

YOUTH TELEPHONE INTERVIEW

INTRO:

Hello, may I speak with _____?

Hello, _____. My name is _____ calling from Southwest Institute. Our office recently contacted you regarding the Rapid Transit Fair at CRS. We're conducting a survey to learn more about what happens to young adults as they leave CRS. I'd like to ask you some questions. No one will have access to your answers. Your answers will help us figure out what types of services youth need. Do you have a few minutes to answer some questions?

If yes, continue with survey

If no, ask if there is a more convenient time to call. Record time here _____

If not interested in participating, circle No

1. What is your age?

2. What is your ethnicity/race?

White (non-Hispanic)

Hispanic

Asian

African American

Other _____

3. What is the primary language spoken in your home?

English

Spanish

Other _____

4. What are your diagnoses?

5. Who do you live with? Parents (both parents in home)

Single Parent Family

Foster Family

Adoptive Family

- | | | | |
|-----|---|------|-----------|
| 6. | Do you have medical insurance? | Yes | No |
| 7. | Are you on your parents' insurance? | Yes | No |
| 8. | Do you have insurance through your work? | Yes | No |
| 9. | Do you get SSI? | Yes | No |
| 10. | Do you get SSDI? | Yes | No |
| 11. | Do you get Medicaid/AHCCCS? | Yes | No |
| 12. | Do you see a ... | | |
| | Primary Care Physician | Yes | No |
| | Specialist | Yes | No |
| | Dentist | Yes | No |
| 13. | Have you had any problems finding a doctor? | Yes | No |
| 14. | Have you had any problems finding a specialist? | Yes | No |
| 15. | How do you rate your health in general? | | |
| | Excellent | Good | Fair |
| | | | Poor |
| | | | Very Poor |
| 16. | How many times have you been hospitalized since January 2003? | | |
| 17. | How many visits have you made to the emergency room since January 2003? | | |
| 18. | What medications do you take? | | |

- | | | | |
|-----|--|-----------|------------------|
| 19. | Are any of these over-the-counter medications? | Yes | No |
| 20. | Do you take herbal medications? | Yes | No |
| 21. | Do you take vitamins/supplements? | Yes | No |
| 22. | Do you take your medications regularly or do you sometimes forget? | | |
| | | Regularly | Sometimes Forget |
| 23. | Have you had problems getting your prescriptions filled? | | |
| | | Yes | No |
| 24. | Do you have allergies? | Yes | No |
| 25. | If yes, what are you allergic to? | | |
| 26. | Do you exercise regularly? | Yes | No |
| 27. | How often do you exercise each week? | _____ | |
| 28. | What type of exercise do you do? | | |
| 29. | Are you on a special diet? | Yes | No |
| 30. | If yes, what type of diet? | | |
| 31. | Do you follow your diet or do you sometimes forget? | | |
| | | Follow | Forget |
| 32. | Do you smoke? | Yes | No |

33. Do you drink alcohol? Yes No
34. If yes, how many drinks each week?
2-4 5-10 over 10
35. Are you?
Underweight Average Overweight
36. Relating to your self care (like bathing or dressing), are you/do you ...
Independent Need minimal assistance Need a lot of assistance
37. Describe the assistance you need?
38. Do you do any chores around the house? Yes No
39. Who does your ...
grocery shopping? You Parent Attendant
laundry? You Parent Attendant
40. Who cooks your meals? You Parent Attendant
41. Are you still in school? Yes No
42. What school/grade are you in?
High School _____
College _____
Other _____

54. How do you get to school/work/other places?

Drive Self

Use Public Transportation

Parents Drive

55. How many phone calls do you make each week? _____

56. How much time do you spend on the internet each week? _____

57. How much time do you spend by yourself each week? _____

58. What do you need to be able to get around more?

INTRO: In these last questions, I will describe a situation and ask how you would respond.

59. You have been really healthy and haven't had to go to the doctor in almost a year. How do you explain this?

60. Your best friend hasn't returned your phone calls in two weeks. Why do you think this happened?

61. You were invited to a birthday party. Why do you think this happened?

62. The boss/teacher didn't talk to you at work/school today? What does that mean?

63. In general, do you feel HAPPY:

Most of the time Some of the time Once in a while Never

64. In general, do you feel SAD:

Most of the time Some of the time Once in a while Never

Closing: Thank you very much for your participation in our survey. We would like to invite you to our Youth Transition Program, Fast Track. Fast Track is a program to help you get the skills you need to make a successful transition to adulthood, and gives you a chance to meet other youth your age. The Fast Track program covers Education, Vocation, Money Management, Housing, Transportation, Health, and Social Skills. I was part of the program and met some really nice people and had fun. Now the project gave me the opportunity to talk to others and earn some money. I hope you'll consider joining the program. Our next sessions will be held in July and September. You even can earn some extra money by attending the sessions. Would you be interested in receiving some more information about Fast Track?

YES

NO

If yes, confirm mailing address here: _____

Once again, thank you for your participation in our survey!