National Inmate Survey: Year 3
Questionnaire Specifications for 90% Sample
2/26/2013

A1 TYPE OF INTERVIEW:
1 ENGLISH MALE
2 ENGLISH FEMALE
3 SPANISH MALE
4 SPANISH FEMALE

INTRO As I mentioned before, the National Inmate Survey is a research study being done by the Bureau of Justice Statistics and RTI International, a not-for-profit research organization in North Carolina.

This interview will take about 35 minutes. Your name will never be connected with the information you provide in this interview. We will treat everything you say as private and confidential. We will not share any information you provide with anyone outside or at the facility or anyone who is not working on the project.

OMB INTERVIEWER: IF RESPONDENT ASKS ANY QUESTIONS ABOUT OMB APPROVAL FOR THIS STUDY, YOU MAY READ THE INFORMATION BELOW. OTHERWISE TOUCH THE NEXT BUTTON TO GO TO THE NEXT SCREEN.

Notice: Public reporting for this collection of information is estimated to average 35 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Director, Bureau of Justice Statistics, 810 Seventh Street, NW, Washington, DC 20531. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 1121-0311.

I1 FACILITY ID

_____

I2 ENTER YOUR INTERVIEWER ID NUMBER:

_____ [ALLOW 6 DIGITS]

I3 IS AN INCENTIVE BEING OFFERED TO INMATES AT THIS FACILITY?

1 YES
2 NO

Section A – Demographics (CAPI)

A2 In what year were you born?

4-DIGIT YEAR: _____
DK/REF

DEFINE CALCAGE:
CALCAGE = AGE CALCULATED BY SUBTRACTING A2 YEAR FROM CURRENT YEAR.

A3 [IF A2 NE (DK OR REF)] Are you CALCAGE – 1 or CALCAGE?

1 CALCAGE – 1
2 CALCAGE
DK/REF

NOTE TO PROGRAMMER: The actual age should be written to the file in addition to the respondent's actual answer to A3.

A4 [IF (A2=DK OR REF) OR A3 = DK OR REF] How old are you?

AGE: _____
DK/REF

NOTE: IF A4 NE BLANK, THEN REDEFINE CALCAGE = A4

I4 [IF CALCAGE < 18] HAS THIS FACILITY APPROVED PARTICIPATION FOR 16 AND 17-YEAR OLDS?

NOTE: THIS INFORMATION IS INCLUDED IN SECTION ? OF THE FACILITY LOGISTICS PLAN.

1 YES
2 NO

A4a [IF CALCAGE < 16 AND I4 = 1] Thank you for your willingness to participate, but we cannot interview anyone who is younger than 16 for this study.

[IF CALCAGE < 18 AND 14 = 2] Thank you for your willingness to participate, but we cannot interview anyone who is younger than 18 for this study.

PRESS NEXT BUTTON TO END INTERVIEW.

Note to Programmers: Route these cases to M20

A4b [IF A4 = DK/REF] Thank you for your willingness to participate, but we cannot interview if we don't know how old you are.

PRESS NEXT BUTTON TO END INTERVIEW.

Note to Programmers: Route these cases to M20

B1. How old were you the **first time** you were arrested or taken into custody for any offense?

AGE: _____ [RANGE: 6 – CALCAGE]
DK/REF

A5 When were you admitted to this facility?

A5a. 2-DIGIT MONTH: _____ [RANGE: 1 – 12] DK/REF
A5b. 2-DIGIT DAY: _____ [RANGE: 1 – 31] DK/REF
A5c. 4-DIGIT YEAR: _____ [RANGE: 1915 – current year] DK/REF

A6 [IF A5a = DK/REF AND A5c NE DK OR REF] What time of year was it? Was it winter, spring, summer, or fall when you were admitted to this facility?

1 WINTER
2 SPRING
3 SUMMER
4 FALL
DK/REF

DEFINE CALCTIME:
CALCTIME = CALCULATED BY "SUBTRACTING" DATE OF INCARCERATION FROM DATE OF INTERVIEW AND THEN ROUNDING. (less than 2 months report as days; 2 – 11 months report as months; 12 months or more round to nearest year)

DEFINE DOAFILL1:
If facility admission date is at least 12 months ago then DOAFILL1 = During the past 12 months
If facility admission date is less than 12 months ago then DOAFILL1 = Since you arrived at this facility

DEFINE DOAFILL2:
If facility admission date is at least 12 months ago then DOAFILL2 = during the past 12 months
If facility admission date is less than 12 months ago then DOAFILL2 = since you arrived at this facility

A7 [IF CALCTIME NE MISSING] That means you have been here for about [CALCTIME]. Is that correct?

1 YES
2 NO

A8 [IF (A5c=DK OR REF) OR A7 = 2] How long have you been in this facility?

INTERVIEWER: PROBE THOROUGHLY TO AVOID A DK OR REFUSE RESPONSE IF AT ALL POSSIBLE.

1 LESS THAN 1 WEEK
2 AT LEAST 1 WEEK BUT LESS THAN 1 MONTH
3 AT LEAST 1 MONTH BUT LESS THAN 2 MONTHS
4 AT LEAST 2 MONTHS BUT LESS THAN 6 MONTHS
5 AT LEAST 6 MONTHS BUT LESS THAN 1 YEAR
6 AT LEAST 1 YEAR BUT LESS THAN 5 YEARS
7 AT LEAST 5 YEARS BUT LESS THAN 10 YEARS
8 10 YEARS OR MORE
DK/REF

UPDATE DOAFILL1:

IF A8 = 1 – 5 THEN DOAFILL1 = Since you arrived at this facility
IF A8 = 6 – 8 OR DK OR REF, THEN DOAFILL1 = During the past 12 months

UPDATE DOAFILL2:

IF A8 = 1 – 5 THEN DOAFILL2 = since you arrived at this facility
IF A8 = 6 – 8 OR DK OR REF, THEN DOAFILL2 = during the past 12 months

A9. Which of the following best describes the housing unit where you spent last night?

1 An open dorm
2 A dorm with cubicles
3 A unit with cells
4 A unit with rooms
5 An area not originally intended as housing, such as a gym, classroom, or day room
6 Administrative segregation or solitary confinement
7 NONE OF THESE
DK/REF

A10. How tall are you?

Feet: _____

Inches: _____

DK/REF

[NOTE TO PROGRAMMERS: THIS ITEM CAN BE COPIED FROM THE YEAR 1 INSTRUMENT.]

SECTION C: ACASI Tutorial

C1 [NO AUDIO REQUIRED] You will complete the rest of this interview on your own using the computer and headphones. Before you start, we'll go through a short practice session together so you can learn how to use this computer to answer the interview questions. After this introduction, I will move away from the computer and will not be able to see your answers so that you can take the interview in privacy.

You do not need the mouse or keyboard to answer questions. You can simply touch the buttons on the screen using your finger.

MOVE COMPUTER SO RESPONDENT CAN SEE THE SCREEN.
For each question, the answers will appear as buttons on the screen, like these yes and no buttons. POINT TO YES AND NO BUTTONS ON SCREEN. To choose an answer you will need to use your finger to touch the button for your answer on the computer screen, like this.
PRESS **YES** BUTTON.
After you choose your answer, you must touch the **NEXT** button at the bottom of the screen. TOUCH THE **NEXT** BUTTON.

C2 [NO AUDIO REQUIRED] If you want to go back to the previous question, this is the **BACK** button. POINT TO BACK BUTTON.

Now I will show you how to use the back button to go back to the previous question and change the answer to no.

NOW DEMONSTRATE USE OF BACK BUTTON BY PRESSING IT TO GO BACK TO THE PREVIOUS SCREEN AND CHANGE YOUR ANSWER TO NO. THEN RETURN TO THIS SCREEN BY PRESSING NEXT.

You can also use the back button to see your previous answer without changing it.

If you don't know the answer to the question, touch the **DON'T KNOW** button [POINT TO DON'T KNOW] at the bottom of the screen and you will go on to the next question. PRESS **DON'T KNOW** BUTTON.

C3 [NO AUDIO REQUIRED] If you don't want to answer the question, you can touch the **REFUSE** button [POINT TO THE REFUSE BUTTON]and you will go on to the next question. PRESS **REFUSE** BUTTON.

C4 [NO AUDIO REQUIRED] If you want the computer to read the question again, you can press the REPEAT button [POINT TO REPEAT BUTTON].

C5 [NO AUDIO REQUIRED] You can adjust the volume here [DEMONSTRATE VOLUME ADJUSTMENT, ON THE HEADPHONE CORD]. Or if you want to turn the volume off you can adjust it on your headphones or take your headphones off.

Please put on your headphones. When you are ready, let me know.

MOVE COMPUTER SO RESPONDENT CAN USE IT. ONCE RESPONDENT HAS HEADPHONES ON, TOUCH THE **NEXT** BUTTON SO RESPONDENT CAN BEGIN PRACTICE SESSION.

PLAY AUDIO FOR ALL FOLLOWING SCREENS

C6 This screen will play while you adjust the volume in your headphones. When you have adjusted the volume to a level that is comfortable to you, touch the **NEXT** button on the bottom of your screen to continue with the practice session.

C7 Welcome to RTI's self-interviewing system, which lets you control the interview and answer in complete privacy. In this system, you can read the questions on the computer screen and hear them read through the headphones. Nobody, not even your interviewer will know how you answer the questions. [IF CALAGE = 16 OR 17] Because you are under 18 I want to remind you that if you speak to your interviewer about any abuse you have experienced at this facility she or her supervisor may need to report it to the agency in this state that investigates abuse.

First, you will learn how to use the system and complete some practice questions. You will learn how to enter answers and how to back-up if you make a mistake and want to change an answer.

If you would like to just see the questions on the screen, you can turn off the voice on your headphones or take them off.

Touch the large **NEXT** button on the bottom of your screen.

C8 After you hear the question, you will hear the possible answers. Each answer will be highlighted as it is read. To answer the question, you simply use your finger to touch the button on the screen with your answer on it and then touch the **NEXT** button.

Do you like ice cream?

Yes
No

C9 The last question was a Yes-No question. Other questions will have more answers to choose from, and you will pick your answer from a list.

What is your favorite color? Touch the answer button on the screen that best fits you and then touch the NEXT button.

Blue
Red
Yellow
Green
Some other color

C10 For some questions you will enter your answer using a keypad like the one shown below. Try using the keypad to answer the question below. If you need to change your answer touch the '**Clear**' button to remove what you have already entered and then put in a new answer.

How many brothers and sisters do you have?

NUMBER: _____ [RANGE: 0 – 999]

C11 Sometimes there will be more than one question to answer on a screen like the example shown below. For these questions the answer choices and the Refused and Don't Know buttons are shown to the right of each question. Try answering the questions below and then press the **NEXT** button to go to the next screen.

Has a doctor or other health care provider **ever** told you that you are allergic to…

Pollen?	Y/N/DK/REF
Dust?	Y/N/DK/REF
Mold?	Y/N/DK/REF

C13 You can tell the computer to repeat a question by touching the **REPEAT** button**.** Try this now.

How many times did you listen to this question?

I have listened to this screen more than once.
I have only listened to this screen one time

C14 If you have any questions, ask your interviewer now. If not, tell the interviewer you are ready to begin and she will move away from the computer. Touch the **NEXT** button when you are ready to begin.

CONTINUATION OF SECTION A: DEMOGRAPHICS

A11 Are you of Hispanic, Latino, or Spanish origin?

1 Yes
2 No
DK/REF

A12 [IF A11 = 1] Which of these categories describes your origin or descent?

	Yes	No
A12a. Mexican-American?	1	2
A12b. Mexican?	1	2
A12c. Cuban?	1	2
A12d. Puerto Rican or other Caribbean?	1	2
A12e. Central or South American Spanish?	1	2
A12f. Some other Spanish group?	1	2

A13 Which of these categories describes your race?

You many answer yes to one or more of these categories.

	Yes	No
A13a. White?	1	2
A13b. Black or African American?	1	2
A13c. American Indian or Alaska Native?	1	2
A13d. Asian?	1	2
A13e. Native Hawaiian or other Pacific Islander?	1	2

A16 How much do you **currently** weigh in pounds?

CURRENT WEIGHT: _____ [RANGE: 50 – 700]
DK/REF

A17 Did you graduate from high school?

1 Yes
2 No
DK/REF

A18 [IF A17 = 1] Did you receive a high school diploma or a GED for finishing high school?

1 HIGH SCHOOL DIPLOMA
2 GED
DK/REF

A19 [If A17 = 2] Did you receive a GED?

1 Yes
2 No
DK/REF

A20 [IF A17 =1 OR A19 =1] What is the highest level of school you have completed?

1 High School or GED
2 Some college but you did not receive a degree
3 Associate Degree
4 Bachelor's Degree
5 An advanced degree such as a Master's, MBA, or PhD
DK/REF

A21 [IF A17 =2 AND A19 =2] Did you attend high school?

1 Yes
2 No
DK/REF

Section V – Veteran Status

The next questions are about service in the United States Armed Forces.

V1. Have you **ever** served in the United States Armed Forces?

1 Yes
2 No
DK/REF

V2. [IF V1 = 1 OR DK OR REF] Have you served in the…

	Yes	No
V2a Army, including the Army National Guard or Reserve?	1	2
V2b Navy, including the Reserve?	1	2
V2c. Marine Corps, including the Reserve?	1	2
V2d. Air Force, including the Air National Guard or Reserve?	1	2
V2e. Coast Guard, including the Reserve?	1	2

V3. [IF V1 = 1 OR V2a = 1 OR V2b = 1 OR V2c = 1 OR V2d = 1 OR V2e = 1] In what year did you **first** enter the United States Armed Forces? Use the keypad below to enter the year.

YEAR: ___ [RANGE: 1920 – CURRENT YEAR]
DK/REF

V4. [IF V1 = 1 OR V2a = 1 OR V2b = 1 OR V2c = 1 OR V2d = 1 OR V2e = 1] Are you **currently** serving in the United States Armed Forces?

1 Yes
2 No
DK/REF

V5. [IF V4 = 2] In what year were you last discharged from the United States Armed Forces? Use the keypad below to enter the year.
YEAR: ___ [RANGE: 1920 – CURRENT YEAR]
DK/ERF

V6a. [IF V4 = 1] While serving in the United States Armed Forces, have you seen combat in a line or combat unit?

[IF V4 = 2 OR DK/REF] While you were serving in the United States Armed Forces, did you see combat in a line or combat unit?

1 Yes
2 No
DK/REF

V6b. [IF V6a = 1] Did you see combat in a line or combat unit in…

	Yes	No
V6b1. World War II?	1	2
V6b2. the Korean Conflict?	1	2
V6b3. the Vietnam War?	1	2
V6b4. the Persian Gulf War?	1	2
V6b5. Afghanistan?	1	2
V6b6. Iraq	1	2
V6b7. Some other military operation which may include peacekeeping operations	1	2

V7. [IF V4 = 1] Altogether, how much time have you served in the United States Armed Forces?

[IF V4 = 2 OR DK/REF] Altogether, how much time did you serve in the United States Armed Forces?

1 Less than 1 year
2 At least one year but less than 3 years
3 At least 3 years but less than 5 years
4 At least 5 years but less than 10 years
5 At least 10 years but less than 15 years
6 At least 15 years but less than 20 years
7 20 years or more
DK/REF

V8. [IF V4 = 2] What type of discharge did you receive from the United States Armed Forces?

1 Honorable
2 General under honorable conditions
3 Other than honorable
4 Bad conduct
5 Dishonorable
6 Some other type of discharge
DK/REF

Section B – Criminal History

B0. These next questions are about your experience with crime and the criminal justice system.

Touch the NEXT button to go to the next screen.

B2. Altogether, how many times have you been arrested or taken into custody for any offense?

1 One time
2 2-3 times
3 4-10 times
4 11 times or more
DK/REF

B3. Before you were admitted to this facility, had you ever spent time as an adult or juvenile in a prison, jail, or other correctional facility?

1 Yes
2 No
DK/REF

B3a. [IF B3 = 1 OR DK OR REF] Before you were admitted to this facility, how much time altogether had you spent as an adult or juvenile in a prison, jail, or other correctional facility?

1 Less than 30 days
2 At least 30 days but less than 6 months
3 At least 6 months but less than 1 year
4 At least 1 year but less than 5 years
5 5 years or more
DK/REF

B4. [IF I0 = 1] Are you **currently** in this facility because you have been sentenced to serve time for an offense?

1 Yes
2 No
DK/REF

B5. [IF B4 = 2 OR DK OR REF] Are you currently being held in this facility for a property offense? Property offenses include crimes like burglary, larceny, theft, auto theft, bad checks, fraud, forgery, arson, or possession of stolen goods.

1 Yes
2 No
DK/REF

B6. [IF B4 = 2 OR DK OR REF] Are you currently being held in this facility for a drug offense? Drug offenses include crimes like possessing, selling, trafficking, importing, smuggling, or manufacturing illegal drugs or drug paraphernalia.

1 Yes
2 No
DK/REF

B7. [IF B4 = 2 OR DK OR REF] Are you currently being held in this facility for a violent offense? Violent offenses include crimes like physical or sexual assault, rape, robbery, manslaughter, murder, attempted murder, or kidnapping.

1 Yes
2 No
DK/REF

B8. [IF B4 = 2 OR DK OR REF] Are you currently being held in this facility for other crimes against people? Other crimes against people include crimes like vehicular homicide, hit and run, reckless endangerment, child neglect, harassment, or stalking.

1 Yes
2 No
DK/REF

B9. [IF B4 = 2 OR DK OR REF] Are you currently being held in this facility for a sexual offense? Sexual offenses include crimes like rape, statutory rape, sexual assault, child molestation, pornography, incest, or indecent exposure.

1 Yes
2 No
DK/REF

B10. [IF B4 = 2 OR DK OR REF] Are you currently being held in this facility for a probation or parole violation?

1 Yes
2 No
DK/REF

B11. [IF B4 = 2 OR DK OR REF] Are you currently being held in this facility for a procedural violation? Procedural violations include things like failure to appear in court, violating a restraining order, failure to obey a lawful order of a police officer, contempt, escape, resisting arrest without violence, or a regulatory or tax offense.

1 Yes
2 No
DK/REF

B12. [IF B4 = 2 OR DK OR REF] Are you currently being held in this facility for driving under the influence or driving while intoxicated?

1 Yes
2 No
DK/REF

B13. [IF B4 = 2 OR DK OR REF] Are you currently being held in this facility for some other offense? Other offenses include crimes like loitering, prostitution, gambling, drunkenness, disorderly conduct, trespassing, minor traffic violations, weapons charges, or immigration violations.

1 Yes
2 No
DK/REF

B14. [IF I0 = 2 OR IF B4 = 1] Are you currently serving time in this facility for a property offense? Property offenses include crimes like burglary, larceny, theft, auto theft, bad checks, fraud, forgery, arson, or possession of stolen goods.

1 Yes
2 No
DK/REF

B15. [IF I0 = 2 OR IF B4 = 1] Are you currently serving time in this facility for a drug offense? Drug offenses include crimes like possessing, selling, trafficking, importing, smuggling, or manufacturing illegal drugs or drug paraphernalia.

1 Yes
2 No
DK/REF

B16. [IF (I0 = 2 OR IF B4 = 1] Are you currently serving time in this facility for a violent offense? Violent offenses include crimes like physical or sexual assault, rape, robbery, manslaughter, murder, attempted murder, or kidnapping.

1 Yes
2 No
DK/REF

B17. [IF I0 = 2 OR IF B4 = 1] Are you currently serving time in this facility for other crimes against people? Other crimes against people include crimes like vehicular homicide, hit and run, reckless endangerment, child neglect, harassment, or stalking.

1 Yes
2 No
DK/REF

B18. [IF I0 = 2 OR IF B4 = 1] Are you currently serving time in this facility for a sexual offense? Sexual offenses include crimes like rape, statutory rape, sexual assault, child molestation, pornography, incest, or indecent exposure.

1 Yes
2 No
DK/REF

B19. [IF I0 = 2 OR IF B4 = 1] Are you currently serving time in this facility for a probation or parole violation?

1 Yes
2 No
DK/REF

B20. [IF I0 = 2 OR IF B4 = 1] Are you currently serving time in this facility for a procedural violation? Procedural violations include things like failure to appear in court, violating a restraining order, failure to obey a lawful order of a police officer, contempt, escape, resisting arrest without violence, or a regulatory or tax offense.

1 Yes
2 No
DK/REF

B21. [IF I0 = 2 OR IF B4 = 1] Are you currently serving time in this facility for driving under the influence or driving while intoxicated?

1 Yes
2 No
DK/REF

B22. [IF I0 = 2 OR IF B4 = 1] Are you currently serving time in this facility for some other offense? Other offenses include crimes like loitering, prostitution, gambling, drunkenness, disorderly conduct, trespassing, minor traffic violations, weapons charges, or immigration violations.

1 Yes
2 No
DK/REF

B23. [IF (I0 = 1 AND B4 =1) OR IF I0 = 2] Are you currently serving a life sentence or a life sentence without parole?

1 Yes
2 No
DK/REF

B24. [IF B23 = 2 OR DK OR REF] Are you currently serving a death sentence?

