

# TODAY2 Form MNI, Material Needs Insecurities Scale

  -     

Release Participant ID

   

Release Visit Number

1. Days since randomization

*Instructions: This form is completed by the participant to record and evaluate, in a standardized manner, material needs insecurities. The form is administered once during a participant's final TODAY2 annual visit.*

## Experiences with Prescription Medications

1. DURING THE PAST 12 MONTHS, has your doctor prescribed any medication for any condition? <sub>1</sub> Yes <sub>0</sub> No → **Skip to Item 6**
2. DURING THE PAST 12 MONTHS, was there any time when you needed prescription medicines but didn't get it because you couldn't afford it? <sub>1</sub> Yes <sub>0</sub> No
- DURING THE PAST 12 MONTHS, are any of the following true for you?**
3. ...You skipped medication doses to save money <sub>1</sub> Yes <sub>0</sub> No
4. ...You took less medicine to save money <sub>1</sub> Yes <sub>0</sub> No
5. ...You delayed filling a prescription to save money <sub>1</sub> Yes <sub>0</sub> No

## Experiences with Food

- For the following statements, please mark whether the statement is often true, sometimes true, or never true for you or your household in the last 12 months, that is, for the past year.
6. The food that {I/we} bought just didn't last, and {I/we} didn't have money to get more. <sub>1</sub> Often true <sub>2</sub> Sometimes true <sub>3</sub> Never true
7. {I/we} couldn't afford to eat balanced meals. <sub>1</sub> Often true <sub>2</sub> Sometimes true <sub>3</sub> Never true

# TODAY2 Form MNI, Material Needs Insecurities Scale

  -    

Release Participant ID

RELEASEID

   

Release Visit Number

PVISIT

8. In the last 12 months, did you or other adults in your household ever cut the size of your meals or skip meals because there wasn't enough money for food?

<sub>1</sub> Yes  
<sub>0</sub> No

MNFS3

*If yes...*

(a) How often did this happen?

<sub>1</sub> Almost every month  
<sub>1</sub> Some months but not every  
<sub>1</sub> Only one or two months

MNFS4

9. In the last 12 months, did you ever eat less than you felt you should because there wasn't enough money for food?

<sub>1</sub> Yes  
<sub>0</sub> No

MNFS5

10. In the last 12 months, were you ever hungry but didn't eat because there wasn't enough money for food?

<sub>1</sub> Yes  
<sub>0</sub> No

MNFS6

## Experiences with Housing

11. Do you live in...?

<sub>1</sub> An apartment  
<sub>2</sub> A house/townhouse/condo  
<sub>3</sub> A shelter/translational living situation  
<sub>4</sub> Other  
<sub>5</sub> Residential treatment/supervised housing  
<sub>6</sub> Government housing (army, etc.)  
<sub>7</sub> Mobile home/trailer  
<sub>8</sub> Room/rented room  
<sub>9</sub> Car  
<sub>10</sub> No steady place to sleep at night  
<sub>11</sub> Hotel/motel  
<sub>12</sub> Don't know or refused

MNHS1

12. Do you own your own home? In other words, could you sell the home if you wanted to?

<sub>1</sub> Yes  
<sub>0</sub> No  
<sub>2</sub> Don't know or refused

MNHS2

# TODAY2 Form MNI, Material Needs Insecurities Scale

  -     

Release Participant ID

RELEASEID

   

Release Visit Number

PVISIT

13. In the past three years, how many places, including your current place, have you lived for one week or longer?

  places

MNHS3

***If answer is 1, skip to item 15.***

14. Did you move because you could no longer afford that home?

 <sub>1</sub> Yes  
 <sub>0</sub> No

MNHS4

15. Have you moved in with anyone in the last 12 months to share household expenses?

 <sub>1</sub> Yes  
 <sub>0</sub> No

MNHS5

16. Have you ever been homeless at any time in the last 12 months?

 <sub>1</sub> Yes  
 <sub>0</sub> No

MNHS6

## Experiences with Energy and Utilities

17. In the past year did your home receive energy assistance?

 <sub>1</sub> Yes  
 <sub>0</sub> No

MNEN1

18. Since this time last year, that is 12 months ago, has the gas or electric company sent you a letter threatening to shut off the gas or electricity in the house for not paying bills?

 <sub>1</sub> Yes  
 <sub>0</sub> No

MNEN2

19. Since this time last year, that is 12 months ago, of last year has the gas, electric, or oil company shut off or refused to deliver gas, electricity, or oil for not paying bills?

 <sub>1</sub> Yes  
 <sub>0</sub> No

MNEN3

20. Since this time last year, that is 12 months ago, were there any days that the home was not heated or cooled because you couldn't pay the bills?

 <sub>1</sub> Yes  
 <sub>0</sub> No

MNEN4

21. Since this time last year, that is 12 months ago, have you ever used a cooking stove to heat the house or apartment because you couldn't pay the bills? This does not include a time the stove was used for heat during a power outage.

 <sub>1</sub> Yes  
 <sub>0</sub> No

MNEN5