

One-year Reinterview for the Hurricane Katrina Community Advisory Group (CAG)

NOTE: This survey was administered to Katrina CAG members at a point one year after their first interview. All respondents had been informed of the study and consented at their first interview. This survey asks some of the same questions that were asked at the first interview, e.g. about current emotional, physical, psychological health so that we can compare people's ratings now to how they rated these things a year prior. Some of the important additions include more detailed questions about substance use, questions about public assistance programs and any interruption of such services because of the hurricane, and questions about individual children living in the household, so that we could understand how Katrina affected the physical and mental health of children and what needs may still not be met.

BEGIN INTERVIEW

1. Here's the first question. What help do you and your household currently need, because of Hurricane Katrina and the aftermath, that relief agencies might be able to provide?

PRE-HURRICANE RESIDENCE AND NEIGHBORHOOD SECTION

1. When we spoke to you last year, you were living in [CITY]. Are you still living in [CITY]?
2. You were living at [ADDRESS]. Do you still live there?
3. What's your new street address? *NOTE: This question is asked only if R reported a change of address. "Skip logic" of this sort is not rigorously mapped out in this document, but can generally be inferred from marginal comments.*
4. What's your new zip code?
5. In what state do you currently live?
6. In what town do you currently live?
7. What's your street address?
8. What's your zip code?
9. What [county/parish] is [CITY] in?
10. The next questions are about your housing before and after Hurricane Katrina. Do you own the home you currently live in without a mortgage, own with a mortgage, rent, or live in without paying rent?
11. What's your current monthly [rent/mortgage payment]?
12. Is your current monthly [rent/mortgage payment] higher, lower, or about the same as it was before the hurricane[s]?
13. What was your monthly payment before the hurricane[s]?
14. Are you planning to live permanently in [CITY] or are you planning to move?
15. What town and state are you planning on moving to?
16. What state are you planning on moving to?
17. How long do you think it will be until you move in terms of weeks, months or years?

HOUSING

1. At the time of the hurricane[s], were you living in a home that you owned without a mortgage, owned WITH a mortgage, rented, or lived in without paying rent?
2. What is your estimate of the total dollar value of all damage done to that home by the hurricane[s] [and flooding]?
3. Do you still own the home? Or did you sell it?
4. How much did you sell it for?
5. How much do you think you could have sold your home for before the hurricane[s]?
6. How much do you think you could sell it for now?
7. How much of a mortgage do you have on your home?
8. Did you have flood insurance at the time of the hurricane[s]?
9. What were your main reasons for not having flood insurance?
10. Did you have any other kind of homeowner's insurance at the time of the hurricane[s]?
11. How much money did you receive from your [flood insurance or home owner's insurance] to help pay for the damage to your [FORMER] home?
12. How much [additional] money do you expect to get from your [flood insurance or home owner's insurance] to help pay for the damage to your [FORMER] home?
13. Did you try to borrow money to repair the damage to your [FORMER] home?
14. Did you succeed in getting a loan?
15. Which of the following statements best describes what you did to get your [FORMER] home repaired?: You did not make any repairs. You did enough repairs to live in the home, but not all the repairs needed to get it back the way it was before the hurricane[s]. You did all repairs

needed to get it back to the way it was before the hurricane[s]. You used this occasion to make your home better than it was before the hurricane[s].

16. Which of the following are your main reasons for not repairing your [FORMER] home back to the way it was before the hurricane[s]? Because you (don't/didn't) know where the money would come from? It (isn't/wasn't) worth it? You (aren't/weren't) sure if the neighborhood will be rebuilt? You (can't/couldn't) find a job near where you used to live? Or some other reason?
17. How much [have you spent so far/did you spend] on repairs to your [FORMER] home?
18. How much [more] do you plan to spend on repairs over the next couple of years?
19. Are you up to date on your monthly mortgage or have you fallen behind?
20. Have you made arrangements with your lender regarding your monthly mortgage payments?
21. Is your current housing situation BETTER, WORSE, or ABOUT THE SAME as it was before the hurricane[s]?
22. What are the most important things that are BETTER about your current housing situation than before the hurricane[s]?
23. What are the WORST aspects of your current housing situation compared to your housing situation before hurricane[s]?

SOCIAL NETWORKS AND SUPPORT SECTION

1. About how many relatives do you have who currently live in the same [county/parish] as you, NOT counting those who live with you?
2. Not counting relatives, about how many people in the [county/parish] are you currently friendly enough with that you could borrow a cup of sugar or have them pick up your mail if you were out of town?
3. About how many friends or relatives in the [county/parish] are you currently close enough to that you could talk about your private feelings without feeling embarrassed?
4. Not counting yourself, how many other people currently live with you?
5. Again, not counting yourself, how many of the people who currently live with you are:
Less than 4 years old? Between 4 and 5 years old? Between 6 and 12 years old? Between 13 and 17 years old? Older than 17?

NOTE: These age breakdowns were necessary later in the instrument to be able to understand which public assistance programs households were eligible for.