1 Yes
2 No
DK/REF

B25a. [IF (I0 = 1 AND B4 =1) AND (B24 = 2 OR DK OR REF)] What is your total maximum sentence length for all of the sentences you are serving?

1 Less than 30 days
2 At least 30 days but less than 6 months
3 At least 6 months but less than 1 year
4 At least 1 year but less than 5 years
5 5 years or more
DK/REF

B25b. [IF I0 = 2 AND (B24 = 2 OR DK OR REF)] What is your total maximum sentence length for all of the sentences you are serving?

1 Less than 1 year
2 At least 1 year but less than 5 years
3 At least 5 years but less than 10 years
4 At least10 years but less than 20 years
5 20 years or more
DK/REF

B26. [IF I0 = 1 AND B23 NE 1 AND B24 NE 1] Do you have a **definite date** on which you expect to be released from jail or prison?

[IF I0 = 2 AND B23 NE 1 AND B24 NE 1] Do you have a **definite date** on which you expect to be released from prison?

1 Yes
2 No
DK/REF

B27. [(IF B26 = 1 OR DK OR REF] How much more time do you think you will serve before you are released?

1 Less than 30 days
2 At least 30 days but less than 1 year
3 At least 1 year but less than 5 years
4 At least 5 years but less than 10 years
5 10 years or more
DK/REF

SECTION D: MISCELLANEOUS

D1 Are you currently married, widowed, divorced or separated, or have you never married?

1 Married
2 Widowed
3 Divorced
4 Separated (For reasons other than incarceration)
5 Never married
DK/REF

D2 Are you male, female, or transgender?

1 Male
2 Female
3 Transgender
DK/REF

D3 Before you entered this facility, about how many different partners had you ever had sex with? By sex we mean vaginal, oral, or anal sex.

1 0
2 1
3 2 – 4
4 5 – 10
5 11 – 20
6 21 or more
DK/REF

D4 [IF D3 NE 1] Before you entered this facility, had you had sex with men only, women only, or both men and women?

1 Men only
2 Women only
3 Both men and women
DK/REF

D5 Do you consider yourself to be heterosexual or 'straight', bisexual, or homosexual or gay?

1 'Straight,' which is also called Heterosexual
2 Bi-sexual
3 [D2 = 1] Homosexual or Gay
[D2 = 2 OR 3 OR DK OR REF] Homosexual, Gay, or Lesbian
4. Other
DK/RE

NOTE: Randomization occurs here. The remainder of this instrument shows routing only for the 90% sample.

D6 [IF GENDER=F] **Before you entered this facility,** had anyone ever physically forced you to have sex or sexual contact – that is unwanted touching of the breasts, genitals, or butt or vaginal, oral, or anal sex?

[IF GENDER=M] **Before you entered this facility,** had anyone ever physically forced you to have sex or sexual contact – that is unwanted touching of the genitals or butt or vaginal, oral or anal sex?

1 Yes
2 No
DK/REF

D7 [IF GENDER=F] **Before you entered this facility**, had anyone pressured you or made you feel you had to have sex or sexual contact – that is unwanted touching of the breasts, genitals, or butt or vaginal, oral, or anal sex?

[IF GENDER=M] **Before you entered this facility**, had anyone ever pressured you or made you feel you had to have sex or sexual contact – that is unwanted touching of the genitals or butt or vaginal, oral or anal sex?

1 Yes
2 No
DK/REF

DEFINE SEXTYPE1:
IF D6 = 1 AND D7 NE 1, SEXTYPE1 = "physically forced"
IF D6 NE 1 AND D7 =1, SEXTYPE1 = "pressured or made to feel that you had"
IF D6 = 1 AND D7 = 1, SEXTYPE1 = "physically forced, pressured, or made to feel that you had"
ELSE SEXTYPE1 = BLANK

D8 [IF D6 =1 OR D7 = 1] How many times were you [SEXTYPE1 FILL] to have sex or sexual contact before you entered this facility?

1 1 time
2 2 times
3 3 – 10 times
4 11 times or more
DK/REF

D8a [IF D8 = 3] How many times were you [SEXTYPE1 FILL] to have sex or sexual contact before you entered this facility?

1 3 times
2 4 times
3 5 times
4 6 times
5 7 times
6 8 times
7 9 times
8 10 times
DK/REF

D8b [IF D8 = 4] How many times were you [SEXTYPE1 FILL] to have sex or sexual contact before you entered this facility?

NUMBER OF TIMES: _____ [RANGE: 11 – 999]
DK/REF

D9 [IF D8 NE 1 AND SEXTYPE1 NE BLANK AND CALCAGE = 18 OR OLDER] Were you [SEXTYPE1 FILL] to have sex or sexual contact before you were 18 years old, after you turned 18, or both?

1 Before you were 18
2 After you turned 18
3. Both
DK/REF

D10 [IF D8 = 1 AND CALCAGE = 18 OR OLDER] Were you [SEXTYPE1 FILL] to have sex or sexual contact before you were 18 years old?

1 Yes
2 No
DK/REF

D11 [IF (D6 = 1 OR D7 = 1) AND B3=1] **Before you entered this facility**, were you [SEXTYPE1 FILL] to have sex or sexual contact while you were an adult or juvenile in a jail, prison, or other correctional facility?

1 Yes
2 No
DK/REF

Section E: Sexual Activity with Inmates

E1 These next questions are about both wanted and unwanted sex or sexual contact you have had with other inmates in this facility **DOAFILL2**. Touch the NEXT button to go to the next screen.

Males		Females	
E2	[IF GENDER = MALE] **DOAFILL1**, have **you** been touched on your butt, thighs, or penis in a sexual way by another inmate? 1 Yes 2 No DK/REF	**E2**	[IF GENDER = FEMALE] **DOAFILL1**, have **you** been touched on your butt, thighs, breasts, or vagina in a sexual way by another inmate? 1 Yes 2 No DK/REF
E6	[IF GENDER = MALE] **DOAFILL1**, have you given **or** received a handjob? A 'handjob' is when someone's penis is rubbed by somebody else. 1 Yes 2 No DK/REF		
E8	[IF GENDER = MALE] **DOAFILL1**, have you given **or** received oral sex or a blow job? Oral sex or a blow job is when one inmate puts their mouth on the penis or butt of another inmate. 1 Yes 2 No DK/REF	**E8**	[IF GENDER = FEMALE] **DOAFILL1**, have you given **or** received oral sex? Oral sex is when one inmate puts their mouth on the vagina or butt of another inmate. 1 Yes 2 No DK/REF
		E10	[IF GENDER=F] **DOAFILL1,** have you had vaginal sex? Vaginal sex is when one inmate inserts their finger or an object into another inmate's vagina. 1 Yes 2 No DK/REF
E12	[IF GENDER = M] **DOAFILL1**, have you had anal sex? Anal sex is when one inmate inserts their finger, penis, or an object into another inmate's butt. 1 Yes 2 No	**E12**	[IF GENDER = F] **DOAFILL1**, have you had anal sex? Anal sex is when one inmate inserts their finger or an object into another inmate's butt. 1 Yes 2 No

DK/REF	DK/REF
E14 [IF GENDER=M] **DOAFILL1**, have you had any type of sex or sexual contact with another inmate **other than** sexual touching, handjobs, oral sex or blowjobs, or anal sex? 1 Yes 2 No DK/REF	**E14** [IF GENDER=F] **DOAFILL1**, have you had any type of sex or sexual contact with another inmate **other than** sexual touching, oral sex, vaginal sex, or anal sex? 1 Yes 2 No DK/REF
E15 [IF E2 = 1 OR E6 = 1 OR E8 = 1 OR E12 = 1 OR E14 = 1] These next questions are **only** about unwanted sex or sexual contact. Touch the NEXT button to go to the next screen.	**E15** [IF E2 = 1 OR E8 = 1 OR E10 = 1 OR E12 = 1 OR E14 = 1] These next questions are **only** about unwanted sex or sexual contact. Touch the NEXT button to go to the next screen.
E16 [IF E2=1] **DOAFILL1**, did another inmate use physical force to touch your butt, thighs, or penis in a sexual way? 1 Yes 2 No DK/REF **E17** [IF E2 = 1] **DOAFILL1**, did another inmate, without using physical force, pressure you or make you feel that you had to let them touch your butt, thighs, or penis in a sexual way? 1 Yes 2 No DK/REF	
	E18 [IF E2=1] **DOAFILL1**, did another inmate use physical force to touch your butt, thighs, breasts, or vagina in a sexual way? 1 Yes 2 No DK/REF **E19** [IF E2 = 1] **DOAFILL1**, did another inmate, without using physical force, pressure you or make you feel that you had to let them touch your butt, thighs, breasts, or vagina in a sexual way? 1 Yes 2 No

		DK/REF	
E22	[IF E6 =1] **DOAFILL1**, did another inmate use physical force to make you give **or** receive a handjob? 1 Yes 2 No DK/REF		
E23	[IF E6 = 1] **DOAFILL1**, did another inmate, without using physical force, pressure you or make you feel that you had to give **or** receive a handjob? 1 Yes 2 No DK/REF		
		E24	[IF E8 = 1] **DOAFILL1**, did another inmate use physical force to make you give **or** receive oral sex? 1 Yes 2 No DK/REF
		E25	[IF E8 = 1] **DOAFILL1**, did another inmate, without using physical force, pressure you or make you feel that you had to give **or** receive oral sex? 1 Yes 2 No DK/REF
E26	[IF E8 =1] **DOAFILL1**, did another inmate use physical force to make you give **or** receive oral sex or a blow job? 1 Yes 2 No DK/REF		
E27	[IF E8 = 1] **DOAFILL1**, did another inmate, without using physical force, pressure you or make you feel that you had to give **or** receive oral sex or a blow job? 1 Yes 2 No DK/REF		
		E28	[IF E10 = 1] **DOAFILL1**, did

			another inmate use physical force to make you have vaginal sex? 1 Yes 2 No DK/REF
		E29	[IF E10 = 1] **DOAFILL1**, did another inmate, without using physical force, pressure you or make you feel that you had to have vaginal sex? 1 Yes 2 No DK/REF
E32	[IF E12 = 1] **DOAFILL1**, did another inmate use physical force to make you have anal sex? 1 Yes 2 No DK/REF	**E32**	[IF E12 = 1] **DOAFILL1**, did another inmate use physical force to make you have anal sex? 1 Yes 2 No DK/REF
E33	[IF E12 = 1] **DOAFILL1**, did another inmate, without using physical force, pressure you or make you feel that you had to have anal sex? 1 Yes 2 No DK/REF	**E33**	[IF E12 = 1] **DOAFILL1**, did another inmate, without using physical force, pressure you or make you feel that you had to have anal sex? 1 Yes 2 No DK/REF
E34	[IF E14 = 1] **DOAFILL1**, did another inmate use physical force to make you have any type of sex or sexual contact **other than** sexual touching, handjobs, oral sex or blowjobs, or anal sex? 1 Yes 2 No DK/REF	**E34**	[IF E14 = 1] **DOAFILL1**, did another inmate use physical force to make you have any type of sex or sexual contact **other than** sexual touching, oral sex, vaginal sex, or anal sex? 1 Yes 2 No DK/REF
E35	[IF E14 = 1] **DOAFILL1**, did another inmate, without using physical force, pressure you or make you feel that you had to have any type of sex or sexual contact **other than** sexual touching, handjobs, oral sex or blowjobs, or anal sex? 1 Yes	**E35**	[IF E14 = 1] **DOAFILL1**, did another inmate, without using physical force, pressure you or make you feel that you had to have any type of sex or sexual contact **other than** sexual touching, oral sex, vaginal sex, or anal sex? 1 Yes

2 No DK/REF	2 No DK/REF

DEFINE forced:
If at least one of (E16, E18, E22, E24, E26, E28, E32, E34) is YES,
then forced = YES
else forced = NO

DEFINE pressured:
If at least one of (E17, E19, E23, E25, E27, E29, E33, E35) is YES,
then pressured = YES
else pressured = NO

DEFINE forcedOrPressuredFill2:
If forced = YES AND pressured = NO
then forcedOrPressuredFill2 = "physically forced"
Else if forced = NO AND pressured = YES
then forcedOrPressuredFill2 = "pressured or made to feel that you had"
Else if forced = YES AND pressured = YES
then forcedOrPressuredFill2 = "physically forced, pressured, or made to feel that you had"
Else
forcedOrPressuredFill2 = "????"
Note that if forced and pressured are both NO, the fill won't be used so it doesn't matter what it is.

E36 [IF GENDER = M AND (E22 = 1 OR E23 = 1 OR E26 = 1 OR E27 = 1 OR E32 = 1 OR E33 = 1)] **DOAFILL1**, how many times altogether were you (physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to):

- [IF E22 OR E23 = 1] Give or receive a handjob,
- [IF E26 OR E27 = 1] Give or receive oral sex or a blow job, or
- [IF E32 OR E33 = 1] Have anal sex?

1 1 time
2 2 times
3 3 – 10 times
4 11 times or more
DK/REF

E36a [IF E36 = 3] **DOAFILL1**, how many times altogether were you (physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to):

- [IF E22 OR E23 = 1] Give or receive a handjob,
- [IF E26 OR E27 = 1] Give or receive oral sex or a blow job, or
- [IF E32 OR E33 = 1] Have anal sex?

1 3 times
2 4 times
3 5 times
4 6 times
5 7 times
6 8 times
7 9 times
8 10 times
DK/REF

E36b [IF E36 = 4] **DOAFILL1**, how many times altogether were you (physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to):

- [IF E22 OR E23 = 1] Give or receive a handjob,
- [IF E26 OR E27 = 1] Give or receive oral sex or a blow job, or
- [IF E32 OR E33 = 1] Have anal sex?

NUMBER OF TIMES: _____ [RANGE: 11 – 300]
DK/REF

E37 [IF GENDER = F AND (E24 = 1 OR E25 = 1 OR E28 = 1 OR E29 = 1 OR E32 = 1 OR E33 = 1)] **DOAFILL1**, how many times altogether were you (physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to):

- [IF E24 OR E25 = 1] Give or receive oral sex,
- [IF E28 OR E29 = 1] Have vaginal sex, or
- [IF E32 OR E33 = 1] Have anal sex?

1 1 time
2 2 times
3 3 – 10 times
4 11 times or more
DK/REF

E37a [IF E37 = 3] **DOAFILL1**, how many times altogether were you (physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to):

- [IF E24 OR E25 = 1] Give or receive oral sex,
- [IF E28 OR E29 = 1] Have vaginal sex, or
- [IF E32 OR E33 = 1] Have anal sex?

1 3 times
2 4 times
3 5 times
4 6 times
5 7 times
6 8 times
7 9 times
8 10 times
DK/REF

E37b [IF E37 = 4] **DOAFILL1**, how many times altogether were you (physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to):

- [IF E24 OR E25 = 1] Give or receive oral sex,
- [IF E28 OR E29 = 1] Have vaginal sex, or
- [IF E32 OR E33 = 1] Have anal sex?

NUMBER OF TIMES: _____ [RANGE: 11 – 300]
DK/REF

E38 [IF E16 = 1 OR E17 = 1] **DOAFILL1**, how many times altogether were you (physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to) let another inmate touch your butt, thighs, or penis in a sexual way?

1 1 time
2 2 times
3 3 – 10 times
4 11 times or more
DK/REF

E38a [IF E38 = 3] **DOAFILL1**, how many times altogether were you (physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to) let another inmate touch your butt, thighs, or penis in a sexual way:

1 3 times
2 4 times
3 5 times
4 6 times
5 7 times
6 8 times
7 9 times
8 10 times
DK/REF

E38b [IF E38 = 4] **DOAFILL1**, how many times altogether were you (physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to) let another inmate touch your butt, thighs, or penis in a sexual way:

NUMBER OF TIMES: _____ [RANGE: 11 – 300]
DK/REF

E39 [IF E18 = 1 OR E19 = 1] **DOAFILL1**, how many times altogether were you (physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to) let another inmate touch your thighs, breasts, or vagina in a sexual way?

1 1 time
2 2 times
3 3 – 10 times
4 11 times or more
DK/REF

E39a [IF E39 = 3] **DOAFILL1**, how many times altogether were you (physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to) let another inmate touch your thighs, breasts, or vagina in a sexual way:

1 3 times
2 4 times
3 5 times
4 6 times
5 7 times
6 8 times
7 9 times
8 10 times
DK/REF

E39b [IF E39 = 4] **DOAFILL1**, how many times altogether were you (physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to) let another inmate touch your thighs, breasts, or vagina in a sexual way:

NUMBER OF TIMES: _____ [RANGE: 11 – 300]
DK/REF

E40 [IF E36 > 1 OR E37 > 1] How soon after you arrived at this facility were you [physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to] have sex or sexual contact with another inmate for the **first time**?

[IF E36 = 1 OR E37 = 1] How soon after you arrived at this facility were you [physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to] have sex or sexual contact with another inmate?

1 Within the first 24 hours after you arrived here
2 More than 24 hours but within your first 3 days here
3 More than 3 days but within your first 30 days here
4 More than 30 days but within your first 6 months here
5 More than 6 months but within your first 12 months here
6 More than 12 months after you arrived here
DK/REF

LCM1 **DOAFILL1**, did another inmate use physical force, pressure you, or make you feel that you had to have any type of sex or sexual contact?

1 Yes
2 No
DK/REF

LCM2a How long has it been since another inmate in this facility used physical force, pressured you, or made you feel that you had to have any type of sex or sexual contact?

1 Within the past 7 days
2 More than 7 days ago but within the past 30 days
3 More than 30 days ago but within the past 12 months
4 More than 12 months ago
5 This has not happened to me at this facility
DK/REF

E162	[IF E2 = 2 AND E6 = 2 AND E8 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] **DOAFILL1**, did another inmate use physical force to touch your butt, thighs, or penis in a sexual way? 1 Yes 2 No DK/REF		
E172	[IF E2 = 2 AND E6 = 2 AND E8 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] **DOAFILL1**, did another inmate, without using physical force, pressure you or make you feel that you had to let them touch your butt, thighs, or penis in a sexual way? 1 Yes 2 No DK/REF		
		E182	[IF E2 = 2 AND E8 = 2 AND E10 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] **DOAFILL1**, did another inmate use physical force to touch your butt, thighs, breasts, or vagina in a sexual way? 1 Yes 2 No DK/REF
		E192	[IF E2 = 2 AND E8 = 2 AND E10 = 2 AND E12 = 2 AND E14 = 2

			AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] **DOAFILL1**, did another inmate, without using physical force, pressure you or make you feel that you had to let them touch your butt, thighs, breasts, or vagina in a sexual way? 1 Yes 2 No DK/REF
E222	[IF E2 = 2 AND E6 = 2 AND E8 = 2 AND AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] **DOAFILL1**, did another inmate use physical force to make you give **or** receive a handjob? 1 Yes 2 No DK/REF		
E232	[IF E2 = 2 AND E6 = 2 AND E8 = 2 AND AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] **DOAFILL1**, did another inmate, without using physical force, pressure you or make you feel that you had to give **or** receive a handjob? 1 Yes 2 No DK/REF		
		E242	[IF E2 = 2 AND E8 = 2 AND E10 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] **DOAFILL1**, did another inmate use physical force to make you give **or** receive oral sex? 1 Yes 2 No DK/REF
		E252	[IF E2 = 2 AND E8 = 2 AND E10 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] **DOAFILL1**, did another inmate, without using physical force, pressure you or make you feel that you had to give **or** receive oral sex?

