

Early Childhood Longitudinal Study: Kindergarten Class of 2010-2011

Spring Kindergarten

Parent Interview

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Spring 2011 Parent Interview: ECLS-K: 2010-2011

Section INQ [Introduction]

Sequence: 0

BOX 1

IF FALL K NON-RESPONDENT (THE CASE DID NOT HAVE A PARENT INTERVIEW IN THE FALL), GO TO INQ040.
OTHERWISE, GO TO INQ050.

INQ040

QUESTION TEXT:

(As I mentioned earlier), you and {CHILD} have been selected to take part in the Early Childhood Longitudinal Study, Kindergarten Class of 2010-2011, which is sponsored by the U.S. Department of Education, National Center for Education Statistics. I have some questions for you that ask about {CHILD}'s school and home experiences. The information I collect in this interview will be extremely valuable in understanding the development of young children and how their early school experiences can be improved.

All responses that relate to or describe identifiable characteristics of individuals may be used only for statistical purposes and may not be disclosed, or used, in identifiable form for any other purpose, unless otherwise compelled by law.

This call will be recorded for quality control purposes.

CODES

1	CONTINUE WITH RECORDING	Box 2
2	CONTINUE WITHOUT RECORDING	INQ040b

INQ040b

QUESTION TEXT:

THIS INTERVIEW IS NOT BEING RECORDED.

IF NEEDED: That's fine. This interview will not be recorded.

PRESS 1 AND ENTER TO CONTINUE.

BOX 2

IF INQ.040 HAS BEEN ASKED TWICE, GO TO INQ.060. ELSE, GO TO INQ.041.

INQ041

QUESTION TEXT:

Are you the parent or guardian in this household who knows the most about {CHILD}'s care, education, and health?

NOTE: TO ANSWER "1" FOR "YES, THE PARENT OR GUARDIAN SHOULD LIVE IN THE SAME HOUSEHOLD AS THE CHILD FOR THE MAJORITY OF THE YEAR, HAVE JOINT CUSTODY OF THE CHILD, OR BE THE ADULT WHO SPENDS THE MOST TIME WITH THE CHILD WHEN THE CHILD IS NOT IN A GROUP HOME. IF YOU ARE NOT SPEAKING TO THIS PERSON NOW, CODE "2" FOR "NO." IF THE CHILD DOES NOT LIVE THERE NOW, CODE "3" FOR "CHILD LIVES ELSEWHERE."

CODES

1	YES	INQ060
2	NO	INQ042
3	CHILD LIVES ELSEWHERE	CMQ701
	REFUSED	INQ042
	DON'T KNOW	INQ042

INQ042

QUESTION TEXT:

May I please speak with the parent or guardian in the household who knows the most about {CHILD}'s care, education, and health?

NOTE: THE PARENT OR GUARDIAN SHOULD LIVE IN THE SAME HOUSEHOLD AS THE CHILD FOR THE MAJORITY OF THE YEAR, HAVE JOINT CUSTODY OF THE CHILD, OR BE THE ADULT WHO SPENDS THE MOST TIME WITH THE CHILD WHEN THE CHILD IS NOT IN A GROUP HOME. IF THIS PERSON IS AVAILABLE AND YOU CAN SPEAK TO HIM/HER NOW, CODE "1". IF YOU NEED TO CALL BACK AND THE PARENT OR GUARDIAN

WILL BE AVAILABLE IN THE FIELD PERIOD, CODE “2”. IF THE PARENT OR GUARDIAN IS NOT AVAILABLE IN THE FIELD PERIOD, CODE “3” TO ASK FOR SOMEONE ELSE. IF THERE IS NOT A PARENT OR GUARDIAN IN THE HOUSEHOLD WHO KNOWS THE MOST ABOUT THE CHILD’S CARE, EDUCATION, AND HEALTH, CODE “4”. IF THE CHILD DOES NOT LIVE THERE NOW, CODE “5” FOR “CHILD LIVES ELSEWHERE.”

CODES

1	AVAILABLE	INQ040
2	NOT AVAILABLE BUT WILL BE BEFORE END OF FIELD PERIOD (CALLBACK APPT.)	CMQ702
3	NOT AVAILABLE IN FIELD PERIOD	INQ043
4	NO PARENT OR GUARDIAN IN HH KNOWS ABOUT CHILD	INQ043
5	CHILD LIVES ELSEWHERE	CMQ701
	REFUSED	INQ043
	DON'T KNOW	INQ043

INQ043

QUESTION TEXT:

May I please speak a household member who is 18 or older and knows about {CHILD}'s care, education, and health?

NOTE: THE RESPONDENT SHOULD LIVE IN THE SAME HOUSEHOLD AS THE CHILD FOR THE MAJORITY OF THE YEAR, HAVE JOINT CUSTODY OF THE CHILD, OR BE THE ADULT WHO SPENDS THE MOST TIME WITH THE CHILD WHEN THE CHILD IS NOT IN A GROUP HOME. IF THIS PERSON IS ON THE PHONE, CODE “1”. IF YOU NEED TO CALL BACK AND THIS PERSON WILL BE AVAILABLE IN THE FIELD PERIOD, CODE “2”. IF THIS PERSON IS NOT AVAILABLE IN THE FIELD PERIOD, CODE “3”. IF THERE IS NOT AN ADULT IN THE HOUSEHOLD WHO KNOWS ABOUT THE CHILD’S CARE, EDUCATION, AND HEALTH, CODE “4”. IF THE CHILD DOES NOT LIVE THERE NOW, CODE “5” FOR “CHILD LIVES ELSEWHERE.”

CODES

1	PERSON ON PHONE	INQ040
2	NOT AVAILABLE BUT WILL BE BEFORE END OF FIELD PERIOD (CALLBACK APPT.)	CMQ702
3	NOT AVAILABLE IN FIELD PERIOD	CMQ703
4	NO PARENT OR GUARDIAN IN HH KNOWS ABOUT CHILD	CMQ703
5	CHILD LIVES ELSEWHERE	CMQ701
	REFUSED	CMQ703
	DON'T KNOW	CMQ703

INQ050

QUESTION TEXT:

Last fall, we spoke with {NAME OF FALL RESPONDENT} who took part in the Early Childhood Longitudinal Study, Kindergarten Class of 2010-2011 on {DATE OF FALL INTERVIEW}. Am I talking to the same person?

VERIFY NAME, AGE AND RELATIONSHIP WITH RESPONDENT:

NAME: {FIRST NAME} {LAST NAME}.

AGE: APPROXIMATELY {UPDATED AGE FROM FALL} YEARS OLD.

RELATIONSHIP TO CHILD: {RELATIONSHIP TO CHILD}.

ENTER "1" FOR YES EVEN IF THE AGE LISTED IS A YEAR OR TWO DIFFERENT FROM THE AGE OF THE RESPONDENT IF YOU HAVE CONFIRMED IT IS THE SAME PERSON.

CODES

1	YES	INQ090
2	NO	INQ051
3	YES, SAME PERSON, BUT CHILD LIVES ELSEWHERE NOW	CMQ701

PROGRAMMER INSTRUCTIONS:

FOR "NAME OF FALL RESPONDENT" DISPLAY FIRST AND LAST NAME OF RESPONDENT FROM PRELOAD. USE THE NAME OF PERSONTYPE=R.

FOR "FIRST NAME" AND "LAST NAME" DISPLAY FALL K RESPONDENT'S FIRST AND LAST NAME FROM THE PRELOAD. FOR "UPDATED AGE FROM FALL" DISPLAY AGE OF RESPONDENT FROM PRELOAD. FOR "RELATIONSHIP TO CHILD" DISPLAY RELATIONSHIP OF RESPONDENT TO CHILD FROM PRELOAD.

FLAG THE RESPONDENT IN THE HOUSEHOLD ROSTER AND SET A FLAG CALLED 'FLAGS.SAMERESP' THAT EQUALS 1 IF INQ.050 = 1.

REFUSED AND DON'T KNOW DISALLOWED.

INQ051

QUESTION TEXT:

May I please speak with {NAME OF PREVIOUS ROUND RESPONDENT}

CODES

1	AVAILABLE	INQ050
2	NOT AVAILABLE BUT WILL BE BEFORE END OF FIELD PERIOD (CALLBACK APPT.)	CMQ702
3	NOT AVAILABLE IN FIELD PERIOD	INQ052
4	CHILD LIVES ELSEWHERE	CMQ701
	REFUSED	INQ052
	DON'T KNOW	INQ052

PROGRAMMER INSTRUCTIONS:

DISPLAY FIRST AND LAST NAME OF RESPONDENT FROM FALL KINDERGARTEN.

IF INQ.051 = 1, HARD ERROR CHECK SHOULD READ:

PLEASE GO BACK TO THE PREVIOUS QUESTION (INQ.050) TO VERIFY THE RESPONDENT.

ⓂPRESS G TO GO BACK NOW.
ⓂPRESS C TO CANCEL.

INQ052

QUESTION TEXT:

Are you the parent or guardian in this household who knows the most about {CHILD}'s care, education, and health?

NOTE: TO ANSWER "1" FOR "YES, THE PARENT OR GUARDIAN SHOULD LIVE IN THE SAME HOUSEHOLD AS THE CHILD FOR THE MAJORITY OF THE YEAR, HAVE JOINT CUSTODY OF THE CHILD, OR BE THE ADULT WHO SPENDS THE MOST TIME WITH THE CHILD WHEN THE CHILD IS NOT IN A GROUP HOME. IF YOU ARE NOT SPEAKING TO THIS PERSON NOW, CODE "2" FOR "NO." IF THE CHILD DOES NOT LIVE THERE NOW, CODE "3" FOR "CHILD LIVES ELSEWHERE."

CODES

1	YES	INQ055
2	NO	INQ053
3	CHILD LIVES ELSEWHERE	CMQ701
	REFUSED	INQ053
	DON'T KNOW	INQ053

INQ053

QUESTION TEXT:

May I please speak with the parent or guardian in the household who knows the most about {CHILD}'s care, education, and health?

NOTE: THE PARENT OR GUARDIAN SHOULD LIVE IN THE SAME HOUSEHOLD AS THE CHILD FOR THE MAJORITY OF THE YEAR, HAVE JOINT CUSTODY OF THE CHILD, OR BE THE ADULT WHO SPENDS THE MOST TIME WITH THE CHILD WHEN THE CHILD IS NOT IN A GROUP HOME. IF THIS PERSON IS AVAILABLE AND YOU CAN SPEAK TO HIM/HER NOW, CODE "1". IF YOU NEED TO CALL BACK AND THE PARENT OR GUARDIAN WILL BE AVAILABLE IN THE FIELD PERIOD, CODE "2". IF THE PARENT OR GUARDIAN IS NOT AVAILABLE IN THE FIELD PERIOD, CODE "3" TO ASK FOR SOMEONE ELSE. IF THERE IS NOT A PARENT OR GUARDIAN IN THE HOUSEHOLD WHO KNOWS THE MOST ABOUT THE CHILD'S CARE, EDUCATION, AND HEALTH, CODE "4". IF THE CHILD DOES NOT LIVE THERE NOW, CODE "5" FOR "CHILD LIVES ELSEWHERE."

CODES

1	AVAILABLE	INQ055
2	NOT AVAILABLE BUT WILL BE BEFORE END OF FIELD PERIOD (CALLBACK APPT.)	CMQ702
3	NOT AVAILABLE IN FIELD PERIOD	INQ054
4	NO PARENT OR GUARDIAN IN HH KNOWS ABOUT CHILD	INQ054
5	CHILD LIVES ELSEWHERE	CMQ701

REFUSED
DON'T KNOW

INQ054
INQ054

INQ054

QUESTION TEXT:

May I please speak a household member who is 18 or older and knows about {CHILD}'s care, education, and health?

NOTE: THE RESPONDENT SHOULD LIVE IN THE SAME HOUSEHOLD AS THE CHILD FOR THE MAJORITY OF THE YEAR, HAVE JOINT CUSTODY OF THE CHILD, OR BE THE ADULT WHO SPENDS THE MOST TIME WITH THE CHILD WHEN THE CHILD IS NOT IN A GROUP HOME. IF THIS PERSON IS ON THE PHONE, CODE "1". IF YOU NEED TO CALL BACK AND THIS PERSON WILL BE AVAILABLE IN THE FIELD PERIOD, CODE "2". IF THIS PERSON IS NOT AVAILABLE IN THE FIELD PERIOD, CODE "3". IF THERE IS NOT AN ADULT IN THE HOUSEHOLD WHO KNOWS ABOUT THE CHILD'S CARE, EDUCATION, AND HEALTH, CODE "4". IF THE CHILD DOES NOT LIVE THERE NOW, CODE "5" FOR "CHILD LIVES ELSEWHERE."

CODES

1	PERSON ON PHONE	INQ055
2	NOT AVAILABLE BUT WILL BE BEFORE END OF FIELD PERIOD (CALLBACK APPT.)	CMQ702
3	NOT AVAILABLE IN FIELD PERIOD	CMQ703
4	NO ADULT IN HH KNOWS ABOUT CHILD	CMQ703
5	CHILD LIVES ELSEWHERE	CMQ701
	REFUSED	CMQ703
	DON'T KNOW	CMQ703

INQ055

QUESTION TEXT:

May I have your name please?

SELECT NAME FROM LIST BELOW.

IF THE NAME IS ON THE LIST OF HOUSEHOLD MEMBERS, ENTER THE NUMBER NEXT TO THE PERSON ON THE HOUSEHOLD ROSTER WHO WILL BE THE CURRENT ROUND RESPONDENT. SELECT THIS PERSON'S NAME EVEN IF THE AGE LISTED IS A YEAR OR TWO DIFFERENT FROM THE AGE OF THE RESPONDENT.

VERIFY NAME, RELATIONSHIP, AND AGE WITH RESPONDENT.

IF NAME NOT LISTED, ENTER o.

o NOT ON LIST

ENTER TEXT

Length

2

PROGRAMMER INSTRUCTIONS:

1. DISPLAY THE UPDATED HOUSEHOLD ROSTER WITH AGE, GENDER, AND RELATIONSHIP FROM THE PRELOAD. AT THE TOP OF THE ROSTER, DISPLAY "o NOT ON LIST." NEXT TO AGE, DISPLAY THE WORD "APPROXIMATELY".
2. DISPLAY HOUSEHOLD MEMBERS 15 YEARS OR OLDER AS RESPONSE CATEGORIES (IN CASE OF RESPONDENT/INTERVIEWER ERROR EARLY IN THE INTERVIEW, INCLUDE THE PREVIOUS ROUND RESPONDENT IN THIS DISPLAY EVEN THOUGH HE/SHE SHOULD HAVE BEEN SELECTED AT INQ.050).
3. IF THE PREVIOUS ROUND RESPONDENT IS SELECTED AT THIS SCREEN (EVEN THOUGH HE/SHE SHOULD HAVE BEEN SELECTED AT INQ.050), SET "FLAGS.SAMERESP" =1 AND GO TO INQ.090.
4. IF ZERO IS ENTERED, GO TO INQ.060. ELSE, IF IT IS A CONTINUING HOUSEHOLD BUT A NEW SPRING RESPONDENT WHO WAS ALREADY IN THE HOUSEHOLD MATRIX, GO TO INQ.080.
5. DISALLOW DK AND RF
6. FLAG THE RESPONDENT

INQ060

QUESTION TEXT:

[May I have your name, please?]

ENTER THE RESPONDENT'S FIRST NAME.

VERIFY SPELLING.

ENTER TEXT

Length

25

PROGRAMMER INSTRUCTIONS:

REFUSED AND DON'T KNOW DISALLOWED.

INQ070

QUESTION TEXT:

[May I have your name, please?]

ENTER THE RESPONDENT'S LAST NAME.

VERIFY SPELLING.

ENTER TEXT

Length

25

PROGRAMMER INSTRUCTIONS:

REFUSED AND DON'T KNOW DISALLOWED.

BOX 3

IF NEW SPRING K RESPONDENT (THE HOUSEHOLD PARTICIPATED IN THE FALL, BUT WE DO NOT HAVE THE SAME RESPONDENT IN THE SPRING AS WE DID IN THE FALL), GO TO INQ080.
IF FALL K NON-RESPONDENT, ASK INQ.072.

INQ072

CARI: Sampling at 100%

QUESTION TEXT:

USE CONSENT SCRIPT BEFORE READING THE TEXT BELOW.

Now, I would like to get permission for {CHILD} to participate in the study. For our records, please state your name, your relationship to {CHILD}, {CHILD}'s name, and that you give us permission for {CHILD} to participate in the ECLS-K 2011 study.

DID PARENT/GUARDIAN GIVE PERMISSION?

CODES

1	YES
2	NO

PROGRAMMER INSTRUCTIONS:

REFUSED AND DON'T KNOW ARE NOT ALLOWED.

BOX 4

FOR FALL K NON-RESPONDENTS, GO TO INQ.130 AND ASK INQ130 THROUGH BOX 8.

INQ080

QUESTION TEXT:

(As I mentioned earlier), you and {CHILD} were selected to take part in the Early Childhood Longitudinal Study Kindergarten Class of 2010-2011 last fall, which is sponsored by the U.S. Department of Education, National Center for Education Statistics. I have some questions for you that ask about {CHILD}'s school and home experiences. The information I collect in this interview will be extremely valuable in understanding the development of young children and how their early school experiences can be improved.

All responses that relate to or describe identifiable characteristics of individuals may be used only for statistical purposes and may not be disclosed, or used, in identifiable form for any other purpose, unless

otherwise compelled by law.

This call will be recorded for quality control purposes.

CODES

1	CONTINUE WITH RECORDING	Box 5
2	CONTINUE WITHOUT RECORDING	INQo8ob

INQo8ob

QUESTION TEXT:

THIS INTERVIEW IS NOT BEING RECORDED.

IF NEEDED: That's fine. This interview will not be recorded.

PRESS 1 AND ENTER TO CONTINUE.

ENTER TEXT

Length 1

BOX 5

FOR NEW SPRING K RESPONDENTS, GO TO INQ130.

INQo9o

QUESTION TEXT:

Last fall, you and {CHILD} took part in the Early Childhood Longitudinal Study Kindergarten Class of 2010-2011, which is sponsored by the U.S. Department of Education, National Center for Education Statistics. I have some questions for you that ask about {CHILD}'s school and home experiences since our last interview. The information I collect in this interview will be extremely valuable in understanding the development of young children and how their early school experiences can be improved.

All responses that relate to or describe identifiable characteristics of individuals may be used only for statistical purposes and may not be disclosed, or used, in identifiable form for any other purpose, unless otherwise compelled by law.

This call will be recorded for quality control purposes.

CODES

1	CONTINUE WITH RECORDING	INQ110
2	CONTINUE WITHOUT RECORDING	INQ090b

INQ090b

QUESTION TEXT:

THIS INTERVIEW IS NOT BEING RECORDED.
IF NEEDED: That's fine. This interview will not be recorded.
PRESS 1 AND ENTER TO CONTINUE.

ENTER TEXT

Length 1

INQ110

QUESTION TEXT:

I would like to verify the spelling of your name for our records. Is your first name spelled {FIRST NAME OF FALL RESPONDENT}?

CODES

1	YES	INQ115
2	NO	INQ112

PROGRAMMER INSTRUCTIONS:

DISPLAY RESPONDENT'S FIRST NAME FROM FALL K.

INQ112

QUESTION TEXT:

How do you spell your first name?
VERIFY SPELLING.

ENTER TEXT

Length 25

INQ115

QUESTION TEXT:

[I would like to verify the spelling of your name for our records.] Is your last name spelled {LAST NAME OF FALL RESPONDENT}?

CODES

1	YES	INQ130
2	NO	INQ116

PROGRAMMER INSTRUCTIONS:

DISPLAY RESPONDENT'S LAST NAME FROM FALL K.

INQ116

QUESTION TEXT:

How do you spell your last name?

VERIFY SPELLING.

ENTER TEXT

Length 25

INQ130

QUESTION TEXT:

Before we begin the interview, I would like to verify some information.

?

I have recorded {CHILD'S FIRST, MIDDLE, AND LAST NAME} as {CHILD}'s full name. Is this correct?

ALSO VERIFY SPELLING.

MAKE CORRECTIONS TO NAME BELOW OR PRESS ENTER TO ACCEPT FIRST/MIDDLE/LAST NAME.

?

IF NO MIDDLE NAME OR INITIAL, ENTER 'NMN'.

Current Info: [CHILD'S FIRST NAME]
[CHILD'S MIDDLE NAME]
[CHILD'S LAST NAME]

FIRST NAME: []
MIDDLE NAME: []
LAST NAME: []

ENTER TEXT

Length 50
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS. HOWEVER, DO NOT ALLOW INTERVIEWER TO CHANGE 'REAL DATA' TO '7' (REFUSED) OR '9' (DON'T KNOW).

FOR CHILD'S FIRST, MIDDLE, AND LAST NAME, DISPLAY CHILD'S FULL NAME FROM PRELOAD.

USE PRELOAD LENGTH FOR CHILD'S NAME.

INQ160

QUESTION TEXT:

ASK IF NOT OBVIOUS: {I have {CHILD} recorded as {male/female}. Is that correct?}{/Is {CHILD} male or female?}

{MAKE CORRECTIONS TO GENDER BELOW OR PRESS ENTER TO ACCEPT CURRENT GENDER.}

Current Info: [MALE/FEMALE]

CODES

1 MALE
2 FEMALE
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY CORRECTED INFORMATION ABOUT CHILD'S GENDER FROM PRELOAD. IF GENDER IS NONMISSING IN THE PRELOAD, DISPLAY "I have...{male/female}. Is that correct?" AND "MAKE CORRECTIONS TO GENDER BELOW OR PRESS ENTER TO ACCEPT CURRENT GENDER..", DISPLAY "male" IF THE PRELOAD SHOWS THAT THE CHILD IS MALE, DISPLAY "female" IF THE PRELOAD SHOWS THAT THE CHILD IS FEMALE, AND NEXT TO "CURRENT INFO" BELOW, DISPLAY "MALE" IF THE CHILD IS MALE ACCORDING TO THE PRELOAD AND DISPLAY "FEMALE" IF THE CHILD IS FEMALE.

ELSE, IF GENDER IS MISSING IN THE PRELOAD, DISPLAY "Is {CHILD}... female?" AND USE A NULL DISPLAY FOR "MALE/FEMALE" NEXT TO "CURRENT INFO".

REFUSED AND DON'T KNOW ALLOWED.

INQ170a

QUESTION TEXT:

{I have recorded that {CHILD} was born on {DATE OF BIRTH}. Is that correct?/What is {CHILD}'s date of birth?}

{MAKE CORRECTIONS TO DATE OF BIRTH BELOW OR PRESS ENTER TO ACCEPT CURRENT DATE OF BIRTH.}

Current Info: [DATE OF BIRTH]

|_|_|/|_|_|/|_|_||_|_|
ENTER DATE OF BIRTH (MONTH/DAY/YEAR)

ENTER NUMBER

Range	1 to 12
REFUSED	BOX 6
DON'T KNOW	BOX 6

PROGRAMMER INSTRUCTIONS:

DISPLAY INFORMATION ABOUT CHILD'S DATE OF BIRTH FROM PRELOAD.

