

Client-Rated Assessment

Interviewer's Name.....

CODES FOR ALL QUESTIONS:

Enter DK for information the patient Does not Know.
 Enter NA for questions that are "Not Applicable" for a particular patient.
 Enter RE for questions a patient Refuses to answer.

Choose the response that best describes how much or how often each statement has applied to you over the past 12 months.

0 Never	1 Once or Twice	2 A Few Times	3 Most of the Time	4 Always
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1. Construct A

- 1a. I have not had money for food..... _____
- 1b. I have not had money for a place to stay the night. _____
- 1c. I have not had money for clothing. _____
- 1d. I have received free food from a soup kitchen, church, or other place. _____
- 1e. I have had to stay in a shelter..... _____
- 1f. I have had housing problems..... _____
- 1g. I have needed help with my living situation. _____
- 1h. Because of my living situation, it has been hard for me to come to appointments for my treatment. _____
- 1i. I have received food from family or friends that I did not pay for. _____
- 1j. The food I was eating was not as good as the food in the hospital..... _____
- 1k. I have been cold or wet because I have not had the right clothing. _____
- 1l. I have had to wear clothing that is dirty, torn, or did not fit me _____
- 1m. I avoided appointments or situations with people because of how poorly I was dressed. _____
- 1n. The places I have been sleeping are not as nice as the room in the hospital..... _____
- 1o. I lost my housing because I could not pay for it. _____
- 1p. Someone said I was wasting my money _____

2. Construct B

- 2a. I have managed my money well. _____
- 2b. I have money saved up in case I need it..... _____
- 2c. I have saved my money, bit by bit, for things I wanted _____
- 2d. I pay my bills. _____

3. Construct C

- 3a. I have trouble managing my money..... _____
- 3b. I haven't trusted myself with my own money. _____
- 3c. I could have used some help managing my money _____
- 3d. I have received money illegally or by asking for it on the street. _____
- 3e. People have been after me to pay money they say I owe them..... _____
- 3f. I have been surprised that I had less money than I thought. _____
- 3g. My money has been gone before the end of the month. _____
- 3h. Someone told me I should spend my money differently _____

4. Construct D

- 4a. People have taken advantage of me when I got my benefit checks _____
- 4b. People came around more often when I got my benefit checks _____
- 4c. There are people who like me for my money _____
- 4d. I have been cheated out of my money _____
- 4e. I have been robbed of my money..... _____
- 4f. I have been pressured to give someone money _____
- 4g. It is not been safe to have money where I live..... _____

5. Construct E

- 5a. I have spent more money than I planned on things I really didn't need. _____
- 5b. I have spent more money than I planned on lottery tickets or other gambling activities..... _____
- 5c. I have gone without important things because I spent the money on things I did not really need..... _____
- 5d. When I had money in my pocket, I spent it. _____
- 5e. When I wanted to buy something, I bought it without worrying about the cost. _____
- 5f. I bought expensive gifts for people I care about..... _____
- 5g. I have borrowed money from friends and family. _____

6. Construct F

- 6a. I have gone without basic necessities (food, clothing, shelter) because I spent the money on drugs and alcohol..... _____
- 6b. I have spent money on illegal drugs and alcohol..... _____
- 6c. I have spent a lot of money on illegal drugs and alcohol..... _____
- 6d. I have spent money gambling (lottery tickets, horse racing, sports)..... _____
- 6e. I have spent a lot of money gambling (lottery tickets, horse racing, sports)..... _____

7. How much money did you receive in the last 30 days from:

- a. Employment\$ _____
- b. Unemployment insurance.....\$ _____
- c. Welfare (SAGA).....\$ _____
- d. Food stamps\$ _____
- e. VA pension benefits\$ _____
- f. VA service-connected compensation.....\$ _____
- g. SSI, not counting state supplement\$ _____
- h. State supplement to SSI.....\$ _____
- i. SSDI.....\$ _____
- j. Significant other, family or friends\$ _____
- k. Illegal sources.....\$ _____
- l. Asking for money on the street\$ _____
- m. Other (specify _____)\$ _____

8. During the last 30 days how much did you spend on:

- a. Utilities (heat, electric, phone, etc.)\$ _____
- b. Rent\$ _____
- c. Food.....\$ _____
- d. Clothes.....\$ _____
- e. Transportation (car payments, gas, bus, or other transportation costs)\$ _____
- f. Health care\$ _____
- g. Cigarettes.....\$ _____
- h. Alcohol\$ _____
- i. Drugs\$ _____
- j. Household expenses (laundry, hardware, light bulbs, etc.)\$ _____
- k. Gambling (lottery tickets, horse racing, sports)\$ _____
- l. Other (specify _____)\$ _____

9. In the last year did you NOT have ____ (fill in items a-g below) because you had no money to pay for it? If patient indicates yes, how many of the past 12 months?

Code: # of months (0-12)

- a. A place to stay _____
- b. Food..... _____
- c. Clothes _____
- d. Health care..... _____
- e. Alcohol _____

- f. Drugs..... _____
- g. Other (specify: _____)..... _____

CODE (10a – 10c) 1=No 2=Yes

10a. Have you gone without basic necessities (food, shelter, or clothing) during the past 12 months..... _____

If answer to 10a is "YES," then ask questions 10b and 10c. If answer to 10a is "NO," skip to question 11.

10b. ONLY ASK IF ANSWER TO 10a is "YES"

If you have gone without basic necessities, do you feel it was because you spent money on drugs and alcohol?..... _____

10c. ONLY ASK IF ANSWER TO 10a is "YES"

If you have gone without basic necessities, do you feel it was because you spent money on things you did not need? _____

11. Indicate how much money you owe to the following:

- a. Family \$ _____
- b. Friends \$ _____
- c. Drug supplier or liquor store..... \$ _____
- d. Landlord \$ _____
- e. Ex-wife \$ _____
- f. Child support..... \$ _____
- g. Court-ordered payments \$ _____
- h. Store \$ _____
- i. Credit card company \$ _____
- j. Other (specify _____)..... \$ _____

Patient's Unique ID# _____

Date ____/____/____

Constructs

- A: Difficulty Meeting Basic Needs**
- B: Responsible Spending (scored negatively)**
- C: Perceived Problem Managing Money**
- D: Victimization**
- E: Impulsive spending**
- F: Spending for Drugs and Alcohol**
- G: Perceived Need for More Money**