			1 Yes 2 No DK/REF
E262	[IF E2 = 2 AND E6 = 2 AND E8 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] **DOAFILL1**, did another inmate use physical force to make you give **or** receive oral sex or a blow job? 1 Yes 2 No DK/REF		
E272	[IF E2 = 2 AND E6 = 2 AND E8 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] **DOAFILL1**, did another inmate, without using physical force, pressure you or make you feel that you had to give **or** receive oral sex or a blow job? 1 Yes 2 No DK/REF		
		E282	[IF E2 = 2 AND E8 = 2 AND E10 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] **DOAFILL1**, did another inmate use physical force to make you have vaginal sex? 1 Yes 2 No DK/REF
		E292	[IF E2 = 2 AND E8 = 2 AND E10 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] **DOAFILL1**, did another inmate, without using physical force, pressure you or make you feel that you had to have vaginal sex? 1 Yes 2 No DK/REF
E322	[IF E2 = 2 AND E6 = 2 AND E8 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1	**E322**	[IF E2 = 2 AND E8 = 2 AND E10 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1

	OR 2 OR 3)] **DOAFILL1**, did another inmate use physical force to make you have anal sex? 1 Yes 2 No DK/REF		OR 2 OR 3)] **DOAFILL1**, did another inmate use physical force to make you have anal sex? 1 Yes 2 No DK/REF
E332	[IF E2 = 2 AND E6 = 2 AND E8 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] **DOAFILL1**, did another inmate, without using physical force, pressure you or make you feel that you had to have anal sex? 1 Yes 2 No DK/REF	**E332**	[IF E2 = 2 AND E8 = 2 AND E10 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] **DOAFILL1**, did another inmate, without using physical force, pressure you or make you feel that you had to have anal sex? 1 Yes 2 No DK/REF
E342	[IF E2 = 2 AND E6 = 2 AND E8 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] **DOAFILL1**, did another inmate use physical force to make you have any type of sex or sexual contact **other than** sexual touching, handjobs, oral sex or blowjobs, or anal sex? 1 Yes 2 No DK/REF	**E342**	[IF E2 = 2 AND E8 = 2 AND E10 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] **DOAFILL1**, did another inmate use physical force to make you have any type of sex or sexual contact **other than** sexual touching, oral sex, vaginal sex, or anal sex? 1 Yes 2 No DK/REF
E352	[IF E2 = 2 AND E6 = 2 AND E8 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] **DOAFILL1**, did another inmate, without using physical force, pressure you or make you feel that you had to have any type of sex or sexual contact **other than** sexual touching, handjobs, oral sex or blowjobs, or anal sex? 1 Yes 2 No DK/REF	**E352**	[IF E2 = 2 AND E8 = 2 AND E10 = 2 AND E12 = 2 AND E14 = 2 AND (LCM1 = 1 OR LCM2a = 1 OR 2 OR 3)] **DOAFILL1**, did another inmate, without using physical force, pressure you or make you feel that you had to have any type of sex or sexual contact **other than** sexual touching, oral sex, vaginal sex, or anal sex? 1 Yes 2 No DK/REF

DEFINE forced:

If at least one of (E162, E182, E222, E242, E262, E282, E322, E342) is YES,
then forced = YES
else forced = NO

DEFINE pressured:

If at least one of (E172, E192, E232, E252, E272, E292, E332, E352) is YES,
then pressured = YES
else pressured = NO

DEFINE forcedOrPressuredFill2:

If forced = YES AND pressured = NO
then forcedOrPressuredFill2 = "physically forced"
Else if forced = NO AND pressured = YES
then forcedOrPressuredFill2 = "pressured or made to feel that you had"
Else if forced = YES AND pressured = YES
then forcedOrPressuredFill2 = "physically forced, pressured, or made to feel that you had"
Else
forcedOrPressuredFill2 = "????"

Note that if forced and pressured are both NO, the fill won't be used so it doesn't matter what it is.

E353 [IF GENDER = M AND (E222 = 1 OR E232 = 1 OR E262 = 1 OR E272 = 1 OR E322 = 1 OR E332 = 1)] **DOAFILL1**, how many times altogether were you (physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to):

- [IF E222 OR E232 = 1] Give or receive a handjob,
- [IF E262 OR E272 = 1] Give or receive oral sex or a blow job, or
- [IF E322 OR E332 = 1] Have anal sex?

1 1 time
2 2 times
3 3 – 10 times
4 11 times or more
DK/REF

E354 [IF E353 = 3] **DOAFILL1**, how many times altogether were you (physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to):

- [IF E222 OR E232 = 1] Give or receive a handjob,
- [IF E262 OR E272 = 1] Give or receive oral sex or a blow job, or
- [IF E322 OR E332 = 1] Have anal sex?

1 3 times
2 4 times
3 5 times
4 6 times
5 7 times
6 8 times
7 9 times
8 10 times
DK/REF

E355 [IF E353 = 4] **DOAFILL1**, how many times altogether were you (physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to):

- [IF E222 OR E232 = 1] Give or receive a handjob,
- [IF E262 OR E272 = 1] Give or receive oral sex or a blow job, or
- [IF E322 OR E332 = 1] Have anal sex?

NUMBER OF TIMES: _____ [RANGE: 11 – 300]
DK/REF

E356 [IF GENDER = F AND (E242 = 1 OR E252 = 1 OR E282 = 1 OR E292 = 1 OR E322 = 1 OR E332 = 1)] **DOAFILL1**, how many times altogether were you (physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to):

- [IF E242 OR E252 = 1] Give or receive oral sex,
- [IF E282 OR E292 = 1] Have vaginal sex, or
- [IF E322 OR E332 = 1] Have anal sex?

1 1 time
2 2 times
3 3 – 10 times
4 11 times or more
DK/REF

E357 [IF E356 = 3] **DOAFILL1**, how many times altogether were you (physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to):

- [IF E242 OR E252 = 1] Give or receive oral sex,
- [IF E282 OR E292 = 1] Have vaginal sex, or
- [IF E322 OR E332 = 1] Have anal sex?

1 3 times
2 4 times
3 5 times
4 6 times
5 7 times
6 8 times
7 9 times
8 10 times
DK/REF

E358 [IF E356 = 4] **DOAFILL1**, how many times altogether were you (physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to):

- [IF E242 OR E252 = 1] Give or receive oral sex,
- [IF E282 OR E292 = 1] Have vaginal sex, or
- [IF E322 OR E332 = 1] Have anal sex?

NUMBER OF TIMES: _____ [RANGE: 11 – 300]
DK/REF

E359 [IF E162 = 1 OR E172 = 1] **DOAFILL1**, how many times altogether were you (physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to) let another inmate touch your butt, thighs, or penis in a sexual way?

1 1 time
2 2 times
3 3 – 10 times
4 11 times or more
DK/REF

E360 [IF E359 = 3] **DOAFILL1**, how many times altogether were you (physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to) let another inmate touch your butt, thighs, or penis in a sexual way:

1 3 times
2 4 times
3 5 times
4 6 times
5 7 times
6 8 times
7 9 times
8 10 times
DK/REF

E361 [IF E359 = 4] **DOAFILL1**, how many times altogether were you (physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to) let another inmate touch your butt, thighs, or penis in a sexual way:

NUMBER OF TIMES: _____ [RANGE: 11 – 300]
DK/REF

E362 [IF E182 = 1 OR E192 = 1] **DOAFILL1**, how many times altogether were you (physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to) let another inmate touch your butt, thighs, breasts, or vagina in a sexual way?

1 1 time
2 2 times
3 3 – 10 times
4 11 times or more
DK/REF

E363 [IF E362 = 3] **DOAFILL1**, how many times altogether were you (physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to) let another inmate touch your butt, thighs, breasts, or vagina in a sexual way:

1 3 times
2 4 times
3 5 times
4 6 times
5 7 times
6 8 times
7 9 times
8 10 times
DK/REF

E364 [IF E362 = 4] **DOAFILL1**, how many times altogether were you (physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to) let another inmate touch your butt, thighs, breasts, or vagina in a sexual way:

NUMBER OF TIMES: _____ [RANGE: 11 – 300]
DK/REF

E365 [IF E353 > 1 OR E356 > 1] How soon after you arrived at this facility were you [physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to] have sex or sexual contact with another inmate for the **first time**?

[IF E353 = 1 OR E356 = 1] How soon after you arrived at this facility were you [physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to] have sex or sexual contact with another inmate?

1 Within the first 24 hours after you arrived here
2 More than 24 hours but within your first 3 days here
3 More than 3 days but within your first 30 days here
4 More than 30 days but within your first 6 months here
5 More than 6 months but within your first 12 months here
6 More than 12 months after you arrived here
DK/REF

Section F: Description of NCSAs

DEFINE NCSA:

IF E16 = 1 OR E17 = 1 OR E18 = 1 OR E19 = 1 OR E22 = 1 OR E23 = 1 OR E24 = 1 OR E25 = 1 OR E26 = 1 OR E27 = 1 OR E28 = 1 OR E29 = 1 OR E32 = 1 OR E33 = 1 OR E34 = 1 OR E35 = 1 OR E162 = 1 OR E172 = 1 OR E182 = 1 OR E192 = 1 OR E222 = 1 OR E232 = 1 OR E242 = 1 OR E252 = 1 OR E262 = 1 OR E272 = 1 OR E282 = 1 OR E292 = 1 OR E322 = 1 OR E332 = 1 OR E342 = 1 OR E352 = 1 THEN NCSA = 1
ELSE NCSA = 2

DEFINE forced:

If at least one of (E16, E18, E22, E24, E26, E28, E32, E34, E162, E182, E222, E242, E262, E282, E322, E342) is YES,
then forced = YES
else forced = NO

DEFINE pressured:

If at least one of (E17, E19, E23, E25, E27, E29, E33, E35, E172, E192, E232, E252, E272, E292, E332, E352) is YES,
then pressured = YES
else pressured = NO

DEFINE forcedOrPressuredFill2:

If forced = YES AND pressured = NO
then forcedOrPressuredFill2 = "physically forced"
Else if forced = NO AND pressured = YES
then forcedOrPressuredFill2 = "pressured or made to feel that you had"
Else if forced = YES AND pressured = YES
then forcedOrPressuredFill2 = "physically forced, pressured, or made to feel that you had"
Else
forcedOrPressuredFill2 = "????"

Note that if forced and pressured are both NO, the fill won't be used so it doesn't matter what it is.

DEFINE #NCSA1
IF E36 + E37 + E38 + E39 + E353 + E356 + E359 + E362 = 1 THEN #NCSA1 = did it
IF E36 + E37 + E38 + E39 + E353 + E356 + E359 + E362 > 1 THEN #NCSA1 = did it **ever**
DEFINE #NCSA2
IF E36 + E37 + E38 +E39 + E353 + E356 + E359 + E362 = 1 THEN #NCSA2 = were you
IF E36 + E37 + E38 +E39 + E353 + E356 + E359 + E362 > 1 THEN #NCSA2= were you **ever**
DEFINE #NCSA3
IF E36 + E37 + E38 + E39 + E353 + E356 + E359 + E362 = 1 THEN #NCSA3 = was it
IF E36 + E37 + E38 + E39 + E353 + E356 + E359 + E362 > 1 THEN #NCSA3 = was it **ever**
DEFINE #NCSA4
IF E36 + E37 + E38 + E39 + E353 + E356 + E359 + E362 = 1 THEN #NCSA4 = did you
IF E36 + E37 + E38 + E39 + E353 + E356 + E359 + E362 > 1 THEN #NCSA4 = did you **ever**
DEFINE #NCSA5
IF E36 + E37 + E38 + E39 + E353 + E356 + E359 + E362 = 1 THEN #NCSA5 = why didn't you
IF E36 + E37 + E38 + E39 + E353 + E356 + E359 + E362 > 1 THEN #NCSA5 = why didn't you **ever**

F1 [IF NCSA = 1] **DOAFILL1**,when you were [physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to] have sex or sexual contact with another inmate, [#NCSA1 FILL] involve **more than one inmate**?

1 Yes
2 No
DK/REF

F2 [IF NCSA=1] **DOAFILL1**,when you were [physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to] have sex or sexual contact with another inmate, [#NCSA1 FILL] happen…

	Yes	No
F2a. Between 6:00 in the morning and noon?	1	2
F2b. After noon but before 6:00 in the evening?	1	2
F2c. After 6:00 in the evening but before midnight?	1	2
F2d. After midnight but before 6:00 in the morning?	1	2

F3 [IF NCSA=1] **DOAFILL1**,when you were [physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to] have sex or sexual contact with another inmate, [#NCSA1 FILL] happen…

	Yes	No
F3a. In your own cell, room, or sleeping area?	1	2
F3b. In the cell, room, or housing area of another inmate?	1	2
F3c. Somewhere else in the facility?	1	2
F3d. Off facility grounds?	1	2

F4 [IF F3c =1] **DOAFILL1**,when you were [physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to] have sex or sexual contact with another inmate, [#NCSA1 FILL] happen …

	Yes	No
F4a. In a shower?	1	2
F4b. In a bathroom?	1	2
F4c. In the yard or recreation area?	1	2
F4d. In a classroom or library?	1	2
F4e. In a workshop, kitchen, or other workplace?	1	2
F4f. In a closet?	1	2
F4g. In an office or other locked room?	1	2
F4h. On the stairs?	1	2

F5 [IF F3d =1] **DOAFILL1**,when you were [physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to] have sex or sexual contact with another inmate, [#NCSA1] happen in…

	Yes	No
F5a. A bus, van, or car?	1	2
F5b. A courthouse?	1	2
F5c. Some other type of temporary holding facility?	1	2
F5d. A hospital or other type of medical facility?	1	2

F6 [IF NCSA = 1] **DOAFILL1**,when you were [physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to] have sex or sexual contact with another inmate, [#NSCA2 FILL] …

	Yes	No
F6a. Persuaded or talked into it?	1	2
F6b. Given a bribe?	1	2
F6c. Blackmailed?	1	2
F6d. Given drugs or alcohol to get you drunk or high?	1	2
F6e. Offered protection from other inmates?	1	2
F6f. Trying to pay off or settle a debt that you owed?	1	2
F6g. Threatened with harm?	1	2
F6h. Physically held down or restrained?	1	2
F6i. Physically harmed or injured?	1	2
F6j. Threatened with a weapon?	1	2

F7 [IF NCSA = 1] **DOAFILL1**,when you were [physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to] have sex or sexual contact with another inmate, [#NCSA1] involve an inmate of Hispanic or Latino origin?

1 Yes
2 No
DK/REF

F7a [IF NCSA = 1] **DOAFILL1**, when you were [physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to] have sex or sexual contact with another inmate, [#NCSA1] involve an inmate who was…

	Yes	No
F7a1. White	1	2
F7a2. Black or African American	1	2
F7a3. American Indian or Alaska Native	1	2
F7a4. Asian	1	2
F7a5. Native Hawaiian or other Pacific Islander	1	2

F8 [IF NCSA = 1] **DOAFILL1**,when you were [physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to] have sex or sexual contact with another inmate, [#NCSA3] initiated by a gang?

1 Yes
2 No
DK/REF

F9 [IF NCSA = 1] **DOAFILL1**, when you were [physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to] have sex or sexual contact with another inmate, [#NCSA2] injured?

1 Yes
2 No
DK/REF

F10 [IF F9 = 1] **DOAFILL1**,when you were [physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to] have sex or sexual contact with another inmate, [#NCSA4] …

	Yes	No
F10a. Receive knife or stab wounds	1	2
F10b. Receive broken bones	1	2
F10c. Have [anal/anal or vaginal] tearing	1	2
F10d. Have your teeth chipped or knocked out	1	2
F10e Receive internal injuries	1	2
F10f. Get knocked unconscious	1	2
F10g. Receive bruises, a black eye, sprains, cuts, scratches, swelling, welts, or burns	1	2

F11 [IF F9 = 1] **DOAFILL1**,when you were [physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to] have sex or sexual contact with another inmate, [#NCSA4] see a doctor, nurse, or other health care provider for any of the injuries you received?

1 Yes
2 No
DK/REF

F12 [IF NCSA = 1] **DOAFILL1**,when you were [physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to] have sex or sexual contact with another inmate, [#NCSA4] report it to facility staff?

1 Yes
2 No
DK/REF

F13 [IF F12 = 1] **DOAFILL1**, when you were [physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to] have sex or sexual contact with another inmate, [#NCSA4] report it to…

	Yes	No
F13a. A correctional officer	1	2
F13b. An administrative staff person	1	2
F13c. A medical or healthcare staff person	1	2
F13d. An instructor or teacher	1	2
F13e. A counselor or other mental health care provider	1	2
F13f. A chaplain or other religious official	1	2
F13g. A volunteer	1	2
F13h. Some other type of facility staff person	1	2
F13i. A telephone hotline	1	2
F13j. Another inmate	1	2
F13k. A family member or friend	1	2

F24 [IF F12 =1] **DOAFILL1,** when you reported that you were [physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to] have sex or sexual contact with another inmate, was your report investigated by facility staff or another investigative unit?

1 Yes
2 No
DK/REF

F14 [IF F12 = 1] **DOAFILL1**, when you made a report to a facility staff person that you were [physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to] have sex or sexual contact with another inmate, did any of the following things happen to you?

	Yes	No
F14a. You were moved to administrative segregation or some other protective housing	1	2
F14b. You were placed in a medical unit, ward, or hospital	1	2
F14c. You were confined to your own cell, room, or housing area	1	2
F14d. You were given a higher level of custody within the facility	1	2
F14e. You were offered a transfer to another facility	1	2
F14f. You were written up	1	2

F15 [IF F12 =2] **DOAFILL1**, when you were [physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to] have sex or sexual contact with another inmate, [#NCSA5] report it to facility staff?

	Yes	No
F15a. [IF F1 = 2] You were afraid or scared of the inmate involved [IF F1 = 1] You were afraid or scared of the inmates involved	1	2
F15b. You were afraid or scared of being punished by facility staff	1	2
F15c. You were embarrassed or ashamed that it happened	1	2
F15d. You didn't think staff would investigate	1	2
F15e. [IF F1 = 2] You didn't think the inmate involved would be punished [IF F1 = 1] You didn't think the inmates involved would be punished	1	2

F16 [IF NSCA = 1 AND (E36 > 1 OR E37 > 1)] How long has it been since you were last [physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to] have sex or sexual contact with another inmate in this facility?

[IF NSCA = 1 AND (E36 = 1 OR E37 = 1)] How long has it been since you were [physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to] have sex or sexual contact with another inmate in this facility?

1 Within the past 7 days
2 More than 7 days ago but within the past 30 days
3 More than 30 days ago but within the past 3 months
4 More than 3 months ago but within the past 6 months
5 More than 6 months ago but within the past 9 months
6 More than 9 months ago but within the past 12 months
7 More than 12 months ago
DK/REF

Section G: Staff Sexual Misconduct

G1 These next questions are about the behavior of staff at this facility **DOAFILL2**. By staff we mean the employees of this facility and anybody who works as a volunteer in this facility. Touch the NEXT button to go to the next screen.

G4 **DOAFILL1**, have any facility staff pressured you or made you feel that you had to let them have sex or sexual contact with you?

1 Yes
2 No
DK/REF

G5 **DOAFILL1**, have you been physically forced by any facility staff to have sex or sexual contact?

1 Yes
2 No
DK/REF

DEFINE SEXTYPE2
IF G4 =1 AND G5 = 1 THEN SEXTYPE2 = physically forced, pressured, or made to feel that you had to
IF G4 = 1 AND G5 NE 1 THEN SEXTYPE2 = pressured or made to feel that you had to
IF G4 NE 1 AND G5 = 1 THEN SEXTYPE2 = physically forced to

G6 [IF G4 =1 OR G5 = 1] **DOAFILL1**, how many times were you [SEXTYPE2 FILL] have sex or sexual contact with any facility staff?

1 1 time
2 2 times
3 3 – 10 times
4 11 times or more
DK/REF

G6a. [IF G6 = 3] **DOAFILL1**, how many times were you [SEXTYPE2 FILL] have sex or sexual contact with any facility staff?

1 3 times
2 4 times
3 5 times
4 6 times
5 7 times
6 8 times
7 9 times
8 10 times
DK/REF

G6b. [IF G6 = 4] **DOAFILL1**, how many times were you [SEXTYPE2 FILL] have sex or sexual contact with any facility staff?

NUMBER OF TIMES: _____ [RANGE: 11 – 300]
DK/REF

G8 [IF (G4 = 1 OR G5 = 1) AND G6 > 1] How soon after you arrived at this facility were you [physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to] have sex or sexual contact with facility staff for the **first time**?

[IF (G4 = 1 OR G5 = 1) AND G6 = 1)] How soon after you arrived at this facility were you [physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to] have sex or sexual contact with facility staff?

1 Within the first 24 hours after you arrived here
2 More than 24 hours but within your first 3 days here
3 More than 3 days but within your first 30 days here
4 More than 30 days but within your first 6 months here
5 More than 6 months but within your first 12 months here
6 More than 12 months after you arrived here
DK/REF

G7 **DOAFILL1**, have any facility staff offered you favors or special privileges in exchange for sex or sexual contact?

1 Yes
2 No
DK/REF

G2 **DOAFILL1**, have you **willingly** had sex or sexual contact with any facility staff?

1 Yes
2 No
DK/REF

G3 [IF G2 = 1] **DOAFILL1**, how many times have you **willingly** had sex or sexual contact with facility staff?

1 1 time
2 2 times
3 3 – 10 times
4 11 times or more
DK/REF

G3a [IF G3 = 3] **DOAFILL1**, how many times have you **willingly** had sex or sexual contact with any facility staff?

1 3 times
2 4 times
3 5 times
4 6 times
5 7 times
6 8 times
7 9 times
8 10 times
DK/REF

G3b [IF G3 = 4] **DOAFILL1**, how many times have you **willingly** had sex or sexual contact with any facility staff?

NUMBER OF TIMES: _____ [RANGE: 11 – 300]
DK/REF

G9 [IF G4 = 1 OR G5 = 1] **DOAFILL1**, on any occasion when you were [SEXTYPE2 FILL] have sex or sexual contact with facility staff, did you report it to other facility staff?

1 Yes
2 No
DK/REF

G10 [IF G2 = 1 OR G4 = 1 OR G5 = 1] These next questions are about any sex or sexual contact you have had with facility staff **DOAFILL2**, whether you wanted to have it or not. Touch the NEXT button to go to the next screen.

G11 [IF G2 = 1 OR G4 = 1 OR G5 = 1] **DOAFILL1**, which of the following types of sex or sexual contact did you have with a facility staff person?

	Yes	No
G11a. You touched a facility staff person's body or had your body touched in a sexual way	1	2
G11b. You gave or received a handjob	1	2
G11c. You gave or received oral sex or a blowjob	1	2
G11d. You had vaginal sex	1	2
G11e. You had anal sex	1	2

G12 [IF G2 =1 OR G4 = 1 OR G5 = 1] **DOAFILL1**, when you had sex or sexual contact with facility staff, did it ever involve **more than one** facility staff person?