IF DATE OF BIRTH IS NOT AVAILABLE IN THE PRELOAD, ENTRY FOR DATE OF BIRTH IS REQUIRED.

REFUSED AND DON'T KNOW ALLOWED.

IF A DATE OF BIRTH IS AVAILABLE FOR THE FOCAL CHILD FROM THE PRELOAD, DISPLAY "I have recorded that {CHILD} was born on {DATE OF BIRTH}. Is that correct?" AND "MAKE CORRECTIONS ... BIRTH." ALSO, IF DATE OF BIRTH IS AVAILABLE IN THE PRELOAD, DISPLAY IT NEXT TO "CURRENT INFO" BELOW. OTHERWISE, IF DATE OF BIRTH IS NOT AVAILABLE IN THE PRELOAD, DISPLAY "What is {child}'s date of birth?" AND USE A NULL DISPLAY NEXT TO "CURRENT INFO".

RANGE CHECK: 1-12 FOR MONTH

INQ17ob

QUESTION TEXT:

I have recorded that {CHILD} was born on {DATE OF BIRTH}. Is that correct?/What is {CHILD}'s date of birth?

{MAKE CORRECTIONS TO DATE OF BIRTH BELOW OR PRESS ENTER TO ACCEPT CURRENT DATE OF BIRTH.}

Current Info: [DATE OF BIRTH]

|_|_|/|_|_|/|_|_||_|_|
ENTER DATE OF BIRTH (MONTH/DAY/YEAR)

ENTER NUMBER

Range	1 to 31
REFUSED	BOX 6
DON'T KNOW	BOX 6

PROGRAMMER INSTRUCTIONS:

DISPLAY INFORMATION ABOUT CHILD'S DATE OF BIRTH FROM PRELOAD.

IF DATE OF BIRTH IS NOT AVAILABLE IN THE PRELOAD, ENTRY FOR DATE OF BIRTH IS REQUIRED.

REFUSED AND DON'T KNOW ALLOWED. HOWEVER, DO NOT ALLOW INTERVIEWER TO CHANGE 'REAL DATA TO REFUSED OR DON'T KNOW.

IF A DATE OF BIRTH IS AVAILABLE FOR THE FOCAL CHILD FROM THE PRELOAD, DISPLAY "I have recorded that {CHILD} was born on {DATE OF BIRTH}. Is that correct?" AND "MAKE CORRECTIONS ... BIRTH." ALSO, IF DATE OF BIRTH IS AVAILABLE IN THE PRELOAD, DISPLAY IT NEXT TO "CURRENT INFO" BELOW. OTHERWISE, IF DATE OF BIRTH IS NOT AVAILABLE IN THE PRELOAD, DISPLAY "What is {child}'s date of birth?" AND USE A NULL DISPLAY NEXT TO "CURRENT INFO".

RANGE CHECK: 1-31 FOR DAY

INQ170c

QUESTION TEXT:

I have recorded that {CHILD} was born on {DATE OF BIRTH}. Is that correct?/What is {CHILD}'s date of birth?

{MAKE CORRECTIONS TO DATE OF BIRTH BELOW OR PRESS ENTER TO ACCEPT CURRENT DATE OF BIRTH.}

Current Info: [DATE OF BIRTH]

|_|_|/|_|_|/|_|_||_|_|
ENTER DATE OF BIRTH (MONTH/DAY/YEAR)

ENTER NUMBER

Range

2003 to 2007

REFUSED

DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY INFORMATION ABOUT CHILD'S DATE OF BIRTH FROM PRELOAD.

IF DATE OF BIRTH IS NOT AVAILABLE IN THE PRELOAD, ENTRY FOR DATE OF BIRTH IS REQUIRED.

REFUSED AND DON'T KNOW ALLOWED. HOWEVER, DO NOT ALLOW INTERVIEWER TO CHANGE 'REAL DATA TO REFUSED OR DON'T KNOW.

IF A DATE OF BIRTH IS AVAILABLE FOR THE FOCAL CHILD FROM THE PRELOAD, DISPLAY "I have recorded that {CHILD} was born on {DATE OF BIRTH}. Is that correct?" AND "MAKE CORRECTIONS ... BIRTH." ALSO, IF DATE OF BIRTH IS AVAILABLE IN THE PRELOAD, DISPLAY IT NEXT TO "CURRENT INFO" BELOW. OTHERWISE, IF DATE OF BIRTH IS NOT AVAILABLE IN THE PRELOAD, DISPLAY "What is {child}'s date of birth?" AND USE A NULL DISPLAY NEXT TO "CURRENT INFO".

RANGE CHECK: 2003-2007 FOR YEAR.

BOX 6

CONTINUE WITH INQ.175.

IF ANY FIELD IN DATE OF BIRTH INQ.170 = REFUSED OR DK, GO TO INQ.176.

INQ175

QUESTION TEXT:

So {CHILD} is {AGE CALCULATED FROM DATE OF BIRTH AT INQ.170} years old. Is that correct?

IF AGE IS INCORRECT, GO BACK TO INQ170 AND CORRECT DATE OF BIRTH.

IF AGE IS STILL INCORRECT, ANSWER "NO" TO THIS QUESTION (INQ175).

CODES

1	YES	INQ180
2	NO	INQ176
	REFUSED	INQ176
	DON'T KNOW	INQ176

INQ176

QUESTION TEXT:

How old is {CHILD}?

ENTER AGE

ENTER NUMBER

Range	3 to 8
REFUSED	
DON'T KNOW	

PROGRAMMER INSTRUCTIONS:

RANGE CHECK 3-8.

IF DK OR RF, DISPLAY 'YOU MUST ENTER AN AGE FOR THE CHILD IF DATE OF BIRTH IS MISSING. IF THEIR RESPONDENT DOESN'T KNOW THE AGE, ASK FOR HIS/HER BEST GUESS. IF THE RESPONDENT REFUSES TO PROVIDE AN AGE, ENTER YOUR BEST GUESS OR A '5' IF YOU CAN'T GUESS AT THE CHILD'S AGE.'

INQ180

QUESTION TEXT:

{I have recorded that {CHILD}'s home address is:}/{What is {CHILD}'s home address?}

{Is this still correct?}

Ⓜ

STREET ADDRESS1Ⓜ: [_____]

STREET ADDRESS2: []
CITY: []
STATE: []
ZIP CODE: []

{TYPE ADDRESS AND ENTER 1 FOR 'YES, CORRECT ADDRESS.'}

CODES

1	YES, CORRECT ADDRESS	INQ200
2	YES, SAME ADDRESS – MINOR CORRECTIONS	INQ190
3	NO. NEW ADDRESS REFUSED DON'T KNOW	INQ190

PROGRAMMER INSTRUCTIONS:

IN THE RESPONSE FIELD, DISPLAY CURRENT ADDRESS INFO FROM THE PRELOAD.

DISPLAY "I have ... is" and "Is this still correct" IF DATA ARE AVAILABLE FROM THE PRELOAD.

IF DATA ARE NOT AVAILABLE, display "What is ..." and "TYPE ADDRESS..."

IF PREVIOUS DATA ARE NOT AVAILABLE FOR ADDRESS, ALLOW REFUSED AND DON'T KNOW IN ALL FIELDS.

INQ190

HELP AVAILABLE

QUESTION TEXT:

MAKE CORRECTIONS TO ADDRESS BELOW.

Current Info: [STREET ADDRESS1]
[STREET ADDRESS2]
[CITY]
[STATE]
[ZIP CODE]

STREET ADDRESS1: []
STREET ADDRESS2: []
[CITY]: []
[STATE]: []
[ZIP CODE]: []

ENTER TEXT

REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

REFUSED AND DON'T KNOW ALLOWED AT ALL FIELDS.

DISPLAY 'HELP AVAILABLE' WHEN ON STATE ENTRY FIELD. USE STATE ABBREVIATIONS AS HELP TEXT.

DISPLAY CURRENT ADDRESS INFO IN THE RESPONSE FIELD.

INQ200

QUESTION TEXT:

{I have recorded that {PHONE NUMBER} is {CHILD}'s family's current home phone number. Is this correct?/What is {CHILD}'s family's current home phone number?}

IF NO TELEPHONE, ENTER 'ooo'.

MAKE CORRECTIONS TO PHONE NUMBER BELOW OR PRESS ENTER TO ACCEPT CURRENT PHONE NUMBER.

|_|_|_|-|_|_|_|-|_|_|_|_|

ENTER TEXT

REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY CURRENT PHONE NUMBER FROM PRELOAD.

DISPLAY 'I have recorded ... correct?' IF A HOME PHONE NUMBER IS AVAILABLE FOR THIS CASE. OTHERWISE, DISPLAY "What is ... phone number?"

IF CURRENT INFO IS NOT AVAILABLE, ENTRY IS REQUIRED FOR TELEPHONE NUMBER.

INQ300

QUESTION TEXT:

Next, I have a few questions about {CHILD}'s background. Was {CHILD} born in this country, that is, in any of the fifty states or the District of Columbia?

CODES

1	YES	BOX 8
2	NO	INQ310
	REFUSED	BOX 8
	DON'T KNOW	BOX 8

INQ310

QUESTION TEXT:

In what country or territory was {CHILD} born?

TO ACTIVATE LOOKUP, BEGIN TO TYPE COUNTRY OR TERRITORY. IF COUNTRY IS NOT ON THE LIST, HIGHLIGHT @U***NOT ON LIST***@U IN THE LOOKUP FILE AND PRESS ENTER.

USE THE ARROW KEYS TO HELP YOU LOCATE A MATCH.

REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY COUNTRY LOOKUP FILE. ALLOW 3 SPACES IN THE RESPONSE FIELD FOR ENTERING RESPONSE CODES.

BOX 7

IF INQ.310 = 0 (NOT ON LIST), CONTINUE WITH INQ.312OS. OTHERWISE, GO TO INQ.320.

INQ312OS

QUESTION TEXT:

What is {CHILD}'s country of birth?

SPECIFY COUNTRY

ENTER TEXT

Length

25

INQ320

QUESTION TEXT:

In what year did {CHILD} come to the United States to stay?

ENTER TEXT

Length

4

REFUSED

DON'T KNOW

PROGRAMMER INSTRUCTIONS:

RANGE CHECK: THE YEAR CHILD CAME TO U.S. CANNOT BE EARLIER THAN CHILD'S YEAR OF BIRTH OR LATER THAN THE CURRENT YEAR.

INQ330

QUESTION TEXT:

Is {CHILD} a U.S. citizen?

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

BOX 8

IF FALL K NON-RESPONDENT, GO TO NEXT SECTION (SPQ).
OTHERWISE, GO TO SECTION PIQ (PARENT'S INVOLVEMENT WITH CHILD'S SCHOOL).

Spring 2011 Parent Interview: ECLS-K: 2010-2011

Section SPQ [Supplementary Items for Non-Response Households]

Sequence: 1

SPQ010

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

DISPLAY 'regular basis the year before' IN UNDERLINED TEXT.

BOLD 'Care from a relative', "If there is at least one parent in the household", "If neither parent lives in the household", AND "Regular Basis" ON FIRST INSTANCE ONLY IN HELP TEXT

QUESTION TEXT:

I'd like to talk to you about child care {CHILD} received on a regular basis from someone other than you or {his/her} parents or guardians the year before {he/she} started kindergarten. This does not include occasional baby-sitting or backup care providers. Did {CHILD} receive care from a relative on a regular basis the year before (he/she) started kindergarten? This may include grandparents, brothers and sisters, or any relatives other than you or {CHILD}'s parents or guardians.

THIS MEANS ANYTIME IN THE YEAR BEFORE CHILD ENTERED KINDERGARTEN.

HELP TEXT:

Care from a relative: Record care or programs provided by someone other than the child's parents in a private home. The private home may be the child's home, the caregiver's home, or another home. In all cases, do not include care provided by a parent, even if they do not live in the household. (Do not include visitation with a separated or divorced parent who does not have custody.)

If there is at least one parent in the household, any relative living in the household is eligible to be counted as a care arrangement, if the care is provided on a regularly scheduled basis. Relatives outside the household may also be regular care providers.

If neither parent lives in the household, do not include care provided by guardians who live with the child (they are similar to parents).

Relative care arrangements may or may not have a charge or fee.

Regular Basis: An arrangement or program occurring on a routine schedule (i.e., occurring at least weekly or on some other schedule). Do not include occasional babysitting or "back up" arrangements that are just used once in a while.

CODES

1	YES	
2	NO	SPQ020
	REFUSED	SPQ020
	DON'T KNOW	SPQ020

SPQ015

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

Spring 2011 Parent Interview: ECLS-K: 2010-2011 :: SPQ

BOLD 'Head Start' ON FIRST INSTANCE ONLY IN HELP TEXT
DISPLAY "the year before" IN UNDERLINED TEXT

QUESTION TEXT:

Head Start is a federally sponsored preschool program primarily for children from low-income families. Were any of the regular care arrangements that {CHILD} had with relatives in the year before kindergarten Head Start ?

HELP TEXT:

Head Start: Head Start is a federally funded early childhood education program designed to improve the school-readiness of disadvantaged children (i.e., children from low-income families). Children who participate are usually 3 to 5 years old. Head Start may be offered in a variety of locations. For this question, we are interested in Head Start services in a family child care program in a private home where the child was cared for by someone who is related to the child but is not his or her parent.

Rarely, you may find a case in which a respondent reports that the child is in 'home Head Start,' that is, he/she participates in Head Start in his/her own home. Generally, this involves the parent acting as the child's teacher, supplemented by occasional home visits by a Head Start teacher and perhaps some occasional group activities at a central location. Do not include child care by a parent in this question.

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

SPQ020

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

DISPLAY 'a regular basis the year before' IN UNDERLINED TEXT.
BOLD 'Care from a non-relative', "If there is at least one parent in the household", "If neither parent lives in the household", AND "Regular Basis" ON FIRST INSTANCE ONLY IN HELP TEXT

QUESTION TEXT:

{Now I'd like to ask you about any care {CHILD} received from nonrelatives in a private home, not including child care centers.} Did {CHILD} receive care from a nonrelative on a regular basis the year before (he/she) started kindergarten? This includes home child care providers, regular sitters or neighbors. {It does not include child care centers.}

THIS MEANS ANYTIME IN THE YEAR BEFORE CHILD ENTERED KINDERGARTEN.

PROBE: This refers to care received from nonrelatives in a private home, including home child care providers, regular sitters, or neighbors. However, this does not include child care centers.

HELP TEXT:

Care from a non-relative: Non-relative care is provided by someone not related to the child and is located in a private home. The private home may be the child's home, the caregiver's home, or another home.

If there is at least one parent in the household, any nonrelative living in the household is eligible to be counted as a care arrangement, IF the care is given on a regularly scheduled basis.

If neither parent lives in the household, do not include care provided by guardians who live with the child (they are treated the same as parents).

Non-relative care arrangements or programs may or may not have a charge or fee.

Regular Basis: An arrangement or program occurring on a routine schedule (i.e., occurring at least weekly or on some other schedule). Do not include occasional babysitting or "back up" arrangements that are just used once in a while.

CODES

1	YES	
2	NO	SPQ040
	REFUSED	SPQ040
	DON'T KNOW	SPQ040

PROGRAMMER INSTRUCTIONS:

DISPLAY 'a regular basis the year before' IN UNDERLINED TEXT.

DISPLAY 'Now . . . centers' IF SPQ.010 = 1. OTHERWISE, USE A NULL DISPLAY.

DISPLAY "It does not include child care centers." IF SPQ.010 NE 1. OTHERWISE, USE A NULL DISPLAY.

SPQ025

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

BOLD 'Head Start' ON FIRST INSTANCE ONLY IN HELP TEXT. UNDERLINE "the year before"

QUESTION TEXT:

{Head Start is a federally sponsored preschool program primarily for children from low-income families.}
Were any of the regular care arrangements that {CHILD} had with nonrelatives in the year before kindergarten Head Start?

HELP TEXT:

Head Start: Head Start is a federally funded early childhood education program designed to improve the school-readiness of disadvantaged children (i.e., children from low-income families). Children who participate are usually 3 to 5 years old. Head Start may be offered in a variety of locations. For this question, we are interested in Head Start services in a family child care program in a private home where the child is cared for by someone who is not his or her parent and is not related to the child.

CODES

1	YES	
2	NO	
	REFUSED	
	DON'T KNOW	

PROGRAMMER INSTRUCTIONS:

DISPLAY "Head Start... families." IF SPQ.015 WAS NOT ASKED. ELSE, USE A NULL DISPLAY.

SPQ040

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

DISPLAY 'a regular basis the year before' IN UNDERLINED TEXT.

BOLD 'Day Care Center' AND "Regular Basis" ON FIRST INSTANCE ONLY

QUESTION TEXT:

Did {CHILD} attend a day care center, nursery school, preschool or prekindergarten program on a regular basis the year before {he/she} started kindergarten?

THIS MEANS ANYTIME IN THE YEAR BEFORE CHILD ENTERED KINDERGARTEN.

HELP TEXT:

Day Care Center: Includes any type of formal program that provides care and supervision. It may be in a child's school or in another location, such as a church or a free-standing building. Head Start programs and state-sponsored preschool or prekindergarten programs are also included.

Regular Basis: An arrangement or program occurring on a routine schedule (i.e., occurring at least weekly or on some other schedule). Do not include occasional babysitting or "back up" arrangements that are just used once in a while.

CODES

1	YES	
2	NO	SPQ060
	REFUSED	SPQ060
	DON'T KNOW	SPQ060

SPQ041

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

BOLD 'Head Start' ON FIRST INSTANCE ONLY IN HELP TEXT. UNDERLINE "the year before"

QUESTION TEXT:

{Head Start is a federally sponsored preschool program primarily for children from low-income families.} Were any of {CHILD}'s care arrangements in a day care center, nursery school, preschool, or prekindergarten program in the year before kindergarten Head Start?

HELP TEXT:

Head Start: Head Start is a federally funded early childhood education program designed to improve the school-readiness of disadvantaged children (i.e., children from low-income families). Children who participate are usually 3 to 5 years old. Head Start may be offered in a variety of locations. For this question, we are interested in Head Start services in a center setting.

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY "Head Start... families." IF SPQ.015 AND SPQ.025 WERE NOT ASKED. ELSE, USE A NULL DISPLAY.

SPQ060

QUESTION TEXT:

Now I have some questions about {CHILD}'s health. How much did {CHILD} weigh when (he/she) was born?

ENTER UNIT

||

CODES

1	POUNDS (WITH OR WITHOUT OUNCES)	SPQ065
2	GRAMS	SPQ066
	REFUSED	SPQ070
	DON'T KNOW	SPQ070

SPQ065a

QUESTION TEXT:

[How much did {CHILD} weigh when (he/she) was born?]

||

ENTER POUNDS.

ENTER NUMBER

Range	1 to 13
REFUSED	BOX 1
DON'T KNOW	BOX 1

PROGRAMMER INSTRUCTIONS:

RANGE CHECK: 1-13 FOR POUNDS

SPQ065b

QUESTION TEXT:

[Now I have some questions about {CHILD}'s health. How much did {CHILD} weigh when (he/she) was born?]

||

ENTER OUNCES

ENTER NUMBER

Range	0 to 15
REFUSED	
DON'T KNOW	

Box 1

IF (SPQ.065 IS REFUSED OR DON'T KNOW FOR THE NUMBER OF POUNDS) OR (THE NUMBER OF POUNDS IN SPQ.065 IS 5 AND REFUSED OR DON'T KNOW FOR THE NUMBER OF OUNCES), GO TO SPQ.070. ELSE, IF THE NUMBER OF POUNDS IN SPQ.065 IS 3 AND REFUSED OR DON'T KNOW FOR THE NUMBER OF OUNCES, GO TO SPQ.080. ELSE, IF THE NUMBER OF POUNDS IN SPQ.065 IS 10 AND REFUSED OR DON'T KNOW FOR THE NUMBER OF OUNCES, GO TO SPQ.085. ELSE, GO TO SPQ.090.

SPQ066

QUESTION TEXT:

[Now I have some questions about {CHILD}'s health. How much did {CHILD} weigh when (he/she) was born?]
|_|_|_|_|
ENTER GRAMS

ENTER NUMBER

Range 454 to 6322
REFUSED
DON'T KNOW

Box 2

IF GRAMS ARE ENTERED IN SPQ.066, GO TO SPQ.090.
ELSE, IF SPQ.066 IS REFUSED OR DON'T KNOW, GO TO SPQ.070.

SPQ070

HELP AVAILABLE

QUESTION TEXT:

When (he/she) was born, did {CHILD} weigh more than 5 1/2 pounds (2,495 grams)?

HELP TEXT:

5 ½ pounds = 5 pounds, 8 ounces = 2,495 grams

CODES

1	YES	BOX 3
2	NO	BOX 3
	REFUSED	BOX 3
	DON'T KNOW	BOX 3

Box 3

IF THE NUMBER OF POUNDS IN SPQ.065 WAS 5 AND REFUSED OR DON'T KNOW FOR THE NUMBER OF OUNCES), GO TO SPQ.090. ELSE, IF SPQ.070 = 1, GO TO SPQ.085. ELSE, GO TO SPQ.080.

SPQ080

HELP AVAILABLE

QUESTION TEXT:

Did (he/she) weigh more than 3 pounds (1,361 grams)?

HELP TEXT:

3 pounds = 1,361 grams

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

Box 4

IF (SPQ.080 = 1 OR 2) OR (SPQ.070 = 2 AND SPQ.080 = REF OR DK), GO TO SPQ.090. ELSE, GO TO SPQ.085.

SPQ085**HELP AVAILABLE****QUESTION TEXT:**

Did {he/she} weigh more than 10 pounds?

HELP TEXT:

10 pounds = 4,536 grams

CODES

- | | |
|---|------------|
| 1 | YES |
| 2 | NO |
| | REFUSED |
| | DON'T KNOW |

SPQ090**QUESTION TEXT:**

Was {CHILD} born more than two weeks before (he/she) was due?

CODES

- | | | |
|---|------------|--------|
| 1 | YES | SPQ100 |
| 2 | NO | SPQ106 |
| | REFUSED | SPQ106 |
| | DON'T KNOW | SPQ106 |

SPQ100**QUESTION TEXT:**

How many days or weeks early was (he/she)?

ENTER NUMBER

|_|_|

ENTER NUMBER

- | | |
|------------|--------|
| REFUSED | SPQ106 |
| DON'T KNOW | SPQ106 |

SPQ105

QUESTION TEXT:

[How many days or weeks early was (he/she)?]

ENTER UNIT

| |

CODES

- | | |
|---|------------|
| 1 | WEEKS |
| 2 | DAYS |
| | REFUSED |
| | DON'T KNOW |

PROGRAMMER INSTRUCTIONS:

RANGE CHECK : 1-31 IF DAYS IS THE UNIT IN SPQ.105; 1-17 IF WEEKS IS THE UNIT IN SPQ.105.

