with your case manager on things that are important to you?

- 0 = Never
- 1 = Rarely
- 2 = Sometimes
- 3 = Often
- 4 = Always
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q257. Since entering the program, did you want help managing your money (paying bills, paying rent, budgeting)?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q258. Since entering the program, have you received help managing your money (paying bills, paying rent, budgeting)?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q259. Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?:
Housing AGENCY

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?:
Outside Agency

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q260. How satisfied are you with the money management help you received?

- 1 = Very Satisfied
- 2 = Satisfied
- 3 = Neutral
- 4 = Dissatisfied
- 5 = Very Dissatisfied
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q261. Since entering the program, did you want help getting employment/schooling/job training?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q262. Since entering the program, have you received help getting employment/schooling/job training?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q263. Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?

Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?:
Housing PROGRAM

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?:
Housing AGENCY

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?:

Outside Agency

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q264. How satisfied are you with the employment/schooling/job training help you received?

- 1 = Very Satisfied
- 2 = Satisfied
- 3 = Neutral
- 4 = Dissatisfied
- 5 = Very Dissatisfied
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q265. Since entering the program, did you want help dealing with legal issues?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q266. Since entering the program, have you received help managing legal issues?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q267. Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?

Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?:

Housing PROGRAM

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?:
Housing AGENCY

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?:
Outside Agency

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q268. How satisfied are you with the legal services you received?

- 1 = Very Satisfied
- 2 = Satisfied
- 3 = Neutral
- 4 = Dissatisfied
- 5 = Very Dissatisfied
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q269. Since entering the program, did you want help dealing with a physical health issue or crisis?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q270. Since entering the program, have you received help managing a physical health issue or crisis?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q271. Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?

Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?:

Housing PROGRAM

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?:

Housing AGENCY

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?:

Outside Agency

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q272. How satisfied are you with the physical health services you received?

- 1 = Very Satisfied
- 2 = Satisfied
- 3 = Neutral
- 4 = Dissatisfied
- 5 = Very Dissatisfied
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q273. Since entering the program, did you want help dealing with a mental health issue or crisis?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q274. Since entering the program, have you received help managing a mental health issue or crisis?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q275. Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?

Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?:

Housing PROGRAM

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?:

Housing AGENCY

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?:

Outside Agency

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q276. How satisfied are you with the mental health services you received?

- 1 = Very Satisfied
- 2 = Satisfied
- 3 = Neutral
- 4 = Dissatisfied
- 5 = Very Dissatisfied
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q277. Since entering the program, did you want help managing your drug or alcohol use?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q278. Since entering the program, have you received help managing your drug or alcohol use?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q279. Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?

Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?:

Housing PROGRAM

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?:

Housing AGENCY

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?:

Outside Agency

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q280. How satisfied are you with the help you received managing your drug or alcohol use?

- 1 = Very Satisfied
- 2 = Satisfied
- 3 = Neutral
- 4 = Dissatisfied
- 5 = Very Dissatisfied
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q281. Since entering the program, did you want help managing/or obtaining public assistance or other benefits?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q282. Since entering the program, have you received help managing/or obtaining public assistance or other benefits?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q283. Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?

Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?:

Housing PROGRAM

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

FSRVPA4B Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?:
Housing AGENCY

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

FSRVPA4C Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?:
Outside Agency

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q284. How satisfied are you with the the help you received managing/or obtaining public assistance or other benefits?

- 1 = Very Satisfied
- 2 = Satisfied
- 3 = Neutral
- 4 = Dissatisfied
- 5 = Very Dissatisfied
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q285. Since entering the program, did you want help connecting with family and/or friends?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q286. Since entering the program, have you received help connecting with family and/or friends?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q287. Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?

Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?:

Housing PROGRAM

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?:

Housing AGENCY

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?:

Outside Agency

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q288. How satisfied are you with the help you received connecting with family and/or friends?

- 1 = Very Satisfied
- 2 = Satisfied
- 3 = Neutral
- 4 = Dissatisfied
- 5 = Very Dissatisfied
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q289. Since entering the program, did you want help with basic personal or home care? (cleaning, laundry, chores, cooking)

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q290. Since entering the program, have you received help with basic personal or home care? (cleaning, laundry, chores, cooking)

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q291. Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?

Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?:

Housing PROGRAM

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?:

Housing AGENCY

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Did you receive this help from your housing program, from your housing agency (but outside of the Category E housing program), and/or from an outside agency?:

Outside Agency

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q292. How satisfied are you with the help you received with basic personal or home care? (cleaning, laundry, chores, cooking)

- 1 = Very Satisfied
- 2 = Satisfied
- 3 = Neutral
- 4 = Dissatisfied
- 5 = Very Dissatisfied
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q293. Of those received, what service was the most useful?