1 Yes
2 No
DK/REF

G13 [IF G2 =1 OR G4 = 1 OR G5 = 1] **DOAFILL1**, when you had sex or sexual contact with facility staff, did it **ever** happen…

	Yes	No
G13a. Between 6:00 in the morning and noon	1	2
G13b. After noon but before 6:00 in the evening	1	2
G13c. After 6:00 in the evening but before midnight	1	2
G13d. After midnight but before 6:00 in the morning	1	2

G14 [IF G2 =1 OR G4 = 1 OR G5 = 1] **DOAFILL1**, when you had sex or sexual contact with facility staff, did it **ever** happen…

	Yes	No
G14a. In your own cell, room, or sleeping area	1	2
G14b. In the cell, room, or housing area of another inmate	1	2
G14c. Somewhere else in the facility	1	2
G14d. Off facility grounds	1	2

G15 [IF G14c = 1] **DOAFILL1**, when you had sex or sexual contact with facility staff did it **ever** happen …

	Yes	No
G15a. In a shower	1	2
G15b. In a bathroom	1	2
G15c. In the yard or recreation area	1	2
G15d. In a classroom or library	1	2
G15e. In a workshop, kitchen, or other workplace	1	2
G15f. In a closet	1	2
G15g. In an office or other locked room	1	2
G15h. On the stairs	1	2

G16 [IF G14d = 1] **DOAFILL1**, when you had sex or sexual contact with facility staff, did it **ever** happen in …

	Yes	No
G16a. A bus, van, or car	1	2
G16b. A courthouse	1	2
G16c. Some other type of temporary holding facility	1	2
G16d. A hospital or other type of medical facility	1	2

G17 [IF G2 =1 OR G4 = 1 OR G5 = 1] **DOAFILL1**, when you had sex or sexual contact with facility staff were any of the following methods used to get you to participate?

	Yes	No
G17a. You were persuaded or talked into it	1	2
G17b. You were given a bribe	1	2
G17c. You were offered favors or special privileges	1	2
G17d. You were blackmailed	1	2
G17e. You were given drugs or alcohol to get you drunk or high	1	2
G17f. You were offered protection from other inmates	1	2
G17g. You were offered protection from another correctional officer	1	2
G17h. You were trying to pay off or settle a debt that you owed	1	2
G17i. You were threatened with harm	1	2
G17j. You were physically held down or restrained	1	2
G17k. You were physically harmed or injured	1	2
G17l. You were threatened with a weapon	1	2

G28. [IF G2 = 1 OR G4 = 1 OR G5 = 1] **DOAFILL1**, did you have sex or sexual contact with male facility staff, female facility staff, or both male and female facility staff?

1 Male facility staff
2 Female facility staff
3 Both male and female facility staff
DK/REF

G29. [IF G28 = 1] **DOAFILL1**, did you have sex or sexual contact with any

	Yes	**No**
G29a. Correctional officers	1	2
G29b. Other staff working the facility	1	2
G29c. Volunteers in the facility	1	2

G30. [IF G28 = 2] **DOAFILL1**, did you have sex or sexual contact with any

	Yes	**No**
G29a. Correctional officers	1	2
G29b. Other staff working in the facility	1	2
G29c. Volunteers in the facility	1	2

G31. [IF G28 = 3] **DOAFILL1**, did you have sex or sexual contact with any

	Yes	**No**
G29a. **Male** correctional officers	1	2
G29b. **Female** correctional officers	1	2
G29c. Other **male** staff working in the facility	1	2
G29d. Other **female** staff working the facility	1	2
G29e. **Male** volunteers in the facility	1	2
G29f. **Female** volunteers in the facility	1	2

G19 [IF G2 =1 OR G4 = 1 OR G5 = 1] **DOAFILL1**, when you had sex or sexual contact with facility staff, were you ever injured?

1 Yes
2 No
DK/REF

G20 [IF G19 = 1] **DOAFILL1**, when you had sex or sexual contact with facility staff, did you ever …

	Yes	No
G30a. Receive knife or stab wounds	1	2
G30b. Receive broken bones	1	2
G30c. Have [anal/anal or vaginal] tearing	1	2
G30d. Have your teeth chipped or knocked out	1	2
G30e. Receive internal injuries	1	2
G30f. Get knocked unconsciousness	1	2
G30g. Receive bruises, a black eye, sprains, cuts, scratches, swelling, welts, or burns	1	2

G21 [IF G19 = 1] **DOAFILL1**, when you were injured as a result of having sex or sexual contact with facility staff, did you see a doctor, nurse, or other health care provider?

1 Yes
2 No
DK/REF

G22 [IF G2 =1 OR G4 = 1 OR G5 = 1] **DOAFILL1**, when you had sex or sexual contact with facility staff did you ever report it to any facility staff person?

1 Yes
2 No
DK/REF

G23 [IF G22 = 1] **DOAFILL1**, when you had sex or sexual contact with facility staff, did you ever report it to…

	Yes	No
G23a. A correctional officer	1	2
G23b. An administrative staff person	1	2
G23c. A medical or healthcare staff person	1	2
G23d. An instructor, or teacher	1	2
G23e. A counselor or other mental health care provider	1	2
G23f. A chaplain or other religious official	1	2
G23g. A volunteer	1	2
G23h. Some other type of facility staff person	1	2
G23i. A telephone hotline	1	2
G23j. Another inmate	1	2
G23k. A family member or friend	1	2

G24 [IF G22 =1] **DOAFILL1,** when you reported that you had sex or sexual contact with facility staff, was your report investigated by facility staff or another investigative unit?

1 Yes
2 No
DK/REF

G25 [IF G22 = 1] **DOAFILL1**, when you reported that you had sex or sexual contact with facility staff, did any of the following things happen to you?

	Yes	No
G25a. You were moved to administrative segregation or some other protective housing	1	2
G25b. You were placed in a medical unit, ward, or hospital	1	2
G25c. You were confined to your own cell, room, or housing area	1	2
G25d. You were given a higher level of custody within the facility	1	2
G25e. You were offered a transfer to another facility	1	2
G25f. You were written up	1	2

G26 [IF G22 =2] **DOAFILL1**, when you had sex or sexual contact with facility staff, why didn't you report it to a facility staff person?

	Yes	No
G26a. You were afraid or scared of being punished by facility staff	1	2
G26b. You were embarrassed or ashamed that it happened	1	2
G26c. You didn't think staff would investigate	1	2
G26d. You had the sex or sexual contact willingly	1	2
G26e. You didn't want the facility staff person to get in trouble	1	2

G27 [IF (G4 = 1 OR G5 = 1) AND G6 > 1)] How long has it been since you were last [physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to] have sex or sexual contact with staff in this facility?

[IF (G4 = 1 OR G5 = 1) AND G6 = 1)] How long has it been since you were [physically forced to/pressured or made to feel that you had to/physically forced, pressured, or made to feel that you had to] have sex or sexual contact with staff in this facility?

1 Within the past 7 days
2 More than 7 days ago but within the past 30 days
3 More than 30 days ago but within the past 3 months
4 More than 3 months ago but within the past 6 months
5 More than 6 months ago but within the past 9 months
6 More than 9 months ago but within the past 12 months
7 More than 12 months ago
DK/REF

Section X: Other Victimization While Incarcerated

XINTRO These next questions are about other things that may have happened to you in this facility. Touch the NEXT button to go to the next screen.

X6a **DOAFILL1**, have you been written up or charged with assaulting another inmate?

1 Yes
2 No
DK/REF

X6b [IF X6a = 1] **DOAFILL1**, how many times have you been written up or charged with assaulting another inmate?

1 1 time
2 2 times
3 3 - 10 times
4 11 times or more
DK/REF

X6c [IFX6b = 3] How many times have you been written up or charged with assaulting another inmate?

1 3 times
2 4 times
3 5 times
4 6 times
5 7 times
6 8 times
7 9 times
8 10 times
DK/REF

X6d [IF X6b = 4] How many times have you been written up or charged with assaulting another inmate?

NUMBER OF TIMES: _____ [RANGE: 11 – 999]
DK/REF

X7a **DOAFILL1**, have you been written up or charged with **physically assaulting** a correctional officer or other facility staff person?

1 Yes
2 No
DK/REF

X7b [IF X7a = 1] **DOAFILL1**, how many times have you been written up or charged with **physically assaulting** a correctional officer or other facility staff person?

1 1 time
2 2 times
3 3 – 10 times
4 11 times or more
DK/REF

X7c [IFX7b= 3] How many times have you been written up or charged with **physically assaulting** a correctional officer or other facility staff person?

1 3 times
2 4 times
3 5 times
4 6 times
5 7 times
6 8 times
7 9 times
8 10 times
DK/REF

X7d [IF X7b = 4] How many times have you been written up or charged with **physically assaulting** a correctional officer or other facility staff person?

NUMBER OF TIMES: _____ [RANGE: 11 – 999]

X8a **DOAFILL1**, have you been written up or charged with **verbally assaulting** a correctional officer or other facility staff person?

1 Yes
2 No
DK/REF

X8b [IF X8a = 1] **DOAFILL1**, how many times have you been written up or charged with **verbally assaulting** a correctional officer or other facility staff person?

1 1 time
2 2 times
3 3 – 10 times
4 11 times or more
DK/REF

X8c [IFX8b= 3] **DOAFILL1,** how many times have you been written up or charged with **verbally assaulting** a correctional officer or other facility staff person?

1 3 times
2 4 times
3 5 times
4 6 times
5 7 times
6 8 times
7 9 times
8 10 times
DK/REF

X8d [IF X8b = 4] **DOAFILL1,** how many times have you been written up or charged with **verbally assaulting** a correctional officer or other facility staff person?

NUMBER OF TIMES: _____ [RANGE: 11 – 999]
DK/REF

X9a **DOAFILL1**, have you spent any time in disciplinary or administrative segregation or solitary confinement?

1 Yes
2 No
DK/REF

X9b [IF X9a = 1] **DOAFILL1**, how much total time have you spent in disciplinary or administrative segregation or solitary confinement?

1 1 day or less
2 More than 1 day but less than 7 days
3 At least 7 days but less than 14 days
4 At least 14 days but less than 30 days
5 30 days or more
DK/REF

LCM5 **DOAFILL1,** have you had any sex or sexual contact with staff in this facility whether you wanted to have it or not?

1 Yes
2 No
DK/REF

LCM6a How long has it been since you had any sex or sexual contact with staff in this facility whether you wanted to or not?

1 Within the past 7 days
2 More than 7 days ago but within the past 30 days
3 More than 30 days ago but within the past 12 months
4 More than 12 months ago
5 This has not happened to me at this facility
DK/REF

Section L: Pat Downs and Strip Searches (All Respondents Receive These Questions)

L0 These next questions are about your experiences with strip searches and pat downs at this facility.

Touch the NEXT button to go to the next screen.

L22a **DOAFILL1**, how often have you been strip searched?

1 Once a week or more
2 Several times a month
3 Once a month
4 Less than once a month
5 Never
DK/REF

L22b **DOAFILL1,** how often have you been patted down?

1 Once a week or more
2 Several times a month
3 Once a month
4 Less than once a month
5 Never
DK/REF

L23 [IF G11a = 1] Earlier you reported that, **DOAFILL2,** you touched a facility staff person's body or had your body touched in a sexual way. Did this happen as part of a **strip search**?

1 Yes
2 No
DK/REF

L23a [IF L23 = 1] On any occasion **DOAFILL2** when you touched a facility staff person's body or had your body touched in a sexual way as part of a strip search, was the strip search conducted by

	Yes	No
L23a1. Male facility staff?	1	2
L23a2. Female facility staff?	1	2

L24 [IF G11a = 1] **DOAFILL1**, when you touched a facility staff person's body or had your body touched in a sexual way, did this happen when it was **not** part of a strip search?

1 Yes
2 No
DK/REF

L25 [IF G11a = 1] **DOAFILL1**, when you touched a facility staff person's body or had your body touched in a sexual way, did this happen as part of a **pat down**?

1 Yes
2 No
DK/REF

L25a [IF L25 = 1] On any occasion **DOAFILL2** when you touched a facility staff person's body or had your body touched in a sexual way as part of a pat down, was the pat down conducted by

	Yes	No
L23a1. Male facility staff?	1	2
L23a2. Female facility staff?	1	2

L26 [IF G11a = 1] **DOAFILL1**, when you touched a facility staff person's body or had your body touched in a sexual way, did this happen when it was **not** part of a pat down?

1 Yes
2 No
DK/REF

Section S: Facility Conditions / Support / Safety (All Respondents Receive These Questions)

S0 These next questions are about everyday living in this facility.

Touch the NEXT button to go to the next screen.

S1 Are there inmates in this facility who you think of as your friends?

1 Yes
2 No
DK/REF

S2 Are there inmates in this facility who you can talk to about your personal problems?

1 Yes
2 No
DK/REF

S3 Are there inmates in this facility who would protect you if another inmate was trying to hurt you?

1 Yes
2 No
DK/REF

S4 Are there correctional officers or other staff at this facility who you can talk to about your personal problems?

1 Yes
2 No
DK/REF

S5 Are there correctional officers or other staff at this facility who would protect you if another inmate was trying to hurt you?

1 Yes
2 No
DK/REF

S6 How crowded is it in your housing unit?

1 Not at all crowded
2 Slightly crowded
3 Pretty crowded
4 Very crowded
DK/REF

S7 How crowded is it outside of the housing units – for example, in the dining hall, classrooms, gym, or work areas?

1 Not at all crowded
2 Slightly crowded
3 Pretty crowded
4 Very crowded
DK/REF

S8 How much privacy do you have in your housing unit?

1 None
2 A little
3 Some
4 A lot
DK/REF

S9 Please indicate whether you agree or disagree with each of the following statements.

Staff at this facility…

	Agree	Disagree
S9a. Are generally fair	1	2
S9b. Do their best to make this facility safe and secure	1	2
S9c. Try to meet the needs of the inmates	1	2
S9d. Break up fights quickly	1	2
S9e. Use physical force only when necessary	1	2
S9f. Let inmates know what is expected of them	1	2
S9g. Generally treat inmates with respect	1	2
S9h. Follow facility rules when handling inmate complaints and grievances	1	2
S9i. Often write up inmates who don't deserve it	1	2

S10 **DOAFILL1,** how often have you been visited by your family or friends?

1 Frequently
2 Sometimes
3 Rarely
4 Never
DK/REF

S11 **DOAFILL1**, how often have you received letters from your family or friends?

1 Frequently
2 Sometimes
3 Rarely
4 Never
DK/REF

S12 **DOAFILL1**, how often have you talked on the telephone with your family or friends?

1 Frequently
2 Sometimes
3 Rarely
4 Never
DK/REF

S13 **DOAFILL1**, how often are inmates at this facility hit, punched, or assaulted by other inmates?

1 Frequently
2 Sometimes
3 Rarely
4 Never
DK/REF

S14 **DOAFILL1**, how often do **you** worry about being hit, punched, or assaulted by other inmates in this facility?

1 Frequently
2 Sometimes
3 Rarely
4 Never
DK/REF

S15 **DOAFILL1**, how often have you **seen** other inmates with some type of weapon?

1 Frequently
2 Sometimes
3 Rarely
4 Never
DK/REF

S16 **DOAFILL1,** how much gang activity has there been at this facility?

1 None
2 A little
3 Some
4 A lot
DK/REF

S17 **DOAFILL1**, have you been in a fight, assault, or incident in which **another inmate** tried to harm you?

1 Yes
2 No
DK/REF

S18 [IF S17 = 1] **DOAFILL1**, how many times have you been in a fight, assault, or other incident in which another inmate tried to harm you?

1 1 time
2 2 times
3 3 – 10 times
4 11 times or more
DK/REF

S19 [IF S18 = 3] **DOAFILL1,** how many times have you been in a fight, assault, or other incident in which another inmate tried to harm you?

1 3 times
2 4 times
3 5 times
4 6 times
5 7 times
6 8 times
7 9 times
8 10 times
DK/REF

S20 [IF S18 = 4] **DOAFILL1,** how many times have you been in a fight assault, or other incident in which another inmate tried to harm you?

NUMBER OF TIMES: _____ [RANGE: 11 – 999]
DK/REF

X3 [IF S17 = 1] **DOAFILL1**, what injuries did you receive in a fight, assault, or incident in which another inmate hurt you?

	Yes	No
X3a. You received knife or stab wounds	1	2
X3b. You received broken bones	1	2
X3c. Your teeth were chipped or knocked out	1	2
X3d You received internal injuries	1	2
X3e. You were knocked unconscious	1	2
X3f. You received bruises, a black eye, sprains, cuts, scratches, swelling, welts, or burns	1	2

X5 [IF X3a = 1 OR X3b = 1 OR X3c = 1 OR X3d = 1 OR X3e = 1 OR X3f = 1] Did you see a doctor, nurse, or other health care provider for your injuries?

1 Yes
2 No
DK/REF

S21 **DOAFILL1**, have you been in a fight, assault, or incident in which a **correctional officer or other facility staff person** tried to harm you?

1 Yes
2 No
DK/REF

S22 [IF S21 = 1] **DOAFILL1**, how many times have you been in a fight, assault, or incident in which a correctional officer or other facility staff person tried to harm you?

1 1 time
2 2 times
3 3 – 10 times
4 11 times or more
DK/REF

S23 [IF S22 = 3] **DOAFILL1,** how many times have you been in a fight, assault, or other incident in which a correctional officer or other facility staff person tried to harm you?

1 3 times
2 4 times
3 5 times
4 6 times
5 7 times
6 8 times
7 9 times
8 10 times
DK/REF

S24 [IF S22 = 4] **DOAFILL1,** how many times have you been in a fight, assault, or other incident in which a correctional officer or other facility staff person tried to harm you?

NUMBER OF TIMES: _____ [RANGE: 11 – 999]
DK/REF

S34 [IF S21 = 1] **DOAFILL1**, what injuries did you receive in a fight, assault, or incident in which a correctional officer or other facility staff person tried to harm you?

	Yes	**No**
S34a. You received knife or stab wounds	1	2
S34b. You received broken bones	1	2
S34c. Your teeth were chipped or knocked out	1	2
S34d You received internal injuries	1	2
S34e. You were knocked unconscious	1	2
S34f. You received bruises, a black eye, sprains, cuts, scratches, swelling, welts, or burns	1	2

S35 [IF S34a = 1 OR S34b = 1 OR S34c = 1 OR S34d = 1 OR S34e = 1 OR S34f = 1] Did you see a doctor, nurse, or other health care provider for your injuries?

1 Yes
2 No
DK/REF

S25 **DOAFILL1**, have any of your personal possessions or belongings been taken by another inmate without your permission?

1 Yes
2 No
DK/REF

S26 [IF S25 = 1] **DOAFILL1**, how many times have any of your personal possessions or belongings been taken by another inmate without your permission?

1 1 time
2 2 times
3 3 – 10 times
4 11 times or more
DK/REF

S27 [IF S26 = 3] **DOAFILL1,** how many times have any of your personal possessions or belongings been taken by another inmate without your permission?

1 3 times
2 4 times
3 5 times
4 6 times
5 7 times
6 8 times
7 9 times
8 10 times
DK/REF

S28 [IF S26 = 4] **DOAFILL1,** how many times have any of your personal possessions or belongings been taken by another inmate without your permission?

NUMBER OF TIMES: _____ [RANGE: 11 – 999]
DK/REF

S29 **DOAFILL1**, do you think there has been enough staff at this facility to provide for the safety and security of inmates?

1 Yes
2 No
DK/REF

S30 **DOAFILL1**, have you filed a grievance for any reason?

1 Yes
2 No
DK/REF

S31 [IF S30 = 1] **DOAFILL1**, how many times have you filed a grievance for any reason?

1 1 time
2 2 times
3 3 – 10 times
4 11 times or more
DK/REF

S32 [IF S31 = 3] **DOAFILL1,** how many times have you filed a grievance for any reason?

1 3 times
2 4 times
3 5 times
4 6 times
5 7 times
6 8 times
7 9 times
8 10 times
DK/REF

S33 [IF S31 = 4] **DOAFILL1,** how many times have you filed a grievance for any reason?

NUMBER OF TIMES: _____ [RANGE: 11 – 999]
DK/REF

Section R – Mental Health

R1 The next questions are about how you have been feeling during the past 30 days.

About how often during the past 30 days did you feel nervous?

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
DK/REF

R2 During the past 30 days, about how often did you feel hopeless?

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
DK/REF

R3 During the past 30 days, about how often did you feel restless or fidgety?

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
DK/REF

R4 How often in the past 30 days did you feel so depressed that nothing could cheer you up?

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
DK/REF

R5 About how often in the past 30 days did you feel that everything was an effort?

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
DK/REF

R6 About how often in the past 30 days did you feel worthless?

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
DK/REF

R7 Did you **ever** in your life have a month or longer when you felt sad or depressed most of the time?

1 Yes
2 No
DK/REF

R8 [IF R7 = 1] During those times when your feelings of sadness or depression were at their worst, did you also have other problems like low energy, changes in your sleep or appetite, or problems with your ability to concentrate?