SPQ106

QUESTION TEXT:

Was {CHILD} a twin, triplet, or other child born as part of a multiple birth?

IF HIGHER-ORDER MULTIPLE BIRTH, CODE NUMBER OF CHILDREN BORN TOGETHER, EVEN IF ONE OR MORE WAS STILL BORN OR DIED SHORTLY AFTER BIRTH.

CODES

- | | |
|---|-----------------------------------|
| 1 | NO |
| 2 | YES, A TWIN |
| 3 | YES, A TRIPLET |
| 4 | YES, A MULTIPLE BIRTH (4 OR MORE) |
| | REFUSED |
| | DON'T KNOW |

SPQ150

QUESTION TEXT:

When {CHILD} was born, were {his/her} biological mother and biological father married to each other?

CODES

- 1 YES
- 2 NO
REFUSED
DON'T KNOW

SPQ155

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

BOLD 'Regularly' IN FIRST INSTANCE ONLY OF HELP TEXT

QUESTION TEXT:

Is any language other than English regularly spoken in your home?

HELP TEXT:

Regularly: A language, other than English, that is spoken on regular basis (that is, occurring at least weekly) by at least one household member.

CODES

- 1 YES
- 2 NO SPQ210
REFUSED SPQ210
DON'T KNOW SPQ210

SPQ156

QUESTION TEXT:

Is English also spoken in your home?

CODES

- 1 YES
- 2 NO
REFUSED
DON'T KNOW

SPQ157

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

DISPLAY 'primary' IN UNDERLINED TEXT
BOLD 'Primary language' ON FIRST INSTANCE ONLY IN HELP TEXT

QUESTION TEXT:

What is the primary language spoken in your home?
HELP TEXT:
Primary language: The language spoken most of the time by most of the household members.

CODES

- 0 ENGLISH
- 1 ARABIC
- 2 CHINES LANGUAGE/DIALECT
- 3 FILIPINO LANGUAGE
- 4 FRENCH
- 5 GERMAN
- 6 GREEK
- 7 ITALIAN
- 8 JAPANESE
- 9 KOREAN
- 10 POLISH
- 11 PORTUGUESE
- 12 SPANISH
- 13 VIETNAMESE
- 14 FARSI
- 15 HMONG
- 16 RESPONDENT CANNOT CHOOSE A PRIMARY LANGUAGE
- 91 SOME OTHER LANGUAGE (SPECIFY)
REFUSED
DON'T KNOW

Box 5

IF SPQ.157 = 91, GO TO SPQ.157OS. ELSE, IF SPQ.157 = 0, GO TO SPQ.210. ELSE, GO TO SPQ.210.

SPQ157OS

DISPLAY INSTRUCTIONS:

DISPLAY 'primary' IN UNDERLINED TEXT.

QUESTION TEXT:

[What is the primary language spoken in your home?]

☐SPECIFY LANGUAGE.

ENTER TEXT

Length 25
REFUSED
DON'T KNOW

SPQ210

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

BOLD "WIC" ON FIRST INSTANCE ONLY IN HELP TEXT

QUESTION TEXT:

When (you were/{CHILD}'s mother was) pregnant with {CHILD}, did (you/she) receive any benefits ☐from the Special Supplemental Food Program for Women, Infants, and Children, or WIC?

HELP TEXT:

WIC: This program provides food assistance and nutritional education to low-income pregnant and postpartum women and their infants, as well as to low-income children up to age 5. WIC is short for the Special Supplemental Food Program for Women, Infants, and Children. WIC benefits can include food, checks, vouchers, and/or a debit card called EBT (Electronic Benefit Transfer).

CODES

1 YES
2 NO
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

IF R VOLUNTEERED THAT SHE IS CHILD'S MOTHER, SAY 'you' INSTEAD OF '{CHILD}'S mother was'.

SPQ220

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

BOLD "WIC" on first instance ONLY in Help Text

QUESTION TEXT:

Did {CHILD} receive any WIC benefits as an infant or child?

HELP TEXT:

WIC: This program provides food assistance and nutritional education to low-income pregnant and

postpartum women and their infants, as well as to low-income children up to age 5. WIC is short for the Special Supplemental Food Program for Women, Infants, and Children. WIC benefits can include food, checks, vouchers, and/or a debit card called EBT (Electronic Benefit Transfer).

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

Box 6

GO TO PIQ (PARENT'S INVOLVEMENT WITH CHILD'S SCHOOL).

Spring 2011 Parent Interview: ECLS-K: 2010-2011

Section PIQ [Parent's Involvement with Child's School] Sequence: 2

PIQ110

QUESTION TEXT:

Now I'd like to ask you about your family's involvement with {CHILD}'s school.

During this school year, have you or another adult in your household taken it upon yourself to contact {CHILD}'s teacher or school for any reason having to do with {CHILD}?

CODES

- 1 YES
- 2 NO
REFUSED
DON'T KNOW

PIQ127

DISPLAY INSTRUCTIONS:

DISPLAY "behavior" IN UNDERLINED TEXT.

QUESTION TEXT:

Since the beginning of this school year, how many times have any of {CHILD}'s teachers or {his/her} school contacted (you/any adult in your household) about any behavior problems {he/she} is having in school?

ENTER NUMBER OF TIMES

TIMES

ENTER NUMBER

- Range 0 to 50
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY "his" AND "he" IF THE CHILD IS A BOY. ELSE, DISPLAY "her" AND "she". IF GENDER IS MISSING, DISPLAY "he/she".

PIQ128

DISPLAY INSTRUCTIONS:

DISPLAY "school work" IN UNDERLINED TEXT.

QUESTION TEXT:

How about any problems {he/she} is having with school work?

ENTER NUMBER OF TIMES

TIMES

ENTER NUMBER

Range 0 to 50
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY "he" IF THE CHILD IS A BOY. ELSE, DISPLAY "she". IF GENDER IS MISSING, DISPLAY "he/she".

PIQ129

QUESTION TEXT:

How about anything {CHILD} is doing particularly well or better in school?

ENTER NUMBER OF TIMES

TIMES

ENTER NUMBER

Range 0 to 50
REFUSED
DON'T KNOW

PIQ130

QUESTION TEXT:

Since the beginning of this school year, have you or the other adults in your household... Attended an open house or a back-to-school night?

CODES

1 YES
2 NO
REFUSED
DON'T KNOW

PIQ140

QUESTION TEXT:

[Since the beginning of this school year, have you or the other adults in your household...] Attended a meeting of a PTA, PTO, or Parent-Teacher Organization?

CODES

- | | |
|---|------------|
| 1 | YES |
| 2 | NO |
| | REFUSED |
| | DON'T KNOW |

PIQ145

QUESTION TEXT:

[Since the beginning of this school year, have you or the other adults in your household...] Gone to a meeting of a parent advisory group or policy council?

CODES

- | | |
|---|------------|
| 1 | YES |
| 2 | NO |
| | REFUSED |
| | DON'T KNOW |

PIQ150

QUESTION TEXT:

[Since the beginning of this school year, have you or the other adults in your household...] Gone to a regularly-scheduled parent-teacher conference with {CHILD}'s teacher or meeting with {CHILD}'s teacher?

CODES

- | | |
|---|------------|
| 1 | YES |
| 2 | NO |
| | REFUSED |
| | DON'T KNOW |

PIQ160

QUESTION TEXT:

[Since the beginning of this school year, have you or the other adults in your household...] Attended a school or class event, such as a play, sports event, or science fair?

CODES

- | | |
|---|------------|
| 1 | YES |
| 2 | NO |
| | REFUSED |
| | DON'T KNOW |

PIQ170

QUESTION TEXT:

[Since the beginning of this school year, have you or the other adults in your household...] Served as a volunteer in {CHILD}'s classroom or elsewhere in the school?

CODES

- | | |
|---|------------|
| 1 | YES |
| 2 | NO |
| | REFUSED |
| | DON'T KNOW |

PIQ174

QUESTION TEXT:

[Since the beginning of this school year, have you or the other adults in your household...] Served on a school committee?

CODES

- | | |
|---|------------|
| 1 | YES |
| 2 | NO |
| | REFUSED |
| | DON'T KNOW |

PIQ175

QUESTION TEXT:

[Since the beginning of this school year, have you or the other adults in your household...] Participated in fundraising for {CHILD}'s school?

CODES

- | | |
|---|------------|
| 1 | YES |
| 2 | NO |
| | REFUSED |
| | DON'T KNOW |

PIQ185

QUESTION TEXT:

During this school year, how many times have you or other adults in your household gone to meetings or participated in activities at {CHILD}'s school?

ENTER NUMBER OF TIMES

|_|_|_|
TIMES

ENTER NUMBER

- | | |
|------------|----------|
| Range | 0 to 999 |
| REFUSED | |
| DON'T KNOW | |

PROGRAMMER INSTRUCTIONS:

IF PIQ.130, PIQ.140, PIQ.145, PIQ.150, PIQ.160, PIQ.170, OR PIQ.174 = 1, SOFT RANGE: 1 TO 180. ELSE, SOFT RANGE = 0 TO 180. HARD RANGE = 0-999. IF SOFT RANGE IS VIOLATED, DISPLAY ERROR MESSAGE: "NUMBER OF TIMES IS LESS THAN OR GREATER THAN EXPECTED. VERIFY NUMBER AND CHANGE, IF NECESSARY, OR HIT "S" TO SUPPRESS AND ACCEPT THE NUMBER YOU ENTERED."

PIQ190

QUESTION TEXT:

For each of the following statements, please tell me how well {CHILD}'s school has done with each activity during this school year. The school lets you know between report cards how {CHILD} is doing in school. Would you say {CHILD}'s school...

CODES

- 1 Does this very well,
 - 2 Just OK, or
 - 3 Doesn't do this at all?
- REFUSED
DON'T KNOW

PIQ200

QUESTION TEXT:

[For each of the following statements, please tell me how well {CHILD}'s school has done with each activity during this school year.] The school helps you understand what children at {CHILD}'s age are like. Would you say {CHILD}'s school...

CODES

- 1 Does this very well,
 - 2 Just OK, or
 - 3 Doesn't do this at all?
- REFUSED
DON'T KNOW

PIQ210

QUESTION TEXT:

[For each of the following statements, please tell me how well {CHILD}'s school has done with each activity during this school year.] The school makes you aware of chances to volunteer at the school. Would you say {CHILD}'s school...

CODES

- 1 Does this very well,
 - 2 Just OK, or
 - 3 Doesn't do this at all?
- REFUSED
DON'T KNOW

PIQ220

QUESTION TEXT:

[For each of the following statements, please tell me how well {CHILD}'s school has done with each activity during this school year.] The school provides workshops, materials, or advice about how to help {CHILD} learn at home. Would you say {CHILD}'s school...

CODES

- 1 Does this very well,
 - 2 Just OK, or
 - 3 Doesn't do this at all?
- REFUSED
DON'T KNOW

PIQ230

QUESTION TEXT:

[For each of the following statements, please tell me how well {CHILD}'s school has done with each activity during this school year.] The school provides information on community services to help {CHILD} or your family. Would you say {CHILD}'s school...

CODES

- 1 Does this very well,
 - 2 Just OK, or
 - 3 Doesn't do this at all?
- REFUSED
DON'T KNOW

PIQ290

QUESTION TEXT:

How often in the past month has {CHILD}'s teacher sent home ideas for things to do with {CHILD} at home? (THIS INCLUDES HOMEWORK.) Would you say...

CODES

- 1 Never,
 - 2 One or two times, or
 - 3 Three or more times?
- REFUSED
DON'T KNOW

PIQ300

QUESTION TEXT:

About how many parents of children in {CHILD}'s class do you talk with regularly, either in person, on the phone, or by texting, e-mailing, or using a social networking site?

__|__|
NUMBER

ENTER NUMBER

Range 0 to 40
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

RANGE: 0 to 40.

PIQ305

CARI: Sampling at 100%

QUESTION TEXT:

Does {CHILD} have any older brothers or sisters who attend or attended the same school?

CODES

1 YES
2 NO
REFUSED
DON'T KNOW

PIQ400

QUESTION TEXT:

{Last time we spoke to you/Earlier}, you said that (ENGLISH/NON-ENGLISH LANGUAGE/a language other than English) is spoken in your home. When {CHILD}'s teacher sends home notes or newsletters, are these in (ENGLISH/NON-ENGLISH LANGUAGE/a language that you speak)?

CODES

1 YES
2 NO

REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

FOR FALL K CONTINUING HOUSEHOLDS:

DISPLAY "The last time we spoke to you".

IF (PLQ.020=2 FROM FALL K (NO OTHER LANGUAGE REGULARLY SPOKEN AT HOME BESIDES ENGLISH)) OR (IF PLQ.060 WAS ASKED AND PLQ.060=0 FROM FALL K (ENGLISH SPOKEN AS PRIMARY LANGUAGE)) OR (IF PLQ.060 WAS NOT ASKED IN FALL-K AND PLQ.041 =0 FOR RESPONDENT FROM FALL K (ENGLISH SPOKEN AS PRIMARY LANGUAGE)), DISPLAY 'English.'

OTHERWISE, IF PLQ.060 WAS ASKED IN FALL-K, DISPLAY THE LANGUAGE SPECIFIED IN PLQ.060 FROM FALL K. IF PLQ.060 WAS NOT ASKED, BUT PLQ.041 WAS ASKED, DISPLAY THE LANGUAGE THE RESPONDENT USED IN PLQ.041.

IF FALL K PLQ.060 WAS ASKED AND PLQ.060=91, DISPLAY THE OTHER SPECIFY TEXT. ELSE, IF FALL K PLQ.060 WAS NOT ASKED AND AND PLQ.041=91, DISPLAY THE OTHER SPECIFY TEXT IN PLQ.041 FOR THE RESPONDENT.

IF FALL K PLQ.060 WAS ASKED AND PLQ.060=16, DK, RF, DISPLAY "a language other than English" AND "a language that you speak". ELSE, IF FALL K PLQ.060 WAS NOT ASKED AND PLQ.041=16, DK, RF FOR THE RESPONDENT, DISPLAY "a language other than English" AND "a language that you speak".

FOR FALL K NON-RESPONDENTS:

DISPLAY "Earlier".

IF SPQ.155=2 (NO OTHER LANGUAGE REGULARLY SPOKEN AT HOME BESIDES ENGLISH), DK, RF, OR SPQ.157=0 (ENGLISH SPOKEN AS PRIMARY LANGUAGE), DISPLAY 'English.'
OTHERWISE, DISPLAY THE LANGUAGE SPECIFIED IN SPQ.157.

IF SPQ.157=91, DISPLAY TEXT FROM OTHER SPECIFY.

IF SPQ.157=16, DK, RF, DISPLAY "a language other than English" AND "a language that you speak".

PIQ410

QUESTION TEXT:

This year, have the following reasons made it harder for you to participate in activities at {CHILD}'s school? Inconvenient meeting times? Has that made it harder for you to participate in activities at {CHILD}'s school?

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

PIQ420

QUESTION TEXT:

[This year, have the following reasons made it harder for you to participate in activities at {CHILD}'s school?]
No child care keeps your family from going to school meetings or events? Has that made it harder for you to participate in activities at {CHILD}'s school?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

PIQ430

QUESTION TEXT:

[This year, have the following reasons made it harder for you to participate in activities at {CHILD}'s school?]
Family members can't get time off from work? [Has that made it harder for you to participate in activities at {CHILD}'s school?]

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

PIQ440

QUESTION TEXT:

[This year, have the following reasons made it harder for you to participate in activities at {CHILD}'s school?]
Problems with safety going to the school? [Has that made it harder for you to participate in activities at {CHILD}'s school?]

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

PIQ450

QUESTION TEXT:

[This year, have the following reasons made it harder for you to participate in activities at {CHILD}'s school?]
The school does not make your family feel welcome? [Has that made it harder for you to participate in activities at {CHILD}'s school?]

CODES

- | | |
|---|------------|
| 1 | YES |
| 2 | NO |
| | REFUSED |
| | DON'T KNOW |

PIQ460

QUESTION TEXT:

[This year, have the following reasons made it harder for you to participate in activities at {CHILD}'s school?]
Problems with transportation to the school? [Has that made it harder for you to participate in activities at {CHILD}'s school?]

CODES

- | | |
|---|------------|
| 1 | YES |
| 2 | NO |
| | REFUSED |
| | DON'T KNOW |

BOX1

IF IT IS A FALL-K CONTINUING HOUSEHOLD AND PLQ.020=1 FROM FALL K (OTHER LANGUAGE REGULARLY SPOKEN AT HOME BESIDES ENGLISH) AND (PLQ.060 WAS ASKED IN FALL K AND PLQ060 NE o FROM FALL K (ENGLISH NOT SPOKEN AS PRIMARY LANGUAGE) OR IF PLQ.060 WAS NOT ASKED IN FALL K AND PLQ.041 NE o FOR FIRST KEY PARENT FROM FALL K (ENGLISH NOT SPOKEN AS PRIMARY LANGUAGE), GO TO PIQ.470.

IF IT IS A FALL K NON-RESPONDENT AND SPQ.155=1 (OTHER LANGUAGE REGULARLY SPOKEN AT HOME BESIDES ENGLISH), AND SPQ.157 NE o (ENGLISH NOT SPOKEN AS PRIMARY LANGUAGE), GO TO PIQ.470. ELSE, GO TO PIQ.480

PIQ470

QUESTION TEXT:

[This year, have the following reasons made it harder for you to participate in activities at {CHILD}'s school?]
Problems because you or members of your family speak a language other than English and meetings are conducted only in English? (Has that made it harder for you to participate in activities at {CHILD}'s school?)

CODES

- | | |
|---|------------|
| 1 | YES |
| 2 | NO |
| | REFUSED |
| | DON'T KNOW |

PIQ480

QUESTION TEXT:

[This year, have the following reasons made it harder for you to participate in activities at {CHILD}'s school?]
You don't hear about things going on at school that you might want to be involved in? (Has that made it harder for you to participate in activities at {CHILD}'s school?)

CODES

- | | |
|---|------------|
| 1 | YES |
| 2 | NO |
| | REFUSED |
| | DON'T KNOW |

PIQ490

QUESTION TEXT:

Would you say that you are very satisfied, somewhat satisfied, somewhat dissatisfied or very dissatisfied with the school {CHILD} attends this year?

CODES

- | | |
|---|-----------------------|
| 1 | VERY SATISFIED |
| 2 | SOMEWHAT SATISFIED |
| 3 | SOMEWHAT DISSATISFIED |

- 4 VERY DISSATISFIED
- REFUSED
- DON'T KNOW

PIQ491

QUESTION TEXT:

About how far would you say it is from your home to the school {CHILD} attends?

CODES

1	LESS THAN 1/8TH MILE (LESS THAN 3 BLOCKS)	PIQ492
2	1/8TH MILE TO 1/4 MILE (3-5 BLOCKS)	PIQ492
3	MORE THAN 1/4 MILE, BUT LESS THAN 1/2 MILE (6-9 BLOCKS)	PIQ492
4	1/2 MILE TO LESS THAN 1 MILE (10-19 BLOCKS)	PIQ492
5	ONE MILE TO 2.5 MILES (LESS THAN 5 MINUTE DRIVE)	PIQ492
6	2.6 MILES TO 5 MILES (BETWEEN 5-10 MINUTE DRIVE)	PIQ492
7	5.1 MILES TO 7.5 MILES (BETWEEN 11 AND 15 MINUTE DRIVE)	PIQ492
8	7.6 MILES TO 10 MILES (BETWEEN 16 AND 20 MINUTE DRIVE)	PIQ492
9	10.1 MILES OR MORE (MORE THAN 20 MINUTE DRIVE)	PIQ492
91	OTHER (SPECIFY)	PIQ491OS
	REFUSED	PIQ492
	DON'T KNOW	PIQ492

PIQ491OS

QUESTION TEXT:

[About how far would you say it is from your home to the school {CHILD} attends?]

SPECIFY DISTANCE

ENTER TEXT

Length

25

REFUSED
DON'T KNOW

PIQ492

QUESTION TEXT:

How does {CHILD} usually get to school in the morning?

CODES

1	SCHOOL BUS	PIQ493
2	PARENT DRIVES (HIM/HER)	PIQ493
3	CARPOOL	PIQ493
4	WALK	PIQ493
5	RIDES A BIKE OR SCOOTER	PIQ493
91	OTHER (SPECIFY)	PIQ492OS
	REFUSED	PIQ493
	DON'T KNOW	PIQ493

PIQ492OS

QUESTION TEXT:

[How does {CHILD} usually get to school in the morning?]

SPECIFY

ENTER TEXT

Length	25
REFUSED	
DON'T KNOW	

PIQ493

QUESTION TEXT:

How long does this take? Would you say...

CODES

- 1 Less than 15 minutes,
 - 2 15-30 minutes, or
 - 3 More than 30 minutes?
- REFUSED
DON'T KNOW

PIQ494

QUESTION TEXT:

On school days, how much time does {CHILD} have between arriving at school and classes starting? Would you say...

CODES

- 1 Less than 10 minutes,
 - 2 10-20 minutes, or
 - 3 More than 20 minutes?
- REFUSED
DON'T KNOW

BOX 2

GO TO SECTION FSQ (FAMILY STRUCTURE).

Spring 2011 Parent Interview: ECLS-K: 2010-2011

Section FSQ [Family Structure] Sequence: 3

Box 1

FALL K CONTINUING RESPONDENTS (THIS INCLUDES (1) FALL K RESPONDENTS WHO PARTICIPATED IN THE FALL AND THE RESPONDENT IS THE SAME IN THE FALL AND SPRING, AND (2) NEW SPRING K RESPONDENTS WHOSE HOUSEHOLDS PARTICIPATED IN THE FALL, BUT THERE IS A NEW RESPONDENT IN THE SPRING), GO TO FSQ010.

FALL K NON-RESPONDENTS: GO TO FSQ020.

FSQ010

CARI: Sampling at 100%

DISPLAY INSTRUCTIONS:

DISPLAY 'still' IN UNDERLINED TEXT.

QUESTION TEXT:

Now I have a few questions about your household. We have listed that (READ NAMES FROM MATRIX) lived in this household at the time of our last interview.

As I read each person's name again, please tell me if he or she still lives in this household.

Does {NAME} still live in this household?

CODES

1	YES	SEE CAPI
2	NO	FSQ015

PROGRAMMER INSTRUCTIONS:

DISPLAY THE COMPLETED HOUSEHOLD MATRIX FROM THE ROUND 1 INTERVIEW. THIS INCLUDES THE PERSON TYPE, FIRST NAME, LAST NAME, AGE, AND GENDER COLUMNS. THESE COLUMNS SHOULD BE PROTECTED, THAT IS, INFORMATION CANNOT BE CHANGED. CHANGES MADE AT INQ.130, INQ.160, AND AGE QUESTIONS (IF INQ.175 = 1, CALCULATE AGE FROM BIRTHDATE IN INQ.170. ELSE, GET FROM INQ.176) SHOULD SHOW UP ON THE MATRIX AT FSQ.010. FOR CONTINUING HOUSEHOLDS, CHANGES MADE AT INQ.112 AND INQ.116 SHOULD BE REFLECTED IN THE FSQ.010 MATRIX.

