

OCF Pre-test - Incarcerated Father

This survey includes questions about your parenting, and program experiences. Your name will not be on the questionnaire and your responses will remain private. Please answer the questions to the best of your ability. Your answers will help identify the services you need.

* 1. Today's date:

What is today's date? MM DD YYYY
 / /

* 2. Participant ID

3. Agency

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Section A: PARENTING

We would like to get a sense of who you are as a parent. We realize that children are different and may require different parenting.

Questions in this section are about your child, or if you have more than one, your two youngest children.

* 4. Do you have any children who are under 21 years old? Only include your biological or legally adopted children. MARK ONLY ONE

- Yes, I have one child who is younger than 21
- Yes, I have more than one child who is younger than age 21
- No, all my children are 21 years or older

If you answered NO, skip to question 23. If you have more than one child, skip to question 7.

5. What is your child's first name or initials?

6. How old is your child?

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7. What is your youngest child's first name or initials?

8. How old is your youngest child?

9. When was the last time you saw [CHILD 1]?

- In the past week
- In the past month
- In the past six months
- In the past year
- 1-2 years ago
- More than 2 years ago
- Never

10. In the past month, how often did you see [CHILD 1]? MARK ONLY ONE

- Every day or almost every day
- 1-3 times per week
- 1-3 times in the past month
- I did not see this child in the past month

11. In the past month, how often did you talk on the phone to [CHILD 1]? MARK ONLY ONE

- Every day or almost every day
- 1-3 times per week
- 1-3 times in the past month
- I did not talk to this child in the past month

12. In the past month, how often did you send letters to [CHILD 1]? MARK ONLY ONE

- Every day or almost every day
- 1-3 times per week
- 1-3 times in the past month
- I did not send letters to this child in the past month

13. In the past month, how often have you talked with [CHILD 1] even if [CHILD 1] about things s/he is especially interested in? MARK ONLY ONE

- Never
- Hardly Ever
- Sometimes
- Often

14. How often have you felt or acted this way in the past month with [CHILD 1]

	Never	Hardly ever	Sometimes	Often
I am happy being with [CHILD 1]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
[CHILD 1] and I are very close to each other	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I try to comfort [CHILD 1] when s/he is upset	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I spend time with [CHILD 1] doing things s/he likes to do	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

If you have only 1 child, skip to question 23. If you have more than 1 child, go to question 15.

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Now think about your next youngest biological or legally adopted child [CHILD 2].

15. What is your next youngest child's first name or initials?

16. How old is your next youngest child?

17. When was the last time you saw [CHILD 2]?

- In the past week
- In the past month
- In the past six months
- In the past year
- 1-2 years ago
- More than 2 years ago
- Never

18. In the past month, how often did you see [CHILD 2]? MARK ONLY ONE

- Every day or almost every day
- 1-3 times per week
- 1-3 times in the past month
- I did not see this child in the past month

19. In the past month, how often did you talk with [CHILD 2] on the phone? MARK ONLY ONE

- Every day or almost every day
- 1-3 times per week
- 1-3 times in the past month
- Never in the past month

20. In the past month, how often did you send letters to [CHILD 2]? MARK ONLY ONE

- Every day or almost every day
- 1-3 times per week
- 1-3 times in the past month
- I did not send letters to this child in the past month

21. In the past month, how often have you talked with [CHILD 2] even if [CHILD 2] about things s/he is especially interested in? MARK ONLY ONE

- Never
- Hardly Ever
- Sometimes
- Often

22. How often have you felt or acted this way in the past month with [CHILD 2]

	Never	Hardly ever	Sometimes	Often
I am happy being with [CHILD 2]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
[CHILD 2] and I are very close to each other	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I try to comfort [CHILD 2] when s/he is upset	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I spend time with [CHILD 2] doing things s/he likes to do	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Section B: ECONOMIC STABILITY

* 23. How much do you agree or disagree with each of the statements below? MARK ONE BOX IN EACH ROW

	Strongly Agree	Agree	Disagree	Strongly Disagree
I would like to learn new job skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have good job skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 24. Do you have a job now?