PRACTICAL PROBLEMS SECTION

1. How stressful overall would you say your experiences with ONGOING PROBLEMS due to the hurricane[s] have been in the PAST THIRTY DAYS on a 0-to-10 scale where 0 means not at all stressful and 10 means the most stressful thing you can imagine? When we spoke to you a year ago, we asked you about the stressfulness of your experiences in the hurricane[s]. You rated your experiences as a [SCORE FROM PREVIOUS INTERVIEW] on a 0-to-10 scale where 0 means not at all stressful and 10 means the most stressful thing you can imagine.
2. How much difficulty do you currently have in each of the following areas of your life because of the hurricane[s]? Don't count difficulties that are unrelated to the hurricane[s].
3. Taking everything into consideration, what would you say are your MOST SERIOUS practical problems caused by the hurricane(s)?
4. If you think of your life overall, would you say your current life is BETTER, WORSE, or ABOUT THE SAME as before the hurricane[s]?
5. How optimistic do you feel about the way things will turn out for you in the future - very optimistic, somewhat, not very, or not at all optimistic?
6. I'm going to read a list of stressful experiences that might have happened to you in the past 12 months. Whether or not they were related to the hurricane[s] please tell me which ones occurred to you: Did you have a serious illness or injury that either started or got much worse? Did you have a parent, child, spouse, or sibling who had a serious illness or injury that either started or got much worse? Did you have anyone else close to you who had a serious illness or injury that either started or got much worse? Did you have a parent, child, spouse, or sibling who died? Did you have anyone else close to you who died? Did you have a marital separation or divorce? Did you have a break-up of any other close relationship? Did you have any serious ongoing problems or arguments with a close friend, neighbor or relative? Were you or your family's chief breadwinner fired from a job? Did you have any other major financial crisis? Did you have any problems with the police or the law? Was anything valuable to you lost or stolen?

PHYSICAL HEALTH SECTION

1. Is your current physical health BETTER, WORSE, or ABOUT THE SAME as before the hurricane[s]?
2. How many times have you seen a doctor for a health problem in the past 12 months?

3. And about how many times do you estimate that you would have seen a doctor during the same 12-month time period if the hurricane[s] had never occurred?
4. What were your main reasons for not seeing a doctor as often as if the hurricane[s] had not happened?
5. Which of the following kinds of health insurance do you currently have -- none, private insurance through a current or former employer or union, private insurance that you purchased directly from the insurance company, Medicare, Medicaid, other government insurance based on financial need, government insurance for military personnel or veterans, or some other kind of health insurance?

EMOTIONAL REACTIONS SECTION

1. After disasters such as the hurricane[s], some people have emotional reactions that can continue for years, such as becoming more nervous, depressed, or withdrawn than usual. I want you to tell me how often you have had each of the following reactions in the past 30 days. How often have you had nightmares or upsetting dreams about the hurricane[s] or aftermath?
2. In the past 30 days, how often have you had upsetting thoughts or memories about the hurricane[s] or aftermath?
3. In the past 30 days, how often have you found yourself thinking back and reliving your experiences in the hurricane[s] or aftermath?
4. In the past 30 days, how often have you found yourself thinking how things might have turned out differently if you or your family or friends had made different decisions?
5. In the past 30 days, how often have you found yourself thinking how things might have turned out differently if the government or relief agencies had acted differently?
6. In the past 30 days, how often have you acted or felt as if you were living through the hurricane[s] again?
7. In the past 30 days, how often have you felt upset by reminders of the hurricane[s] or terrible things that happened to you after the hurricane[s]?
8. In the past 30 days, how often have you had bodily reactions - such as fast heartbeat, stomach churning, sweatiness, or dizziness - when reminded of the hurricane[s] or aftermath?
9. In the past 30 days, how often have you had difficulty falling asleep or staying asleep?
10. In the past 30 days, how often have you been more irritable or angry than usual?
11. In the past 30 days, how often have you had more difficulty concentrating than usual?
12. In the past 30 days, how often have you had heightened awareness of potential dangers to yourself or others?
13. In the past 30 days, how often have you been more jumpy or easily startled than usual?
14. When a painful memory of the hurricane[s] pops into your mind, in the past 30 days, how often do you do each of the following things? (*All of the time, most of the time, some of the time, a little of the time, or never?*): How often do you try to push the memory out of your mind? How often do you try to think of something else that is more pleasant? How often do you try to distract yourself by doing something to get your mind off the painful memory?
15. In the past 30 days, how often have you felt either anxious or worried or nervous?
16. In the past 30 days, how often have you felt so anxious or worried or nervous that nothing could calm you down?
17. In the past 30 days, how often have you felt restless or fidgety?
18. In the past 30 days, how often have you felt sad or depressed?
19. In the past 30 days, how often have you felt so sad that nothing could cheer you up?
20. In the past 30 days, how often have you felt hopeless?
21. In the past 30 days, how often have you felt worthless?
22. In the past 30 days, how often have you felt that everything was an effort?
23. In the past 30 days, how often have you felt angry?
24. In the past 30 days, how often have you felt so angry that you either lost your temper or felt out of control?
25. Thinking of all the emotional reactions I just asked you about, how much did these reactions interfere with your ability to get along with people in the past 30 days?
26. How much did your emotional reactions in the past 30 days interfere with your ability to work or do the practical things you needed to do?
27. Would you say that your current mental health is BETTER than it was before the hurricane[s], WORSE, or ABOUT THE SAME as it was before the hurricane[s]?
28. For the next few questions please think about the one month since the hurricane[s] when you had the MOST SEVERE emotional reactions of the sort I have been asking you about. This might have been the first month after the hurricane[s] or some later month. During that month, how often:
 - a. Did you have nightmares or very upsetting thoughts about the hurricane[s]?
 - b. Did you go out of your way to avoid the situations that reminded you of the hurricane[s]?
 - c. Did you try hard not to think about the hurricane[s]?
 - d. Were you on guard, watchful, or easily startled because of the hurricane[s]?
 - e. Did you feel emotionally numb or detached from people and things around you because of the hurricane[s]?