1 Yes
2 No
DK/REF

R9 [IF R8 = 1] You mentioned feeling sad or depressed for a month or longer in your life and having other problems like low energy, changes in your sleep or appetite, or an inability to concentrate. About how many weeks in the past 12 months did you have problems like this?

Use the keypad below to enter the number of weeks. You can enter any number from 0 to 52.

NUMBER OF WEEKS: _____ [RANGE: 0 – 52]
DK/REF

R10 Did you **ever** in your life have times lasting a month or longer when you were nervous, edgy, anxious, or worried most of the time?

1 Yes
2 No
DK/REF

R11 [IF R10 = 1] During those times, did you also have other problems like being restless, irritable, easily tired, or have difficulty falling asleep?

1 Yes
2 No
DK/REF

R12 [IF R11 = 1] About how many weeks in the last 12 months did you have problems like this – of being nervous or anxious or worried along with other problems like being irritable or having trouble sleeping?

Use the keypad below to enter the number of weeks. You can enter any number from 0 to 52.

NUMBER OF WEEKS: _____ [RANGE 0 – 52]
DK/REF

R13 Some people have feelings of fright or panic. They have physical sensations like a pounding heart, shortness of breath, dizziness, or a feeling like they are going to throw up. They sometimes even feel like they are going to lose control, go crazy, or die. Did you ever in your life have an episode like this, often called an anxiety or panic attack?

1 Yes
2 No
DK/REF

R14 [IF R13 = 1] About how many weeks in the last 12 months did you have at least one anxiety or panic attack?

Use the keypad below to enter the number of weeks. You can enter any number from 0 to 52.

NUMBER OF WEEKS: _____ [RANGE: 0 – 52]
DK/REF

R15 Did you ever in your life have anger attacks -- when all of a sudden you lost control and either yelled, broke things, or tried to hurt someone?

1 Yes
2 No
DK/REF

R16 [IF R15 = 1] About how many weeks in the last 12 months did you have at least one anger attack?

Use the keypad below to enter the number of weeks. You can enter any number from 0 to 52.

NUMBER OF WEEKS: _____ [RANGE: 0 – 52]
DK/REF

R17 Some people have times lasting several days or longer when they feel much more excited or manic or more full of energy than usual. Their minds go too fast. They talk a lot. They are very restless and sometimes do things unusual for them, such as driving too fast or spending too much money. Have you ever in your life had an episode like this lasting several days or longer?

1 Yes
2 No
DK/REF

R18 [IF R17 = 1] About how many weeks in the last 12 months did you have an episode of being more excited or manic or more full of energy than usual?

Use the keypad below to enter the number of weeks. You can enter any number from 0 to 52.

ENTER NUMBER OF WEEKS: _____ [RANGE: 0 – 52]
DK/REF

R19 [IF R17 = 2 OR DK OR REF] Have you ever in your life had an episode lasting several days or longer when most of the time you were so irritable or grouchy that you either started arguments, shouted at people, or hit people?

1 Yes
2 No
DK/REF

R20 [IF R19 = 1] About how many weeks in the last 12 months did you have an episode of being very irritable or grouchy?

Use the keypad below to enter the number of weeks. You can enter any number from 0 to 52.

ENTER NUMBER OF WEEKS: _____ [RANGE: 0 – 52]
DK/REF

R21 Did you ever in your life have any of the following experiences happen to you:

	Yes	**No**
R21a A serious fight or physical assault?	1	2
R21a1. A sexual assault?	1	2
R21b. A life-threatening accident or injury?	1	2
R21c. The murder or suicide of a loved one?	1	2
R21d. The accidental death of a loved one?	1	2
R21e. Witnessed someone being seriously injured or killed?	1	2
R21f. Any experience that put you at risk of death?	1	2

R22 [IF R21a = 1 OR R21b = 1 OR R21c = 1 OR R21d = 1 OR R21e = 1 OR R21f = 1] Experiences like the ones listed on the last screen can cause emotional problems like nightmares, very upsetting thoughts, anxiety, depression, feeling detached from other people, and avoiding situations that remind you of the experience. Did you ever have problems like these after any of the experiences that have happened to you?

1 Yes
2 No
DK/REF

R23 [IF R22 = 1] What is the longest amount of time you ever had any kinds of emotional problems after any of the experiences that have happened to you?

1 Less than 1 month
2 1 – 3 months
3 4 – 6 months
4 7 – 12 months
5 More than a year
DK/REF

R24 Have you **ever** been told by a mental health professional, such as a psychiatrist or psychologist, that you had…

	Yes	No
R24a. Manic depression, a bipolar disorder, or mania?	1	2
R24b. A depressive disorder?	1	2
R24c. Schizophrenia or another psychotic disorder?	1	2
R24d. Post-traumatic stress disorder or PTSD?	1	2
R24e. Another anxiety disorder, such as panic disorder or OCD?	1	2
R24f. A personality disorder, such as antisocial or borderline personality	1	2
R24g. A mental or emotional condition other than those listed above?	1	2

R25 The next questions are about any times you may have stayed overnight in any type of hospital or other facility for any problem with your emotions, nerves, or mental health. Please do **not** include any overnight hospital stays for alcohol or drug use.

Touch the NEXT button to go to the next screen.

R26 Have you **ever** stayed overnight or longer in any type of hospital or other facility to receive treatment or counseling for any problem you were having with your emotions, nerves, or mental health?

1 Yes
2 No
DK/REF

R27 [IF R26 = 1 AND FACILITY = JAIL] During the 12 months before you were admitted to this facility, did you stay overnight or longer in any type of hospital or other facility to receive treatment or counseling for any problem you were having with your emotions, nerves, or mental health?

[IF R26 = 1 AND FACILITY = PRISON] During the 12 months before you were admitted to any facility to serve time on your **current sentence,** did you stay overnight or longer in any type of hospital or other facility to receive treatment or counseling for problems you were having with your emotions, nerves, or mental health?

1 Yes
2 No
DK/REF

R28 The next questions are about services you may have received for any problem with your emotions, nerves, or mental health. As you answer these questions please do **not** include any services you may have received for drug or alcohol use. Some questions ask about prescription medicine. Prescription medicines are drugs that you take if a doctor authorizes them for you.

Touch the NEXT button to go to the next screen.

R29 Have you **ever** taken any prescription medicine for any problem you were having with your emotions, nerves, or mental health?

1 Yes
2 No
DK/REF

R30 [IF B4 = 1 AND R29 = 1] At the time of the offense for which you are currently serving time, were you taking prescription medicine for any problem you were having with your emotions, nerves, or mental health?

[IF B4 = 2 OR DK OR REF AND R29 = 1] At the time of the offense for which you are currently being held, were you taking prescription medicine for any problem you were having with your emotions, nerves, or mental health?

1 Yes
2 No
DK/REF

R31 [IF FACILITY = PRISON AND R29 = 1] Since you were admitted to any facility to serve time on your **current sentence**, have you taken prescription medicine for any problem you were having with your emotions, nerves, or mental health?

[IF FACILITY = JAIL AND R29 = 1] Since you were admitted to this facility, have you taken prescription medicine for any problem you were having with your emotions, nerves, or mental health?

1 Yes
2 No
DK/REF

R32 [IF R31 = 1] Are you **currently** taking prescription medicine for any problem with your emotions, nerves, or mental health?

1 Yes
2 No
DK/REF

R33 Have you **ever** received counseling or therapy from a trained professional such as a psychiatrist, psychologist, social worker, or nurse for any problem you were having with your emotions, nerves, or mental health?

1 Yes
2 No
DK/REF

R34 [IF R33 = 1 AND FACILITY = PRISON] Since you were admitted to any facility to serve time on your **current sentence**, have you received counseling or therapy from a trained professional such as a psychiatrist, psychologist, social worker, or nurse for any problem you were having with your emotions, nerves, or mental health?

[IF R33 = 1 AND FACILITY = JAIL] Since you were admitted to this facility, have you received counseling or therapy from a trained professional such as a psychiatrist, psychologist, social worker, or nurse for any problem you were having with your emotions, nerves, or mental health?

1 Yes
2 No
DK/REF

R35 [IF R33 = 1] Are you **currently** receiving any counseling or therapy from a trained professional such as a psychiatrist, psychologist, social worker, or nurse for any problem with your emotions, nerves, or mental health?

1 Yes
2 No
DK/REF

R36 [IF FACILITY TYPE = JAIL AND R24a = 1] At the time you were admitted to this facility, did you have manic depression, a bipolar disorder, or mania?

[IF FACILITY TYPE = PRISON AND R24a = 1] At the time you were admitted to any facility to serve time on your **current sentence**, did you have manic depression, a bipolar disorder, or mania?

1 Yes
2 No
DK/REF

R37 [IF FACILITY TYPE = JAIL AND R36 = 1] In the 30 days before you were admitted to this facility, were you taking any prescription medicine for your manic depression, bipolar disorder, or mania?

[IF FACILITY TYPE = PRISON AND R36 =1] In the 30 days before you were admitted to any facility to serve time on your **current sentence**, were you taking any prescription medicine for your manic depression, bipolar disorder, or mania?

1 Yes
2 No
DK/REF

R38 [IF FACILITY TYPE = JAIL AND R36 = 1] In the 30 days before you were admitted to this facility, were you receiving any medical treatment other than prescription medicine for your manic depression, bipolar disorder, or mania?

[IF FACILITY TYPE = PRISON AND R36 =1] In the 30 days before you were admitted to any facility to serve time on your **current sentence**, were you receiving any medical treatment other than prescription medicine for your manic depression, bipolar disorder, or mania?

1 Yes
2 No
DK/REF

R39 [IF FACILITY = JAIL AND R36 = 2 OR DK OR REF] Since you were admitted to this facility, have you been told by a doctor, nurse, or other health care provider that you had manic depression, a bipolar disorder, or mania?

[IF FACILITY = PRISON AND R36 = 2 OR DK OR REF] Since you were admitted to any facility to serve time on your **current sentence**, have you been told by a doctor, nurse, or other health care provider that you had manic depression, a bipolar disorder, or mania?

1 Yes
2 No
DK/REF

R40 [IF FACILITY = JAIL AND (R36 =1 OR R39 =1)] Since you were admitted to this facility, have you taken any prescription medicine for your manic depression, bipolar disorder, or mania?

[IF FACILITY = PRISON AND (R36 =1 OR R39 =1)] Since you were admitted to any facility to serve time on your **current sentence**, have you taken any prescription medicine for your manic depression, bipolar disorder, or mania?

1 Yes
2 No
DK/REF

R41 [IF FACILITY = JAIL AND (R36 =1 OR R39 =1)] Since you were admitted to this facility, have you received any medical treatment other than prescription medicine for your manic depression, bipolar disorder, or mania?

[IF FACILITY = PRISON AND (R36 =1 OR R39 =1)] Since you were admitted to any facility to serve time on your **current sentence**, have you received any medical treatment other than prescription medicine for your manic depression, bipolar disorder, or mania?

1 Yes
2 No
DK/REF

R42 [IF FACILITY = JAIL AND R39 = 1 AND R40 = 1], How soon after you were told that you had manic depression, a bipolar disorder, or mania did you start taking prescription medicine at this facility for manic depression, bipolar disorder, or mania?

[IF FACILITY = PRISON AND R39 = 1 AND R40 = 1] Think about when you were first told that you had manic depression, a bipolar disorder, or mania after you were admitted to any facility to serve time on your **current sentence**. How soon after you were told did you start taking prescription medicine for your manic depression, bipolar disorder, or mania?

1 Within 2 days
2 More than 2 days but within 7 days
3 More than 7 days but within 14 days
4 More than 14 days but within 30 days
5 More than 30 days
DK/REF

R43 [IF FACILITY = JAIL AND R39 = 1 AND R41 =1] How soon after you were told that you had manic depression, a bipolar disorder, or mania did you start receiving any medical treatment other than prescription medicine at this facility for manic depression, a bipolar disorder, or mania?

[IF FACILITY = PRISON AND R39 =1 AND R41 = 1] Think about when you were first told that you had manic depression, a bipolar disorder, or mania after you were admitted to any facility to serve time on your **current sentence.** How soon after you were told did you start receiving any medical treatment other than prescription medicine for your manic depression, bipolar disorder, or mania?

1 Within 2 days
2 More than 2 days but within 7 days
3 More than 7 days but within 14 days
4 More than 14 days but within 30 days
5 More than 30 days
DK/REF

R44 [IF FACILITY = JAIL AND R36 = 1 AND R40 = 1] How soon after you were admitted to this facility did you start taking prescription medicine for your manic depression, bipolar disorder, or mania?

[IF FACILITY = PRISON AND R36 = 1 AND R40 = 1] How soon after you were admitted to any facility to serve time on your **current sentence** did you start taking prescription medicine for your manic depression, bipolar disorder, or mania?

1 Within 2 days
2 More than 2 days but within 7 days
3 More than 7 days but within 14 days
4 More than 14 days but within 30 days
5 More than 30 days
DK/REF

R45 [IF FACILITY = JAIL AND R36 = 1 AND R41 = 1] How soon after you were admitted to this facility did you start receiving any medical treatment other than prescription medicine for your manic depression, bipolar disorder, or mania?

[IF FACILITY = PRISON AND R36 = 1 AND R41 = 1] How soon after you were admitted to any facility to serve time on your **current sentence** did you start receiving any medical treatment other than prescription medicine for your manic depression, bipolar disorder, or mania?

1 Within 2 days
2 More than 2 days but within 7 days
3 More than 7 days but within 14 days
4 More than 14 days but within 30 days
5 More than 30 days
DK/REF

R46 [IF R24a = 1] Are you **currently** taking prescription medicine for your manic depression, bipolar disorder, or mania?

1 Yes
2 No
DK/REF

R47 [IF R24a = 1] Are you **currently** receiving any medical treatment other than prescription medicine for your manic depression, bipolar disorder, or mania?

1 Yes
2 No
DK/REF

R48 [IF R46 = 2] Why aren't you currently taking prescription medicine for your manic depression, bipolar disorder, or mania?

	Yes	No
R48a. You have not seen a doctor to get the medicine	1	2
R48b. The doctor at the facility doesn't think you need medicine	1	2
R48c. You don't like taking the medicine	1	2
R48d. You don't think you need the medicine	1	2
R48e. The facility is not willing to give the medicine to you	1	2
R48f. You would have to be transferred to a different facility to receive the medicine	1	2
R48g. You don't currently have manic depression, bipolar disorder or mania	1	2
R48h. Some other reason	1	2

R49 [IF FACILITY TYPE = JAIL AND R24b = 1] At the time you were admitted to this facility, did you have a depressive disorder?

[IF FACILITY TYPE = PRISON AND R24b = 1] At the time you were admitted to any facility to serve time on your **current sentence**, did you have a depressive disorder?

1 Yes
2 No
DK/REF

R50 [IF FACILITY TYPE = JAIL AND R49 = 1] In the 30 days before you were admitted to this facility, were you taking any prescription medicine for your depressive disorder?

[IF FACILITY TYPE = PRISON AND R49 =1] In the 30 days before you were admitted to any facility to serve time on your **current sentence**, were you taking any prescription medicine for your depressive disorder?

1 Yes
2 No
DK/REF

R51 [IF FACILITY TYPE = JAIL AND R49 = 1] In the 30 days before you were admitted to this facility, were you receiving any medical treatment other than prescription medicine for your depressive disorder?

[IF FACILITY TYPE = PRISON AND R49 =1] In the 30 days before you were admitted to any facility to serve time on your **current sentence**, were you receiving any medical treatment other than prescription medicine for a depressive disorder?

1 Yes
2 No
DK/REF

R52 [IF FACILITY = JAIL AND R49 = 2 OR DK OR REF] Since you were admitted to this facility, have you been told by a doctor, nurse, or other health care provider that you had a depressive disorder?

[IF FACILITY = PRISON AND R49 = 2 OR DK OR REF] Since you were admitted to any facility to serve time on your **current sentence**, have you been told by a doctor, nurse, or other health care provider that you had a depressive disorder?

1 Yes
2 No
DK/REF

R53 [IF FACILITY = JAIL AND (R49 =1 OR R52 =1)] Since you were admitted to this facility, have you taken any prescription medicine for your depressive disorder?

[IF FACILITY = PRISON AND (R49 =1 OR R52 =1)] Since you were admitted to any facility to serve time on your **current sentence**, have you taken any prescription medicine for your depressive disorder?

1 Yes
2 No
DK/REF

R54 [IF FACILITY = JAIL AND (R49 =1 OR R52 =1)] Since you were admitted to this facility, have you received any medical treatment other than prescription medicine for your depressive disorder?

[IF FACILITY = PRISON AND (R49 =1 OR R52 =1)] Since you were admitted to any facility to serve time on your **current sentence**, have you received any medical treatment other than prescription medicine for your depressive disorder?

1 Yes
2 No
DK/REF

R55 [IF FACILITY = JAIL AND R52 = 1 AND R53 = 1] How soon after you were told that you had a depressive disorder did you start taking prescription medicine at this facility for your depressive disorder?

[IF FACILITY = PRISON AND R52 = 1 AND R53 = 1] Think about when you were first told that you had a depressive disorder after you were admitted to any facility to serve time on your **current sentence**. How soon after you were told did you start taking prescription medicine for your depressive disorder?

1 Within 2 days
2 More than 2 days but within 7 days
3 More than 7 days but within 14 days
4 More than 14 days but within 30 days
5 More than 30 days
DK/REF

R56 [IF FACILITY = JAIL AND R52 = 1 AND R54 =1] How soon after you were told that you had a depressive disorder did you start receiving any medical treatment other than prescription medicine at this facility for your depressive disorder?

[IF FACILITY = PRISON AND R52 =1 AND R54 = 1] Think about when you were first told that you had a depressive disorder after you were admitted to any facility to serve time on your **current sentence.** How soon after you were told did you start receiving any medical treatment other than prescription medicine for your depressive disorder?

1 Within 2 days
2 More than 2 days but within 7 days
3 More than 7 days but within 14 days
4 More than 14 days but within 30 days
5 More than 30 days
DK/REF

R57 [IF FACILITY = JAIL AND R49 = 1 AND R53 = 1] How soon after you were admitted to this facility did you start taking prescription medicine for your depressive disorder?

[IF FACILITY = PRISON AND R49 = 1 AND R53 = 1] How soon after you were admitted to any facility to serve time on your **current sentence** did you start taking prescription medicine for your depressive disorder?

1 Within 2 days
2 More than 2 days but within 7 days
3 More than 7 days but within 14 days
4 More than 14 days but within 30 days
5 More than 30 days
DK/REF

R58 [IF FACILITY = JAIL AND R49 = 1 AND R54 = 1] How soon after you were admitted to this facility did you start receiving any medical treatment other than prescription medicine for your depressive disorder?

[IF FACILITY = PRISON AND R49 = 1 AND R54 = 1] How soon after you were admitted to any facility to serve time on your **current sentence** did you start receiving any medical treatment other than prescription medicine for your depressive disorder?

1 Within 2 days
2 More than 2 days but within 7 days
3 More than 7 days but within 14 days
4 More than 14 days but within 30 days
5 More than 30 days
DK/REF

R59 [IF R24b = 1] Are you **currently** taking prescription medicine for your depressive disorder?

1 Yes
2 No
DK/REF

R60 [IF R24b = 1] Are you **currently** receiving any medical treatment other than prescription medicine for your depressive disorder?

1 Yes
2 No
DK/REF

R61 [IF R59 = 2] Why aren't you currently taking prescription medicine for your depressive disorder?

	Yes	**No**
R61a. You have not seen a doctor to get the medicine	1	2
R61b. The doctor at the facility doesn't think you need medicine	1	2
R61c. You don't like taking the medicine	1	2
R61d. You don't think you need the medicine	1	2
R61e. The facility is not willing to give the medicine to you	1	2
R61f. You would have to be transferred to a different facility to receive the medicine	1	2
R61g. You don't currently have a depressive disorder	1	2
R61h. Some other reason	1	2

R62 [IF FACILITY TYPE = JAIL AND R24c = 1] At the time you were admitted to this facility, did you have schizophrenia or another psychotic disorder?

[IF FACILITY TYPE = PRISON AND R24c = 1] At the time you were admitted to any facility to serve time on your **current sentence**, did you have schizophrenia or another psychotic disorder?

1 Yes
2 No
DK/REF

R63 [IF FACILITY TYPE = JAIL AND R62 = 1] In the 30 days before you were admitted to this facility, were you taking any prescription medicine for schizophrenia or another psychotic disorder?

[IF FACILITY TYPE = PRISON AND R62 =1] In the 30 days before you were admitted to any facility to serve time on your **current sentence**, were you taking any prescription medicine for schizophrenia or another psychotic disorder?

1 Yes
2 No
DK/REF

R64 [IF FACILITY TYPE = JAIL AND R62 = 1] In the 30 days before you were admitted to this facility, were you receiving any medical treatment other than prescription medicine for schizophrenia or another psychotic disorder?

[IF FACILITY TYPE = PRISON AND R62 =1] In the 30 days before you were admitted to any facility to serve time on your **current sentence**, were you receiving any medical treatment other than prescription medicine for schizophrenia or another psychotic disorder?