ADD AS THE 6TH COLUMN TO THE MATRIX, 'STILL HERE'. DISPLAY 'Y' IF PERSON STILL LIVES IN THE HOUSEHOLD AND 'N' IF THE PERSON DOES NOT (BASED ON HOW FSQ010 IS CODED).

THE CURSOR SHOULD START AT THE 'STILL HERE' COLUMN FOR THE FIRST PERSON LISTED IN THE MATRIX.

DISPLAY BRACKETS [] AROUND THE FIRST TWO PARAGRAPHS WHENEVER IN THE 'STILL HERE' COLUMN FOR SOMEONE OTHER THAN THE FIRST PERSON LISTED ON THE MATRIX. (THE FIRST TWO PARAGRAPHS SHOULD BE DISPLAYED WITHOUT THE BRACKETS WHEN YOU FIRST ARRIVE AT THIS QUESTION.)

ADD AS THE 7TH COLUMN TO THE MATRIX, 'REASON LEFT'(FSQ.015).

IF THE 'STILL IN HH' COLUMN IS CODED 'NO', THE CURSOR SHOULD MOVE RIGHT TO THE 'REASON LEFT' COLUMN. IF THE 'STILL IN HH' IS CODED 'YES', THE CURSOR SHOULD MOVE TO THE 'STILL HERE' COLUMN FOR THE NEXT PERSON ON THE MATRIX (THE 'REASON LEFT' COLUMN DOES NOT NEED TO BE COMPLETED IN THIS INSTANCE).

ADD AS THE 8TH COLUMN TO THE MATRIX, 'REASON LEFT OTHER' (FSQ.015OS).

THE MATRIX CANNOT HAVE MORE THAN 25 ROW ENTRIES.

IF QUESTION IS ABOUT THE RESPONDENT AND INQ.055 NE o (RESPONDENT IS NOT A NEW HOUSEHOLD MEMBER) AND FSQ.010 = 2 (NOT IN HH), DISPLAY ERROR MESSAGE: 'THIS PERSON CANNOT BE THE RESPONDENT AND NOT BE IN THE HOUSEHOLD.'

FSQ015

CARI: Sampling at 100%

QUESTION TEXT:

Why is {NAME} no longer living in this household?

CODES

- | | |
|----|---|
| 1 | SEPARATION OR DIVORCE |
| 2 | ATTENDING COLLEGE OR BOARDING SCHOOL |
| 3 | LIVING ELSEWHERE FOR EMPLOYMENT-RELATED REASONS |
| 4 | DECEASED |
| 5 | MOVED ON/MOVED ELSEWHERE |
| 6 | ROSTER ERROR |
| 7 | MOVED BACK WITH PARENTS |
| 91 | SOME OTHER REASON (SPECIFY) |
| | REFUSED |
| | DON'T KNOW |

PROGRAMMER INSTRUCTIONS:

1. DISPLAY THIS QUESTION WHENEVER IN THE 'REASON LEFT' COLUMN.
2. ONCE THIS ITEM IS CODED, THE CURSOR SHOULD MOVE TO THE 'STILL HERE' COLUMN FOR THE NEXT PERSON ON THE MATRIX.
3. HOWEVER, IF SOME OTHER REASON IS CODED, THEN FSQ015OS MUST FIRST BE COMPLETED BEFORE MOVING TO THE NEXT PERSON ON THE MATRIX.

FSQ015OS

CARI: Sampling at 100%

QUESTION TEXT:

[Why is {NAME} no longer living in this household?]

ENTER OTHER REASON

ENTER TEXT

Length 50
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

1. DISPLAY 'REASON LEFT OTHER' AS THE 8TH COLUMN IN THE MATRIX.
2. DISPLAY THIS QUESTION WHENEVER IN THE 'REASON LEFT OTHER' COLUMN.
3. THIS COLUMN ONLY NEEDS TO BE COMPLETED IF CODE 91 IS SELECTED AS A REASON IN THE 'WHY REASON LEFT' COLUMN.

FSQ020

CARI: Sampling at 100%

QUESTION TEXT:

{Other than the people I just asked about, is there anyone else currently living in this household? For example, anyone who has moved in or any babies born since our last interview? Please tell me the names and ages of all the other people who normally live here. Please do not include anyone staying here temporarily who usually lives somewhere else.}

{Now I have a few questions about your household. We have noted that you and {CHILD} currently live in this household. First I'd like to ask you some questions about yourself, then I'd like you to please tell me the names and ages of all the other people who normally live here Please do not include anyone staying here temporarily who usually lives somewhere else.}

{PROBE: Anyone else (living in this household)?}

{ENTER FIRST NAME OF {NEW} HOUSEHOLD MEMBER OR PRESS ENTER IF MATRIX IS COMPLETE.}

{YOU WILL NEED TO ENTER THE NAME, AGE, AND GENDER OF EACH HOUSEHOLD MEMBER NAMED BEFORE LEAVING THE MATRIX.}

{PRESS ENTER TO RECORD THE AGE AND GENDER OF THE RESPONDENT OR PRESS THE DOWN ARROW KEY TO ADD A HOUSEHOLD MEMBER.}

ENTER TEXT

Length 25
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

1. DISPLAY THE HOUSEHOLD MATRIX (PERSON TYPE, FIRST NAME, LAST NAME, AGE, AND GENDER COLUMNS.)
2. THE INTERVIEWER CAN ADD UP TO 25 ROW ENTRIES.
3. THE INTERVIEWER CAN MOVE ALL AROUND THE MATRIX USING THE ARROW KEYS (EXCEPT ON PROTECTED FIELDS).
4. IF A FALL-K CONTINUING HOUSEHOLD:

- a. DISPLAY FIRST PARAGRAPH "Other... else." WHEN YOU FIRST ARRIVE AT FSQ020. ALSO DISPLAY THIS PARAGRAPH IN BRACKETS [] WHENEVER YOU ARE IN THE FIRST NAME COLUMN FOR ANY PERSON OTHER THAN PERSON NUMBER 1 (THE RESPONDENT).
- b. DISPLAY ALL HOUSEHOLD MEMBERS AND ASSOCIATED INFORMATION AS COLLECTED IN THE FALL OR UPDATED IN INQ (INQ.112, INQ.116, INQ.130, INQ.160, AND AGE VARIABLES ((IF INQ.175 = 1, CALCULATE AGE FROM BIRTHDATE IN INQ.170. ELSE, GET FROM INQ.176)) FOR THE CHILD AND THE ROUND 1 RESPONDENT. HOWEVER, DO NOT DISPLAY THE NAMES OF THOSE HH MEMBERS THAT WERE CODED '2' AT FSQ010 (NOT IN HH ANYMORE).
- c. ALL PREVIOUS HH MEMBER ROWS SHOULD BE PROTECTED. THE CURSOR SHOULD APPEAR ON THE FIRST BLANK FIRST NAME COLUMN.
- d. WHEN ON THE FIRST BLANK FIRST NAME COLUMN DISPLAY "PROBE: ... household", "ENTER FIRST ... COMPLETE", AND THE "NEW" IN THAT SCREEN INSTRUCTION.
- e. WHEN ON THE SECOND BLANK FIRST NAME COLUMN, THE PROBE AND SCREEN INSTRUCTION CITED ABOVE SHOULD ALSO CONTINUE TO BE DISPLAYED.

5. IF A FALL-K NONRESPONSE HOUSEHOLD:

- a. DISPLAY THE SECOND PARAGRAPH "Now... else." WHEN YOU FIRST ARRIVE AT FSQ020. ALSO DISPLAY THIS PARAGRAPH IN BRACKETS [] WHENEVER YOU ARE IN THE FIRST NAME COLUMN FOR ANY PERSON OTHER THAN PERSON NUMBER 1 (THE RESPONDENT).
- b. DISPLAY THE RESPONDENT'S FIRST AND LAST NAMES IN THE APPROPRIATE COLUMNS (COLLECTED AT INQ060/070). DISPLAY 'R' IN THE FIRST COLUMN TO INDICATE THAT PERSON IS THE RESPONDENT.
- c. DISPLAY THE NAME OF THE FOCAL CHILD IN THE SECOND ROW OF THE FIRST AND LAST NAME COLUMNS (FROM INQ.130). DISPLAY 'C' IN THE FIRST COLUMN TO INDICATE THAT PERSON IS THE FOCAL CHILD. DISPLAY THE AGE (IF INQ.175 = 1, CALCULATE AGE FROM BIRTHDATE IN INQ.170. ELSE, GET FROM INQ.176) AND GENDER (INQ.160) OF THE CHILD IN THE APPROPRIATE COLUMNS OF THE SECOND ROW. THIS ROW IS PROTECTED.
- d. DISPLAY "YOU WILL NEED... THE MATRIX." AND "PRESS ENTER TO... A HOUSEHOLD MEMBER" WHENEVER THE CURSOR IS POSITIONED IN THE FIRST NAME COLUMN FOR PERSON NUMBER 1.
- e. DISPLAY "ENTER FIRST NAME... IF MATRIX IS COMPLETE." WHENEVER THE CURSOR IS POSITIONED IN THE FIRST NAME COLUMN FOR A ROW OTHER THAN PERSON NUMBER 1 (THE FIRST BLANK ROW AFTER CHILD).
- f. DISPLAY "PROBE:... household?" WHENEVER THE CURSOR IS POSITIONED IN THE FIRST NAME COLUMN FOR SOMEONE OTHER THAN PERSON NUMBER 1 OR THE FIRST HOUSEHOLD MEMBER ADDED AFTER THE CHILD.

FSQ025

CARI: Sampling at 100%

QUESTION TEXT:

ENTER LAST NAME OF {NAME}.

ENTER TEXT

Length	25
REFUSED	
DON'T KNOW	

PROGRAMMER INSTRUCTIONS:

DISPLAY THIS QUESTION WHEN THE CURSOR IS POSITIONED IN THE LAST NAME COLUMN OF THE HOUSEHOLD MATRIX.

FSQ030

CARI: Sampling at 100%

QUESTION TEXT:

How old {are you/is {NAME}}?
ENTER AGE OF {NAME}.
{ENTER ZERO IF PERSON'S AGE IS LESS THAN ONE YEAR.}
|_|_|_|

ENTER NUMBER

Range 0 to 120
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

RANGE: 0 to 120.

DISPLAY THIS QUESTION WHEN THE CURSOR IS POSITIONED IN THE AGE COLUMN OF THE HOUSEHOLD MATRIX.

DISPLAY 'are you' WHEN THE CURSOR IS POSITIONED IN THE AGE COLUMN FOR THE RESPONDENT'S ROW AND 'is {NAME}' (DISPLAY THE APPROPRIATE FIRST NAME) WHEN THE CURSOR IS POSITIONED IN THE AGE COLUMN FOR SOMEONE OTHER THAN THE RESPONDENT'S ROW. DISPLAY "ENTER ZERO... ONE YEAR." WHEN THE CURSOR IS POSITIONED IN THE AGE COLUMN FOR SOMEONE OTHER THAN THE RESPONDENT'S ROW.

DISPLAY "ENTER ZERO... ONE YEAR." WHEN THE CURSOR IS POSITIONED IN THE AGE COLUMN FOR SOMEONE OTHER THAN THE RESPONDENT.

SOFT RANGE FOR RESPONDENT'S AGE IS 18 TO 100. IF AGE IS OUTSIDE THIS RANGE, DISPLAY MESSAGE: "RESPONDENT'S AGE IS OUTSIDE THE RANGE OF 18 TO 100. PLEASE VERIFY BEFORE CONTINUING."

HARD RANGE FOR PERSONS OTHER THAN THE RESPONDENT IS: 0 to 120.

FSQ040

CARI: Sampling at 100%

QUESTION TEXT:

CODE IF OBVIOUS. OTHERWISE, ASK: {Are you/Is {NAME}} male or female?
ENTER GENDER OF {NAME}.

CODES

1 MALE
2 FEMALE
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY THIS QUESTION WHEN THE CURSOR IS POSITIONED IN THE GENDER COLUMN.

DISPLAY 'Are you' WHEN THE CURSOR IS POSITIONED IN THE GENDER COLUMN FOR THE RESPONDENT'S ROW AND 'Is {NAME}' (DISPLAY THE APPROPRIATE FIRST NAME) WHEN THE CURSOR IS POSITIONED IN THE GENDER COLUMN FOR SOMEONE OTHER THAN THE RESPONDENT'S ROW.

FSQ045

CARI: Sampling at 100%

QUESTION TEXT:

CHECK HOUSEHOLD MATRIX. IF ANY BLANK FIELDS, RETURN THE CURSOR TO THE BLANK FIELD ON THE MATRIX AND DISPLAY THE APPROPRIATE ERROR MESSAGE. IF HOUSEHOLD MATRIX IS COMPLETE, PRESS 1 AND ENTER TO CONTINUE.

FSQ060

CARI: Sampling at 100%

QUESTION TEXT:

Have we missed anyone who usually lives here who is temporarily away from home or living in a dorm at school, or any babies or small children?

{YOU WILL NEED TO ENTER THE NAME, AGE, AND GENDER OF EACH HOUSEHOLD MEMBER NAMED BEFORE LEAVING THE MATRIX.}

{PRESS ENTER TO RECORD THE AGE AND GENDER OF THE RESPONDENT OR PRESS THE DOWN ARROW KEY TO ADD A HOUSEHOLD MEMBER.}

{ENTER FIRST NAME OF {NEW} HOUSEHOLD MEMBER OR PRESS ENTER ON A BLANK FIELD IF MATRIX IS COMPLETE.}

CODES

1	YES	FSQ020
2	NO	FSQ110
	REFUSED	FSQ110
	DON'T KNOW	FSQ110

FSQ110

CARI: Sampling at 100%

QUESTION TEXT:

Do you have a spouse or partner who lives in this household?

CODES

1	YES	FSQ120
2	NO	BOX 2
	REFUSED	BOX 2
	DON'T KNOW	BOX 2

QUESTION TEXT:

Who in the household is your spouse or partner?

ENTER THE NUMBER NEXT TO THE NAME OF THE PERSON WHO IS {RESPONDENT}'S SPOUSE/PARTNER.

IF NAME NOT LISTED, BACK UP AND ADD PERSON (IF PART OF HOUSEHOLD).

CODES

- | | |
|---|----------------------------|
| 1 | {DISPLAY HH MEMBER NAME 1} |
| 2 | {DISPLAY HH MEMBER NAME 2} |
| 3 | {DISPLAY HH MEMBER NAME 3} |
| 4 | {DISPLAY HH MEMBER NAME 4} |
| 5 | {DISPLAY HH MEMBER NAME 5} |
| 6 | {DISPLAY HH MEMBER NAME 6} |
| 7 | {DISPLAY HH MEMBER NAME 7} |
| 8 | {DISPLAY HH MEMBER NAME 8} |

PROGRAMMER INSTRUCTIONS:

DISPLAY HOUSEHOLD MEMBERS OVER 16 YEARS OF AGE AS RESPONSE CATEGORY CHOICES. (LINES FOR 8 HH MEMBERS ARE SHOWN BELOW, BUT UP TO 25 SHOULD BE DISPLAYED DEPENDING ON THE HOUSEHOLD). DO NOT DISPLAY THE NAMES OF HOUSEHOLD MEMBERS CODED AS NO LONGER LIVING IN THE HOUSEHOLD AT FSQ.010.

DO NOT DISPLAY THE RESPONDENT'S NAME.

FLAG PERSON SELECTED AT FSQ.120 AS "RESPONDENT'S SPOUSE/PARTNER".

DISPLAY THE RESPONDENT'S FIRST NAME FOR {RESPONDENT}.

Box 2

IF FALL K NON RESPONSE HOUSEHOLD: CONTINUE WITH BOX 3.

IF FALL K CONTINUING HOUSEHOLD (INCLUDES FALL K RESPONDENTS AND NEW SPRING RESPONDENTS):

IF NEW HOUSEHOLD MEMBERS WERE ADDED TO FSQ.120, CONTINUE WITH BOX 3.
ELSE, GO TO FSQ.200.

Box 3

LOOP 1

IF FALL K NON RESPONSE HOUSEHOLD, ASK FSQ.130 - FSQ.180 FOR EACH PERSON ENUMERATED ON THE HOUSEHOLD MATRIX (AT FSQ.020) WHO IS NOT THE FOCAL CHILD.

ELSE, IF FALL K CONTINUING HOUSEHOLD (INCLUDES FALL K RESPONDENTS AND NEW SPRING RESPONDENTS), ASK FSQ.130 - FSQ.180 FOR EACH NEW PERSON ENUMERATED ON THE HOUSEHOLD MATRIX (AT FSQ.020) WHO IS NOT THE FOCAL CHILD.

FSQ130

HELP AVAILABLE

CARI: Sampling at 100%

DISPLAY INSTRUCTIONS:

BOLD, ON FIRST INSTANCE ONLY IN HELP TEXT, 'Mother/Female Guardian', 'Father/Male Guardian', 'Sister', 'Brother', 'Girlfriend or Female Partner of CHILD's Parent/Guardian', 'Boyfriend or Male Partner of CHILD's Parent/Guardian', 'Grandmother', 'Grandfather', 'Aunt', 'Uncle', 'Cousin', 'Other Relative', 'Other Non-relative'

QUESTION TEXT:

What is {your/{NAME}'s} relationship to {CHILD}?

{CODE RELATIONSHIP OF NEW HOUSEHOLD MEMBERS ONLY.}

HELP TEXT:

Mother/Female Guardian: The female primarily responsible for the child. Includes birth or biological mothers, adoptive, step, foster, and other mothers, as well as legal female guardians.

Father/Male Guardian: The male primarily responsible for the child. Includes birth or biological fathers, adoptive, step, foster, and other fathers, as well as legal male guardians.

Sister: Include biological (full, half), adoptive, step, and foster sisters.

Brother: Include biological (full, half), adoptive, step, and foster brothers.

Girlfriend or Female Partner of CHILD's Parent/Guardian: The female who has a "partner-like" relationship with one of the child's parents or guardians. "Living as married" is another way of describing the relationship.

Boyfriend or Male Partner of CHILD's Parent/Guardian: The male who has a "partner-like" relationship with one of the child's parents or guardians. "Living as married" is another way of describing the relationship.

Grandmother: The female parent of the child's biological or adoptive mother or father.

Grandfather: The male parent of the child's biological or adoptive mother or father.

Aunt: The sister of the child's biological or adoptive mother or father or the wife of the child's uncle.

Uncle: The brother of the child's biological or adoptive mother or father or the husband of the child's aunt.

Cousin: A child of the focal child's uncle, aunt, or cousin.

Other Relative: Refers to relationships that aren't specifically listed, such as great grandmother, niece, or

nephew.

Other Non-relative: Refers to the relationship between two people when there is no family relationship through blood, marriage, adoption, or partnership (i.e., living together as married). It also refers to more ambiguous relationships that exist where there are two people living together as married and they have children. For example, the child's father and the father's girlfriend (who is not the child's mother) live together as married and the girlfriend's daughter lives with them. The relationship of the girlfriend's daughter to the child would be siblings if they were married, but since the father and the girlfriend are not married, she is an "other non-relative." If the "other non-relative" is coded, you will receive a list of other codes to use if they are more descriptive than "other non-relative."

CODES

1	MOTHER/FEMALE GUARDIAN	FSQ140
2	FATHER/MALE GUARDIAN	FSQ150
3	SISTER	FSQ160
4	BROTHER	FSQ170
5	GIRLFRIEND OR FEMALE PARTNER OF {CHILD}'S PARENT/GUARDIAN	BOX 4
6	BOYFRIEND OR MALE PARTNER OF {CHILD}'S PARENT/GUARDIAN	BOX 4
7	GRANDMOTHER	BOX 4
8	GRANDFATHER	BOX 4
9	AUNT	BOX 4
10	UNCLE	BOX 4
11	COUSIN	BOX 4
12	OTHER RELATIVE	BOX 4
13	OTHER NON-RELATIVE	FSQ180

PROGRAMMER INSTRUCTIONS:

DISPLAY THE RELATIONSHIP MATRIX.
DO NOT DISPLAY THE FOCAL CHILD'S ROW.
REFUSED AND DON'T KNOW ARE DISALLOWED FOR FSQ.130.

CONSISTENCY CHECK: IF FSQ.040 = 1 (MALE) FOR THE SUBJECT OF THIS QUESTION, FSQ.130 SHOULD NOT EQUAL 1, 3, 5, 7, OR 9. ELSE, IF FSQ.040 = 2 (FEMALE) FOR THE SUBJECT OF THIS QUESTION, FSQ.130 SHOULD NOT EQUAL 2, 4, 6, 8, OR 10. IF ANY ANSWERS VIOLATE THESE RULES, DISPLAY MESSAGE: THIS PERSON CANNOT BE CODED AS BOTH A {RELATIONSHIP FROM FSQ.130} AND A {GENDER FROM FSQ.040}. PLEASE VERIFY INFORMATION AND CHANGE THE RELATIONSHIP OR GENDER, AS NECESSARY.

1. IF FALL-K CONTINUING HOUSEHOLD:

- DO NOT DISPLAY THE NAMES OF HH MEMBERS NOT LIVING IN THE HOUSEHOLD (CODED '2' AT FSQ010).
- THE NAMES AND RELATIONSHIPS OF HOUSEHOLD MEMBERS COLLECTED LAST ROUND SHOULD BE PROTECTED.
- THE CURSOR SHOULD START IN THE FIELD FOR THE FIRST NEW PERSON ADDED AT FSQ020 THIS ROUND.
- DISPLAY 'CODE RELATIONSHIP... ONLY.'
- DISPLAY "your" IF LOOPING ON A NEW RESPONDENT. OTHERWISE, DISPLAY "{NAME}'s" USING THE NAME OF THE NEW HOUSEHOLD MEMBER THAT IS BEING LOOPED ON.

2. IF FALL-K NONRESPONSE HOUSEHOLD:

- DISPLAY ALL NAMES COLLECTED AT FSQ.020.
- THE CURSOR SHOULD BEGIN IN THE COLUMN FOR THE RELATIONSHIP OF THE RESPONDENT TO THE CHILD.
- DISPLAY "your" IF LOOPING ON THE RESPONDENT. OTHERWISE, DISPLAY "{NAME}'s" USING THE NAME OF THE HOUSEHOLD MEMBER THAT IS BEING LOOPED ON.

DISPLAY INSTRUCTIONS:

BOLD IN HELP TEXT: "Biological or Birth Mother", "Adoptive Mother", "Step Mother", "Foster Mother", "Female Guardian", "Other Female Parent or Guardian"

QUESTION TEXT:

{Are you/Is {NAME}} {CHILD}'s...

HELP TEXT:
 Biological or Birth Mother: Child's female biological parent. This may be the birth mother, but could also apply to a mother who used a surrogate mother to have her biological child.

Adoptive Mother: The female who has taken the child into her own family by legal process to raise as her own child.