29. How soon after the hurricane[s] did you start having these emotional reactions at least once a week?
30. Do you still have these reactions at least once a week now? Or have they either stopped entirely or decreased to less often than once a week?
31. Beginning with the time you first had these reactions at least once a week, for how many months did you continue to have these emotional reactions at least once a week?
32. When was the MOST RECENT month and year when you had these emotional reactions at least once a week?

LOSS SECTION

1. People lost many things because of the hurricane[s] - loved ones, property, a sense of community, and a way of life. On a 0-to-10 scale where 0 means no loss and 10 means the greatest loss you can imagine, what number describes how much you lost because of the hurricane[s]? When we spoke to you a year ago, we asked you about things you might have lost because of the hurricane[s] such as loved ones, property, a sense of community, and a way of life. At that time, you rated your loss a [SCORE FROM PREVIOUS INTERVIEW] on a 0 to 10 scale where 0 means no loss and 10 means the greatest loss you can imagine. Is that the number you would still use, or would you pick a different number now?
2. In the past 30 days, how often have you found yourself longing or yearning for the things you lost in the hurricane[s]?
3. How BITTER have you felt about your loss in the past 30 days - not at all, a little, some, a lot, or extremely bitter?
4. How EMPTY OR MEANINGLESS do things seem since your loss?
5. How difficult is it for you to accept your loss or to believe that it's real?

HISTORY OF EMOTIONAL PROBLEMS SECTION

1. The next questions are about thoughts of hurting yourself. Was there ever a time in the past 12 months when you seriously thought about committing suicide?
2. Did you make a plan for committing suicide at any time in the past 12 months?
3. Did you attempt suicide in the past 12 months?
4. Did this attempt result in an injury or poisoning?
5. Did it require medical attention?
6. Did it require overnight hospitalization?

SUBSTANCE USE SECTION

1. The next questions are about your use of alcohol. During the past 12 months, did you have at least 1 drink of alcohol -- every day, nearly every day, 3 or 4 days a week, or less than 3 days a week?
2. Did you have at least one drink - one or two days a week, 2 or 3 days a month, once a month, or less often than once a month?
3. By a drink of alcohol I mean either a bottle of beer, a glass of wine, a shot of hard liquor, or a mixed drink. With that definition in mind, how many drinks did you USUALLY have on days when you drank during the past 12 months?
4. What was the LARGEST number of drinks that you drank in a single day, during the past 12 months?
5. During the past 12 months, how much did you have each of the following experiences because of your alcohol use?: How much was your physical health harmed by your use of alcohol? How much was your family hurt by your use of alcohol? How much did you do impulsive things that you regretted later because of your alcohol use? How much did you fail to do what was expected of you because of your alcohol use? How much have you been unhappy because of your alcohol use?
6. Were these alcohol-related problems in the past 12 month WORSE than they were in the 12 months before the hurricane[s], BETTER, or ABOUT THE SAME as in the 12 months before the hurricane[s]?
7. Would you say a lot [BETTER/WORSE], somewhat, or only a little [BETTER/WORSE] than in the 12 months before the hurricane[s]?
8. The next question is about use of marijuana, cocaine, or other illegal drugs. During the past 12 months, about how often did you use marijuana, cocaine, or any other illegal drug?
9. Would you say it was one or two days a week, 2 or 3 days a month, once a month, or less often than once a month?
10. The next question is about prescription medicines such as sleeping pills, tranquilizers, painkillers, and stimulants that you might have used. During the past 12 months did you ever use sleeping pills, tranquilizers, painkillers, or stimulants for any reason?
11. Some people use prescription medicines such as sleeping pills, tranquilizers, painkillers, and stimulants ON THEIR OWN - that is, in greater amounts, more often, or longer than prescribed;

or for a reason other than a doctor said that they should be used. People use such medicines to feel more alert, to relax or quiet their nerves, to feel better, to enjoy themselves, to get high, or just to see how they would work. During the past 12 months, about how often did you use prescription medicines ON YOUR OWN?

12. Would you say it was one or two days a week, 2 or 3 days a month, once a month, or less often than once a month?
13. During the past 12 months, how much did you have each of the following experiences because of your use of [(illegal drugs)/ (or) /(prescription medicines)]?: How much was your physical health harmed by your use of [(illegal drugs)/ (or) /(prescription medicines)]? How much was your family hurt by your use of [(illegal drugs)/ (or) /(prescription medicines)]? How much did you do impulsive things that you regretted later because of using [(illegal drugs)/ (or) /(prescription medicines)]? How much did you fail to do what was expected of you because of your use of [(illegal drugs)/ (or) /(prescription medicines)]? How much have you been unhappy because of your use of [(illegal drugs)/ (or) /(prescription medicines)]?
14. Were these drug-related problems in the past 12 month WORSE than they were in the 12 months before the hurricane[s], BETTER, or ABOUT THE SAME as in the 12 months before the hurricane[s]?
15. Would you say a lot [BETTER/WORSE], somewhat, or only a little [BETTER/WORSE] than in the 12 months before the hurricane[s]?
16. During the past 12 months, about how often did you smoke at least one cigarette?
17. Would you say it was one or two days a week, 2 or 3 days a month, once a month, or less often than once a month?
18. About how many cigarettes did you smoke on an average day (when you smoked)?
19. Is that MORE than you smoked in the 12 months before the hurricane[s], LESS, or ABOUT THE SAME as in the 12 months before the hurricane[s]?
20. Would you say a lot [MORE/LESS], somewhat, or only a little [MORE/LESS] than in the 12 months before the hurricane[s]?