1 Yes
2 No
DK/REF

R65 [IF FACILITY = JAIL AND R62 = 2 OR DK OR REF] Since you were admitted to this facility, have you been told by a doctor, nurse, or other health care provider that you had schizophrenia or another psychotic disorder?

[IF FACILITY = PRISON AND R62 = 2 OR DK OR REF] Since you were admitted to any facility to serve time on your **current sentence**, have you been told by a doctor, nurse, or other health care provider that you had schizophrenia or another psychotic disorder?

1 Yes
2 No
DK/REF

R66 [IF FACILITY = JAIL AND (R62 =1 OR R65 =1)] Since you were admitted to this facility, have you taken any prescription medicine for schizophrenia or another psychotic disorder?

[IF FACILITY = PRISON AND (R62 =1 OR R65 =1)] Since you were admitted to any facility to serve time on your **current sentence**, have you taken any prescription medicine for schizophrenia or another psychotic disorder?

1 Yes
2 No
DK/REF

R67 [IF FACILITY = JAIL AND (R62 =1 OR R65 =1)] Since you were admitted to this facility, have you received any medical treatment other than prescription medicine for schizophrenia or another psychotic disorder?

[IF FACILITY = PRISON AND (R62 =1 OR R65 =1)] Since you were admitted to any facility to serve time on your **current sentence**, have you received any medical treatment other than prescription medicine for schizophrenia or another psychotic disorder?

1 Yes
2 No
DK/REF

R68 [IF FACILITY = JAIL AND R65 = 1 AND R66 = 1] How soon after you were told that you had schizophrenia or another psychotic disorder did you start taking prescription medicine at this facility for schizophrenia or another psychotic disorder?

[IF FACILITY = PRISON AND R65 = 1 AND R66 = 1] Think about when you were first told that you had schizophrenia or another psychotic disorder after you were admitted to any facility to serve time on your **current sentence**. How soon after you were told did you start taking prescription medicine for schizophrenia or another psychotic disorder?

1 Within 2 days
2 More than 2 days but within 7 days
3 More than 7 days but within 14 days
4 More than 14 days but within 30 days
5 More than 30 days
DK/REF

R69 [IF FACILITY = JAIL AND R65 = 1 AND R67 =1] How soon after you were told that you had schizophrenia or another psychotic disorder did you start receiving any medical treatment other than prescription medicine at this facility for schizophrenia or another psychotic disorder?

[IF FACILITY = PRISON AND R65 =1 AND R67 = 1] Think about when you were first told that you had schizophrenia or another psychotic disorder after you were admitted to any facility to serve time on your **current sentence.** How soon after you were told did you start receiving any medical treatment other than prescription medicine for schizophrenia or another psychotic disorder?

1 Within 2 days
2 More than 2 days but within 7 days
3 More than 7 days but within 14 days
4 More than 14 days but within 30 days
5 More than 30 days
DK/REF

R70 [IF FACILITY = JAIL AND R62 = 1 AND R66 = 1] How soon after you were admitted to this facility did you start taking prescription medicine for schizophrenia or another psychotic disorder?

[IF FACILITY = PRISON AND R62 = 1 AND R66 = 1] How soon after you were admitted to any facility to serve time on your **current sentence** did you start taking prescription medicine for schizophrenia or another psychotic disorder?

1 Within 2 days
2 More than 2 days but within 7 days
3 More than 7 days but within 14 days
4 More than 14 days but within 30 days
5 More than 30 days
DK/REF

R71 [IF FACILITY = JAIL AND R62 = 1 AND R67 = 1] How soon after you were admitted to this facility did you start receiving any medical treatment other than prescription medicine for schizophrenia or another psychotic disorder?

[IF FACILITY = PRISON AND R62 = 1 AND R67 = 1] How soon after you were admitted to any facility to serve time on your **current sentence** did you start receiving any medical treatment other than prescription medicine for schizophrenia or another psychotic disorder?

1 Within 2 days
2 More than 2 days but within 7 days
3 More than 7 days but within 14 days
4 More than 14 days but within 30 days
5 More than 30 days
DK/REF

R72 [IF R24c = 1] Are you **currently** taking prescription medicine for schizophrenia or another psychotic disorder?

1 Yes
2 No
DK/REF

R73 [IF R24c = 1] Are you **currently** receiving any medical treatment other than prescription medicine for schizophrenia or another psychotic disorder?

1 Yes
2 No
DK/REF

R74 [IF R72 = 2] Why aren't you currently taking prescription medicine for schizophrenia or another psychotic disorder?

	Yes	**No**
R74a. You have not seen a doctor to get the medicine	1	2
R74b. The doctor at the facility doesn't think you need medicine	1	2
R74c. You don't like taking the medicine	1	2
R74d. You don't think you need the medicine	1	2
R74e. The facility is not willing to give the medicine to you	1	2
R74f. You would have to be transferred to a different facility to receive the medicine	1	2
R74g. You don't currently have schizophrenia or another psychotic disorder	1	2
R74h. Some other reason	1	2

R75 [IF FACILITY TYPE = JAIL AND R24d = 1] At the time you were admitted to this facility, did you have post-traumatic stress disorder or PTSD?

[IF FACILITY TYPE = PRISON AND R24d = 1] At the time you were admitted to any facility to serve time on your **current sentence**, did you have post-traumatic stress disorder or PTSD?

1 Yes
2 No
DK/REF

R76 [IF FACILITY TYPE = JAIL AND R75 = 1] In the 30 days before you were admitted to this facility, were you taking any prescription medicine for your post-traumatic stress disorder or PTSD?

[IF FACILITY TYPE = PRISON AND R75 =1] In the 30 days before you were admitted to any facility to serve time on your **current sentence**, were you taking any prescription medicine for your post-traumatic stress disorder or PTSD?

1 Yes
2 No
DK/REF

R77 [IF FACILITY TYPE = JAIL AND R75 = 1] In the 30 days before you were admitted to this facility, were you receiving any medical treatment other than prescription medicine for your post-traumatic stress disorder or PTSD?

[IF FACILITY TYPE = PRISON AND R75 =1] In the 30 days before you were admitted to any facility to serve time on your **current sentence**, were you receiving any medical treatment other than prescription medicine for your post-traumatic stress disorder or PTSD?

1 Yes
2 No
DK/REF

R78 [IF FACILITY = JAIL AND R75 = 2 OR DK OR REF] Since you were admitted to this facility, have you been told by a doctor, nurse, or other health care provider that you had post-traumatic stress disorder or PTSD?

[IF FACILITY = PRISON AND R75 = 2 OR DK OR REF] Since you were admitted to any facility to serve time on your **current sentence**, have you been told by a doctor, nurse, or other health care provider that you had post-traumatic stress disorder or PTSD?

1 Yes
2 No
DK/REF

R79 [IF FACILITY = JAIL AND (R75 =1 OR R78 =1)] Since you were admitted to this facility, have you taken any prescription medicine for your post-traumatic stress disorder or PTSD?

[IF FACILITY = PRISON AND (R75 =1 OR R78 =1)] Since you were admitted to any facility to serve time on your **current sentence**, have you taken any prescription medicine for your post-traumatic stress disorder or PTSD?

1 Yes
2 No
DK/REF

R80 [IF FACILITY = JAIL AND (R75 =1 OR R78 =1)] Since you were admitted to this facility, have you received any medical treatment other than prescription medicine for your post-traumatic stress disorder or PTSD?

[IF FACILITY = PRISON AND (R75 =1 OR R78 =1)] Since you were admitted to any facility to serve time on your **current sentence**, have you received any medical treatment other than prescription medicine for your post-traumatic stress disorder or PTSD?

1 Yes
2 No
DK/REF

R81 [IF FACILITY = JAIL AND R78 = 1 AND R79 = 1] How soon after you were told that you had post-traumatic stress disorder or PTSD did you start taking prescription medicine at this facility for post-traumatic stress disorder or PTSD?

[IF FACILITY = PRISON AND R78 = 1 AND R79 = 1] Think about when you were first told that you had post-traumatic stress disorder or PTSD after you were admitted to any facility to serve time on your **current sentence**. How soon after you were told did you start taking prescription medicine for your post-traumatic stress disorder or PTSD?

1 Within 2 days
2 More than 2 days but within 7 days
3 More than 7 days but within 14 days
4 More than 14 days but within 30 days
5 More than 30 days
DK/REF

R82 [IF FACILITY = JAIL AND R78 = 1 AND R80 =1] How soon after you were told that you had post-traumatic stress disorder or PTSD did you start receiving any medical treatment other than prescription medicine at this facility for post-traumatic stress disorder or PTSD?

[IF FACILITY = PRISON AND R78 =1 AND R80 = 1] Think about when you were first told that you had post-traumatic stress disorder or PTSD after you were admitted to any facility to serve time on your **current sentence.** How soon after you were told did you start receiving any medical treatment other than prescription medicine for your post-traumatic stress disorder or PTSD?

1 Within 2 days
2 More than 2 days but within 7 days
3 More than 7 days but within 14 days
4 More than 14 days but within 30 days
5 More than 30 days
DK/REF

R83 [IF FACILITY = JAIL AND R75 = 1 AND R79 = 1] How soon after you were admitted to this facility did you start taking prescription medicine for your post-traumatic stress disorder or PTSD?

[IF FACILITY = PRISON AND R75 = 1 AND R79 = 1] How soon after you were admitted to any facility to serve time on your **current sentence** did you start taking prescription medicine for your post-traumatic stress disorder or PTSD?

1 Within 2 days
2 More than 2 days but within 7 days
3 More than 7 days but within 14 days
4 More than 14 days but within 30 days
5 More than 30 days
DK/REF

R84 [IF FACILITY = JAIL AND R75 = 1 AND R80 = 1] How soon after you were admitted to this facility did you start receiving any medical treatment other than prescription medicine for your post-traumatic stress disorder or PTSD?

[IF FACILITY = PRISON AND R75 = 1 AND R80 = 1] How soon after you were admitted to any facility to serve time on your **current sentence** did you start receiving any medical treatment other than prescription medicine for your post-traumatic stress disorder or PTSD?

1 Within 2 days
2 More than 2 days but within 7 days
3 More than 7 days but within 14 days
4 More than 14 days but within 30 days
5 More than 30 days
DK/REF

R85 [IF R24d = 1] Are you **currently** taking prescription medicine for your post-traumatic stress disorder or PTSD?

1 Yes
2 No
DK/REF

R86 [IF R24d = 1] Are you **currently** receiving any medical treatment other than prescription medicine for your post-traumatic stress disorder or PTSD?

1 Yes
2 No
DK/REF

R87 [IF R85 = 2] Why aren't you currently taking prescription medicine for your post-traumatic stress disorder or PTSD?

	Yes	**No**
R87a. You have not seen a doctor to get the medicine	1	2
R87b. The doctor at the facility doesn't think you need medicine	1	2
R87c. You don't like taking the medicine	1	2
R87d. You don't think you need the medicine	1	2
R87e. The facility is not willing to give the medicine to you	1	2
R87f. You would have to be transferred to a different facility to receive the medicine	1	2
R87g. You don't currently have post-traumatic stress disorder or PTSD	1	2
R87h. Some other reason	1	2

R88 [IF FACILITY TYPE = JAIL AND R24e = 1] At the time you were admitted to this facility, did you have an anxiety disorder such as panic disorder?

[IF FACILITY TYPE = PRISON AND R24e = 1] At the time you were admitted to any facility to serve time on your **current sentence**, did you have an anxiety disorder such as panic disorder?

1 Yes
2 No
DK/REF

R89 [IF FACILITY TYPE = JAIL AND R88 = 1] In the 30 days before you were admitted to this facility, were you taking any prescription medicine for your anxiety disorder?

[IF FACILITY TYPE = PRISON AND R88 =1] In the 30 days before you were admitted to any facility to serve time on your **current sentence**, were you taking any prescription medicine for your anxiety disorder?

1 Yes
2 No
DK/REF

R90 [IF FACILITY TYPE = JAIL AND R88 = 1] In the 30 days before you were admitted to this facility, were you receiving any medical treatment other than prescription medicine for your anxiety disorder?

[IF FACILITY TYPE = PRISON AND R88 =1] In the 30 days before you were admitted to any facility to serve time on your **current sentence**, were you receiving any medical treatment other than prescription medicine for your anxiety disorder?

1 Yes
2 No
DK/REF

R91 [IF FACILITY = JAIL AND R88 = 2 OR DK OR REF] Since you were admitted to this facility, have you been told by a doctor, nurse, or other health care provider that you had an anxiety disorder such as panic disorder?

[IF FACILITY = PRISON AND R88 = 2 OR DK OR REF] Since you were admitted to any facility to serve time on your **current sentence**, have you been told by a doctor, nurse, or other health care provider that you had an anxiety disorder such as panic disorder?

1 Yes
2 No
DK/REF

R92 [IF FACILITY = JAIL AND (R88 =1 OR R91 =1)] Since you were admitted to this facility, have you taken any prescription medicine for your anxiety disorder?

[IF FACILITY = PRISON AND (R88 =1 OR R91 =1)] Since you were admitted to any facility to serve time on your **current sentence**, have you taken any prescription medicine for your anxiety disorder?

1 Yes
2 No
DK/REF

R93 [IF FACILITY = JAIL AND (R88 =1 OR R91 =1)] Since you were admitted to this facility, have you received any medical treatment other than prescription medicine for your anxiety disorder?

[IF FACILITY = PRISON AND (R88 =1 OR R91 =1)] Since you were admitted to any facility to serve time on your **current sentence**, have you received any medical treatment other than prescription medicine for your anxiety disorder?

1 Yes
2 No
DK/REF

R94 [IF FACILITY = JAIL AND R91 = 1 AND R92 = 1] How soon after you were told that you had an anxiety disorder did you start taking prescription medicine at this facility for your anxiety disorder?

[IF FACILITY = PRISON AND R91 = 1 AND R92 = 1] Think about when you were first told that you had an anxiety disorder after you were admitted to any facility to serve time on your **current sentence**. How soon after you were told did you start taking prescription medicine for your anxiety disorder?

1 Within 2 days
2 More than 2 days but within 7 days
3 More than 7 days but within 14 days
4 More than 14 days but within 30 days
5 More than 30 days
DK/REF

R95 [IF FACILITY = JAIL AND R91 = 1 AND R93 =1] How soon after you were told that you had an anxiety disorder did you start receiving any medical treatment other than prescription medicine at this facility for your anxiety disorder?

[IF FACILITY = PRISON AND R91 =1 AND R93 = 1] Think about when you were first told that you had an anxiety disorder after you were admitted to any facility to serve time on your **current sentence.** How soon after you were told did you start receiving any medical treatment other than prescription medicine for your anxiety disorder?

1 Within 2 days
2 More than 2 days but within 7 days
3 More than 7 days but within 14 days
4 More than 14 days but within 30 days
5 More than 30 days
DK/REF

R96 [IF FACILITY = JAIL AND R88 = 1 AND R92 = 1] How soon after you were admitted to this facility did you start taking prescription medicine for your anxiety disorder?

[IF FACILITY = PRISON AND R88 = 1 AND R91 = 1] How soon after you were admitted to any facility to serve time on your **current sentence** did you start taking prescription medicine for your anxiety disorder?

1 Within 2 days
2 More than 2 days but within 7 days
3 More than 7 days but within 14 days
4 More than 14 days but within 30 days
5 More than 30 days
DK/REF

R97 [IF FACILITY = JAIL AND R88 = 1 AND R93 = 1] How soon after you were admitted to this facility did you start receiving any medical treatment other than prescription medicine for your anxiety disorder?

[IF FACILITY = PRISON AND R88 = 1 AND R93 = 1] How soon after you were admitted to any facility to serve time on your **current sentence** did you start receiving any medical treatment other than prescription medicine for your anxiety disorder?

1 Within 2 days
2 More than 2 days but within 7 days
3 More than 7 days but within 14 days
4 More than 14 days but within 30 days
5 More than 30 days
DK/REF

R98 [IF R24e = 1] Are you **currently** taking prescription medicine for your anxiety disorder?

1 Yes
2 No
DK/REF

R99 [IF R24e = 1] Are you **currently** receiving any medical treatment other than prescription medicine for your anxiety disorder?

1 Yes
2 No
DK/REF

R100 [IF R98 = 2] Why aren't you currently taking prescription medicine for your anxiety disorder?

	Yes	**No**
R100a. You have not seen a doctor to get the medicine	1	2
R100b. The doctor at the facility doesn't think you need medicine	1	2
R100c. You don't like taking the medicine	1	2
R100d. You don't think you need the medicine	1	2
R100e. The facility is not willing to give the medicine to you	1	2
R100f. You would have to be transferred to a different facility to receive the medicine	1	2
R100g. You don't currently have an anxiety disorder	1	2
R100h. Some other reason	1	2

R101 [IF FACILITY TYPE = JAIL AND R24f = 1] At the time you were admitted to this facility, did you have a personality disorder such as antisocial or borderline personality?

[IF FACILITY TYPE = PRISON AND R24f = 1] At the time you were admitted to any facility to serve time on your **current sentence**, did you have a personality disorder such as antisocial or borderline personality?

1 Yes
2 No
DK/REF

R102 [IF FACILITY TYPE = JAIL AND R101 = 1] In the 30 days before you were admitted to this facility, were you taking any prescription medicine for your personality disorder?

[IF FACILITY TYPE = PRISON AND R101 =1] In the 30 days before you were admitted to any facility to serve time on your **current sentence**, were you taking any prescription medicine for your personality disorder?

1 Yes
2 No
DK/REF

R103 [IF FACILITY TYPE = JAIL AND R101 = 1] In the 30 days before you were admitted to this facility, were you receiving any medical treatment other than prescription medicine for your personality disorder?

[IF FACILITY TYPE = PRISON AND R101 =1] In the 30 days before you were admitted to any facility to serve time on your **current sentence**, were you receiving any medical treatment other than prescription medicine for your personality disorder?

1 Yes
2 No
DK/REF

R104 [IF FACILITY = JAIL AND R101 = 2 OR DK OR REF] Since you were admitted to this facility, have you been told by a doctor, nurse, or other health care provider that you had a personality disorder such as antisocial or borderline personality?

[IF FACILITY = PRISON AND R101 = 2 OR DK OR REF] Since you were admitted to any facility to serve time on your **current sentence**, have you been told by a doctor, nurse, or other health care provider that you had a personality disorder such as antisocial or borderline personality?

1 Yes
2 No
DK/REF

R105 [IF FACILITY = JAIL AND (R101 =1 OR R104 =1)] Since you were admitted to this facility, have you taken any prescription medicine for your personality disorder?

[IF FACILITY = PRISON AND (R101 =1 OR R104 =1)] Since you were admitted to any facility to serve time on your **current sentence**, have you taken any prescription medicine for your personality disorder?

1 Yes
2 No
DK/REF

R106 [IF FACILITY = JAIL AND (R101 =1 OR R104 =1)] Since you were admitted to this facility, have you received any medical treatment other than prescription medicine for your personality disorder?

[IF FACILITY = PRISON AND (R101 =1 OR R104 =1)] Since you were admitted to any facility to serve time on your **current sentence**, have you received any medical treatment other than prescription medicine for your personality disorder?

1 Yes
2 No
DK/REF

R107 [IF FACILITY = JAIL AND R104 = 1 AND R105 = 1] How soon after you were told that you had a personality disorder did you start taking prescription medicine at this facility for your personality disorder?

[IF FACILITY = PRISON AND R104 = 1 AND 105 = 1] Think about when you were first told that you had a personality ty disorder after you were admitted to any facility to serve time on your **current sentence**. How soon after you were told did you start taking prescription medicine for your personality disorder?

1 Within 2 days
2 More than 2 days but within 7 days
3 More than 7 days but within 14 days
4 More than 14 days but within 30 days
5 More than 30 days
DK/REF

R108 [IF FACILITY = JAIL AND R104 = 1 AND R106 =1] How soon after you were told that you had a personality disorder did you start receiving any medical treatment other than prescription medicine at this facility for your personality disorder?

[IF FACILITY = PRISON AND R104 =1 AND R106 = 1] Think about when you were first told that you had an personality disorder after you were admitted to any facility to serve time on your **current sentence.** How soon after you were told did you start receiving any medical treatment other than prescription medicine for your personality disorder?

1 Within 2 days
2 More than 2 days but within 7 days
3 More than 7 days but within 14 days
4 More than 14 days but within 30 days
5 More than 30 days
DK/REF

R109 [IF FACILITY = JAIL AND R101 = 1 AND R105 = 1] How soon after you were admitted to this facility did you start taking prescription medicine for your personality disorder?

[IF FACILITY = PRISON AND R101 = 1 AND R105 = 1] How soon after you were admitted to any facility to serve time on your **current sentence** did you start taking prescription medicine for your personality disorder?

1 Within 2 days
2 More than 2 days but within 7 days
3 More than 7 days but within 14 days
4 More than 14 days but within 30 days
5 More than 30 days
DK/REF

R110 [IF FACILITY = JAIL AND R101 = 1 AND R106 = 1] How soon after you were admitted to this facility did you start receiving any medical treatment other than prescription medicine for your personality disorder?

[IF FACILITY = PRISON AND R101 = 1 AND R106 = 1] How soon after you were admitted to any facility to serve time on your **current sentence** did you start receiving any medical treatment other than prescription medicine for your personality disorder?