- 1 = Money Management
- 2 = Employment/Schooling
- 3 = Legal
- 4 = Physical Health
- 5 = Mental Health
- 6 = Drug or Alcohol use
- 7 = Sorting out Public Assistance or other benefits
- 8 = Connecting with family/friends
- 9 = Basic care: personal/home
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q294. What service was the next most useful to you?

- 1 = Money Management
- 2 = Employment/Schooling
- 3 = Legal
- 4 = Physical Health
- 5 = Mental Health
- 6 = Drug or Alcohol use
- 7 = Sorting out Public Assistance or other benefits
- 8 = Connecting with family/friends
- 9 = Basic care: personal/home
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q295. What was the third most useful to you?

- 1 = Money Management
- 2 = Employment/Schooling
- 3 = Legal
- 4 = Physical Health
- 5 = Mental Health
- 6 = Drug or Alcohol use
- 7 = Sorting out Public Assistance or other benefits
- 8 = Connecting with family/friends
- 9 = Basic care: personal/home
- 97 = Don't Know
- 98 = Refuse to Answer
- 99 = Not Applicable

Q296. How often do you attend groups and activities held by your housing provider?

- 0 = Never
- 1 = Rarely
- 2 = Sometimes
- 3 = Often
- 4 = Always
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q297. How satisfied are you with the groups and activities held by your housing provider?

- 1 = Very Satisfied
- 2 = Satisfied
- 3 = Neutral
- 4 = Dissatisfied
- 5 = Very Dissatisfied
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q298. Overall how satisfied are you with the amount of choice you have had over your services?

- 1 = Very Satisfied
- 2 = Satisfied
- 3 = Neutral
- 4 = Dissatisfied
- 5 = Very Dissatisfied
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q299. How often have you discussed your drug or alcohol use with your case manager?

- 0 = Never
- 1 = Rarely
- 2 = Sometimes
- 3 = Often
- 4 = Always
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q300. How open about your drug or alcohol use do you feel you can be with your housing provider or case manager?

- 0 = Not at all
- 1 = A little bit
- 2 = Moderately
- 3 = Quite a bit
- 4 = Extremely
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q301. Has your case manager discussed what your goals are regarding drug or alcohol use?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q302. Has your case manager suggested that you should reduce your alcohol use? NOTE to interviewer: If client never drank, choose 'Not Applicable'.

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q303. Has your case manager suggested that you should reduce your drug use? NOTE to interviewer: If client never used, choose 'Not Applicable'.

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q304. Has your case manager suggested that you should quit using alcohol? **NOTE to interviewer: If client never drank, choose 'Not Applicable'.**

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q305. Has your case manager suggested that you should quit using drugs? **NOTE to interviewer: If client never used, choose 'Not Applicable'.**

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q306. Has your case manager suggested that you take a small step to change your use?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q307. Has your case manager suggested that you should enroll in/continue to go to an abstinence-based drug or alcohol program (inpatient/outpatient)?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q308. Has your case manager suggested that you should go to NA or AA meetings even if you continue to use?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q309. Has your case manager suggested that you talk about your drug or alcohol use with someone that won't push you toward quitting?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q310. Has your case manager suggested that you see a therapist who can help you reduce your drug or alcohol related harm without pushing abstinence?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q311. Has your case manager suggested that you move to abstinence based housing?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q312. Has your case manager suggested that you switch the type of drug you use?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q313. Has your case manager suggested that you use or drink with different people?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q314. Has your case manager suggested that you use or drink in different places?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q315. Has your case manager discussed how you can maintain your sobriety?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q316. Has your case manager talked about how drugs or alcohol affect money management?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q317. Has your case manager talked about how drugs or alcohol affect family relationships?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q318. Has your case manager talked about how drugs or alcohol affect health?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q319. Has your case manager talked about how drugs or alcohol affect mental health?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q320. Has your case manager talked about how drugs or alcohol affect employment/schooling?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q321. Has your case manager talked about how drugs or alcohol affect public assistance/benefits?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q322. Has your case manager talked about how drugs or alcohol affect legal issues?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q323. Has your case manager talked about how drugs or alcohol affect basic personal/home care?

- 0 = No
- 1 = Yes
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q324. How confident are you in your case manager's ability to understand what your goals/needs are regarding your drug or alcohol use?

- 0 = Not at all
- 1 = A little bit
- 2 = Moderately
- 3 = Quite a bit
- 4 = Extremely
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q325. Overall, how satisfied are you with your case manager's ability to help you manage your drug or alcohol use/sobriety?

- 1 = Very Satisfied
- 2 = Satisfied
- 3 = Neutral
- 4 = Dissatisfied
- 5 = Very Dissatisfied
- 7 = Don't Know
- 8 = Refuse to Answer
- 9 = Not Applicable

Q326. Use this space for any notes you might have regarding the interview.