MENTAL HEALTH TREATMENT SECTION

1. In the past 12 months, have you received any sort of professional counseling for problems with your emotions, nerves, mental health, or substance use?
2. What kind of professional did you see?
3. How many sessions of psychological counseling or psychotherapy did you receive in the past 12 months?
4. Were any of these sessions paid for, at least in part, by the American Red Cross "Access to Care" program?
5. In terms of cost, did you receive [this session/these sessions] at no cost, did you have to pay, or did your insurance pay?
6. Are you still going to counseling or psychotherapy sessions or have you stopped?
7. In the past 12 months have you taken a prescription medicine for problems with your emotions, nerves mental health or substance use?
8. What were your reasons for stopping your counseling or psychotherapy sessions?
9. What prescription medications have you taken in the past 12 months for your problems with your emotions, nerves, mental health or substance use?
10. About how many days out of the past 365 did you take [DRUG NAME]?
11. Who prescribed [this medication/these medications]?
12. Are you still taking [this medication/these medications] or have you stopped?
13. What were your reasons for stopping [your counseling or psychotherapy sessions and] your medication?
14. People differ a lot in their feelings about professional help for emotional problems. If you had a SERIOUS emotional problem, would you DEFINITELY go for professional help, PROBABLY go, PROBABLY NOT go, or DEFINITELY NOT go for professional help?
15. How comfortable [did/would] you feel talking about personal problems with a professional?
16. How embarrassed would you be if your friends knew you were getting professional help for an emotional problem?
17. Of the people who see a professional for serious emotional problems, what percent do you think are helped?
18. Of those who do not get professional help, what percent do you think get better even without it?
19. Was there a time in the past 12 months when you felt that you might need to see a professional because of problems with your emotions, nerves, mental health or substance use?
20. What were your reasons for not seeing a professional?
21. The next question is about any treatment for emotional problems or alcohol or drug problems you might have received in the 12 months BEFORE the hurricane[s], including either medication, counseling, or both. Did you receive any treatment for emotional problems or substance problems at any time in the 12 months before the hurricane[s]?
22. About how many times in the 12 months BEFORE Katrina did you see a professional for problems with your emotions, nerves, mental health or substance use?

23. In the 12 months before the hurricane[s], did you take any prescription medicine for problems with your emotions, nerves, mental health or substance use?
24. What prescription medications of this sort did you take?
25. About how many days out of the 365 days before the hurricane[s] did you take [DRUG NAME]?
26. A lot of people had problems getting their medications refilled after the hurricane[s] because their drug store was closed, their records lost, or they couldn't find their doctor to get a new prescription. Did you have any problems of this sort?
27. How long did you go without medication because you could not get the refill?
28. We are very interested in the problems people had getting medications refilled, so I want you to give me specific details about this problem. Please describe in detail the problems you faced in getting your prescriptions filled. Which of these problems caused you to go without medication?

RED CROSS ACCESS TO CARE PROGRAM SECTION

1. The American Red Cross has a new program to help people pay for emotional support services, such as mental health treatment and substance abuse treatment. Have you heard that this program exists?
2. Do you remember the name of the program?
3. It's called the 'Access to Care' Program. About how many people do you know, including yourself, who have tried to use the "Access to Care" Program?
4. From what you know, how easy is it to enroll in the "Access to Care" program?
5. From what you know, how HELPFUL are the services people receive through the "Access to Care" program?

EMPLOYMENT SECTION

1. In our last interview you told us you were [ANSWER FROM PREVIOUS INTERVIEW], has there been a change in your marital status since then?
2. Are you currently married, separated, divorced, widowed, or never married?
3. Are you living with someone in a marriage-like relationship?
4. What is the highest degree or level of school your [spouse/partner] completed?
5. And what's YOUR job situation now - are you employed, self-employed, looking for work, or what?
6. Who is the main breadwinner in your household - you, someone else, or both you and someone else?
7. Who is the (other) main breadwinner?
8. And which one of those people made the most money?
9. Is [MAIN BREADWINNER] employed, self-employed, looking for work, disabled, a student, a homemaker, retired, or something else?
10. Is the current employment situation in your household BETTER, WORSE, or ABOUT THE SAME as it was before the hurricane[s]?
11. Is that a lot [BETTER/WORSE], somewhat, or only a little [BETTER/WORSE] than before the hurricane[s]?

