**TRIP THRIVE/Aunt Bertha Questions Crosswalk**

|  |  |  |
| --- | --- | --- |
| **Domain** | **Aunt Bertha** | **THRIVE** |
| Housing | What is your housing situation today? | Do you currently live in a shelter or have no steady place to sleep at night? |
| How many times have you moved in the past 12 months? | Do you think you are at risk of becoming homeless? |
| Food | In the last 12 months, did the food you bought just not last and you didn't have the money to get more? | Within the past 12 months, the food you bought just didn’t last and you didn’t have money to get more. |
| In the last 12 months have you worried that your food would run out before you had the money to buy more? | Within the past 12 months, you worried whether your food would run out before you got money to buy more. |
| Do you currently have trouble going out to shop for food or preparing food? | Is this an emergency, do you need food for tonight? |
| Paying for medicine/  treatment | Do you have trouble paying for your treatment, including medicines, visits or tests? | Do you have trouble paying for medicines? |
| Do you have trouble paying for other things related to your treatment, like wigs or prostheses? |  |
| Transportation | In the past 12 months, has lack of reliable transportation kept you from medical appointments, work or from getting things needed for daily living? | Do you have trouble getting transportation to medical appointments? |
| Utilities/home maintenance | Think about the place you live. Do you have problems with any of the following? *(pests, utilities not working, etc)* | Do you have trouble paying your heating or electricity bill? |
| In the past 12 months, has the electric, gas, oil or water company threatened to shut off or shut off services to your home? |  |
| In the past 12 months, has your phone service been shut off or disconnected? |  |
| Child/elder care | In the last 12 months, have you missed a health care visit or work because you needed to care for a child, family member or friend? | Do you have trouble taking care of a child, family member or friend? |
| Employment | Are you worried about taking time off from your job because of your health/ treatment? | Are you currently unemployed and looking for a job? |
| Do you plan to work during your treatment? |  |
| Are you currently unemployed and looking for a job, or working but looking for a better job? |  |
| Education | Are you interested in going to school or getting job training? | Are you interested in more education? |
| Legal | Do you currently have any legal concerns or needs (like to prevent eviction, being fired, or discrimination)? |  |