Step Mother: The female other than the child's mother who is married to the child's father.

Foster Mother: The female with whom the child is placed temporarily, usually through a social service agency and/or a court.

Female Guardian: The female legally placed in charge of the affairs of the child.

Other Female Parent or Guardian: This person acts as the mother of the child, but does not fit into one of the other categories. For example, in a household with two mothers, one of the mothers may not classify herself as biologically related and she may not be legally in charge of the affairs of the child even though she is another parent to the child. This category may also be used if a mother has a child through a surrogate mother, or with a donated egg, and does not classify the child as biologically related or adopted through a legal process.

CODES

1	Biological or birth mother,	BOX 4
2	Adoptive mother,	BOX 4
3	Step mother,	BOX 4
4	Foster mother or female guardian, or	BOX 4
5	Other female parent or guardian?	BOX 4
	REFUSED	BOX 4
	DON'T KNOW	BOX 4

PROGRAMMER INSTRUCTIONS:

DISPLAY "Are you" IF LOOPING ON THE RESPONDENT. OTHERWISE, DISPLAY "Is {NAME}" USING THE NAME OF THE HOUSEHOLD MEMBER THAT IS BEING LOOPED ON.

CONSISTENCY CHECK: IF FSQ.140 = 1, THE AGE OF THIS HOUSEHOLD MEMBER SHOULD BE AT LEAST 10 YEARS OLDER THAN THE CHILD AND AT MOST 50 YEARS OLDER THAN THE CHILD. IF NOT, DISPLAY MESSAGE: UNLIKELY ANSWER: THE MOTHER WAS REPORTED TO BE {AGE FROM FSQ.030} YEARS OLD AND THE CHILD IS {CHILD AGE FROM FSQ.020} YEARS OLD. PLEASE CONFIRM INFORMATION AND CORRECT RELATIONSHIP OR AGE, IF NECESSARY.

DISPLAY INSTRUCTIONS:

BOLD IN HELP TEXT: 'Biological or Birth Father', "Adoptive Father", "Step Father", "Foster Father", "Male Guardian", "Other Type of Father"

QUESTION TEXT:

{Are you/Is {NAME}} {CHILD}'s...

HELP TEXT:

Biological or Birth Father: Child's male biological parent. This could also apply to a father who used a surrogate mother to have his biological child.

Adoptive Father: The male who has taken the child into his own family by legal process to raise as his own child.

Step Father: The male other than the child's father who is married to the child's mother.

Foster Father: The male with whom the child is placed temporarily, usually through a social service agency and/or a court.

Male Guardian: The male legally placed in charge of the affairs of the child.

Other Type of Father: This person acts as the father of the child, but does not fit into one of the other categories. For example, in a household with two fathers, one of the fathers may not classify himself as biologically related and he may not be legally in charge of the affairs of the child even though he is another parent to the child. This category may also be used if a father has a child through a surrogate mother, or with donated sperm, and does not classify the child as biologically related or adopted through a legal process.

CODES

1	Biological or birth father,	BOX 4
2	Adoptive father,	BOX 4
3	Step father,	BOX 4
4	Foster father or male guardian, or	BOX 4
5	Other male parent or guardian?	BOX 4
	REFUSED	BOX 4
	DON'T KNOW	BOX 4

PROGRAMMER INSTRUCTIONS:

DISPLAY "Are you" IF LOOPING ON THE RESPONDENT. OTHERWISE, DISPLAY "Is {NAME}" USING THE NAME OF THE HOUSEHOLD MEMBER THAT IS BEING LOOPED ON.

CONSISTENCY CHECK: IF FSQ.140 = 1, THE AGE OF THIS HOUSEHOLD MEMBER SHOULD BE AT LEAST 10 YEARS OLDER THAN THE CHILD'S AGE. IF NOT, DISPLAY MESSAGE: UNLIKELY ANSWER: THE FATHER WAS REPORTED TO BE {AGE FROM FSQ.030} YEARS OLD AND THE CHILD IS {CHILD AGE FROM FSQ.020} YEARS OLD. PLEASE CONFIRM INFORMATION AND CORRECT RELATIONSHIP OR AGE, IF NECESSARY.

FSQ160

CARI: Sampling at 100%

DISPLAY INSTRUCTIONS:

BOLD IN HELP TEXT: 'Full Sister', "Half Sister", "Step Sister", "Adoptive Sister", "Foster Sister"

QUESTION TEXT:

{Are you/Is {NAME}} {CHILD}'s...

HELP TEXT:

Full Sister: A female with whom the child shares the same biological parents.

Half Sister: A female with whom the child shares one biological parent.

Step Sister: A female to whom the child is unrelated except by the marriage of one biological parent.

Adoptive Sister: A female to whom the child is unrelated except that they are in the same family in which she or the child has been legally adopted by the family.

Foster Sister: A female to whom the child is unrelated except that they are in the same family in which she or the child have been taken into the home on a temporary basis and the parents have legal responsibility for the child.

CODES

1	Full sister,	BOX 4
2	Half sister,	BOX 4
3	Step sister,	BOX 4
4	Adoptive sister, or	BOX 4
5	Foster sister?	BOX 4
	REFUSED	BOX 4
	DON'T KNOW	BOX 4

PROGRAMMER INSTRUCTIONS:

DISPLAY "Are you" IF LOOPING ON THE RESPONDENT. OTHERWISE, DISPLAY "Is {NAME}" USING THE NAME OF THE HOUSEHOLD MEMBER THAT IS BEING LOOPED ON.

FSQ170

HELP AVAILABLE

CARI: Sampling at 100%

DISPLAY INSTRUCTIONS:

BOLD IN HELP TEXT: 'Full Brother', 'Half Brother', 'Step Brother', 'Adoptive Brother', 'Foster Brother'

QUESTION TEXT:

{Are you/Is {NAME}} {CHILD}'s...

HELP TEXT:

Full Brother: A male with whom the child shares the same biological parents.

Half Brother: A male with whom the child shares one biological parent.

Step Brother: A male to whom the child is unrelated except by the marriage of one biological parent.

Adoptive Brother: A male to whom the child is unrelated except that they are in the same family in which he or the child has been legally adopted by the family.

Foster Brother: A male to whom the child is unrelated except that they are in the same family in which he or the child have been taken into the home on a temporary basis and the parents have legal responsibility for the child.

CODES

1	Full brother,	BOX 4
2	Half brother,	BOX 4
3	Step brother,	BOX 4
4	Adoptive brother, or	BOX 4
5	Foster brother?	BOX 4
	REFUSED	BOX 4

PROGRAMMER INSTRUCTIONS:

DISPLAY "Are you" IF LOOPING ON THE RESPONDENT. OTHERWISE, DISPLAY "Is {NAME}" USING THE NAME OF THE HOUSEHOLD MEMBER THAT IS BEING LOOPED ON.

FSQ180**HELP AVAILABLE****CARI: Sampling at 100%****QUESTION TEXT:**

{Are you/Is {NAME}} {CHILD}'s...

CODE NON-RELATIVE RELATIONSHIP BELOW IF MORE DESCRIPTIVE.

HELP TEXT:

Girlfriend or Female Partner of CHILD's Parent/Guardian: The female who has a "partner-like" relationship with one of the child's parents or guardians. "Living as married" is another way of describing the relationship.

Boyfriend or Male Partner of CHILD's Parent/Guardian: The male who has a "partner-like" relationship with one of the child's parents or guardians. "Living as married" is another way of describing the relationship.

Female Guardian: The female legally placed in charge of the affairs of the child.

Male Guardian: The male legally placed in charge of the affairs of the child.

Daughter/son of CHILD's Parent's Partner: The child of the person who has a "partner-like" relationship with one of the child's parents or guardians.

Other Relative of CHILD's Parent's Partner: Some other relative of the person who has a "partner-like" relationship with one of the child's parents or guardians.

Other Non-relative: If one of the codes for non-relative above does not better describe the relationship of the person to the child, and there is no family relationship through blood, marriage, adoption, or partnership (i.e., living together as married), use this code.

CODES

1	GIRLFRIEND OR FEMALE PARTNER OF {CHILD}'S PARENT/GUARDIAN	BOX 4
2	BOYFRIEND OR MALE PARTNER OF {CHILD}'S PARENT/GUARDIAN	BOX 4
3	FEMALE GUARDIAN	BOX 4
4	MALE GUARDIAN	BOX 4
5	DAUGHTER/SON OF {CHILD}'S PARENT'S PARTNER	BOX 4
6	OTHER RELATIVE OF {CHILD}'S PARENT'S PARTNER	FSQ181
91	OTHER NON-RELATIVE (SPECIFY)	
	REFUSED	BOX 4
	DON'T KNOW	BOX 4

PROGRAMMER INSTRUCTIONS:

DISPLAY "Are you" IF LOOPING ON THE RESPONDENT. OTHERWISE, DISPLAY "Is {NAME}" USING THE NAME OF THE HOUSEHOLD MEMBER THAT IS BEING LOOPED ON.

IF FSQ.180 IS CODED 1 (GIRLFRIEND), FLAG RESPONSE TO FSQ.130 AS CODE 5.

IF FSQ.180 IS CODED 2 (BOYFRIEND), FLAG RESPONSE TO FSQ.130 AS CODE 6.

IF FSQ.180 IS CODED 3 (FEMALE GUARDIAN), FLAG RESPONSE TO FSQ.130 AS CODE 1 AND RESPONSE TO FSQ.140 AS CODE 4.

IF FSQ.180 IS CODED 4 (MALE GUARDIAN), FLAG RESPONSE TO FSQ.130 AS CODE 2 AND RESPONSE TO FSQ.150 AS CODE 4.

FSQ181

CARI: Sampling at 100%

QUESTION TEXT:

SPECIFY OTHER NON-RELATIVE.

ENTER TEXT

Length	70
REFUSED	
DON'T KNOW	

Box 4

END LOOP 1.
ASK FSQ130 - FSQ180 FOR NEXT PERSON ON THE HOUSEHOLD ROSTER WHO IS NOT THE FOCAL CHILD. IF NO NEXT PERSON, CONTINUE WITH BOX 4A.

Box 4A

LOOP 2.
IF THERE ARE ANY MISSING ETHNICITY OR RACE DATA (FOR NEW OR OLD HOUSEHOLD MEMBERS) FOR (THE FOCAL CHILD) OR (THE RESPONDENT) OR (A MOTHER FIGURE (CODE '1' AT FSQ.130 OR CODE '3' AT FSQ.180)) OR (A FATHER FIGURE (CODE '2' AT FSQ.130 OR CODE '4' AT FSQ.180)) OR (THE RESPONDENT'S SPOUSE/PARTNER, IF THERE ARE NO MOTHER OR FATHER FIGURES, MEANING NO HOUSEHOLD MEMBERS WITH CODE '1' AT FSQ.130, CODE '3' AT FSQ.180, CODE '2' AT FSQ.130, OR CODE '4' AT FSQ.180), CONTINUE WITH FSQ190.

OTHERWISE, GO TO BOX 4B.

DISPLAY INSTRUCTIONS:

BOLD 'Hispanic or Latino' IN HELP TEXT ONLY

QUESTION TEXT:

{Are you/Is {NAME}} Hispanic or Latino?

HELP TEXT:

Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

PROGRAMMER INSTRUCTIONS:

CAPI MATRIX INSTRUCTIONS:

DISPLAY IN COLUMN 1 EACH PERSON ENUMERATED ON THE HOUSEHOLD ROSTER (AT FSQ.020) WHO IS THE FOCAL CHILD, RESPONDENT, MOTHER FIGURE (CODE '1' AT FSQ.130 OR CODE '3' AT FSQ.180), OR FATHER FIGURE (CODE '2' AT FSQ.130 OR CODE '4' AT FSQ.180).

IF NO MOTHER OR FATHER FIGURES IN THE HOUSEHOLD (NO HOUSEHOLD MEMBERS WITH A CODE '1' AT FSQ.130, CODE '3' FSQ.180, CODE '2' AT FSQ.130, OR CODE '4' AT FSQ.180), DISPLAY IN COLUMN 1 THE FOCAL CHILD, THE RESPONDENT, AND THE RESPONDENT'S SPOUSE/PARTNER (HOUSEHOLD MEMBER SELECTED AT FSQ.120, IF ANY).

NOTE: IF THE RESPONDENT IS A MOTHER OR FATHER FIGURE, ONLY DISPLAY HIS/HER NAME ONCE.

NOTE: DO NOT DISPLAY HOUSEHOLD MEMBERS CODED AS NOT LIVING IN THE HOUSEHOLD AT FSQ.010.

THE CURSOR SHOULD BE POSITIONED ON THE FIRST BLANK FIELD. IF NO BLANK FIELDS, THE CURSOR SHOULD BE POSITIONED ON THE LAST COMPLETED FIELD IN THE MATRIX.

IF FALL K CONTINUING HOUSEHOLDS, ASK ABOUT HISPANIC OR LATINO FOR NEW HOUSEHOLD MEMBERS OR OLD HOUSEHOLD MEMBERS WITH MISSING ETHNICITY OR RACE DATA FOR THE FOCAL CHILD, THE FOCAL CHILD'S PARENTS OR THE RESPONDENT, OR IF THERE ARE NO PARENTS, THEN ASK ABOUT THE RESPONDENT AND RESPONDENT'S SPOUSE/PARTNER. DISPLAY "Are you" IF LOOPING ON A NEW RESPONDENT. OTHERWISE, DISPLAY "Is {NAME}" USING THE NAME OF THE NEW HOUSEHOLD MEMBER THAT IS BEING LOOPED ON.

IF FALL K NON-RESPONSE HOUSEHOLDS, ASK ABOUT HISPANIC OR LATINO FOR THE FOCAL CHILD, RESPONDENT, MOTHER AND FATHER FIGURES. IF NO MOTHER OR FATHER FIGURES, THEN ASK ABOUT THE FOCAL CHILD, THE RESPONDENT AND RESPONDENT'S SPOUSE/PARTNER (IF ANY). DISPLAY "Are you" IF LOOPING ON THE RESPONDENT. OTHERWISE, DISPLAY "Is {NAME}" USING THE NAME OF THE HOUSEHOLD MEMBER THAT IS BEING LOOPED ON.

DISPLAY INSTRUCTIONS:

BOLD IN HELP TEXT: 'American Indian or Alaska Native', "Asian", "Black or African American", "Native Hawaiian or Other Pacific Islander", "White"

QUESTION TEXT:

What is {your/{NAME}'s} race? You may name one or more races to indicate what {you/NAME} {consider/considers} {yourself/himself/herself} to be.

IF "HISPANIC" OR "LATINO" PROBE: Is that White Hispanic, Black Hispanic, both, or something else?

IF RESPONDENT CONTINUES TO SAY "HISPANIC" OR "LATINO" AFTER USING THE PROBE ABOVE, CODE AS "DON'T KNOW."

CODE ALL THAT APPLY.

HELP TEXT:

American Indian or Alaska Native: A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

Asian: A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

Black or African American: A person having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

White: A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

CODES	Code All That Apply
1	AMERICAN INDIAN OR ALASKA NATIVE
2	ASIAN
3	BLACK OR AFRICAN AMERICAN
4	NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER
5	WHITE
	REFUSED
	DON'T KNOW

PROGRAMMER INSTRUCTIONS:

CAPI MATRIX INSTRUCTIONS:

DISPLAY IN COLUMN 1 EACH PERSON ENUMERATED ON THE HOUSEHOLD ROSTER (AT FSQ.020) WHO IS THE FOCAL CHILD, RESPONDENT, MOTHER FIGURE (CODE '1' AT FSQ.130 OR CODE '3' AT FSQ.180), OR FATHER FIGURE (CODE '2' AT FSQ.130 OR CODE '4' AT FSQ.180).

IF NO MOTHER OR FATHER FIGURES IN THE HOUSEHOLD (NO HOUSEHOLD MEMBERS WITH A CODE '1' AT FSQ.130, CODE '3' FSQ.180, CODE '2' AT FSQ.130, OR CODE '4' AT FSQ.180), DISPLAY IN COLUMN 1 THE FOCAL CHILD, THE RESPONDENT, AND THE RESPONDENT'S SPOUSE/PARTNER (HOUSEHOLD MEMBER SELECTED AT FSQ.120, IF ANY).

NOTE: IF THE RESPONDENT IS A MOTHER OR FATHER FIGURE, ONLY DISPLAY HIS/HER NAME ONCE.

NOTE: DO NOT DISPLAY HOUSEHOLD MEMBERS CODED AS NOT LIVING IN THE HOUSEHOLD AT FSQ.010.

IF FALL K CONTINUING HOUSEHOLDS, ASK ABOUT RACE FOR NEW HOUSEHOLD MEMBERS OR OLD HOUSEHOLD MEMBERS WITH MISSING ETHNICITY OR RACE DATA FOR THE FOCAL CHILD, THE FOCAL

CHILD'S PARENTS OR THE RESPONDENT OR IF THERE ARE NO PARENTS, THEN ABOUT THE RESPONDENT AND RESPONDENT'S SPOUSE/PARTNER. DISPLAY "your", "you", "consider", AND "yourself" IF LOOPING ON THE RESPONDENT. OTHERWISE, DISPLAY "{NAME}", "{NAME}", "considers" AND ("himself" OR "herself") USING THE NAME OF THE HOUSEHOLD MEMBER THAT IS BEING LOOPED ON. DISPLAY "himself" IF THE PERSON IS MALE AND "herself" IF THE PERSON IS FEMALE. IF GENDER IS MISSING, DISPLAY "himself/herself".

IF FALL K NON-RESPONSE HOUSEHOLDS, ASK ABOUT RACE FOR THE FOCAL CHILD, RESPONDENT, MOTHER AND FATHER FIGURES. IF NO MOTHER OR FATHER FIGURES, THEN ASK ABOUT THE FOCAL CHILD, THE RESPONDENT AND RESPONDENT'S SPOUSE/PARTNER (IF ANY). DISPLAY "your", "you", "consider", AND "yourself" IF LOOPING ON THE RESPONDENT. OTHERWISE, DISPLAY "{NAME}", "{NAME}", "considers" AND ("himself" OR "herself") USING THE NAME OF THE HOUSEHOLD MEMBER THAT IS BEING LOOPED ON. DISPLAY "himself" IF THE PERSON IS MALE AND "herself" IF THE PERSON IS FEMALE. IF GENDER IS MISSING, DISPLAY "himself/herself".

Box 4B

END LOOP 2.

ASK FSQ.190 – FSQ.195 FOR NEXT PERSON WHO IS THE FOCAL CHILD, MOTHER FIGURE, FATHER FIGURE, OR RESPONDENT OR RESPONDENT'S SPOUSE (IF NO MOTHER OR FATHER FIGURES) (NEW OR OLD HH MEMBERS) WHOSE ETHNICITY OR RACE DATA ARE MISSING.
IF NO NEXT PERSON, CONTINUE WITH FSQ.200.

FSQ200

CARI: Sampling at 100%

{FILL 1} currently married, separated, divorced, widowed, in a domestic partnership, or {FILL 2} never been married?

{FILL 1}	{FILL 2}	ParentsR	BioMoinHH	BioFainHH	AdopMoinHH	AdopFainHH	OtherinHH
		The current roster shows a relationship of biological/ adoptive mother or biological/ adoptive father for the person flagged as the respondent for YES	The current roster shows the relationship of biological mother for at least one HH member (not the R) for YES	The current roster shows the relationship of biological father for at least one HH member (not the R) for YES	The current roster shows the relationship of adoptive mother for at least one HH member (not the R) for YES	The current roster shows the relationship of adoptive father for at least one HH member (not the R) for YES	The current roster shows there is no biological/ adoptive mother/father in the household for YES
Are you	have you	YES					NO
Are you	have you	NO	NO	NO	NO	NO	YES
Are CHILD's biological parents	have they	NO	YES	YES			NO
Is CHILD's biological mother	has she	NO	YES	NO			NO
Is CHILD's biological father	has he	NO	NO	YES			NO
Is CHILD's adoptive mother	has she	NO	NO	NO	YES	NO	NO
Is CHILD's adoptive father	has he	NO	NO	NO	NO	YES	NO
Are CHILD's adoptive parents	have they	NO	NO	NO	YES	YES	NO

REFUSED
DON'T KNOW

Box 5

IDENTIFY THE 2 "KEY" PARENT FIGURES IN THE HOUSEHOLD. THIS PERSON OR PERSONS SHOULD BE CHOSEN AS FOLLOWS:

- 1) THE KEY PARENT FIGURES SHOULD BE CHOSEN ONLY FROM AMONG CURRENT MEMBERS OF THE HOUSEHOLD;
- 2) IF A MOTHER (RELATION=1) IS IN THE HOUSEHOLD SHE SHOULD BE A KEY PARENT FIGURE; IF A FATHER (RELATION =2) IS IN THE HOUSEHOLD HE SHOULD BE A KEY PARENT FIGURE; IF THERE ARE TWO MOTHERS (RELATION=1) PICK THE MOTHER WITH THE LOWER NUMBER RELATIONSHIP IN THE FOLLOWING SYSTEM: BIRTH MOTHER =1, ADOPTIVE MOTHER=2, STEPMOTHER=3, FOSTER MOTHER OR FEMALE GUARDIAN =4. OTHER TYPE OF MOTHER = 5. IF TWO MOTHERS HAVE SAME NUMBER RELATIONSHIP, PICK ONE WITH LOWEST PERSON NUMBER. IF THERE ARE TWO FATHERS (RELATION=2), PICK THE FATHER WITH THE LOWER NUMBER RELATIONSHIP IN THE FOLLOWING SYSTEM: BIRTH FATHER =1, ADOPTIVE FATHER=2, STEPFATHER=3, FOSTER FATHER OR MALE GUARDIAN =4, AND OTHER TYPE OF FATHER = 5. IF TWO FATHERS HAVE SAME NUMBER RELATIONSHIP, PICK ONE WITH LOWEST PERSON NUMBER;
- 3) IF THERE IS A MOTHER (RELATION =1) BUT NO FATHER (RELATION=2) AND THE MOTHER HAS A SPOUSE/PARTNER, THE MOTHER SHOULD BE A KEY PARENT FIGURE AND THE SPOUSE/PARTNER SHOULD BE A KEY PARENT FIGURE;
- 4) IF THERE IS A FATHER (RELATION=2) BUT NO MOTHER (RELATION=1) AND THE FATHER HAS A SPOUSE/PARTNER, THE FATHER SHOULD BE A KEY PARENT FIGURE AND THE SPOUSE/PARTNER SHOULD BE A KEY PARENT FIGURE;
- 5) OTHERWISE, IF THERE ARE NOT PARENTS IN THE HOUSEHOLD (RELATION NE 1 OR 2), THE RESPONDENT SHOULD BE A KEY PARENT FIGURE AND THE RESPONDENT'S SPOUSE/PARTNER, IF ONE, SHOULD BE A KEY PARENT FIGURE.

FSQ212

QUESTION TEXT:

Now I have a few questions about {your/{NAME}'s} country of birth. In what country {were/was} {you/{NAME}} born?