DEMOGRAPHICS SECTION

1. The next question is about the total income of your household before taxes in the past 12 months, including income from all sources, such as wages, salaries, investment income, income from Social Security and retirement benefits, help from relatives, and so forth. Was your total household income in the past 12 months less than 20,000 dollars, between 20 and 40,000, between 40 and 80,000, or more than 80,000 dollars? BRANCHES DEPENDING ON RESPONSE: Was it less than 5000, between 5 and 10, between 10 and 15, or more than 15,000? Was it less than 25 thousand, between 25 and 30, between 30 and 35, or more than 35 thousand? Was it less than 50 thousand, between 50 and 60, between 60 and 70, or more than 70 thousand? Was it less than 100 thousand, between 100 and 150, or more than 150,000?

HEAD START

1. Last time we interviewed you, you told us you lived with [NUMBER FROM PREVIOUS INTERVIEW] [child aged/children ages] 4 to 5 years old in the 12 months before the hurricane[s]. Is this correct?
2. How many children ages 4 to 5 years old were living with you in the year before the hurricane[s]?
3. The next questions are about Head Start. Head Start is a federally sponsored preschool program primarily for children from low-income families. In the 12 months before the hurricane[s], did

[either of/any of] the four-or-five-year-old [child/children] in your pre-hurricane household receive any services from HEAD START?

4. How many of those children were in Head Start at any time in the 12 months before the hurricane[s]?
5. How would you rate Head Start services in your community in the 12 months before the hurricane[s]?
6. For how many days, weeks, or months after the hurricane[s] were there either delays or difficulties continuing to receive Head Start services?
7. And what about now? [Does/Do] [either of/any of] the four-or-five-year-old [child/children] in your current household receive any services from HEAD START right now?
8. How many of these children are in Head Start right now?
9. How would you rate Head Start services in your community in the past 12 months?
10. Why [doesn't the four or five year old child/don't the four or five year old children] in your current household receive Head Start?
11. Would you say the Head Start program is BETTER than it was before the hurricane[s], WORSE, or ABOUT THE SAME as before the hurricane[s]?
12. Would that be a lot [BETTER/WORSE], somewhat, or only a little [BETTER/WORSE] than before the hurricane[s]?

EARLY HEAD START

1. Last time we interviewed you, you told us you lived with [NUMBER FROM PREVIOUS INTERVIEW] [child/children] younger than four years old in the 12 months before the hurricane[s]. Is this correct?
2. How many children younger than four years old were living with you in the 12 months before the hurricane[s]?
3. The next question is about Early Head Start. [Head Start is a federally sponsored program primarily for children from low-income families.] Early Head Start expands the services of Head Start to low-income families with children younger than four years old, and to pregnant women. In the 12 months before the hurricane[s], did [either of/any of] the under four year old [child/ children] in your pre-hurricane household receive any services from EARLY HEAD START?
4. How many of those children were in Early Head Start at any time in the 12 months before the hurricane[s]?
5. How would you rate Early Head Start services in your community in the 12 months before the hurricane[s]?
6. For how many days, weeks, or months after the hurricane[s] were there either delays or difficulties continuing to receive Early Head Start services?
7. And what about now? [Does/Do] [either of/any of] the under four-year old [child/children] in your current household receive any services from EARLY HEAD START right now?
8. How many of these children are in Early Head Start right now?
9. How would you rate the Early Head Start services in your community in the past 12 months?
10. Why [doesn't the under-four-year-old child/don't the under-four-year-old children] in your current household receive Early Head Start services?
11. Would you say the Early Head Start program is BETTER than it was before the hurricane[s], WORSE, or ABOUT THE SAME as before the hurricane[s]?
12. Would that be a lot [BETTER/WORSE], somewhat, or only a little [BETTER/WORSE] than before the hurricane[s]?

CHILD CARE SERVICES

1. Last time we interviewed you, you told us you lived with [NUMBER FROM PREVIOUS INTERVIEW] [child/children] under 13 years old before the hurricane[s]. Is this correct?
2. How many children under 13 years old were living with you in the year before the hurricane[s]?
3. The next question is about Child Care. In the 12 months before the hurricane[s], did [either of/any of] the [child/children] under 13 years old in your pre-hurricane household receive child care from someone other than a parent, for example in your own or someone else's home, with relatives, or in a center?
4. How many of those children received child care from someone other than a parent at any time in the 12 months before the hurricane[s]?
5. Was the child care provider paid for taking care of your [child/children]?
6. Did someone in your household pay the full amount for this child care; did a government or community agency help to pay for some of the cost of the child care; or did a government or community agency pay the full amount of the care?
7. What was the name of the government program or community agency that [helped pay/paid] for child care?

8. How would you rate child care services in your community in the 12 months before the hurricane[s]?
9. For how many days, weeks, or months after the hurricane[s] were there either delays or difficulties continuing to receive child care?
10. The next questions are about Child Care that children receive from someone other than a parent, for example in their own or someone else's home, with relatives, or in a center. [Does/Do] [either of/any of] the under thirteen year-old [child/children] in your current household receive any child care from someone other than a parent right now?
11. How many of these children currently receive childcare from someone other than a parent?
12. Is the child care provider paid for taking care of your [child/children]?
13. Does someone in your household pay the full amount for this child care; does a government or a community agency help pay for some of the cost of the child care; or does a government or community agency pay the full amount of the care?
14. What is the name of the government program or community agency that [helps pay/pays] for child care in your household?
15. How would you rate the child care services in your community in the past 12 months?
16. Why does your household no longer receive assistance from the government or a community agency to help pay for child care from someone other than a parent?
17. Would you say the child care services your household receives from someone other than a parent are BETTER than they were before the hurricane[s], WORSE, or ABOUT THE SAME as before the hurricane[s]?
18. Would that be a lot [BETTER/WORSE], somewhat, or only a little [BETTER/WORSE] than before the hurricane[s]?