- Yes
- No

25. Is it a work release job?

Yes

No

26. Have you participated in education or job training programs in the past month?

No

Yes

If Yes, please describe:

27. When did you start your current job?

Date / Time MM DD YYYY

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CHILD SUPPORT

28. Below are some general statements about child support. For each statement, please indicate whether you believe it is true or false. If you don't know, mark "I don't know" for that statement. Answer questions whether or not you have a child support order.

	True	False	I don't know
Fathers can get help with their child support order by contacting the child support agency	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A father has the right to ask for a change in the amount of his child support order	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The law requires a father to pay child support even if the mother of the child has a new partner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The law requires the father to pay child support even if the child's mother prevents him from seeing his child	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

29. Do you have a legal arrangement or child support order that requires you to provide financial support for any of your children? MARK ONLY ONE

- Yes
- No
- I don't know

30. Do you know how to request a change in your child support order if your income changes? MARK ONLY ONE

- Yes
- No

31. Have you notified child support that you are incarcerated?

- Yes
- No

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C: RELATIONSHIPS

* 32. How much do you agree or disagree with the following statements? MARK ONE BOX IN EACH ROW

	Strongly Agree	Agree	Disagree	Strongly Disagree
It is better for children if their parents are married . . .	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Living together is just the same as being married . . .	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 33. Are you currently in a relationship (whether you are married or not married)?

- Yes
- No

34. Which of the following statements best describes your relationship with your current partner? MARK ONLY ONE

- We are married
- We are romantically involved on a steady basis
- We are involved in an on-again off-again relationship

35. How satisfied are you with the way you and your partner/spouse handle conflict? MARK ONLY ONE

- Very satisfied
- Somewhat satisfied
- Not at all satisfied

36. When is the last time you saw your current partner/spouse? MARK ONLY ONE

- In the past week
- In the past month
- In the past six months
- In the past year
- 1-2 years ago
- More than 2 years ago
- Not since I was incarcerated

37. In the past month, how often have you talked on the phone with your partner/spouse? MARK ONLY ONE

- Every day or almost every day
- 1-3 times a week
- 1-3 times a month
- I did not talk to my spouse/partner on the phone in the past month

38. Please indicate how often the following happened in the past month. MARK ONE BOX IN EACH ROW

	Never	Hardly Ever	Sometimes	Often
My partner/spouse was rude or mean to me when we disagreed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My partner/spouse seemed to view my words or actions more negatively than I meant them to be	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Our arguments became very heated	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Small issues suddedly became big arguments	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My partner/spouse or I stayed mad at one another after an argument	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My partner/spouse blamed me for his/her problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My partner/spouse yelled or screamed at me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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D: PERSONAL DEVELOPMENT

* 39. This question is about feelings you may have experienced recently. During the PAST 30 DAYS, how often have you felt . .

	None of the time	A little of the time	Some of the time	Most of the time	All of the time
Nervous	<input type="radio"/>				
Hopeless	<input type="radio"/>				
Restless or fidgety	<input type="radio"/>				
So depressed that nothing could cheer you up	<input type="radio"/>				
That everything was an effort	<input type="radio"/>				
Worthless	<input type="radio"/>				

* 40. How much do you agree or disagree with the following statements?

	Strongly Agree	Agree	Disagree	Strongly Disagree
I have little control over the things that happen to me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have hope when I think about my future	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I wouldn't know where to go for help if I had money troubles	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have others who will listen when I need to talk about my problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
When I am lonely there are several people I can talk to	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have people I can count on when I am feeling down	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If there is a crisis, I have other I can talk to	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 41. Is there someone you could turn to, such as a friend or family member, if you suddenly needed to borrow money? MARK ONLY ONE

- Yes
- No
- I don't know

42. When did you enter jail/prison for this current detention? INDICATE MONTH/YEAR

43. How long is your current sentence? INDICATE MONTHS/YEARS

44. Prior to this have you been in jail or prison before?

Yes

No

45. Altogether, how many years have you been in jail or prison over your lifetime? INDICATE YEARS

THANK YOU FOR COMPLETING THIS SURVEY!