1 Within 2 days
2 More than 2 days but within 7 days
3 More than 7 days but within 14 days
4 More than 14 days but within 30 days
5 More than 30 days
DK/REF

R111 [IF R24f = 1] Are you **currently** taking prescription medicine for your persoanlity disorder?

1 Yes
2 No
DK/REF

R112 [IF R24f = 1] Are you **currently** receiving any medical treatment other than prescription medicine for your personality disorder?

1 Yes
2 No
DK/REF

R113 [IF R111 = 2] Why aren't you currently taking prescription medicine for your personality disorder?

	Yes	No
R113a. You have not seen a doctor to get the medicine	1	2
R113b. The doctor at the facility doesn't think you need medicine	1	2
R113c. You don't like taking the medicine	1	2
R113d. You don't think you need the medicine	1	2
R113e. The facility is not willing to give the medicine to you	1	2
R113f. You would have to be transferred to a different facility to receive the medicine	1	2
R113g. You don't currently have a personality disorder	1	2
R113h. Some other reason	1	2

Section Q – Disability Status

Q0 The next questions are about difficulties that you might have due to a physical, mental, or emotional problem.

Touch the NEXT button to go to the next screen.

Q1 Are you deaf or do you have serious difficulty hearing?

1 Yes
2 No
DK/REF

Q2 Are you blind or do you have serious difficulty seeing even when wearing glasses?

1 Yes
2 No
DK/REF

Q3 Because of a physical, mental, or emotional problem, do you have serious difficulty concentrating, remembering, or making decisions?

1 Yes
2 No
DK/REF

Q4 Do you have serious difficulty walking or climbing stairs?

1 Yes
2 No
DK/REF

Q5 Do you have difficulty dressing or bathing?

1 Yes
2 No
DK/REF

Q6 Because of a physical, mental, or emotional problem, do you have difficulty doing activities on your own such as going to meal time, going outside, working in or outside of this facility, going to classes, or attending programs?

1 Yes
2 No
DK/REF

Q7 [IF Q1 OR Q2 OR Q3 OR Q4 OR Q5 OR Q6 = 1] Is the difficulty you experience doing activities on your own caused by…

	Yes	No
H7a. A physical problem?	1	2
H7b. A mental or emotional problem?	1	2

RANDOMIZATION POINT: All cases are randomized to either Subgroun A or Subgroup B. Once randomization is completed time checks will determine whether a respondent will proceed with additional modules.

Subgroup A Ordering of Additional Modules: Drug Use, Alcohol Use, Drug/Alcohol Treatment

Subgroup B Ordering of Additional Modules: Physical Health, Drug Use

Section P – Medical Conditions and Care (Subgroup B Only)

TIME STAMP HERE

NOTE TO PROGRAMMERS: FOR SUBGROPU B: If R's time in interview is equal to or less than 28 minutes continue with P0. Otherwise skip to M0.

P0 [IF FACILITY TYPE = JAIL] The next questions are about your health and any health and dental care you may have received since you were admitted to this facility. Some questions may ask about prescription medicines. Prescription medicines are drugs that you take if a doctor authorizes them for you.

[IF FACILITY TYPE = PRISON] The next questions are about your health and any health care you may have received in **any** facility where you have been held to serve time on your **current sentence**. Some questions may ask about prescription medicines. Prescription medicines are drugs that you take if a doctor authorizes them for you.

Touch the NEXT button to go to the next screen.

P1 [IF FACILITY TYPE = JAIL] When you were admitted to this facility, did a staff person…

[IF FACILITY TYPE = PRISON] When you were first admitted to **any** facility to serve time on your **current sentence**, did a staff person…

	Yes	No
P1a. check to see if you were sick, injured, drunk, or high?	1	2
P1b. ask you any questions about your health or medical history?	1	2
P1c. ask if you had ever thought about or tried to commit suicide?	1	2

P5 [IF FACILITY TYPE = JAIL] Since you were admitted to this facility, have you been injured in an accident, such as slipping or falling while at work or while playing sports?

[IF FACILITY TYPE = PRISON] Since you were admitted to any facility to serve time on your **current sentence**, have you been injured in an accident, such as slipping or falling while at work or while playing sports?

1 Yes
2 No
DK/REF

P6 [IF FACILITY TYPE = JAIL AND P5 = 1] Since you were admitted to this facility, what types of injuries have you received as a result of an **accident**?

[IF FACILITY TYPE = PRISON AND P5 = 1] Since you were admitted to any facility to serve time on your **current sentence** what types of injuries have you received as a result of an **accident**?

	Yes	**No**
P6a. You received broken bones	1	2
P6b. Your teeth were chipped or knocked out	1	2
P6c. You received internal injuries	1	2
P6d. You were knocked unconscious	1	2
P6e. You received bruises, a black eye, sprains, cuts, scratches, swelling, welts, or burns	1	2

P7 [IF P6a = 1 OR P6b = 1 OR P6c = 1 OR P6d = 1 OR P6e = 1] Did you see a doctor, nurse, or other health care provider for any of your injuries?

1 Yes
2 No
DK/REF

P8 [IF FACILITY TYPE = JAIL] Since you were admitted to this facility, have you had any type of surgery?

[IF FACILITY TYPE = PRISON] Since you were admitted to any facility to serve time on your **current sentence**, have you had any type of surgery?

1 Yes
2 No
DK/REF

P9 [IF FACILITY TYPE = JAIL] Since you were admitted to this facility, have you had any problems with your teeth or gums?

[IF FACILITY TYPE = PRISON] Since you were admitted to any facility to serve time on your **current sentence**, have you had any problems with your teeth or gums?

1 Yes
2 No
DK/REF

P10 [If P9 = 1], Did you see a dentist, doctor, nurse, or other health care provider for any of these problems with your teeth or gums?

1 Yes
2 No
DK/REF

P11 [IF FACILITY TYPE = JAIL] Since you were admitted to this facility, have you seen a doctor, nurse, or other health care provider for any reason other than those already mentioned?

[IF FACILITY TYPE = PRISON] Since you were admitted to any facility to serve time on your **current sentence**, have you seen a doctor, nurse, or other health care provider for any reason other than those already mentioned?

1 Yes
2 No
DK/REF

P12 [IF FACILITY TYPE = JAIL] How satisfied are you with the health care you have received since you were admitted to this facility?

[IF FACILITY TYPE = PRISON] How satisfied are you with the health care you have received at any facility where you have been held to serve time on your **current sentence**?

1 Very satisfied
2 Somewhat satisfied
3 Not satisfied at all
DK/REF

P13 [IF FACILITY = JAIL] Compared to the health care you were receiving during the 12 months **before** you were admitted to this facility, how would you rate the quality of health care you have received at this facility?

[IF FACILITY =PRISON] Compared to the health care you were receiving during the 12 months **before** you were admitted to any facility to serve time on your **current sentence**, how would you rate the quality of health care you have received at this facility?

1 Better
2 About the same
3 Worse
DK/REF

P14 [IF FACILITY TYPE = JAIL] The next questions are about medical tests you may have had since you were admitted to this facility.

Touch the NEXT button to go to the next screen.

[IF FACILITY TYPE = PRISON] The next questions are about medical tests you may have had since you were admitted to any facility to serve time on your **current sentence**.

Touch the NEXT button to go to the next screen.

P15 [IF FACILITY TYPE = JAIL] Since you were admitted to this facility, has anyone pricked your skin to test you for tuberculosis or TB?

[IF FACILITY TYPE = PRISON] Since you were admitted to any facility to serve time on your **current sentence**, has anyone pricked your skin to test you for tuberculosis or TB?

1 Yes
2 No
DK/REF

P16 [IF P15 = 1] What was the result of the last tuberculosis (TB) test you had?

1 Positive – you have tuberculosis (TB)
2 Negative – you do not have tuberculosis (TB)
3 Your results are not available yet
4 You were never told the result
DK/REF

P17 [IF P16 = 1] Were you given medicine to take because of your positive tuberculosis or TB skin test?

1 Yes
2 No
DK/REF

P18 [IF P15 NE 1] Has a doctor, nurse, or other health care provider **ever** told you that you have tuberculosis or TB?

1 Yes
2 No
DK/REF

P19 [IF FACILITY TYPE = JAIL] Since you were admitted to this facility, have you had your blood tested for any reason?

[IF FACILITY TYPE = PRISON] Since you were admitted to any facility to serve time on your **current sentence**, have you had your blood tested for any reason?

1 Yes
2 No
DK/REF

P20 [IF FACILITY TYPE = JAIL AND P19 = 1] Since you were admitted to this facility, have you had your blood tested for HIV – the virus that causes AIDS?

[IF FACILITY TYPE = PRISON AND P19 = 1] Since you were admitted to any facility to serve time on your **current sentence**,, have you had your blood tested for HIV – the virus that causes AIDS?

1 Yes
2 No
DK/REF

P21 [IF P20 = 1] What was the result of the most recent HIV test you had?

1 Positive, you are infected with HIV – the virus that causes AIDS
2 Negative you are not infected with HIV – the virus that causes AIDS
3 Your results are not available yet
4 You were never told the result
DK/REF

P22 [IF P20 NE 1] Have you **ever** been tested for HIV – the virus that causes AIDS?

1 Yes
2 No
DK/REF

P23 [IF P22 = 1] What was the result of the most recent HIV test you had?

1 Positive, you are infected with HIV – the virus that causes AIDS
2 Negative, you are not infected with the virus that causes AIDS
3 Your results are not available yet
4 You were never told the result
DK/REF

P24 [IF P21 OR P23 = 1] Are you currently taking any medicine or receiving treatment for HIV – the virus that causes AIDS?

1 Yes
2 No
DK/REF

P25 [IF {FACILITY TYPE = JAIL AND P19 = 1] Since you were admitted to this facility, have you been tested for Hepatitis B?

[IF {FACILITY TYPE = PRISON AND P19 = 1}] Since you were admitted to any facility to serve time on your **current sentence**, have you been tested for Hepatitis B?

1 Yes
2 No
DK/REF

P26 [IF P25 = 1] What was the result of the most recent Hepatitis B test you had?

1 Positive, you are infected with Hepatitis B
2 Negative, you are not infected with Hepatitis B
3 Your results are not available yet
4 You were never told the result
DK/REF

P27 [IF P25 NE 1] Has a doctor, nurse, or other health care provider **ever** told you that you have Hepatitis B?

1 Yes
2 No
DK/REF

P28 [IF {FACILITY TYPE = JAIL AND P19 = 1] Since you were admitted to this facility, have you been tested for Hepatitis C?

[IF {FACILITY TYPE = PRISON AND P19 = 1] Since you were admitted to any facility to serve time on your **current sentence**, have you been tested for Hepatitis C?

1 Yes
2 No
DK/REF

P29 [IF P28 = 1] What was the result of the most recent Hepatitis C test you had?

1 Positive, you are infected with Hepatitis C
2 Negative, you are not infected with Hepatitis C
3 Your results are not available yet
4 You were never told the result
DK/REF

P30 [IF P28 NE 1] Has a doctor, nurse, or other health care provider **ever** told you that you have Hepatitis C?

1 Yes
2 No
DK/REF

P31 [IF {FACILITY TYPE = JAIL AND P19 = 1] Since you were admitted to this facility, have you been tested for any sexually transmitted disease other than HIV, Hepatitis B, and Hepatitis C?

[IF {FACILITY TYPE = PRISON AND P19 = 1}] Since you were admitted to any facility to serve time on your **current sentence**, have you been tested for any sexually transmitted disease other than HIV, Hepatitis B, and Hepatitis C?

1 Yes
2 No
DK/REF

P32 [IF P31 = 1] What was the result of the most recent sexually transmitted disease test you had?

1 Positive, a sexually transmitted disease infection was found
2 Negative, no sexually transmitted disease infection was found
3 Your results are not available yet
4 You were never told the result
DK/REF

P33 [IF P31 NE 1] Has a doctor, nurse, or other health care provider **ever** told you that you had any sexually transmitted disease other than HIV, Hepatitis B, and Hepatitis C?

1 Yes
2 No
DK/REF

P34 These next questions are about specific medical problems you may have had in the past or have currently.

Touch the NEXT button to go to the next screen.

P35 Has a doctor, nurse, or other health care provider **ever** told you that you had…

	Yes	No
P35a. Any type of cancer?	1	2
P35b. High blood pressure or hypertension?	1	2
P35c. A stroke?	1	2
P35d. Diabetes or high blood sugar?	1	2
P35e. A problem with your heart?	1	2
P35f. A problem with your kidneys?	1	2
P35g. Arthritis or rheumatism?	1	2
P35h. Asthma?	1	2
P35i. Cirrhosis of the liver?	1	2

P36 Have you **ever** been paralyzed or unable to move your legs, arms, or other areas of your body? Please do not include times when you may have been held down, tied up, or medicated.

1 Yes
2 No
DK/REF

P37 Have you **ever** been knocked unconscious?

1 Yes
2 No
DK/REF

P38 [IF P35a = 1] What kind of cancer did a doctor, nurse, or other health care provider tell you that you had?

	Yes	No
P38a. [GENDER = F] Breast cancer	1	2
P38b. [GENDER = F] Cervical cancer	1	2
P38c. Colon cancer	1	2
P38d. Leukemia	1	2
P38e. Lung cancer	1	2
P38f. [GENDER = F] Ovarian cancer	1	2
P38g. [GENDER = M] Prostate cancer	1	2
P38h. Skin cancer or melanoma	1	2
P38i. [GENDER = M] Testicular cancer	1	2
P38j. [GENDER = F] Uterine cancer	1	2
P38k. Some other kind of cancer	1	2

P39 [IF P35e = 1] What type of heart problems did a doctor, nurse, or other health care provider tell you that you had?

	Yes	**No**
P39a. Angina or angina pectoris	1	2
P39b. An irregular heart beat, also known as arrhythmia	1	2
P39c. Arteriosclerosis or hardening of the arteries	1	2
P39d. A heart attack or myocardial infarction	1	2
P39e. Coronary, congenital, or rheumatic heart disease	1	2
P39f. A heart murmur or other heart valve damage	1	2
P39g. Tachycardia or a rapid heart beat	1	2
P39h. Some other kind of heart problem	1	2

P40 [IF P35a = 1 OR P35b = 1 OR P35c = 1 OR P35d = 1 OR P35e = 1 OR P35f = 1 OR P35g = 1 OR P35h = 1 OR P35i = 1] Has a doctor, nurse, or other health care provider told you that you **currently** have…
NOTE TO PROGRAMMERS: CAN THIS SCREEN FILL WITH ONLY THOSE DISEASES THE R ENDORSED IN P35?

	Yes	No
P40a. [IF P35a = 1] Any type of cancer?	1	2
P40b. [IF P35b = 1] High blood pressure or hypertension?	1	2
P40c. [IF P35c = 1] Problems caused by a stroke?	1	2
P40d. [IF P35d = 1] Diabetes or high blood sugar?	1	2
P40e. [IF P35e = 1] A problem with your heart?	1	2
P40f. [IF P35f = 1] A problem with your kidneys?	1	2
P40g. [IF P35g = 1] Arthritis or rheumatism?	1	2
P40h. [IF P35h = 1] Asthma?	1	2
P40i. [IF P35i = 1] Cirrhosis of the liver?	1	2

P41 [IF P36 = 1] Are you **currently** paralyzed or unable to move parts of your body?

1 Yes
2 No
DK/REF

P42 [IF P37 = 1] Do you **currently** have problems because you were knocked unconscious at some time in the past?

1 Yes
2 No
DK/REF

P43 [IF P40a = 1] What kind of cancer do you **currently** have?

	Yes	No
P43a. [GENDER = F] Breast cancer	1	2
P43b. [GENDER = F] Cervical cancer	1	2
P43c. Colon cancer	1	2
P43d. Leukemia	1	2
P43e. Lung cancer	1	2
P43f. [GENDER = F] Ovarian cancer	1	2
P43g. [GENDER = M] Prostate cancer	1	2
P43h. Skin cancer or melanoma	1	2
P43i. [GENDER = M] Testicular cancer	1	2
P43j. [GENDER = F] Uterine cancer	1	2
P43k. Some other kind of cancer	1	2

P44 [IF P40e = 1] What type of heart problems did a doctor, nurse, or other health care provider tell you that you **currently** have?

	Yes	**No**
P44a. Angina or angina pectoris	1	2
P44b. An irregular heart beat, also known as arrhythmia	1	2
P44c. Arteriosclerosis or hardening of the arteries	1	2
P44d. A heart attack or myocardial infarction	1	2
P44e. Coronary, congenital, or rheumatic heart disease	1	2
P44f. A heart murmur or other heart valve damage	1	2
P44g. Tachycardia or a rapid heart beat	1	2
P44h. Some other kind of heart problem	1	2

Section J – Drug Use (SUBGROUPS A AND B)

TIME STAMP HERE

NOTE TO PROGRAMMERS: FOR SUBGROUP A: If R's time in interview is equal to or less than 31 minutes continue with J1. Otherwise skip to M0. FOR SUBGROUP B: If R's time in interview is equal to or less than 31 minutes continue with J1. Otherwise skip to M0.

J1. These next questions are about using drugs other than alcohol.

Have you **ever** used...

	YES	NO
J1a. Heroin?	1	2
J1b. Other opiates, for example, Darvon, Percocet, or OxyContin without a doctor's prescription or Methadone outside a treatment program?	1	2
J1c. Methamphetamine such as ice or crank?	1	2
J1d. Other amphetamines such as speed without a doctor's prescription?	1	2
J1e. Methaqualone such as Quaaludes without a doctor's prescription?	1	2
J1f. Barbiturates such as downers without a doctor's prescription?	1	2
J1g. Tranquilizers such as Valium without a doctor's prescription?	1	2
J1h Crack?	1	2
J1i. Cocaine other than crack?	1	2
J1j. PCP?	1	2
J1k. Ecstasy?	1	2
J1l. LSD or other hallucinogens?	1	2
J1m. Marijuana or hashish?	1	2
J1n. Any other drugs that we didn't mention?	1	2
J1o. Inhalants or sniffed substances to get high, for example nitrous oxide, aerosols, paint thinner, glue, lighter fluid, spray paint, or gasoline?	1	2

J1a1 [IF J1a = 1] How old were you the **first time** you used heroin?

AGE: _____ [RANGE: 1 – 99]
DK/REF

J1b1 [IF J1b = 1] How old were you the **first time** you used other opiates such as Darvon, Percocet, or OxyContin without a doctor's prescription or Methadone outside a treatment program?

AGE: _____ [RANGE: 1 – 99]
DK/REF

J1c1 [IF J1c = 1] How old were you the **first time** you used Methamphetamine such as ice or crank?

AGE: _____ [RANGE: 1 – 99]
DK/REF

J1d1 [IF J1d = 1] How old were you the **first time** you used some other Amphetamine such as speed without a doctor's prescription?

AGE: _____ [RANGE: 1 – 99]
DK/REF

J1e1 [IF J1e = 1] How old were you the **first time** you used Methaqualone such as Quaaludes without a doctor's prescription?

AGE: _____ [RANGE: 1 – 99]
DK/REF

J1f1 [IF J1f = 1] How old were you the **first time** you used barbiturates such as downers without a doctor's prescription?

AGE: _____ [RANGE: 1 – 99]
DK/REF

J1g1 [IF J1g = 1] How old were you the **first time** you used tranquilizers such as Valium without a doctor's prescription?

AGE: _____ [RANGE: 1 – 99]
DK/REF

J1h1 [IF J1h = 1] How old were you the **first time** you used crack?

AGE: _____ [RANGE: 1 – 99]
DK/REF

J1i1 [IF J1i = 1] How old were you the **first time** you used cocaine other than crack?

AGE: _____ [RANGE: 1 – 99]
DK/REF

J1j1 [IF J1j = 1] How old were you the **first time** you used PCP?

AGE: _____ [RANGE: 1 – 99]
DK/REF

J1k1 [IF J1k = 1] How old were you the **first time** you used Ecstasy?

AGE: _____ [RANGE: 1 – 99]
DK/REF

J1l1 [IF J1l = 1] How old were you the **first time** you used LSD or other hallucinogens?

AGE: _____ [RANGE: 1 – 99]
DK/REF

J1m1 [IF J1m = 1] How old were you the **first time** you used marijuana or hashish?

AGE: _____ [RANGE: 1 – 99]
DK/REF

J1n1 [IF J1n = 1] How old were you the **first time** you used any other drugs?

AGE: _____ [RANGE: 1 – 99]
DK/REF

J1o1 [IF J1o = 1] How old were you the **first time** you used any inhalant to get high?

AGE: _____ [RANGE: 1 – 99]
DK/REF

DO FOR x = a to o

J2x. [IF J1x = 1] Have you ever used [FILL FROM J1x] once a week or more for at least a month?

1 Yes
2 No
DK/REF

J3x. [IF J1x = 1] During the month before the arrest or violation that led to you being admitted to this facility, were you using [FILL FROM J1x]?

1 Yes
2 No
DK/REF

J4x. [IF J3x = 1] How often did you use [FILL FROM J1x] during the month before the arrest or violation that led to you being admitted to this facility?