TEMPORARY ASSISTNACE FOR NEEDY FAMILIES (TANF) SECTION

NOTE: Temporary Assistance for Needy Families (TANF) often has different names in each state. The reference to "TANFNAME1" AND "TANFNAME2" refer to the different names of TANF programs when a respondent lived in one state at the time of the first interview and now lives in a second state at the time of this interview. This is also why there are placeholders "STATENAME1" and "STATENAME2" in the section below. The interviewers had the information pre-loaded on their computers so that they did not have to be looking up state program names, etc.

1. Last time we interviewed you, you told us you lived with [NUMBER FROM PREVIOUS INTERVIEW] [child/children] under 18 years old before the hurricane[s]. Is this correct?
2. How many children under age 18 were living with you in the 12 months before the hurricane[s]?
3. The next question is about PUBLIC ASSISTANCE. In the 12 months before the hurricane[s] did your household ever receive PUBLIC ASSISTANCE payments in [STATENAME1], also known as TANF?
4. For how many of the children under age 18 did your household receive [TANFNAME1] payments in the 12 months before the hurricane[s]?
5. How would you rate the services related to [TANFNAME1] benefits in your community in the 12 months before the hurricane[s]?
6. For how many days, weeks, or months after the hurricane[s] were there either delays or difficulties continuing to receive [TANFNAME1] payments?
7. The next questions are about PUBLIC ASSISTANCE in [STATENAME2], also known as TANF /or [TANFNAME2]. Does your current household receive [TANFNAME2] payments?
8. For how many children does your household receive [TANFNAME2] payments?
9. How would you rate the services related to [TANFNAME2] benefits in your community in the past 12 months?
10. Why does your household no longer receive [TANFNAME1] payments?
11. Why isn't your household receiving payments from the [STATENAME2] public assistance program known as [TANFNAME2]?
12. [If received TANF at same program before and after hurricane] Would you say the services related to [TANFNAME2] benefits are BETTER than they were before the hurricane[s], WORSE, or ABOUT THE SAME as before the hurricane[s]?
13. [If received TANF in two different states] Would you say the [STATENAME2] [TANFNAME2] benefits your household is receiving now are BETTER, WORSE, or ABOUT THE SAME as the services related to the [STATENAME1] [TANFNAME1] benefits your household received before the hurricane[s]?
13. Would that be a lot [BETTER/WORSE], somewhat, or only a little [BETTER/WORSE] than before the hurricane[s]?

CHILD SUPPORT ENFORCEMENT SECTION

1. The next questions are about CHILD SUPPORT ENFORCEMENT SERVICES, also called "Child Support Services". These services include collection of child support payments, establishing a child support order, legally identifying a child's father, or locating a child's parent. In the 12 months before the hurricane[s] did your household ever receive CHILD SUPPORT SERVICES?

2. For how many of the children under age 18 did your household receive child support services at any time in the 12 months before the hurricane[s]?
3. How would you rate the child support services in your community in the 12 months before the hurricane[s]?
4. For how many days, weeks, or months after the hurricane[s] were there either delays or difficulties continuing to receive child support services?
5. The next questions are about CHILD SUPPORT ENFORCEMENT SERVICES, also called 'Child Support Services', such as collection of child support payments, establishing a child support order, legally identifying a child's father, or locating a child's parent. Does your current household receive child support services right now?
6. For how many of the children under age 18 does your household receive child support services right now?
7. How would you rate the child support services in your community in the past 12 months?
8. Why does your household no longer receive child support services?
9. Would you say the child support services are BETTER than they were before the hurricane[s], WORSE, or ABOUT THE SAME as before the hurricane[s]?
10. Would that be a lot [BETTER/WORSE], somewhat, or only a little [BETTER/WORSE] than before the hurricane[s]?

UNMET NEEDS SECTION

1. Not counting the programs and services we just talked about and not including housing needs, are there any other kinds of services or programs that the [child/children] in the household, or the household in general, [needs/need] but is not getting?
2. What services are they?

CONTACT INFORMATION

1. In order to keep in touch with you in the future, we need to update your contact information. Before we go to our last set of questions which are about individual children in the household we need to update the contact information we have for you.
2. I have that the email address you check regularly is [EMAIL]. Is that correct?
3. When we last spoke we didn't get an email address from you. Do you have one now that you check regularly?
4. What is your email address?
5. I have your cell phone number as [(###) ### - ####]. Is that correct?
6. When we last spoke we didn't get a cell phone number from you. Do you have a cell phone number?
7. What's your correct cell phone number?
8. In order to help us find you if you move or we lose track of you, could you give us the names and contact information for three friends or relatives who would know where you are if you moved?
9. The last time we spoke you gave me the contact information for [# of Contacts] friend(s) or relative(s) who would know where you are if you move and we lose track of you. I'd like to confirm their name[s], address[es], and telephone number[s] to make sure they are still at the same place.
10. Last year we mailed you a card to keep in your [wallet/purse] that contains the project's toll-free phone number and web address. Do you still have that card?
11. I would like to confirm your full name and mailing address in order to have a new card mailed to you.

