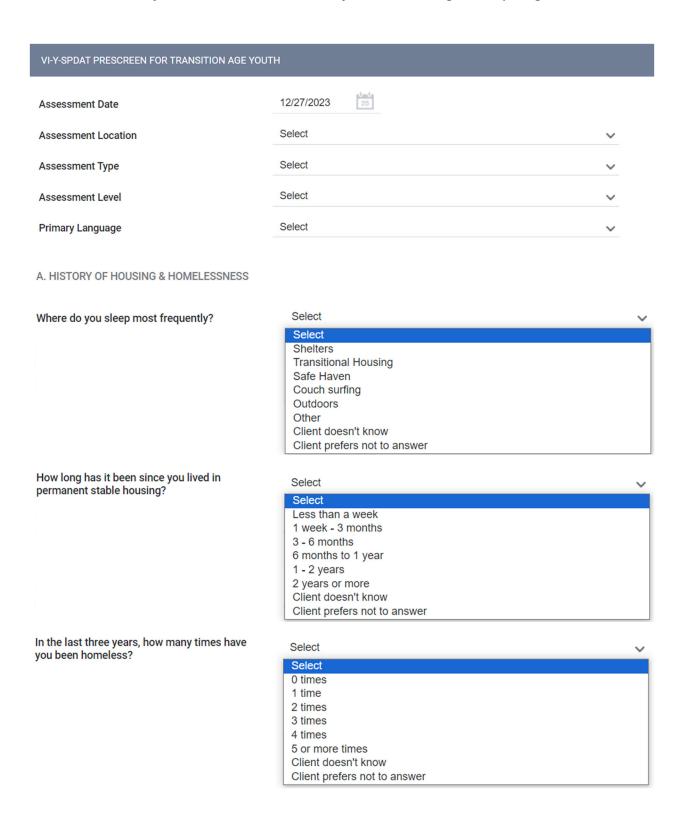
Transition Age Youth VI-SPDAT

Use for households where Head of Household is age 24 or younger



B. RISKS

In the past six months, received health care at an emergency department/room?

Select Select 0 times 1 time 2 times 3 times 4 times 5 or more times Client doesn't know Client prefers not to answer

In the past six months, how many times have you taken an ambulance to the hospital?



In the past six months, how many times have you been hospitalized as an in-patient?



In the past six months, how many times have you used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines?



In the past six months, how many times have you talked to police because you witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or because the police told you that you must move along?



In the past six months, how many times have you stayed one or more nights in a holding cell, jail or prison, whether that was a short-term stay like the drunk tank, a longer stay for a more serious offense, or anything in between?



Have you been attacked or beaten up since you've become homeless?



Have you threatened to or tried to harm yourself or anyone else in the last year?



Do you have any legal stuff going on right now that may result in you being locked up, having to pay fines or that make it more difficult to rent a place to live?



Were you ever incarcerated when younger than age 18?



Does anybody force or trick you to do things that you do not want to do?

Select

Select

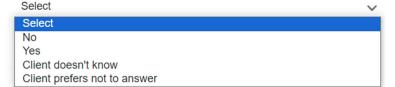
No
Yes
Client doesn't know
Client prefers not to answer

Do you ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone you don't know, share a needle, or anything like that?



C. SOCIALIZATION

Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you owe them money?



Do you get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that?



Do you have planned activities, other than just surviving, that make you feel happy and fulfilled?

Select

Select

No
Yes

Client doesn't know
Client prefers not to answer

Are you currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that?



IS YOUR CURRENT LACK OF STABLE HOUSING...

Because you ran away from your family home, a Select group home or a foster home? Select No Yes Client doesn't know Client prefers not to answer Because of a difference in religious or cultural Select beliefs from your parents, guardians or caregivers? Select No Yes Client doesn't know Client prefers not to answer Because your family or friends caused you to Select become homeless? Select No Yes Client doesn't know Client prefers not to answer Because of conflicts around gender identity or Select sexual orientation? Select No Yes Client doesn't know Client prefers not to answer Because of violence at home between family Select members? Select No Yes Client doesn't know Client prefers not to answer Because of an unhealthy or abusive Select relationship, either at home or elsewhere? Select No Yes Client doesn't know Client prefers not to answer

D. WELLNESS

Have you ever had to leave an apartment, shelter program, or other place you were staying because of your physical health?

Select

Select

No
Yes
Client doesn't know
Client prefers not to answer

Do you have any chronic health issues with your liver, kidneys, stomach lungs or heart?

Select

Select

No
Yes
Client doesn't know
Client prefers not to answer

If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you?



Do you have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help?

Select

Select

No
Yes
Client doesn't know
Client prefers not to answer

When you are sick or not feeling well, do you avoid getting help?

Select

Select

No
Yes

Client doesn't know
Client prefers not to answer

Are you currently pregnant, have you ever been pregnant, or have you ever gotten someone pregnant?

Select

Select

No
Yes
Client doesn't know
Client prefers not to answer

Has your drinking or drug use led you to being kicked out of an apartment or program where you were staying in the past?



Will drinking or drug use make it difficult for you to stay housed or afford your housing?



If you've ever used marijuana, did you ever try it at age 12 or younger?



HAVE YOU EVER HAD TROUBLE MAINTAINING YOUR HOUSING, OR BEEN KICKED OUT OF AN APARTMENT, SHELTER PROGRAM OR OTHER PLACE YOU WERE STAYING, BECAUSE OF:

Select A mental health issue or concern? Select No Yes Client doesn't know Client prefers not to answer Select A past head injury? Select No Yes Client doesn't know Client prefers not to answer A learning disability, developmental disability, or Select other impairment? Select No Yes Client doesn't know Client prefers not to answer Do you have any mental health or brain issues Select that would make it hard for you to live independently because you'd need help? Select No Yes

> Client doesn't know Client prefers not to answer

Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking?

Select

Select

No
Yes
Client doesn't know
Client prefers not to answer

Are there any medications like painkillers that you don't take the way the doctor prescribed or where you sell the medication?



FINALLY, I'D LIKE TO ASK YOU SOME QUESTIONS TO HELP US BETTER UNDERSTAND HOMELESSNESS AND IMPROVE HOUSING AND SUPPORT SERVICES.

