

ACO REACH SDoH Screening Questions

Section 1

- 1. At any point in the past 2 years, has season or migrant farm work been your or your family's main source of income?
- 2. Have you been discharged from the armed forces of the United States?
- 3. How many family members, including yourself, do you currently live with?
- 4. What is your housing situation today?
- 5. Are you worried about losing your housing?
- 6. What is the highest level of school that you have finished?
- 7. What is your current work situation?
- 8. During the past year, what was the total combined income for you and the family members you live with? This information will help us determine if you are eligible for any benefits.
- 9. In the past year, have you or any family members you live with been unable to get any of the following when it was really needed?
- 10. Has lack of transportation kept you from medical appointments, meetings, work, or from getting things needed for daily living?
- 11. How often do you see or talk to people that you care about and feel close to (For example: talking to friends on the phone, visiting friends or family, going to church or club meetings)?
- 12. Stress is when someone feels tense, nervous, anxious or can't sleep at night because their mind is troubled how stressed are you?
- 13. Do you feel physically and emotionally safe where you currently live?
- 14. In the past year, have you been afraid of your partner or ex-partner?

Section 2

- 1. What is your living situation today?
- 2. Think about the place you live. Do you have problems with any of the following?
- 3. Within the past 12 months, you worried that your food would run out before you got money to buy more.



- 4. Within the past 12 months, the food you bought just didn't last and you didn't have money to get more.
- 5. In the past 12 months, has lack of reliable transportation kept you from medical appointments, meetings, work or from getting things needed for daily living?
- 6. In the past 12 months has the electric, gas, oil, or water company threatened to shut off services in your home?

"Because violence and abuse happen to a lot of people and affects their health, we are asking the following questions."

- 1. How often does anyone, including family and friends, physically hurt you?"
- 2. How often does anyone, including family and friends, insult or talk down to you?
- 3. How often does anyone, including family and friends, threaten you with harm?
- 4. How often does anyone, including family and friends, scream or curse at you?

Section 3

- 1. Within the past 12 months, did you worry that your food would run out before you got money to buy more?
- 2. Within the past 12 months, did the food you bought just not last, and you didn't have money to get more?
- 3. Do you have housing?
- 4. Are you worried about losing your housing?
- 5. Within the past 12 months, have you or your family members you live with been unable to get utilities (heat, electricity) when it was really needed?
- 6. Within the past 12 months, has lack of transportation kept you from medical appointments, getting your medicines, non-medical meetings or appointments, work, or from getting things that you need?
- 7. Do you feel physically and emotionally safe where you currently live?
- 8. Within the past 12 months, have you been hit, slapped, kicked or otherwise physically hurt by someone?
- 9. Within the past 12 months, have you been humiliated or emotionally abused in other ways by your partner or ex-partner?