1 Less than once a week
2 At least once a week
3 Almost daily
4 Daily
DK/REF

J5. [IF ANY J1x = 1] When you committed the offense for which you are now incarcerated, were you trying to get money to buy drugs or obtain drugs for your use?

1 Yes
2 No
DK/REF

J6. [IF ANY J1x = 1] Were you under the influence of drugs at the time of the offense for which you are now incarcerated?

1 Yes
2 No
DK/REF

J7. [IF J6 = 1] What drugs were you under the influence of at the time of the offense for which you are now incarcerated?

	YES	NO
J7a. [IF J1a=1]Heroin?	1	2
J7b. [IF J1b=1]Other opiates, for example, Darvon Percocet, or OxyContin without a doctor's prescription or Methadone outside a treatment program?	1	2
J7c. [IF J1c=1]Methamphetamine such as ice or crank?	1	2
J7d. [IF J1d=1]Other amphetamines such as speed without a doctor's prescription?	1	2
J7e. [IF J1e=1]Methaqualone such as Quaaludes without a doctor's prescription?	1	2
J7f. [IF J1f=1]Barbiturates such as downers without a doctor's prescription?	1	2
J7g. [IF J1g=1]Tranquilizers such as Valium without a doctor's prescription?	1	2
J7h [IF J1h=1]Crack?	1	2
J7i. [IF J1i=1]Cocaine other than crack?	1	2
J7j. [IF J1j=1]PCP?	1	2
J7k. [IF J1k=1]Ecstasy?	1	2
J7l. [IF J1l=1]LSD or other hallucinogens?	1	2
J7m. [IF J1m=1]Marijuana or hashish?	1	2
J7n. [IF J1n=1]Any other drugs that we didn't mention?	1	2
J7o. [IF J1o=1]Inhalants or sniffed substances to get high, for example nitrous oxide, aerosols, paint thinner, glue, lighter fluid, or gasoline?	1	2

J8. [IF ANY J3x = 1] In the month prior to the arrest or violation that led to you being admitted to this facility, how did you get the drugs you were using?

	YES	NO
J8a. Bought them from a stranger?	1	2
J8b. Bought them from a dealer you know?	1	2
J8c. Bought them from a friend?	1	2
J8d. Stole them?	1	2
J8e. Given to you by friends or acquaintances?	1	2
J8f. Used a fake or forged prescription?	1	2
J8g. Traded sex for the drugs?	1	2
J8h Got the drugs some other way?	1	2

J9. [IF MORE THAN 1 "YES" IN J8] What was the main way you got the drugs you were using in the month prior to the arrest or violation that led to you being admitted to this facility?

[IF J8a=1]1	Bought them from a stranger
[IF J8b=1]2	Bought them from a dealer you know
[IF J8c=1]3	Bought them from a friend
[IF J8d=1]4	Stole them
[IF J8e=1]5	Given to you by friends or acquaintances
[IF J8f=1]6	Used a fake or forged prescription
[IF J8g=1]7	Traded sex for the drugs
[IF J8h=1]8	Got the drugs some other way
DK/REF	

J10. [IF ANY J1x = 1] Have you **ever** used a needle to get any drug injected under your skin, into a muscle or into a vein for non-medical reasons?

1 Yes
2 No
DK/REF

J11. [IF J10 = 1 AND (J1a = 1 OR J1b = 1 OR J1c = 1 OR J1i = 1 OR J1n = 1)] What kinds of drugs have you **ever** used with a needle?

	YES	**NO**
J11a. [IF J1a=1]Heroin?	1	2
J11b. [IF J1b=1]Other opiates, for example, Darvon, Percocet, or OxyContin without a doctor's prescription or Methadone outside a treatment program?	1	2
J11c. [IF J1c=1]Methamphetamine such as ice or crank?	1	2
J11i. [IF J1i=1]Cocaine other than crack?	1	2
J11n. [IF J1n=1] Some other drug?	1	2

J12. [IF J10 = 1] Have you **ever** used a needle that you knew or suspected had been used by someone else for injecting drugs or shared a needle that you had used with someone else?

1 Yes
2 No
DK/REF

J13. [IF ANY J1x = 1] These next questions are about experiences many people have in connection with their use of drugs.

In your entire life, have you **ever** driven a car, motorcycle, truck, boat, or any other motor vehicle while under the influence of a drug?

1 Yes
2 No
DK/REF

J14. [IF J13 = 1] In your entire life, have you **ever** had an accident while driving a motor vehicle while under the influence of a drug?

1 Yes
2 No
DK/REF

J15. [IF ANY J1x = 1] During the year before the arrest or violation that led to you being admitted to this facility…

	YES	NO
J15a. Did you get into situations while using drugs or just after using drugs that increased your chances of getting hurt – like driving a car or other vehicle, swimming, using machinery or walking in a dangerous area or around heavy traffic?	**1**	**2**
J15b. Did you have arguments with your spouse, boyfriend or girlfriend, family, or friends while under the influence of a drug?	**1**	**2**
J15c. Did you lose a job because of your drug use?	**1**	**2**
J15d. Did you have job or school trouble because of your drug use like missing too much work, not doing your work well, being demoted at work, or dropping out of school?	**1**	**2**
J15e. Did you get arrested or held at a police station because of your drug use?	**1**	**2**
J15f. Did you get into a physical fight while under the influence of a drug?	**1**	**2**

J16. [IF ANY J1x = 1] During the year before the arrest or violation that led to you being admitted to this facility...

	YES	NO
J16a. Did you often use a drug in larger amounts or for longer periods than you meant to?	**1**	**2**
J16b. Did you more than once want to cut down on your drug use or try to cut down on your drug use but found you couldn't do it?	**1**	**2**
J16c. Did you spend a lot of time getting drugs, using them or getting over the bad after-effects?	**1**	**2**
J16d. Did using drugs or being sick from using drugs keep you from doing work, going to school, or caring for children?		
J16e. Did you give up activities that you were interested in or that were important to you in favor of using drugs like – work, school, hobbies, or associating with family and friends?	**1**	**2**
J16f. Did you continue to use drugs even though it was causing emotional or psychological problems?	**1**	**2**

J17. [IF ANY J1x = 1] During the year before the arrest or violation that led to you being admitted to this facility...

	YES	NO
J17a. Did you continue to use drugs even though it was causing problems with family, friends, or work?	**1**	**2**
J17b. Did you continue to use drugs even though it was causing physical health or medical problems?	**1**	**2**
J17c. Did your usual amount of drugs have less effect on you than it once did or did you have to use more to get the effect you wanted?	**1**	**2**
J17d. Did you experience some of the bad after-effects of using drugs after cutting down or stopping your drug use – like shaking, feeling nervous or anxious, sick to your stomach, restless, sweating, or having trouble sleeping or fits or seizures, or see, feel, or hear things that weren't really there?	**1**	**2**
J17e. Did you ever keep using drugs to get over any of the bad after-effects of a drug or to keep from having bad after-effects?	**1**	**2**

J18. When you were arrested and booked the last time, were you tested for drugs?

1 Yes
2 No
DK/REF

J19. [IF J18=1] What was the result of the drug test you took when you were arrested and book the last time?

1 Positive for drug use
2 Negative
3 Neither, inconclusive
DK/REF

J20. Have you been tested for drugs since your admission to this facility?

1 Yes
2 No
DK/REF

J21. [IF J20=1] Have you been told the results of any of the drug tests you have taken since you were admitted to this facility?

1 Yes
2 No
DK/REF

J22. [IF J21=1]Were any of the drug tests you have taken since you were admitted to this facility positive?

1 Yes
2 No
DK/REF

Section H – Alcohol (SUBGROUPS A AND B)

TIME STAMP HERE

NOTE TO PROGRAMMERS: FOR SUBGROUPS A AND B: If R's time in interview is equal to or less than 32 minutes continue with H1. Otherwise skip to M0

H1 The next questions are about drinking alcohol.

In your entire life, have you had at least 12 drinks of any kind of alcohol, not counting small tastes or sips?

1 YES
2 NO
DK/REF

H2 [IF H1=1] About how old were you when you first started drinking alcohol, other than small tastes or sips?
AGE: _____ [RANGE: 1 – 99]
DK/REF

H3 [IF H1=1] Have you ever drunk alcoholic beverages, more than once a week for more than a month?

1 YES
2 NO
DK/REF

H4 [IF H1=1] During the year before the arrest or violation that led to you being admitted to this facility, did you drink any alcohol?

1 YES
2 NO
DK/REF

H5 [IF H4=1] During that year how often did you **usually** drink alcohol?

1 Daily or almost daily
2 At least once a week
3 Less than once a week
4 About once a month
5 Less than once a month
DK/REF

H6 [IF H1=1] Had you been drinking any alcohol at the time of the offense you are now incarcerated for?

1 YES
2 NO
DK/REF

H7 [IF H6=1] About how many hours had you been drinking?

Hours: _____ [RANGE: 1 – 999]
DK/REF

DEFINE HOURSFILL
IF H7 = 1 HOURSFILL = hour
IF H7 > 1 OR H7 = DK OR H7 = REF, HOURSFILL = hours

H8 [IF H6=1] In the [HOURSFILL] before the arrest or violation that led to you being admitted to this facility, did you drink any –

	YES	NO
H8a. Beer?	1	2
H8b. Wine, wine coolers, champagne, or sparkling wine?	1	2
H8c. Liquor, including mixed drinks and liqueurs?	1	2

H9 [IF H3=1 OR (H5=1 OR 2)] Here are some experiences many people have in connection with their drinking. In your entire life,

	YES	NO
H9a. Have you ever felt you should cut down on your drinking?	1	2
H9b. Have people ever annoyed you by criticizing your drinking?	1	2
H9c. Have you ever felt bad or guilty about your drinking?	1	2
H9d. Have you ever had a drink first thing in the morning to steady your nerves or get rid of a hangover?	1	2

H10. [IF H1=1] In your entire life, have you **ever** driven a car, motorcycle, truck, boat, or any other vehicle after having too much to drink?

1 Yes
2 No
DK/REF

H11. [IF H10=1] In your entire life, have you **ever** had an accident after you were drinking?

1 Yes
2 No
DK/REF

H12. [IF H1 = 1] In your entire life, have you **ever** had as much as a fifth of liquor in one day – that would be about 20 drinks, or 3 bottles of wine, or as much as 3 six-packs of beer in one day?

1 Yes
2 No
DK/REF

H13 [IF H4=1] During the year before the arrest or violation that led to you being admitted to this facility,

	YES	NO
H13a. Did you get into situations while drinking or after drinking that increased your chances of getting hurt – like driving a car or other vehicle, swimming, using machinery or walking in a dangerous area or around heavy traffic?	1	2
H13b. Did you have arguments with your spouse, boyfriend or girlfriend, family, or friends while drinking or right after drinking?	1	2
H13c. Did you lose a job because of your drinking?	1	2
H13d. Did you have job or school trouble because of your drinking-like missing too much work, not doing your work well, being demoted at work, or dropping out of school?	1	2
H13e. Did you get arrested or held at a police station because of your drinking?	1	2
H13f. Did you get into a physical fight while drinking or right after drinking?	1	2

H14 [IF H4=1] During the year before the arrest or violation that led to you being admitted to this facility,

	YES	NO
H14a Did you often drink more or for longer periods of time than you meant to?	1	2
H14b. Did you more than once want to cut down on your drinking or try to cut down on your drinking but found you couldn't do it?	1	2
H14c. Did you spend a lot of time drinking or getting over the bad after-effects of drinking?	1	2
H14d. Did your drinking or being sick from drinking keep you from doing work, going to school or caring for children?	1	2
H14e. Did you give up activities that you were interested in or were important to you in favor of drinking – like work, school, hobbies, or associating with family and friends?	1	2
H14f. Did you continue to drink even though it was causing emotional or psychological problems?	1	2

H15 [IF H4=1] During the year before the arrest or violation that led to you being admitted to this facility,

	YES	NO
H15a. Did you continue to drink even though it was causing problems with family, friends, or work?	1	2
H15b. Did you continue to drink even though it was causing physical health or medical problems?	1	2
H15c. Did your usual number of drinks have less effect on you than it once did or did you have to drink more to get the effect you wanted?	1	2
H15d. Did you find that you experienced some of the bad after-effects of drinking after cutting down on your drinking or stop drinking – shaking, feeling nervous or anxious, sick to your stomach, restless, sweating, or having trouble sleeping or fits or seizures, or see, feel or hear things that weren't really there?	1	2
H15e. Did you often take a drink or use any other drug to get over any of the bad after-effects of drinking or to keep from having them?	1	2

Section K – Treatment (SUBGROUPS A AND B)

TIME STAMP HERE

NOTE TO PROGRAMMERS: FOR SUBGROUPS A And B: If R's time in interview is equal to or less than 32 minutes continue with K1. Otherwise skip to M0

K1. [IF J1a = 1 OR J1b = 1 OR J1c = 1 OR J1d = 1 OR J1e = 1 OR J1f = 1 OR J1g = 1 OR J1h = 1 OR J1i = 1 OR J1j = 1 OR J1k = 1 OR J1l = 1 OR J1m = 1 OR J1n = 1 OR J1o = 1 OR H1 = 1] These next questions are about alcohol and drug treatment programs you may have attended.

Have you **ever** attended any kind of alcohol or drug treatment program?

1 Yes
2 No
DK/REF

K2. [IF K1 = 1] What types of alcohol or drug treatment programs have you **ever** attended?

	YES	NO
K2a. An alcohol or drug detoxification unit to dry out for up to 72 hours?	1	2
K2b. An alcohol or drug program in which you live in a special facility or unit?	1	2
K2c. Drug or alcohol counseling with a trained professional while **not** living in a special facility or unit?	1	2
K2d. A self-help group or peer group counseling, such as Alcoholics Anonymous, Narcotics Anonymous, or Cocaine Anonymous?	1	2
K2e. An education or awareness program explaining problems with alcohol or drugs?	1	2
K2f. A program that provided a maintenance drug to cut your high or make you sick, such as methadone, antibuse, or naltrexone?	1	2
K2g. Some other alcohol or drug treatment program?	1	2

DO FOR x = a to g.
DEFINE PROGRAMX FILL
IF K2a = 1 THEN PROGRAMX = an alcohol or drug detoxification unit for up to 72 hours
IF K2b= 1 THEN PROGRAMX = an alcohol or drug program in which you lived in a special facility or unit
IF K2c = 1 THEN PROGRAMX = any drug or alcohol counseling with a trained professional while **not** living in a special facility or unit
IF K2d = 1 THEN PROGRAMX = a self-help group or peer counseling
IF K2e = 1 THEN PROGRAMX = an education or awareness program explaining problems with alcohol or drugs
IF K2f = 1 THEN PROGRAMX = a program that provided a maintenance drug to cut your high or make you sick
IF K2g = 1 THEN PROGRAMX = any other kind of alcohol or drug treatment program

K4x. [IF K2x = 1] Have you ever attended [PROGRAMX] while you were in jail, prison, or other correctional facility?

1 Yes
2 No
DK/REF

K6x. [IF K4x = 1] **DOAFILL1**, have you attended [PROGRAMX]?

1 Yes
2 No
DK/REF

K7x. [IF K6x = 1] Did you attend [PROGRAMX] for problems with alcohol, drugs, or both?

1 Alcohol only
2 Drugs only
3 Both alcohol and drugs
DK/REF

K8x. [IF K6x = 1] **DOAFILL1**, were you **required** to attend [PROGRAMX]?

1 Yes
2 No
DK/REF

K9x. [IF K6x = 1] Have you or will you receive any good or gain time by participating in [PROGRAMX] **DOAFILL2**?

1 Yes
2 No
DK/REF

K5x. [IF K2x = 1] Have you ever attended [PROGRAMX] while you were on probation or parole?

1 Yes
2 No
DK/REF

K10x. [IF K5x=1] When you were on probation or parole, were you **required** to attend [PROGRAMX]?

1 Yes
2 No
DK/REF

K11x. [IF K5x = 1] Did you attend [PROGRAMX] while you were on probation or parole for problems with alcohol, drugs, or both?

1 Alcohol only
2 Drugs only
3 Both alcohol and drugs
DK/REF

Section M: Interview Debriefing Items (All Respondents Receive These Items)

M0 Thank you for completing the survey. Now we have a few questions we'd like you to answer about your experience with this interview. Touch the NEXT button to go to the next screen.

M1 How difficult was it for you to use the computer to do this survey?

1 Not difficult at all
2 Sort of difficult
3 Very difficult
DK/REF

M2 How comfortable did you feel using the computer to answer questions about (your own experiences with sex and sexual assault in this facility / your use of drugs and alcohol)?

1 Very comfortable
2 Somewhat comfortable
3 Somewhat uncomfortable
4 Very uncomfortable
DK/REF

M3. How upsetting did you find it to answer questions about (your own experiences with sex and sexual assault in this facility / your use of drugs and alcohol)?

1 Not upsetting at all
2 Somewhat upsetting
3 Very upsetting
DK/REF

M4. [IF R RECEIVED SEXUAL ASSAULT QUESTIONS] Are there any types of sex or sexual contact that have happened to you **DOAFILL1** that you didn't report during this interview?

1 Yes
2 No
DK/REF

M5. How accurate are the answers you entered into the computer?

1 Not very accurate
2 Fairly accurate
3 Very accurate
DK/REF

MINC1 [IF I3 = 1] How important was knowing that you would receive a snack in appreciation of the time you spent completing this questionnaire?

1 Very important
2 Somewhat important
3 Not important
DK/REF

MINC2 [IF I3 = 1] Did anyone tell you directly that you were required to participate in this study?

1 Yes
2 No
DK/REF

MINC2a [IF MINC2 = 1] Who told you that you were required to participate in this study?

1 A facility staff person
2 An interviewer from RTI
3 Another inmate
DK/REF

MINC3 [IF MINC2 = 2] Were you ever made to feel that you were required to participate in this study?

1 Yes
2 No
DK/REF

M6. That is all the questions we have. If you found the survey questions upsetting for any reason, your interviewer can tell you how to contact a mental health counselor employed by this facility. Thank you very much for participating in this study.

Please tell your interviewer that you have completed the survey.

M7. THANK INMATE FOR PARTICIPATING.

NOTIFY OFFICER THAT THE INMATE IS FINISHED AND CAN LEAVE THE INTERVIEW ROOM. AFTER THE INMATE LEAVES THE ROOM, ENTER THE PASSWORD TO CONTINUE ON TO YOUR DEBRIEFING QUESTIONS.

ENTER PASSWORD TO CONTINUE.

NOTE TO PROGRAMMER: WE'LL NEED A SHORT PASSWORD SO THAT RESPONDENTS CAN'T GO ANY FURTHER IN THE INTERVIEW. THE LAST SET OF DEBRIEFING QUESTIONS WILL BE FOR THE INTERVIEWER.

M9. Estimate the respondent's understanding of the interview

1 No difficulty – no language or reading problem
2 Some difficulty
3 A great deal of difficulty

M10 How much do you think seeing or hearing about the laptop computer influenced the respondent's decision to participate in the interview?

1 Influenced him/her a lot in a positive way
2 Influenced him/her a little in a positive way
3 Didn't influence his/her decision at all
4 Influence him/her a little in a negative way
5 Influenced him/her a lot in a negative way

M11 Please indicate how necessary you think the tutorial was for this respondent.

1 Unnecessary – the respondent could have completed the interview without the tutorial
2 Useful, but perhaps not necessary – the tutorial made the ACASI portion easier, but the respondent probably could have completed the interview without it
3 Necessary – the respondent could not have completed the ACASI portion without it

M12 Did the respondent raise any questions during the informed consent process?

1 Yes
2 No

M13 [IF M12 = 1] Please describe the questions the respondent raised during the informed consent process.

_____
ALLOW 150 CHARACTERS

M14 Please record any comments the respondent made about the nature of the questions or the task of answering the questions during either the CAPI or ACASI portions of the interview.

_____
ALLOW 150 CHARACTERS

M15 How upset did the respondent appear to be during the ACASI portion of the interview?

1 Not upset at all
2 Somewhat upset
3 Very upset

M16 [IF M15 = 2 OR 3] Please provide any details you can about why this inmate appeared to be somewhat or very upset during the ACASI portion of the interview.

_____
ALLOW 150 CHARACTERS

M17 Indicate the degree of distractions or interruptions during the interview.

1 None
2 A few
3 A lot

M18 Was the privacy of the interview setting compromised at any point during the interview?

1 Yes
2 No

M19 [IF M18 = 1] In what way was the privacy of the interview setting compromised during this interview?

_____
ALLOW 150 CHARACTERS

FIINC1 [IF I3 = 1] Did the inmate take the incentive that was offered?

1 YES
2 NO

FIINC2 [IF FIINC1 = 1] What incentive did the inmate receive?

_____
ALLOW 40 CHARACTERS

M19a PLEASE PROVIDE ANY OTHER COMMENTS ABOUT THE INTERVIEW THAT WOULD BE USEFUL FOR THE PROJECT TEAM TO KNOW:

_____
ALLOW 150 CHARACTERS

M20 INTERVIEWER: YOU HAVE REACHED THE END OF THE INTERVIEW. TOUCH THE FINISH BUTTON BELOW TO RETURN TO THE CASE MANAGEMENT SYSTEM.

Note to Programmers: Only two buttons are required for this screen – BACK and FINISH