TO ACTIVATE LOOKUP, BEGIN TO TYPE COUNTRY OR TERRITORY. IF COUNTRY IS NOT ON THE LIST, HIGHLIGHT @U***NOT ON LIST***@U IN THE LOOKUP FILE AND PRESS ENTER.

USE THE ARROW KEYS TO HELP YOU LOCATE A MATCH.

| | | |

REFUSED

DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY 'your', "were" AND "you" IF CURRENT CYCLE OF LOOP IS ASKING ABOUT THE RESPONDENT. DISPLAY "{NAME}" (AND THAT PERSON'S FIRST NAME), "was" and "{NAME}" (AND THAT PERSON'S FIRST NAME AGAIN), IF CURRENT CYCLE OF LOOP IS ASKING ABOUT A HOUSEHOLD MEMBER WHO IS NOT THE RESPONDENT.

DISPLAY COUNTRY LOOKUP FILE. ALLOW 3 SPACES IN THE RESPONSE FIELD FOR ENTERING RESPONSE CODES.

Box 7

IF FSQ.212 = 0 (NOT ON LIST), CONTINUE WITH FSQ.211OS.
IF FSQ.212 = 1, 5, 90, 139, 179, 203, 235, DK, OR RF, GO TO BOX 8.
OTHERWISE, CONTINUE WITH FSQ.213.

FSQ212OS

QUESTION TEXT:

[In what country {were/was} {you/{NAME}} born?]

SPECIFY COUNTRY.

ENTER TEXT

Length 25
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY "were" AND "you" IF CURRENT CYCLE OF LOOP IS ASKING ABOUT THE RESPONDENT. DISPLAY "was" and "{NAME}" (AND THAT PERSON'S FIRST NAME) IF CURRENT CYCLE OF LOOP IS ASKING ABOUT A HOUSEHOLD MEMBER WHO IS NOT THE RESPONDENT.

FSQ213

QUESTION TEXT:

How old {was/were} {you/{NAME}} when {you/{he/she}} first moved to the United States?

AGE

ENTER NUMBER

Range 0 to 75
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY "were", "you", AND "you" IF CURRENT CYCLE OF LOOP IS ASKING ABOUT THE RESPONDENT. DISPLAY "was", "{NAME}" (AND THAT PERSON'S FIRST NAME), AND "he" FOR A MALE/"she" FOR A FEMALE/"he/she" IF GENDER IS MISSING IF CURRENT CYCLE OF LOOP IS ASKING ABOUT A HOUSEHOLD MEMBER WHO IS NOT THE RESPONDENT.

RANGE CHECK: RANGE CHECK: 0 – 75 YEARS OLD. UNLESS AGE IN HOUSEHOLD ROSTER = DK OR RF, AGE ENTERED AT THIS ITEM SHOULD BE CHECKED IN A SOFT RANGE AGAINST THIS PERSON'S AGE IN THE HOUSEHOLD ROSTER. OTHERWISE, DISPLAY ERROR MESSAGE: "THIS AGE CANNOT BE GREATER THAN PERSON'S CURRENT AGE. PLEASE CONFIRM ANSWER.

1. PRESS G TO REENTER ANSWER.
2. PRESS C TO ESCAPE OR CANCEL.
3. PRESS S TO ACCEPT ANSWER ABOUT AGE WHEN FIRST MOVED TO THE UNITED STATES. ADD COMMENT ABOUT THE PERSON'S CURRENT AGE."

Box 8

ASK FSQ.212-FSQ.213 FOR THE NEXT KEY PARENT FIGURE. IF THERE IS NOT A KEY PARENT FIGURE LEFT TO BE ASKED ABOUT, GO TO BOX 9.

Box 9

IF FALL-K NON-RESPONDENT, ASK FSQ.221 AND FSQ.222 FOR 2 “KEY” PARENT FIGURES AS DEFINED IN BOX 5. (FSQ.221 AND FSQ.222 MAY BE ASKED IN A LOOP UP TO TWO TIMES). ELSE, GO TO SECTION HEQ (HOME ENVIRONMENT, ACTIVITIES, AND COGNITIVE STIMULATION).

FSQ221

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

BOLD IN HELP TEXT: "Highest Grade or Year of School Completed", "12th grade but no diploma", "High school equivalent", "High school diploma", "Vocational/technical program after high school but no voc/tech diploma", "Vocational/technical program after high school", "Some college but no degree", "Associate's degree", "Bachelor's degree", "Graduate or professional school but no degree", "Master's (MA, MS)", "Doctorate Degree (Ph.D., EDD)", "Professional degree after bachelor's degree (Medicine/MD; Dentistry/DDS; Law/JD/LLB)"

QUESTION TEXT:

{Now I have a few questions about education and job training.} What is the highest grade or year of school that {you/{NAME}} {have/has} completed?

{[IF NECESSARY, SAY: Again, any information you can provide will be helpful.]}

HELP TEXT:

Highest Grade or Year of School Completed: For grades 1-11, enter the exact grade level. If the person you are asking about completed elementary school, find out the last grade completed. If the respondent says the person finished 12th grade, ask whether the person received a diploma or got the equivalent of a high school diploma.

Completing a given grade in school should be counted as the number of years it normally takes to complete that grade level of education, regardless of how many years it actually took the person to finish. This means that for persons who skipped or repeated grades in elementary school, you will enter the highest grade completed regardless of the number of years they were in school. This rule is true for elementary school through high school and is especially relevant to college.

12th grade but no diploma: The person completed the 12th grade, but did not earn a high school diploma or GED.

High school equivalent: This means that the person has a GED. The GED is an exam certified equivalent of a high school diploma received when the person has not actually received a degree from attending high school, but has acquired his/her GED (high school equivalency based on passing the GED exam).

High school diploma: A certificate that verifies that a person has successfully completed the required courses of a high school curriculum and has actually graduated from high school rather than having a GED.

Vocational/technical program after high school but no voc/tech diploma: The person attended this type of program, but did not earn a degree/diploma/certificate of successful completion of the program.

Vocational/trade school after high school refers to work or trade-related education received after completing high school, but does not include college. Examples include secretarial school, mechanical or computer training school, etc. Some community colleges offer vocational training, but this would be considered '1-2

years of college" or "associate's degree" and not vocational or trade school.

Vocational/technical program after high school: The person attended this type of program, but DID earn a degree/diploma/certificate of successful completion of the program. Vocational/trade school after high school refers to work or trade-related education received after completing high school, but does not include college. Examples include secretarial school, mechanical or computer training school, etc. Some community colleges offer vocational training, but this would be considered "1-2 years of college" or "associate's degree" and not vocational or trade school.

Some college but no degree: The person does not have a 4-year college (bachelor's) degree but has completed a class for credit at a college or university.

Associate's degree: A 2-year college degree typically earned at a community college (rather than a trade school).

Bachelor's degree: A 4-year college degree earned at a university or 4-year college. It is sometimes called an "undergraduate degree."

Graduate or professional school but no degree: The person attended a graduate or professional school that advanced him/her toward a degree beyond a Bachelor's degree (for example, a Master's, Doctorate, or other professional degree). However, the person did not complete the program or earn the degree.

Master's (MA, MS): Studies beyond a bachelor's degree, but not a Ph.D. or Ed.D.

Doctorate Degree (Ph.D., EDD): Studies beyond a Master's degree that result in a doctorate degree.

Professional degree after bachelor's degree (Medicine/MD; Dentistry/DDS, Law/JD/LLB): Any other graduate degrees earned with academic studies beyond the bachelor's.

CODES

1	1ST GRADE	
2	2ND GRADE	
3	3RD GRADE	
4	4TH GRADE	
5	5TH GRADE	
6	6TH GRADE	
7	7TH GRADE	
8	8TH GRADE	
9	9TH GRADE	
10	10TH GRADE	
11	11TH GRADE	
12	12TH GRADE BUT NO DIPLOMA	
13	HIGH SCHOOL EQUIVALENT/GED	BOX 10
14	HIGH SCHOOL DIPLOMA	BOX 10
15	VOC/TECH PROGRAM AFTER HIGH SCHOOL BUT NO VOC/TECH DIPLOMA	
16	VOC/TECH PROGRAM AFTER HIGH SCHOOL, DIPLOMA	
17	SOME COLLEGE BUT NO DEGREE	
18	ASSOCIATE'S DEGREE	
19	BACHELOR'S DEGREE	BOX 10

20	GRADUATE OR PROFESSIONAL SCHOOL BUT NO DEGREE	BOX 10
21	MASTER'S (MA, MS)	BOX 10
22	DOCTORATE DEGREE (PHD, EDD)	BOX 10
23	PROFESSIONAL DEGREE AFTER BACHELOR'S DEGREE (MEDICINE/MD; DENTISTRY/DDS; LAW/JD/LLB; ETC.)	BOX 10
	REFUSED	
	DON'T KNOW	

PROGRAMMER INSTRUCTIONS:

DISPLAY 'Now ... training.' IF FIRST CYCLE OF LOOP. OTHERWISE, USE A NULL DISPLAY.

DISPLAY "you" AND "have" IF CURRENT CYCLE OF LOOP IS ASKING ABOUT THE RESPONDENT. DISPLAY "{NAME}" (AND THAT PERSON'S FIRST NAME) and "has" IF CURRENT CYCLE OF LOOP 1 IS ASKING ABOUT A HOUSEHOLD MEMBER WHO IS NOT THE RESPONDENT.

DISPLAY "[IF NECESSARY ... be helpful.]" IF THERE ARE NO BIOLOGICAL PARENTS IN THE HOUSEHOLD (NO HOUSEHOLD MEMBER WITH A CODE '1' AT FSQ.140 OR FSQ.150). OTHERWISE, USE A NULL DISPLAY.

FSQ222

QUESTION TEXT:

{Do/Does} {you/{NAME}} have a high school diploma, or its equivalent, such as a GED, or neither?

CODES

1	HIGH SCHOOL DIPLOMA
2	HIGH SCHOOL EQUIVALENT (GED)
3	NO HIGH SCHOOL DIPLOMA/EQUIVALENT
	REFUSED
	DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY "Do" AND 'you' IF CURRENT CYCLE OF LOOP IS ASKING ABOUT THE RESPONDENT. DISPLAY "Does" AND "{NAME}" (AND THAT PERSON'S FIRST NAME) IF CURRENT CYCLE OF LOOP 1 IS ASKING ABOUT A HOUSEHOLD MEMBER WHO IS NOT THE RESPONDENT.

Box 10

END LOOP.
ASK FSQ221 – FSQ222 FOR NEXT KEY PARENT FIGURE.
IF NO NEXT PERSON, CONTINUE WITH HEQ.

Spring 2011 Parent Interview: ECLS-K: 2010-2011

Section HEQ [Home Environment, Activities, and Cognitive Stimulation]

Sequence: 4

HEQ100

QUESTION TEXT:

In the past month, that is, since {MONTH} {DAY}, has anyone in your family done the following things with {CHILD}?

Visited a library?

CODES

- | | |
|---|------------|
| 1 | YES |
| 2 | NO |
| | REFUSED |
| | DON'T KNOW |

PROGRAMMER INSTRUCTIONS:

DISPLAY PREVIOUS MONTH FOR "MONTH" AND DATE OF INTERVIEW FOR "DAY".

HEQ110

QUESTION TEXT:

[In the past month, that is, since {MONTH} {DAY}, has anyone in your family done the following things with {CHILD}?

Visited a bookstore?

CODES

- | | |
|---|------------|
| 1 | YES |
| 2 | NO |
| | REFUSED |
| | DON'T KNOW |

PROGRAMMER INSTRUCTIONS:

DISPLAY PREVIOUS MONTH FOR "MONTH" AND DATE OF INTERVIEW FOR "DAY".

HEQ130

QUESTION TEXT:

[In the past month, that is, since {MONTH} {DAY}, has anyone in your family done the following things with

{CHILD}?:]

Gone to a play, concert, or other live show?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY PREVIOUS MONTH FOR 'MONTH' AND DATE OF INTERVIEW FOR 'DAY'.

HEQ140

QUESTION TEXT:

[In the past month, that is, since {MONTH} {DAY}, has anyone in your family done the following things with {CHILD}?:]

Visited an art gallery, museum, or historical site?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY PREVIOUS MONTH FOR 'MONTH' AND DATE OF INTERVIEW FOR 'DAY'.

HEQ150

QUESTION TEXT:

[In the past month, that is, since {MONTH} {DAY}, has anyone in your family done the following things with {CHILD}?:]

Visited a zoo, aquarium, or petting farm?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY PREVIOUS MONTH FOR 'MONTH' AND DATE OF INTERVIEW FOR 'DAY'.

HEQ180

QUESTION TEXT:

[In the past month, that is, since {MONTH} {DAY}, has anyone in your family done the following things with {CHILD}?:]

Attended an athletic or sporting event in which {CHILD} was not a player?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY PREVIOUS MONTH FOR 'MONTH' AND DATE OF INTERVIEW FOR 'DAY'.

HEQ200

DISPLAY INSTRUCTIONS:

DISPLAY 'past week' IN UNDERLINED TEXT.

QUESTION TEXT:

In the past week, how often did {CHILD} look at picture books outside of school? Would you say ...

CODES

- 1 Never,
 - 2 Once or twice a week,
 - 3 3 to 6 times a week, or
 - 4 Every day?
 - REFUSED
 - DON'T KNOW
-

HEQ210

DISPLAY INSTRUCTIONS:

DISPLAY 'past week' IN UNDERLINED TEXT

QUESTION TEXT:

In the past week, how often did {CHILD} read to {himself/herself} or to others outside of school?

Would you say ...

CODES

- 1 Never,

- 2 Once or twice a week,
 - 3 3 to 6 times a week, or
 - 4 Every day?
- REFUSED
DON'T KNOW

HEQ220

CARI: Sampling at 100%

QUESTION TEXT:

Do you have a home computer that {CHILD} uses?

CODES

- | | | |
|---|------------|--------|
| 1 | YES | HEQ230 |
| 2 | NO | HEQ300 |
| | REFUSED | HEQ300 |
| | DON'T KNOW | HEQ300 |

HEQ230

QUESTION TEXT:

In an average week, how often does {CHILD} use the computer?

Would you say ...

CODES

- 1 Never,
 - 2 Once or twice a week,
 - 3 3 to 6 times a week, or
 - 4 Every day?
- REFUSED
DON'T KNOW

HEQ240

QUESTION TEXT:

Does {CHILD} use the computer ... To play with programs that teach {him/her} something, like math or reading skills?

CODES

- 1 YES
- 2 NO
REFUSED
DON'T KNOW

HEQ250

QUESTION TEXT:

[Does {CHILD} use the computer ...] To play with drawing or art programs?

CODES

- 1 YES
- 2 NO
REFUSED
DON'T KNOW

HEQ260

QUESTION TEXT:

[Does {CHILD} use the computer ...] To get on the Internet?

CODES

- 1 YES
- 2 NO
REFUSED
DON'T KNOW

HEQ270

DISPLAY INSTRUCTIONS:

DISPLAY "past week" IN UNDERLINED TEXT.

QUESTION TEXT:

Now, please think about the past week. How often did {CHILD} use a computer outside of school to read stories or look at picture books in the past week? Would you say...

CODES

- 1 Never,
 - 2 Once or twice a week,
 - 3 3 to 6 times a week, or
 - 4 Every day?
- REFUSED
DON'T KNOW

HEQ300

QUESTION TEXT:

Outside of school hours, has {CHILD} ever participated in:
Academic activities, like tutoring, or math lab?

CODES

- 1 YES
 - 2 NO
- REFUSED
DON'T KNOW

HEQ301

QUESTION TEXT:

[Outside of school hours, has {CHILD} ever participated in:]
 Dance lessons?

CODES

- 1 YES
 - 2 NO
- REFUSED
DON'T KNOW

HEQ310

QUESTION TEXT:

[Outside of school hours, has {CHILD} ever participated in:]

Organized athletic activities, like basketball, soccer, baseball, or gymnastics?

CODES

- | | |
|---|------------|
| 1 | YES |
| 2 | NO |
| | REFUSED |
| | DON'T KNOW |

HEQ320

QUESTION TEXT:

[Outside of school hours, has {CHILD} ever participated in:]

Organized clubs or recreational programs, like scouts?

CODES

- | | |
|---|------------|
| 1 | YES |
| 2 | NO |
| | REFUSED |
| | DON'T KNOW |

HEQ330

QUESTION TEXT:

[Outside of school hours, has {CHILD} ever participated in:]

Music lessons, for example, piano, instrumental music or singing lessons?

CODES

- | | |
|---|-----|
| 1 | YES |
| 2 | NO |

REFUSED
DON'T KNOW

HEQ340

QUESTION TEXT:

[Outside of school hours, has {CHILD} ever participated in:]

Drama classes?

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

HEQ350

QUESTION TEXT:

[Outside of school hours, has {CHILD} ever participated in:]

Art classes or lessons, for example, painting, drawing, or sculpture?

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

HEQ370

QUESTION TEXT:

[Outside of school hours, has {CHILD} ever participated in:]

Organized performing arts programs, such as children's choirs, dance programs, or theater performances?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

HEQ380

QUESTION TEXT:

[Outside of school hours, has {CHILD} ever participated in:]

Crafts classes or lessons?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

HEQ390

QUESTION TEXT:

[Outside of school hours, has {CHILD} ever participated in:]

Non-English language instruction?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

HEQ391

QUESTION TEXT:

[Outside of school hours, has {CHILD} ever participated in:]

Religious activities or instruction?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

HEQ392

QUESTION TEXT:

[Outside of school hours, has {CHILD} ever participated in:]

Volunteer work or community service?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

BOX 1

IF ANY OF THE ACTIVITY QUESTIONS HAS AN ANSWER OF 1 (HEQ.300 = 1 OR HEQ.301 = 1 OR HEQ.310 = 1 OR HEQ.320 = 1 OR HEQ.330 = 1 OR HEQ.340 = 1 OR HEQ.350 = 1 OR HEQ.370 = 1 OR HEQ.380 = 1 OR HEQ.390 = 1 OR HEQ.391 = 1 OR HEQ.392 = 1), GO TO HEQ.393. ELSE, GO TO HEQ.400.

HEQ393

QUESTION TEXT:

Did {CHILD}'s participation in {this activity/any of these activities} help to cover the hours when you needed adult supervision for {him/her}?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

IF ONLY ONE OF THE ACTIVITY QUESTIONS (HEQ.300 HEQ.301, HEQ.310, HEQ.320, HEQ.330, HEQ.340, HEQ.350, HEQ.370, HEQ.380, HEQ.390, HEQ.391, HEQ.392) DISPLAY "this activity." ELSE, DISPLAY "any of these activities".

HEQ400

QUESTION TEXT:

Now, I have some questions about your neighborhood. How safe is it for children to play outside during the day in your neighborhood?

Would you say it's ...

CODES

- 1 Not at all safe,
- 2 Somewhat safe, or
- 3 Very safe?
- REFUSED
- DON'T KNOW

HEQ420

QUESTION TEXT:

How much of a problem are the following in the block or area around your house or apartment? What about ... Selling or using drugs or excessive drinking in public?

Would you say they are a...

CODES

- 1 Big problem,
- 2 Somewhat of a problem, or
- 3 No problem?
- REFUSED
- DON'T KNOW

HEQ430

QUESTION TEXT:

[How much of a problem are the following in the block or area around your house or apartment? What about ...] Burglary or robbery?

Would you say they are a...

CODES

- 1 Big problem,
 - 2 Somewhat of a problem, or
 - 3 No problem?
- REFUSED
DON'T KNOW

HEQ460

DISPLAY INSTRUCTIONS:

- 1. DISPLAY "five days" IN UNDERLINED TEXT.
- 2. DISPLAY "NOT" IN UNDERLINED TEXT.

QUESTION TEXT:

During the last five days {CHILD} was in school, how many breakfasts did {he/she} eat that were NOT school breakfasts. By breakfast we mean breakfasts eaten at home, at childcare, or at school, but not part of a school breakfast program. Please count only one breakfast per day.

NUMBER OF BREAKFASTS

ENTER NUMBER

Range 0 to 5
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

- 3. HARD RANGE CHECK: 0-5 BREAKFASTS

BOX 2

IF NUMBER OF BREAKFASTS IS ZERO REFUSED OR DON'T KNOW, GO TO HEQ.480.
ELSE, GO TO HEQ.470.

HEQ470a

QUESTION TEXT:

Where did {CHILD} eat these breakfasts?

a. At home?

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

HEQ470b

QUESTION TEXT:

[Where did {CHILD} eat these breakfasts?]

b. At a relative's or friend's home?

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

PROGRAMMER INSTRUCTIONS:

WHEN ON B-F, DISPLAY 'Where... breakfasts?' IN SQUARE BRACKETS.
RESPONSES: 1 = YES, 2 = NO

HEQ470c

QUESTION TEXT:

[Where did {CHILD} eat these breakfasts?]

c. At a child care location?

CODES

1	YES
---	-----

- 2 NO
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

WHEN ON B-F, DISPLAY "Where... breakfasts?" IN SQUARE BRACKETS.
RESPONSES: 1 = YES, 2 = NO

HEQ47od

QUESTION TEXT:

[Where did {CHILD} eat these breakfasts?]

d. At school, but not part of school breakfast?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

WHEN ON B-F, DISPLAY "Where... breakfasts?" IN SQUARE BRACKETS.
RESPONSES: 1 = YES, 2 = NO

HEQ47oe

QUESTION TEXT:

[Where did {CHILD} eat these breakfasts?]

e. At a restaurant, including food taken out from fast food restaurants?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

WHEN ON B-F, DISPLAY "Where... breakfasts?" IN SQUARE BRACKETS.
RESPONSES: 1 = YES, 2 = NO

HEQ47of

QUESTION TEXT:

[Where did {CHILD} eat these breakfasts?]

f. Somewhere else? (SPECIFY)

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

WHEN ON B-F, DISPLAY "Where... breakfasts?" IN SQUARE BRACKETS.
RESPONSES: 1 = YES, 2 = NO

BOX 3

IF HEQ470F = 1, GO TO HEQ470OS. ELSE, GO TO HEQ480.

HEQ470OS

QUESTION TEXT:

[Where did {CHILD} eat these breakfasts?]

SPECIFY LOCATION.

ENTER TEXT

Length 50
REFUSED
DON'T KNOW

HEQ480

DISPLAY INSTRUCTIONS:

1. DISPLAY "five days" IN UNDERLINED TEXT.
2. DISPLAY "you" IN UNDERLINED TEXT

QUESTION TEXT:

During the last five days {CHILD} was in school, how many breakfasts did you eat? Please count only one breakfast per day.

NUMBER OF BREAKFASTS

ENTER NUMBER

Range 0 to 5
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

HARD RANGE CHECK: 0-5 BREAKFASTS

HEQ500

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

DISPLAY 'typical week' IN UNDERLINED TEXT.
BOLD "Family" ON FIRST INSTANCE ONLY IN HELP TEXT

QUESTION TEXT:

I'm going to read some statements about things that may occur in your family. In a typical week, please tell me the number of days ...