FINAL QUESTIONS TO ASK

1. Please remember to call our toll-free number if you ever move to help us find you the next time we need to do an interview. As you know, the goal of our study is to assess the needs of people affected by the hurricane[s]. Given that goal, is there anything you think I should have asked you that I didn't ask about the current needs of people like you who were affected by the hurricane[s]?
2. How would you have answered that question if I had asked it?

CHILD QUESTIONS

In this reinterview we were able to ask, for the first time, about how individual children were affected by Katrina, how they were faring now, and what needs they might have that were not being

met. We asked about up to 2 children per household that had children in the range 4 to 17 years old at the time of this interview. In households where there were more than 2 children we used a detailed series of questions to identify all children and then to select the two to ask the questions about. The procedure ensured that the children asked about were representative of all possible children we could have interviewed, in terms of age and sex. Also, we only asked a parent, step-parent, or guardian about children. If our main respondent for a household did not have one of these three roles for the children in the household, we would interview the appropriate adult for this series of questions. First that adult would be provided with description of the study and provided with informed consent.

1. What's your relationship to [CHILD], are you a parent, step-parent, sibling, or some other relationship?
2. Are you [CHILD]'s legal guardian?
3. My next questions are about how [CHILD] has been affected by the hurricane[s]. I will need to speak to [CHILD]'s parent, step-parent or legal guardian to ask these questions. Is there a parent, step-parent or legal guardian of [CHILD] living with you?
4. Would that be [CHILD]'s mother, father, step-mother, step-father or legal guardian?
5. What is the first name of [CHILD]'s [MOTHER/FATHER/STEP-MOTHER/STEP-FATHER/LEGAL GUARDIAN]?)
6. Is [she/he/(she/he)] at home right now and able to come to the phone?

CHILD ROLE FUNCTIONING

1. As you know, many people are concerned about the impact of the hurricane[s] on children. I'd like to ask you some questions about [CHILD]. The first few questions are about how [CHILD] was doing in various areas of life in the 12 months before the hurricane[s]. The response categories I'd like you to use are EXCELLENT, VERY GOOD, GOOD, FAIR, and POOR. In the 12 months before the hurricane[s], how would you rate [CHILD]'s: relationships with other kids of a similar age? behavior in terms of obeying rules and staying out of trouble? performance at school? physical health? mental health?
2. Would you say [CHILD]'s...relationships with other kids of a similar age / behavior in terms of obeying rules and staying out of trouble / performance at school / physical Health / mental health ...have been BETTER, WORSE, or ABOUT THE SAME in the past 12 months as in the 12 months before the hurricane[s]?
3. In the 12 months before the hurricane[s], did [CHILD] ever have any special school classes or school services for children with learning problems or behavior problems or emotional problems?
4. Does [CHILD] CURRENTLY have any special school classes or school services for children with learning problems or behavior problems or emotional problems?
5. The next question is about days of school missed by [CHILD] in a typical month in the 12 months before the hurricane[s]. About how many days out of 20 school days did [CHILD] miss from school for any reason in a typical month in the 12 months before the hurricane[s]?
6. The next question is about days of school missed by [CHILD] during the past month. About how many days out of 20 school days did [CHILD] miss from school for any reason in the past month?
7. Now I want you to think about all the things [CHILD] has gone through because of the hurricane[s]. On a zero to ten scale where 0 means "not at all stressful" and ten means "the most stressful thing you can imagine," what number best describes how stressful the experiences caused by the hurricane[s] have been to [CHILD]?
8. What do you think the MOST stressful things were for [CHILD] at the time of the hurricane[s] and the first few months after the hurricane[s]?
9. What do you think the most stressful things have been for [CHILD] in the past 12 months?

CHILD PHYSICAL HEALTH SECTION

1. You said earlier that [CHILD]'s physical health before the hurricane[s] was [FAIR/POOR]. What kinds of physical health problems did [CHILD] have?
2. You said earlier that [CHILD]'s physical health has been worse in the past 12 months than before the hurricane[s]. What kinds of physical health problems has [he/she] had in the past 12 months?

CHILD HEALTH CARE UTILIZATION SECTION

1. About how many times did [CHILD] see a doctor for a physical health problem in the past 12 months?
2. And about how many times do you estimate [CHILD] WOULD HAVE seen a doctor during the same time period if the hurricane[s] had never occurred?
3. What are the main reasons [CHILD] saw a doctor less often than [he/she] would have if the hurricane[s] had not happened?

CHILD MENTAL HEALTH SECTION

1. The next questions are about [CHILD]'s emotions and behavior in the PAST 12 MONTHS. I'm going to read a series of statements and I'd like you to tell me if each one has been NOT true, SOMEWHAT true, or VERY true of [CHILD] in the past 12 months. Here's the first one, in the past 12 months has [CHILD]: had many worries or often seemed worried? often been unhappy, depressed, or tearful? stolen things from home or school or elsewhere? often lied or cheated? often lost [his/her] temper? generally been well behaved and usually did what adults requested of [him/her]? been restless, overactive, and could not stay still for long? seen [his/her] chores or homework through to the end and had a good attention span? been generally liked by other [children/youth]? gotten along better with adults than with other [children/youth]?
2. Overall, would you rate [CHILD]'s difficulties with emotions, concentration, behavior, or getting along with others in the past 12 months as SEVERE, MODERATE, or MILD?
3. How much do you think the hurricane[s] caused these difficulties?