CASAHOPE Monthly Log

This monthly log is part of a research study at The National Center on Addiction and Substance Abuse (CASA) at Columbia University. The information you provide in this and other logs is very important to us, and we plan to work with your agency to use this information in a way that is beneficial to your clients. Thank you for your help and continued involvement!

If you have any questions or comments, please contact Clare Davidson, MSW at 347-845-5213 or cdaavidson@casacolumbia.org

1. Your Name

2. Client's Name

3. Month this log reflects

4. If this is the first month the client is being housed, please report the date the client was housed below and complete this log to reflect the partial month.

5. Below is space for any additional comments you might have regarding the information reported in this log.

CASAHOPE Monthly Provider Log

1. How many times did you meet face-to-face with this client in the past month?

2. Below is a list of different kinds of social services. Please think about the types of REFERRALS your agency may have made for this client in the past month and mark the boxes below to reflect these referrals. Note: This question applies to only NEW referrals made IN-HOUSE or OUT-OF-HOUSE in the past month.

	Client referred to service IN-HOUSE	Client referred to service OUT-OF-HOUSE	No referral was made	Don't Know/Unsure
Medical	€	€	€	€
Employment/Vocational Education (WEP, GED classes, job training, etc.)	€	€	€	€
Substance Use	€	€	€	€
Legal	€	€	€	€
Mental Health	€	€	€	€
Entitlements (SSI, Public Assistance, etc.)	€	€	€	€
Independent Living (Budgeting, Cooking, etc.)	€	€	€	€

3. Mark the boxes below to reflect the type of SERVICES this client has received in the past month. Note: This question applies to NEW OR ONGOING service receipt IN-HOUSE or OUT-OF-HOUSE.

	Client received service IN-HOUSE	Client received service OUT-OF-HOUSE	Client received no services	Don't Know/Unsure
Medical	€	€	€	€
Employment/Vocational Education (WEP, GED classes, job training, etc.)	€	€	€	€
Substance Use	€	€	€	€
Legal	€	€	€	€
Mental Health	€	€	€	€
Entitlements (SSI, Public Assistance, etc.)	€	€	€	€
Independent Living (Budgeting, Cooking, etc.)	€	€	€	€

4. Please rate this client's ability to...

	Not at all able	Somewhat able	Moderately able	Considerably able	Don't Know/Unsure	Not Applicable
Use the Telephone	jñ	jñ	jñ	jñ	jñ	jñ
Do Laundry	jñ	jñ	jñ	jñ	jñ	jñ
Do the Shopping	jñ	jñ	jñ	jñ	jñ	jñ
Travel Independently	jñ	jñ	jñ	jñ	jñ	jñ
Prepare Food	jñ	jñ	jñ	jñ	jñ	jñ
Take Responsibility for Own Medications	jñ	jñ	jñ	jñ	jñ	jñ
Perform Housekeeping	jñ	jñ	jñ	jñ	jñ	jñ
Handle Finances	jñ	jñ	jñ	jñ	jñ	jñ
Manage chronic physical or mental illness	jñ	jñ	jñ	jñ	jñ	jñ

12. Did this client work in the past month? (do not include WEP or other benefit dependent work services)

- Client worked FULL-time ON the books
- Client worked FULL-time OFF the books
- Client worked PART-time ON the books
- Client worked PART-time OFF the books
- Client worked SPORADICALLY OFF the books
- Client did NOT work
- Client is unable to work due to disability
- Don't know/Unsure

13. How many times has the client been arrested, detained, or incarcerated in the past month?

Don't Know/Unsure

Times

14. Mark the statement below that best reflects this client's interaction with your agency.

- Client is participating regularly- satisfactory progress
- Client is participating regularly- little or no progress
- Client is not participating regularly- stability unknown
- Client is not participating regularly- appears stable
- Client is not participating regularly- appears to be worse
- Client's status in program is in jeopardy/under evaluation
- Client left program against advice
- Client left program in accordance with advice
- Client status unknown- No contact with client this month

15. If the client was discharged from your program in the last month, mark all reasons for discharge that apply. Please also contact Clare Davidson at 347-845-5213.

- Needed higher level of care
- Violent behavior
- Unable to pay rent because of loss of benefits or income
- Unable to pay rent because of personal budgeting issues
- Other (please specify)
- Non-compliance with program requirements
- Substance use problems
- Legal problems/Incarceration
- Client was stable and no longer needed services

16. Mark all sources that you consulted regarding this client.

- Your own experience and records
- Clinical Team (group)
- Other (please specify)
- Other Case Managers (individual)
- Supervisor (individual)

17. How confident are you that the information reported in this log is accurate?

- Extremely Confident
- Very Confident
- Somewhat Confident
- Not Confident at All
- Don't know/Unsure