At least some of the family eats breakfast together.

HELP TEXT:

Family: By family, we mean at least one adult and one child

NUMBER OF DAYS

ENTER NUMBER

Range 0 to 7
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

RANGE:0 TO 7.

HEQ510

DISPLAY INSTRUCTIONS:

DISPLAY 'typical week' IN UNDERLINED TEXT.

QUESTION TEXT:

[I'm going to read some statements about things that may occur in your family. In a typical week, please tell me the number of days ...]

{CHILD} has breakfast at a regular time.

IF RESPONDENT ASKS WHAT 'REGULAR' MEANS, SAY THAT IT MEANS "GENERALLY AROUND THE SAME

TIME."

NUMBER OF DAYS

ENTER NUMBER

Range 0 to 7
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

RANGE: 0 TO 7.

HEQ520

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

DISPLAY 'typical week' IN UNDERLINED TEXT.
BOLD "Family" ON FIRST INSTANCE ONLY IN HELP TEXT

QUESTION TEXT:

[I'm going to read some statements about things that may occur in your family. In a typical week, please tell me the number of days ...]

Your family eats the evening meal together.

HELP TEXT:

Family: By family, we mean at least one adult and one child.

NUMBER OF DAYS

ENTER NUMBER

Range 0 to 7
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

RANGE: 0 TO 7.

HEQ530

DISPLAY INSTRUCTIONS:

DISPLAY 'typical week' IN UNDERLINED TEXT.

QUESTION TEXT:

[I'm going to read some statements about things that may occur in your family. In a typical week, please tell me the number of days ...]

The evening meal is served at a regular time.

IF RESPONDENT ASKS WHAT 'REGULAR' MEANS, SAY THAT IT MEANS "GENERALLY AROUND THE SAME TIME."

NUMBER OF DAYS

ENTER NUMBER

Range 0 to 7
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

RANGE: 0 TO 7.

HEQ550

QUESTION TEXT:

On weeknights during the school year, does {CHILD} usually go to bed at about the same time each night, or does {his/her} bedtime vary a lot from night to night?

CODES

1	HAS USUAL BEDTIME	HEQ560
2	BEDTIME VARIES	HEQ570
	REFUSED	HEQ570
	DON'T KNOW	HEQ570

PROGRAMMER INSTRUCTIONS:

DISPLAY "his" IF THE CHILD IS MALE. DISPLAY "her" IF THE CHILD IS FEMALE. ELSE, IF THE CHILD'S GENDER IS MISSING, DISPLAY "his/her".

HEQ560a

QUESTION TEXT:

About what time does {CHILD} usually go to bed?

ENTER HOUR

ENTER NUMBER

Range 1 to 12
REFUSED HEQ570
DON'T KNOW HEQ570

PROGRAMMER INSTRUCTIONS:

RANGE CHECK: LOWER RANGE: 1:00. UPPER RANGE: 12:59.

HEQ560b

QUESTION TEXT:

[About what time does {CHILD} usually go to bed?]

|_|_|
ENTER MINUTES

ENTER NUMBER

Range	0 to 59
REFUSED	HEQ570
DON'T KNOW	HEQ570

PROGRAMMER INSTRUCTIONS:

RANGE CHECK: LOWER RANGE: 1:00. UPPER RANGE: 12:59.

HEQ560c

QUESTION TEXT:

[About what time does {CHILD} usually go to bed?]

SELECT A.M. OR P.M.

CODES

1	A.M.	
2	P.M.	
	REFUSED	HEQ570
	DON'T KNOW	HEQ570

HEQ570a

QUESTION TEXT:

What is the latest time that {CHILD} goes to bed on weekdays?

|_|_|
ENTER HOUR

ENTER NUMBER

Range	1 to 12
REFUSED	HEQ580
DON'T KNOW	HEQ580

PROGRAMMER INSTRUCTIONS:

RANGE CHECK: LOWER RANGE: 1:00. UPPER RANGE: 12:59.

HEQ570b

QUESTION TEXT:

[What is the latest time that {CHILD} goes to bed on weekdays?]

| | |
ENTER MINUTE

ENTER NUMBER

Range	0 to 59
REFUSED	HEQ580
DON'T KNOW	HEQ580

HEQ570c

QUESTION TEXT:

[What is the latest time that {CHILD} goes to bed on weekdays?]

SELECT A.M. OR P.M.

CODES

1	A.M.
2	P.M.
	REFUSED
	DON'T KNOW

HEQ580

QUESTION TEXT:

How often does someone in your family talk with {CHILD} about {his/her} ethnic or racial heritage?

Would you say ...

CODES

1	Never,
2	Almost never,

- 3 Several times a year,
 - 4 Several times a month, or
 - 5 Several times a week or more?
- REFUSED
DON'T KNOW

HEQ590

QUESTION TEXT:

How often does someone in your family talk with {CHILD} about your family's religious beliefs or traditions?

Would you say ...

CODES

- 1 Never,
 - 2 Almost never,
 - 3 Several times a year,
 - 4 Several times a month, or
 - 5 Several times a week or more?
- REFUSED
DON'T KNOW

BOX 4

GO TO SECTION SSQ (SOCIAL SKILLS, PROBLEM BEHAVIORS, AND APPROACHES TO LEARNING).

SSQ: Social Skills, Problem Behaviors, and Approaches Toward Learning

Twenty-five items ask parents to rate children on social-emotional skills including ability to exercise self-control; ability to interact with others; problem behaviors (e.g., fighting, arguing, anger, depression, low-self-esteem, impulsiveness, etc); and approaches to learning (e.g., self-direction, organization, eagerness to learn).

Source: *Social Skills Rating System (SSRS)*. Copyright © 1990 NCS Pearson. Adapted with permission. All rights reserved.

Spring 2011 Parent Interview: ECLS-K: 2010-2011

Section CFQ [Critical Family Processes]

Sequence: 6

BOX 1

IF PERSON FLAGGED AS R SCORES '1' OR '2' AT FSQ.130
OR IF NO HOUSEHOLD MEMBER SCORES '1' OR '2' AT FSQ.130,
CONTINUE WITH BOX 2.
OTHERWISE, GO TO BOX 4.

BOX 2

IF FSQ110=1 (PARTNER CURRENTLY LIVING IN HOUSEHOLD), ASK CFQ100.
OTHERWISE, GO TO BOX 3.

CFQ100

QUESTION TEXT:

Now, I'd like to ask some questions about your relationship with {NAME OF CURRENT PARTNER}. Would you say that your relationship is...

CODES

- 1 Very happy,
 - 2 Fairly happy, or
 - 3 Not too happy?
- REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY NAME OF PARTNER FROM FSQ.120.

BOX 3

IF FATHER FIGURE IN HOUSEHOLD (FSQ.130=2 FOR AT LEAST ONE MEMBER OF THE HOUSEHOLD), CONTINUE WITH CFQ.300. OTHERWISE, GO TO BOX 4.

CFQ300

QUESTION TEXT:

How much time {do you/does {NAME}} or another adult male in your home spend playing with {CHILD} on a typical school day?

CODES

- | | |
|---|---|
| 0 | NO TIME |
| 1 | LESS THAN 5 MINUTES |
| 2 | 5 - 9 MINUTES |
| 3 | 10 - 15 MINUTES |
| 4 | 16 - 30 MINUTES |
| 5 | 31 - 45 MINUTES |
| 6 | 46 MINUTES TO ONE HOUR |
| 7 | MORE THAN ONE HOUR, BUT LESS THAN 2 HOURS |
| 8 | TWO HOURS - BUT LESS THAN THREE HOURS |
| 9 | THREE HOURS OR MORE |
| | REFUSED |
| | DON'T KNOW |

PROGRAMMER INSTRUCTIONS:

DISPLAY 'do you' IF THE PERSON FLAGGED AS RESPONDENT IS A FATHER FIGURE (FSQ.130=2).

OTHERWISE, DISPLAY 'does {NAME}'. FOR {NAME}, DISPLAY THE FIRST NAME OF THE PERSON CODED '2' AT FSQ.130.

CFQ310

QUESTION TEXT:

How about on a typical weekend day?

CODES

- | | |
|---|---------------------|
| 0 | NO TIME |
| 1 | LESS THAN 5 MINUTES |
| 2 | 5 - 9 MINUTES |

- 3 10 - 15 MINUTES
- 4 16 - 30 MINUTES
- 5 31 - 45 MINUTES
- 6 46 MINUTES TO ONE HOUR
- 7 MORE THAN ONE HOUR, BUT LESS THAN 2 HOURS
- 8 TWO HOURS - BUT LESS THAN THREE HOURS
- 9 THREE HOURS OR MORE
- REFUSED
- DON'T KNOW

BOX 4

GO TO SECTION NRQ (NON-RESIDENT PARENTS).

Spring 2011 Parent Interview: ECLS-K: 2010-2011

Section NRQ [Non-Resident Parents]

Sequence: 7

BOX 1

IF BOTH BIOLOGICAL PARENTS (CODED '1' AT FSQ.140 FOR AT LEAST ONE HOUSEHOLD MEMBER AND CODED '1' AT FSQ.150 FOR AT LEAST ONE HOUSEHOLD MEMBER) ARE CURRENTLY LIVING TOGETHER IN THE HOUSEHOLD, GO TO BOX 7.
OTHERWISE, CONTINUE WITH BOX 2.

BOX 2

LOOP 1

ASK NRQ.040 - NRQ.251 ONE TIME FOR EACH BIOLOGICAL MOTHER, ADOPTIVE MOTHER, BIOLOGICAL FATHER, AND ADOPTIVE FATHER NOT LIVING IN THE HOUSEHOLD.

DETERMINING LOOPING ELIGIBILITY:

1. NO BIOLOGICAL/BIRTH MOTHER IN HH: IF NO HOUSEHOLD MEMBER WITH A CODE '1' AT FSQ.140 AND EITHER FALL K HRQ.030=1 (BIOLOGICAL MOTHER LIVING) OR FALL K NON-RESPONDENT, THEN ASK ABOUT BIOLOGICAL MOTHER.
2. NO ADOPTIVE MOTHER IN HH: IF NO BIOLOGICAL OR ADOPTIVE MOTHER IN HOUSEHOLD, BUT ADOPTIVE FATHER IS IN THE HOUSEHOLD (THAT IS, THERE IS NO HOUSEHOLD MEMBER WITH A CODE '1' OR '2' AT FSQ.140, BUT AT LEAST ONE HOUSEHOLD MEMBER WITH A CODE '2' AT FSQ.150), THEN ASK ABOUT ADOPTIVE MOTHER.
3. NO BIOLOGICAL/BIRTH FATHER IN HH: IF NO HOUSEHOLD MEMBER WITH A CODE '1' AT FSQ.150 AND EITHER FALL K HRQ.030=1 (BIOLOGICAL FATHER LIVING) OR FALL K NON-RESPONDENT, ASK ABOUT BIOLOGICAL FATHER.
4. NO ADOPTIVE FATHER IN HH: IF NO BIOLOGICAL OR ADOPTIVE FATHER IN HOUSEHOLD, BUT ADOPTIVE MOTHER IS IN THE HOUSEHOLD (THAT IS, THERE IS NO HOUSEHOLD MEMBER WITH CODE '1' OR '2' AT FSQ.150, BUT AT LEAST ONE HOUSEHOLD MEMBER WITH A CODE '2' AT FSQ.140), THEN ASK ABOUT ADOPTIVE FATHER.
5. IF FALL-K ANSWERS WERE NRQ.040 = 5 (PARENT DECEASED), NRQ.040 = 6 (NO CONTACT SINCE ADOPTION), NRQ.030 = 2 (NO ADOPTIVE NON-RESIDENT MOTHER/FATHER), NRQ.040 = 7 (NO ADOPTIVE (MOTHER/FATHER), OR NRQ.040 = 8 (PARENT UNKNOWN /WAS ONLY A DONOR) FOR ANY OF THE NON-RESIDENT PARENTS, DO NOT LOOP ON THIS PARENT.

IF THERE ARE ANY ELIGIBLE CASES ACCORDING TO THE LOOPING RULES ABOVE, GO TO NRQ.040 FOR EACH ELIGIBLE CASE UNTIL ALL ELIGIBLES HAVE BEEN ASKED ABOUT IN THE QUESTIONS. ELSE, GO TO BOX 7.

NRQ040

Spring 2011 Parent Interview: ECLS-K: 2010-2011 :: NRQ

QUESTION TEXT:

The next questions are about {CHILD}'s contact with {his/her} {biological/adoptive} (father/mother).
[We understand that some of these questions may be difficult {for adoptive parents} to answer, however, these are standard questions we ask when a child does not live with {his/her} biological parents. Any information you can provide will be helpful.]
How long has it been since {CHILD} last had a visit, a phone call, or received a card or letter from {his/her} {biological/adoptive} {father/mother}? Would you say ...

CODES

1	Less than one month,	NRQ050
2	More than a month but less than a year,	NRQ124
3	More than a year, or	BOX 3
4	No contact since birth?	BOX 4
5	PARENT IS DECEASED	BOX 4
6	NO CONTACT SINCE ADOPTION	BOX 4
7	NO ADOPTIVE {MOTHER/FATHER}	BOX 4
8	PARENT UNKNOWN/WAS ONLY A DONOR	BOX 4
	REFUSED	BOX 4
	DON'T KNOW	BOX 4

PROGRAMMER INSTRUCTIONS:

DISPLAY "his" IF THE CHILD IS MALE. DISPLAY "her" IF THE CHILD IS FEMALE. ELSE, IF CHILD GENDER IS MISSING, DISPLAY "his/her".

IF THERE IS A BIRTH FATHER IN THE HOUSEHOLD, DISPLAY "biological" AND "mother" FOR THE PARTICULAR LOOP R IS ON.

IF THERE IS A BIRTH MOTHER IN THE HOUSEHOLD, DISPLAY "biological" AND "father" FOR THE PARTICULAR LOOP R IS ON.

IF THERE IS AN ADOPTIVE FATHER IN THE HOUSEHOLD, DISPLAY "adoptive" AND "mother" FOR THE PARTICULAR LOOP R IS ON.

IF THERE IS AN ADOPTIVE MOTHER IN THE HOUSEHOLD, DISPLAY "adoptive" AND "father" FOR THE PARTICULAR LOOP R IS ON.

DISPLAY '[We... helpful]' IF THERE ARE NO BIOLOGICAL PARENTS IN THE HOUSEHOLD (NO HOUSEHOLD MEMBER WITH A CODE '1' AT FSQ.140 OR FSQ.150). OTHERWISE, USE A NULL DISPLAY.

DISPLAY 'for adoptive parents' IF THE RESPONDENT IS AN ADOPTIVE PARENT (FSQ.140 OR FSQ.150 IS CODED '2' FOR THE PERSON FLAGGED AS THE RESPONDENT).

NRQ050

QUESTION TEXT:

How many days has {CHILD} seen {his/her} {biological/adoptive}{father/mother} in the past 4 weeks?

|_|_|
NUMBER OF DAYS

ENTER NUMBER

Range 0 to 28
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY "his" IF THE CHILD IS MALE. DISPLAY "her" IF THE CHILD IS FEMALE. ELSE, IF CHILD GENDER IS MISSING, DISPLAY "his/her".

IF FSQ.140 = 1, DISPLAY "biological" AND "mother" FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.150 = 1, DISPLAY "biological" AND "father" FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.140 = 2, DISPLAY "adoptive" AND "mother" FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.150 = 2, DISPLAY "adoptive" AND "father" FOR THE PARTICULAR LOOP R IS ON.

RANGE: 0 TO 28

NRQ120

QUESTION TEXT:

How many days was {CHILD} scheduled to see {his/her} {biological/adoptive} {father/mother} in the past 4 weeks?

|_|_|
NUMBER OF DAYS

ENTER NUMBER

Range 0 to 28
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY "his" IF THE CHILD IS MALE. DISPLAY "her" IF THE CHILD IS FEMALE. ELSE, IF CHILD GENDER IS MISSING, DISPLAY "his/her".

IF FSQ.140 = 1, DISPLAY "biological" AND "mother" FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.150 = 1, DISPLAY "biological" AND "father" FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.140 = 2, DISPLAY "adoptive" AND "mother" FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.150 = 2, DISPLAY "adoptive" AND "father" FOR THE PARTICULAR LOOP R IS ON.

RANGE: 0 TO 28.

NRQ121

QUESTION TEXT:

How many nights did {CHILD} and {his/her} {biological/adoptive} {father/mother} sleep in the same house in the past four weeks?

__|__|
NUMBER OF DAYS

ENTER NUMBER

Range 0 to 28
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY "his" IF THE CHILD IS MALE. DISPLAY "her" IF THE CHILD IS FEMALE. ELSE, IF CHILD GENDER IS MISSING, DISPLAY "his/her".

IF FSQ.140 = 1, DISPLAY "biological" AND "mother" FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.150 = 1, DISPLAY "biological" AND "father" FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.140 = 2, DISPLAY "adoptive" AND "mother" FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.150 = 2, DISPLAY "adoptive" AND "father" FOR THE PARTICULAR LOOP R IS ON.

RANGE: 0 TO 28.

NRQ122

QUESTION TEXT:

Did {CHILD}'s {biological/adoptive} {father/mother} miss any scheduled visits with {CHILD} in the past four weeks?

CODES

1 YES
2 NO
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

IF FSQ.140 = 1, DISPLAY "biological" AND "mother" FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.150 = 1, DISPLAY "biological" AND "father" FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.140 = 2, DISPLAY "adoptive" AND "mother" FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.150 = 2, DISPLAY "adoptive" AND "father" FOR THE PARTICULAR LOOP R IS ON.

NRQ123

QUESTION TEXT:

How many times have {CHILD} and {his/her} {biological/adoptive} {father/ mother} talked on the telephone to each other in the past 4 weeks?

NUMBER OF DAYS

ENTER NUMBER

Range 0 to 28
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY "his" IF THE CHILD IS MALE. DISPLAY "her" IF THE CHILD IS FEMALE. ELSE, IF CHILD GENDER IS MISSING, DISPLAY "his/her".

IF FSQ.140 = 1, DISPLAY "biological" AND "mother" FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.150 = 1, DISPLAY "biological" AND "father" FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.140 = 2, DISPLAY "adoptive" AND "mother" FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.150 = 2, DISPLAY "adoptive" AND "father" FOR THE PARTICULAR LOOP R IS ON.

RANGE: 0 TO 28.

NRQ124

QUESTION TEXT:

Which of the following statements best describes your current relationship with {CHILD}'s {biological/adoptive} {father/mother}?

CODES

- 1 We generally get along pretty well,
 - 2 We don't get along too well,
 - 3 We fight a lot and do not get along well, or
 - 4 We avoid seeing each other?
- REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

IF FSQ.140 = 1, DISPLAY "biological" AND "mother" FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.150 = 1, DISPLAY "biological" AND "father" FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.140 = 2, DISPLAY "adoptive" AND "mother" FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.150 = 2, DISPLAY "adoptive" AND "father" FOR THE PARTICULAR LOOP R IS ON.

NRQ130

QUESTION TEXT:

Since the beginning of this school year, has {CHILD}'s {biological/adoptive} {mother/father}... Attended an open house or a back-to-school night?

CODES

- | | |
|---|------------|
| 1 | YES |
| 2 | NO |
| | REFUSED |
| | DON'T KNOW |

PROGRAMMER INSTRUCTIONS:

IF FSQ.140 = 1, DISPLAY “biological” AND “mother” FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.150 = 1, DISPLAY “biological” AND “father” FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.140 = 2, DISPLAY “adoptive” AND “mother” FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.150 = 2, DISPLAY “adoptive” AND “father” FOR THE PARTICULAR LOOP R IS ON.

NRQ135

QUESTION TEXT:

[Since the beginning of this school year, has {CHILD}'s {biological/adoptive} {mother/father}...] Gone to a regularly-scheduled parent-teacher conference with {CHILD}'s teacher or meeting with {CHILD}'s teacher?

CODES

- | | |
|---|------------|
| 1 | YES |
| 2 | NO |
| | REFUSED |
| | DON'T KNOW |

PROGRAMMER INSTRUCTIONS:

IF FSQ.140 = 1, DISPLAY “biological” AND “mother” FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.150 = 1, DISPLAY “biological” AND “father” FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.140 = 2, DISPLAY “adoptive” AND “mother” FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.150 = 2, DISPLAY “adoptive” AND “father” FOR THE PARTICULAR LOOP R IS ON.

NRQ140

QUESTION TEXT:

[Since the beginning of this school year, has {CHILD}'s {biological/adoptive} {mother/father}...] Attended a school or class event, such as a play or sports event or science fair?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

- IF FSQ.140 = 1, DISPLAY “biological” AND “mother” FOR THE PARTICULAR LOOP R IS ON.
- IF FSQ.150 = 1, DISPLAY “biological” AND “father” FOR THE PARTICULAR LOOP R IS ON.
- IF FSQ.140 =2, DISPLAY “adoptive” AND “mother” FOR THE PARTICULAR LOOP R IS ON.
- IF FSQ.150 = 2, DISPLAY “adoptive” AND “father” FOR THE PARTICULAR LOOP R IS ON.

NRQ145

QUESTION TEXT:

[Since the beginning of this school year, has {CHILD}'s {biological/adoptive} {mother/father}...] Volunteered at the school or served on a committee?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

- IF FSQ.140 = 1, DISPLAY “biological” AND “mother” FOR THE PARTICULAR LOOP R IS ON.
- IF FSQ.150 = 1, DISPLAY “biological” AND “father” FOR THE PARTICULAR LOOP R IS ON.
- IF FSQ.140 =2, DISPLAY “adoptive” AND “mother” FOR THE PARTICULAR LOOP R IS ON.
- IF FSQ.150 = 2, DISPLAY “adoptive” AND “father” FOR THE PARTICULAR LOOP R IS ON.

BOX 3

IF LOOPING ON NONRESIDENT BIOLOGICAL FATHER, CONTINUE WITH NRQ200.
OTHERWISE, GO TO NRQ.250.

NRQ200

QUESTION TEXT:

Did {CHILD}'s biological father ever sign the application for {CHILD}'s birth certificate or sign a statement that legally says he is {CHILD}'s biological father?

CODES

1	YES	NRQ250
2	NO	NRQ210
	REFUSED	NRQ210
	DON'T KNOW	NRQ210

NRQ210

QUESTION TEXT:

Did you or someone in your family go to court to establish that he was {CHILD}'s legal biological father?

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

NRQ250

QUESTION TEXT:

How many minutes does {CHILD}'s {biological/adoptive} {mother/father} live from {him/her}?

CODES

1	10 MINUTES OR LESS
2	11-30 MINUTES
3	31-59 MINUTES
4	1-2 HOURS
5	MORE THAN 2 HOURS
	REFUSED
	DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY "him" IF THE CHILD IS MALE. DISPLAY "her" IF THE CHILD IS FEMALE. ELSE, IF CHILD GENDER IS MISSING, DISPLAY "him/her".