CHILD SUBSTANCE USE SECTION

1. Does [CHILD] smoke cigarettes?
2. Does [he/she] drink alcohol?
3. Does [he/she] use marijuana, cocaine, or other illegal drugs?
4. For the next few questions, I will refer to [CHILD]'s use of [alcohol/ (or) / marijuana, cocaine or other illegal drugs] as "substance use". During the past 12 months, how often did [CHILD]'s substance use interfere with [his/her] responsibilities at school, home, or on a job?
5. How often in the past 12 months did [his/her] substance use cause arguments or other serious problems with [his/her] family, friends, or neighbors?
6. How often in the past 12 months was [CHILD] under the influence of [alcohol/ (or) /drugs] in situations where [he/she] could get hurt, like when riding a bike or walking in a dangerous area or using a machine?
7. How often in the past 12 months did [CHILD] get stopped by the police or get in trouble with the police because of [his/her] substance use?
8. Would you rate [CHILD]'s substance use problems over the past 12 months as SEVERE, MODERATE, or MILD?
9. How much [is the hurricane/are the hurricanes] responsible for [CHILD]'s substance problems?

CHILD MENTAL HEALTH TREATMENT SECTION

1. Since the hurricane[s], has [CHILD] received any sort of professional counseling for problems with [his/her] emotions, nerves, mental health or substance use?
2. What kind of professional did [CHILD] see?
3. How many sessions of psychological counseling or psychotherapy did [CHILD] receive since the hurricane[s]?
4. Is [CHILD] still going to counseling or psychotherapy sessions or has [he/she] stopped?
5. Since the hurricane[s], has [CHILD] taken a prescription medicine for problems with [his/her] emotions, nerves mental health or substance use?
6. What were the reasons [CHILD] stopped [his/her] counseling or psychotherapy sessions?
7. What prescription medications has [CHILD] taken since the hurricane[s] for problems with [his/her] emotions, nerves, mental health or substance use?
8. About how many days out of the past 365 did [CHILD] take [DRUG NAME]?
9. Has [CHILD] taken any other prescription medications for problems with [his/her] emotions, nerves, mental health or substance problems?
10. Who prescribed [this medication/these medications]?
11. Is [CHILD] still taking [this medication/these medications] or has [he/she] stopped?
12. What were [CHILD]'s reasons for stopping [(his/her) counseling or psychotherapy sessions and] medication?
13. Was there a time since the hurricane[s] when you felt that [CHILD] might need to see a professional because of problems with [his/her] emotions, nerves, mental health or substance use?
14. What were the reasons for [CHILD] not seeing a professional?
15. The next question is about any treatment for emotional problems or alcohol or drug problems [CHILD] might have received in the 12 months BEFORE the hurricane[s], including either medication, counseling, or both. Did [CHILD] receive any treatment for emotional problems or substance problems at any time in the 12 months before the hurricane[s]?
16. About how many times in the 12 months BEFORE the hurricane[s] did [CHILD] see a professional about problems with [his/her] emotions, concentration, behavior, or substance use?

17. In the 12 months BEFORE the hurricane[s], did [CHILD] take any prescription medicine for problems with [his/her] emotions, concentration, or behavior?
18. What prescription medications of this sort did [CHILD] take?
19. About how many days out of the 365 days before the hurricane[s] did [CHILD] take [DRUG NAME]?
20. Did [CHILD] take other prescription medications for problems with [his/her] emotions, concentration or behavior?
21. A lot of people had problems getting their medications refilled after the hurricane[s] because their drug store was closed, their records lost, or they couldn't find their doctor to get a new prescription. Did you have any problems of this sort with [CHILD]'s medication?
22. How long did [CHILD] go without medication because you could not get the refill?
23. We are very interested in the problems people had getting medications refilled, so I want you to give me specific details about this problem. Please describe in detail the problems you faced in getting [CHILD]'s prescriptions filled. Which of these problems caused [CHILD] to go without medication?

NOTE: If household has more than one child, then we repeat the child questions that were used above for this second child. See the sections CHILD ROLE FUNCTIONING through MENTAL HEALTH TREATMENT SECTION

ADDITIONAL DEMOGRAPHICS AND INTERVIEW END FOR ADULT WHO IS NOT MAIN RESPONDENT

NOTE: These questions were only asked of an adult who was not our main respondent, i.e. in the situations where there were children in the household, but our main respondent was not the parent, step-parent, or guardian of the child(ren).

1. In order to interview you again in the coming months about how your [child is/children are] doing, I want to make sure we have some information about you.
2. Can I get your full name?
3. Is your mailing address the same as [ADDRESS]?
4. Do you have an email address that you check regularly? What's the address?
5. Are you a male or female? (*if necessary*)
6. How old are you?
7. Are you currently married, separated, divorced, widowed, or never married?
8. Are you currently living with someone in a marriage-like relationship?
9. Are you of Hispanic or Latino origin?
10. Which of the following categories best describes your racial background...
11. What is the highest degree or level of school you completed?
12. What is the highest degree or level of school your [spouse/partner] completed?