IF FSQ.140 = 1, DISPLAY "biological" AND "mother" FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.150 = 1, DISPLAY "biological" AND "father" FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.140 =2, DISPLAY "adoptive" AND "mother" FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.150 = 2, DISPLAY "adoptive" AND "father" FOR THE PARTICULAR LOOP R IS ON.

NRQ251

QUESTION TEXT:

Does {CHILD}'s {biological/adoptive} {mother/father} live in the same state or a different state than {CHILD}?

CODES

- 1 SAME STATE
- 2 DIFFERENT STATE
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

IF FSQ.140 = 1, DISPLAY "biological" AND "mother" FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.150 = 1, DISPLAY "biological" AND "father" FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.140 =2, DISPLAY "adoptive" AND "mother" FOR THE PARTICULAR LOOP R IS ON.

IF FSQ.150 = 2, DISPLAY "adoptive" AND "father" FOR THE PARTICULAR LOOP R IS ON.

BOX 4

ASK NRQ.040 TO NRQ.251 FOR THE NEXT NON-RESIDENTIAL PARENT. IF NO NEXT NON-RESIDENTIAL PARENT, GO TO BOX 5.

BOX 5

IF NRQ.040 = 5 (DECEASED), 6 (NO CONTACT SINCE ADOPTION), 7 (NO ADOPTIVE PARENT), 8 (PARENT UNKNOWN/ONLY A DONOR), "REFUSED" OR "DON'T KNOW" FOR ALL THE CHILD'S NON-RESIDENT PARENT(S), GO TO BOX 7. ELSE, GO TO NRQ.261.

NRQ261**QUESTION TEXT:**

Next, I'd like to ask some questions about child support. Have child support payments for {CHILD} ever been awarded by a court or a judge, agreed to in writing, agreed to informally, or do you not have an agreement of any kind?

CODE ALL THAT APPLY. CODES 1 AND 4 CANNOT BE CODED TOGETHER. CODE 5 CANNOT BE CODED WITH ANY OTHER.

CODES	Code All That Apply	
1	YES, AWARDED BY A COURT	BOX 6
2	YES, AGREED TO IN WRITING	BOX 6
3	YES, AGREED TO INFORMALLY	BOX 6
4	YES, AWARD PENDING	BOX 6
5	NO AGREEMENT	Box 7
91	OTHER (SPECIFY)	NRQ262
	REFUSED	BOX 7
	DON'T KNOW	BOX 7

PROGRAMMER INSTRUCTIONS:

CODES 1 AND 4 CANNOT BE CODED TOGETHER. CODE 5 CANNOT BE CODED WITH ANY OTHER.

NRQ262**QUESTION TEXT:**

What kind of agreement do you have?

SPECIFY

ENTER TEXT

Length 30
REFUSED
DON'T KNOW

BOX 6

IF MORE THAN 1 NONRESIDENT PARENT, CONTINUE WITH NRQ.264.
OTHERWISE, GO TO NRQ.265.

NRQ264

QUESTION TEXT:

What parent do you have this agreement with?

PROBE: Any other parent?

CODE ALL THAT APPLY

CODES	Code All That Apply
1	{CHILD}'S BIOLOGICAL FATHER
2	{CHILD}'S BIOLOGICAL MOTHER
3	{CHILD}'S ADOPTIVE FATHER
4	{CHILD}'S ADOPTIVE MOTHER
	REFUSED
	DON'T KNOW

NRQ265

QUESTION TEXT:

In the past year were you supposed to receive any child support payments for {CHILD}?

CODES		
1	YES	
2	NO	BOX 7
	REFUSED	BOX 7
	DON'T KNOW	BOX 7

NRQ266

QUESTION TEXT:

During the last year, have you received this money regularly, so that you could almost always count on getting the money?

CODES

- | | |
|---|------------|
| 1 | YES |
| 2 | NO |
| | REFUSED |
| | DON'T KNOW |

BOX 7

GO TO SECTION DWQ (DISCIPLINE AND WARMTH).

Spring 2011 Parent Interview: ECLS-K: 2010-2011

Section DWQ [Discipline, Warmth, and Emotional Supportiveness]

Sequence: 8

BOX 1

IF PERSON FLAGGED AS R SCORES '1' OR '2' AT FSQ.130
OR IF NO HOUSEHOLD MEMBER SCORES '1' OR '2' AT FSQ.130,
CONTINUE WITH DWQ.010.
OTHERWISE, GO TO DWQ.080.

DWQ010

QUESTION TEXT:

Now, I'm going to read some statements. Please tell me whether each statement is completely true, mostly true, somewhat true, or not at all true.

{CHILD} and I often have warm, close times together.

PROBE: Is it completely true, mostly true, somewhat true or not at all true?

CODES

- 1 COMPLETELY TRUE
- 2 MOSTLY TRUE
- 3 SOMEWHAT TRUE
- 4 NOT AT ALL TRUE
- REFUSED
- DON'T KNOW

DWQ015

QUESTION TEXT:

[Now, I'm going to read some statements. Please tell me whether each statement is completely true, mostly true, somewhat true, or not at all true.]

Most of the time I feel that {CHILD} likes me and wants to be near me.

[PROBE: Is it completely true, mostly true, somewhat true or not at all true?]

CODES

- 1 COMPLETELY TRUE
 - 2 MOSTLY TRUE
 - 3 SOMEWHAT TRUE
 - 4 NOT AT ALL TRUE
- REFUSED
DON'T KNOW

DWQ025

QUESTION TEXT:

[Now, I'm going to read some statements. Please tell me whether each statement is completely true, mostly true, somewhat true, or not at all true.]

Even when I'm in a bad mood, I show {CHILD} a lot of love.

[PROBE: Is it completely true, mostly true, somewhat true or not at all true?]

CODES

- 1 COMPLETELY TRUE
 - 2 MOSTLY TRUE
 - 3 SOMEWHAT TRUE
 - 4 NOT AT ALL TRUE
- REFUSED
DON'T KNOW

DWQ035

QUESTION TEXT:

[Now, I'm going to read some statements. Please tell me whether each statement is completely true, mostly true, somewhat true, or not at all true.]

I express affection by hugging, kissing, and holding {CHILD}.

[PROBE: Is it completely true, mostly true, somewhat true or not at all true?]

CODES

- 1 COMPLETELY TRUE

- 2 MOSTLY TRUE
- 3 SOMEWHAT TRUE
- 4 NOT AT ALL TRUE
- REFUSED
- DON'T KNOW

DWQ040

QUESTION TEXT:

[Now, I'm going to read some statements. Please tell me whether each statement is completely true, mostly true, somewhat true, or not at all true.]

Being a parent is harder than I thought it would be.

[PROBE: Is it completely true, mostly true, somewhat true or not at all true?]

CODES

- 1 COMPLETELY TRUE
- 2 MOSTLY TRUE
- 3 SOMEWHAT TRUE
- 4 NOT AT ALL TRUE
- REFUSED
- DON'T KNOW

DWQ045

QUESTION TEXT:

[Now, I'm going to read some statements. Please tell me whether each statement is completely true, mostly true, somewhat true, or not at all true.]

{CHILD} does things that really bother me.

[PROBE: Is it completely true, mostly true, somewhat true or not at all true?]

CODES

- 1 COMPLETELY TRUE
- 2 MOSTLY TRUE
- 3 SOMEWHAT TRUE
- 4 NOT AT ALL TRUE
- REFUSED

DWQ050

QUESTION TEXT:

[Now, I'm going to read some statements. Please tell me whether each statement is completely true, mostly true, somewhat true, or not at all true.]

I find myself giving up more of my life to meet {CHILD}'s needs than I ever expected.

[PROBE: Is it completely true, mostly true, somewhat true or not at all true?]

CODES

- 1 COMPLETELY TRUE
 - 2 MOSTLY TRUE
 - 3 SOMEWHAT TRUE
 - 4 NOT AT ALL TRUE
- REFUSED
DON'T KNOW

DWQ060

QUESTION TEXT:

[Now, I'm going to read some statements. Please tell me whether each statement is completely true, mostly true, somewhat true, or not at all true.]

I often feel angry with {CHILD}.

[PROBE: Is it completely true, mostly true, somewhat true or not at all true?]

CODES

- 1 COMPLETELY TRUE
 - 2 MOSTLY TRUE
 - 3 SOMEWHAT TRUE
 - 4 NOT AT ALL TRUE
- REFUSED
DON'T KNOW

DWQo8o

DISPLAY INSTRUCTIONS:

DISPLAY "in your home" AND 'at home" IN UNDERLINED TEXT.

This is a pretty complicated item, if need be, we can send this to you in a Word file; I'm not sure what the best way is to present this in Specwriter.

QUESTION TEXT:

Now I'd like to ask some questions about {CHILD}'s television viewing. We are interested in {his/her} television viewing only in your home. We want you to include television shows, videotapes, and DVDs, but not games played on gaming systems like Playstation, Wii, or XBox.

On any given weekday, how many hours of television, videotapes, or DVDs on average does {CHILD} watch at home? How about...

ENTER "77" IF FAMILY DOES NOT HAVE A TV.

- a. Before 8:00 a.m.?
- b. Between 8:00 a.m. and 6 p.m.?
- c. After 6 p.m.?

ENTER NUMBER

REFUSED

DON'T KNOW

PROGRAMMER INSTRUCTIONS:

2. DISPLAY THE FOLLOWING MATRIX IN THE RESPONSE FIELD:

	HOURS	MINUTES
Before 8:00 a.m.?		
Between 8:00 a.m. and 6 p.m.?		
After 6 p.m.?		

1. WHEN CURSOR IS ON THE HOUR FIELDS, DISPLAY 'ENTER NUMBER OF HOURS. IF LESS THAN AN HOUR, ENTER 'o.'

2. WHEN CURSOR IS ON THE MINUTE FIELDS, DISPLAY 'ENTER NUMBER OF MINUTES.'

3. WHEN CURSOR IS ON THE HOUR FIELDS OF DWQ.o8oB-C OR, OR ANY OF THE MINUTE FIELDS, DISPLAY 'on any given....How about...' IN SQUARE BRACKETS.

4. DK AND RF ALLOWED AT ALL FIELDS. EMPTY IS ALLOWED FOR MINUTES, BUT NOT FOR HOURS.

5. IF "77" IS ENTERED IN DWQ.o8oA, GO TO DWQ.100.

6. USE THE FOLLOWING SKIP INSTRUCTIONS FOR DK OR RF AT HOUR FIELDS:

IF DK OR RF AT:	SKIP TO	ELSE
DWQ.o8oA HOUR FIELD	DWQ.o8oB	CONTINUE WITH MINUTE
DWQ.o8oB HOUR FIELD	DWQ.o8oC	CONTINUE WITH MINUTE
DWQ.o8oC HOUR FIELD	DWQ.o82	CONTINUE WITH MINUTE

7. HARD RANGE FOR DWQ.o8oA = 0 - 5 FOR HOURS; 0 - 59 FOR MINUTES. HARD RANGE FOR DWQ.o8oB: 0 - 10 FOR HOURS; 0 - 59 FOR MINUTES. HARD RANGE FOR DWQ.o8oC = 0 - 9 FOR HOURS; 0 - 59 FOR MINUTES. THE TOTAL OF THE THREE TIME FRAMES SHOULD NOT EXCEED 24 HOURS. OTHERWISE, DISPLAY ERROR MESSAGE: 'The total number of hours exceeds 24! Please correct the entries.'

DWQ082

DISPLAY INSTRUCTIONS:

DISPLAY 'at home' IN UNDERLINED TEXT.

QUESTION TEXT:

How about on Saturday and Sunday? How many hours does {CHILD} watch television, videotapes, or DVDs at home on...

- a. Saturdays?
- B. Sundays?

ENTER NUMBER

REFUSED

DON'T KNOW

Please see CAPI Inst field below for range info

PROGRAMMER INSTRUCTIONS:

2. DISPLAY THE FOLLOWING MATRIX IN THE RESPONSE FIELD:

	HOURS	MINUTES
Saturdays?		
Sundays?		

3. WHEN CURSOR IS ON THE HOUR FIELDS, DISPLAY 'ENTER NUMBER OF HOURS. IF LESS THAN AN HOUR, ENTER 'o.'

4. WHEN CURSOR IS ON THE MINUTE FIELDS, DISPLAY 'ENTER NUMBER OF MINUTES.'

5. WHEN CURSOR IS ON THE HOUR FIELD OF DWQ.082B OR ANY OF THE MINUTE FIELDS, DISPLAY 'How about... at home on...' IN SQUARE BRACKETS.

6. DK AND RF ALLOWED AT ALL FIELDS. EMPTY IS ALLOWED FOR MINUTES, BUT NOT FOR HOURS.

7. USE THE FOLLOWING SKIP INSTRUCTIONS FOR DK OR RF AT HOUR FIELDS:

IF DK OR RF AT:	SKIP TO	ELSE
DWQ.082A HOUR FIELD	DWQ.082B	CONTINUE WITH MINUTE
DWQ.082B HOUR FIELD	DWQ.084	CONTINUE WITH MINUTE

8. HARD RANGE: 0 - 24 HOUR FOR FIELDS; 0 - 59 FOR MINUTE FIELDS. IF HOURS = 24, THEN MINUTES CANNOT EXCEED 0. OTHERWISE, DISPLAY ERROR MESSAGE: 'The total number of hours exceeds 24! Please correct the entries.'

DWQ084

QUESTION TEXT:

Are there family rules for {CHILD} about any of the following...

What programs {CHILD} can watch?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

DWQo86

QUESTION TEXT:

[Are there family rules for {CHILD} about any of the following...]

How many hours {CHILD} may watch television?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

DWQo88

QUESTION TEXT:

[Are there family rules for {CHILD} about any of the following...]

How early or late {CHILD} may watch television?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

DWQ100

QUESTION TEXT:

Sometimes kids mind pretty well and sometimes they don't. About how many times, if any, have you spanked {CHILD} in the past week?

ENTER 95 IF RESPONDENT VOLUNTEERS THAT {CHILD} IS NEVER SPANKED.

□□
NUMBER

ENTER NUMBER

Range	0 to 95
Soft Range	0 to 15
REFUSED	
DON'T KNOW	

PROGRAMMER INSTRUCTIONS:

SOFT RANGE CHECK: 0 TO 15 SPANKINGS. HARD RANGE CHECK 0 to 95.

BOX 2

IF DWQ.100 = 0, GO TO DWQ.101. ELSE, GO TO DWQ.110.

DWQ101

QUESTION TEXT:

Do you ever spank {CHILD}?

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

DWQ110

QUESTION TEXT:

Most children get angry with their parents from time to time. If {CHILD} got so angry that (he/she) hit you, what would you do? Would you...

CODE ALL THAT APPLY

CODES

1	{Spank {him/her}},	BOX 4
2	Have {him/her} take a time out,	BOX 4
3	Hit {him/her} back,	BOX 4
4	Talk to {him/her} about what {he/she} did wrong,	BOX 4
5	Ignore it,	BOX 4
6	Make {him/her} do some work around the house,	BOX 4
7	Make fun of {him/her},	BOX 4
8	Make {him/her} apologize,	BOX 4
9	Take away a privilege,	BOX 4
10	Give a warning,	BOX 4
11	Yell at {CHILD} or threaten {him/her}, or	BOX 4
12	Something else? (SPECIFY)	DWQ110OS
	REFUSED	BOX 4
	DON'T KNOW	BOX 4

PROGRAMMER INSTRUCTIONS:

IF DWQ.100 = 95 OR DWQ.101 = 2, DO NOT DISPLAY FIRST RESPONSE OPTION (Spank him/her), ELSE, DISPLAY FIRST RESPONSE OPTION.

DWQ110OS

QUESTION TEXT:

[Most children get angry with their parents from time to time. If {CHILD} got so angry that (he/she) hit you, what would you do? Would you...]

SPECIFY SOMETHING ELSE

ENTER TEXT

Length 50
REFUSED
DON'T KNOW

BOX 4

GO TO SECTION CHQ (CHILD HEALTH AND WELL-BEING).

Spring 2011 Parent Interview: ECLS-K: 2010-2011

Section CHQ [Child's Health and Well-Being]

Sequence: 8.5

CHQ005

CARI: Sampling at 100%

QUESTION TEXT:

Now I have some questions about {CHILD}'s health and development. At what age did {CHILD} speak {his/her} first words other than ma-ma or da-da?

PROBE: IF RESPONDENT DOES NOT REMEMBER OR DOES NOT ANSWER WITH A VALUE THAT CAN BE CATEGORIZED, PROBE WITH THE FOLLOWING CATEGORIES.

CODES

- | | |
|---|---|
| 1 | BEFORE 6 MONTHS |
| 2 | 6 TO 9 MONTHS |
| 3 | 10 TO 12 MONTHS |
| 4 | 13 TO 15 MONTHS |
| 5 | 16 TO 18 MONTHS |
| 6 | 19 TO 24 MONTHS |
| 7 | AFTER 24 MONTHS |
| 8 | CHILD DOES NOT SPEAK
REFUSED
DON'T KNOW |

CHQ006

QUESTION TEXT:

At what age did {CHILD} take {his/her} first steps without support?

PROBE: IF RESPONDENT DOES NOT REMEMBER OR DOES NOT ANSWER WITH A VALUE THAT CAN BE CATEGORIZED, PROBE WITH THE FOLLOWING CATEGORIES.

CODES

- | | |
|---|-----------------|
| 1 | BEFORE 6 MONTHS |
| 2 | 6 TO 9 MONTHS |
| 3 | 10 TO 12 MONTHS |
| 4 | 13 TO 15 MONTHS |
| 5 | 16 TO 18 MONTHS |
| 6 | 19 TO 24 MONTHS |

- 7 AFTER 24 MONTHS
- 8 CHILD DOES NOT WALK
REFUSED
DON'T KNOW

CHQ007

QUESTION TEXT:

As an infant, did {CHILD} have difficulty sucking or swallowing?

CODES

- 1 YES
- 2 NO
REFUSED
DON'T KNOW

CHQ010

QUESTION TEXT:

How long has it been since {CHILD}'s last visit to a dentist or dental hygienist for dental care?

CODES

- 1 NEVER BEEN TO DENTIST OR DENTAL HYGIENIST
FOR DENTAL CARE
- 2 LESS THAN 6 MONTHS
- 3 6 MONTHS TO LESS THAN 1 YEAR
- 4 1 YEAR TO 2 YEARS
- 5 MORE THAN 2 YEARS
REFUSED
DON'T KNOW

CHQ020

QUESTION TEXT:

How long has it been since {CHILD}'s last visit to a clinic, health center, hospital, doctor's office, or other place for routine health care?

PROBE: Routine health care may include check-ups, or immunization appointments.

CODES

- 1 NEVER HAD ROUTINE HEALTH CARE
- 2 LESS THAN 6 MONTHS
- 3 6 MONTHS TO LESS THAN 1 YEAR
- 4 1 YEAR TO 2 YEARS
- 5 MORE THAN 2 YEARS
- REFUSED
- DON'T KNOW

CHQ021

QUESTION TEXT:

Has {CHILD} had an ear infection since entering kindergarten?

CODES

- 1 YES CHQ023
- 2 NO
- REFUSED
- DON'T KNOW

CHQ022

QUESTION TEXT:

Has {CHILD} had an ear ache since entering kindergarten?

CODES

- 1 YES CHQ024
- 2 NO CHQ030
- REFUSED CHQ030
- DON'T KNOW CHQ030

CHQ023

QUESTION TEXT:

Since entering kindergarten, how many times did a doctor, nurse, or other medical professional tell you that {CHILD} had an ear infection?

RECORD NUMBER OF TIMES

NUMBER OF TIMES

ENTER NUMBER

Range 0 to 15

REFUSED

DON'T KNOW

PROGRAMMER INSTRUCTIONS:

RANGE: 0 – 15.

Box 1

IF CHQ.023 GE 1, GO TO CHQ.024. ELSE, GO TO CHQ.030.

CHQ024

QUESTION TEXT:

How have {CHILD}'s {ear infections/ear aches} been treated by your doctor, nurse, or other medical professional since {she/he} entered kindergarten?

PROBE: Anything else ?

CODE ALL THAT APPLY FOR 1-6

- | CODES | Code All That Apply |
|--------------|---|
| 1 | NO TREATMENT/WATCH AND WAIT |
| 2 | DECONGESTANTS |
| 3 | ANTIBIOTICS |
| 4 | WITH EAR TUBES |
| 5 | ANALGESICS (E.G., FEVER REDUCER OR PAIN RELIEVER) |
| 6 | WITH EAR DROPS |

- 7 DID NOT GO TO DOCTOR, NURSE, OR MEDICAL CHQ030
PROFESSIONAL
- 91 OTHER (SPECIFY)
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

CODE ALL THAT APPLY FOR 1-6. DO NOT ALLOW 7 (DID NOT GO TO DOCTOR/NURSE) TO BE SELECTED WITH ANY OTHER RESPONSE.

DISPLAY "ear infections" IF CHQ.021 = 1. ELSE, DISPLAY "ear aches"

Box 2

IF ONE OF THE CODES IN CHQ.024 = 91, GO TO CHQ.024OS. ELSE, GO TO BOX 3.

CHQ024OS

QUESTION TEXT:

[How have {CHILD}'s {ear infections/ear aches} been treated by your doctor, nurse, or other medical professional since {she/he} entered kindergarten?]

SPECIFY TREATMENT.

ENTER TEXT

Length

50

PROGRAMMER INSTRUCTIONS:

DISPLAY "ear infections" IF CHQ.021 = 1. ELSE, DISPLAY "ear aches".

SPECIFY TREATMENT.

Box 3

IF ONE OF THE CODES IN CHQ.024 = 4, GO TO CHQ.025. ELSE, GO TO CHQ.030.

CHQ025

QUESTION TEXT:

Have ear tubes been placed in the right ear, left ear, or both ears when your child has had surgery to place tubes in {his/her} ears?

IF NEEDED: Please consider all surgeries since the start of kindergarten if {CHILD} had more than one to place ear tubes.

CODES

- 1 RIGHT EAR
- 2 LEFT EAR
- 3 BOTH EARS
- REFUSED
- DON'T KNOW

CHQ030

QUESTION TEXT:

Is {CHILD} now covered by a health insurance plan which would pay any part of a hospital, doctor's, or surgeon's bill?

PROBE: This includes {Medicaid/ {or STATE NAME FOR MEDICAID}}.

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

FOR "or STATE MEDICAID PROGRAM NAME"; DISPLAY NAME FOR STATE MEDICAID PROGRAM, IF ANY, FROM PRELOAD. ELSE, IF MISSING, DISPLAY "Medicaid."

CHQ060

QUESTION TEXT:

In a typical week, on how many days does {CHILD} get exercise that causes rapid breathing, perspiration, and a rapid heartbeat for 20 continuous minutes or more?

ENTER # OF DAYS

ENTER NUMBER

Range 0 to 7
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

RANGE CHECK 0-7.

CHQ070a

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

BOLD "GROUP SPORTS" IN HELP TEXT ONLY

QUESTION TEXT:

What types of exercise or physical activity does {CHILD} get? How about....

Group sports?

HELP TEXT:

GROUP SPORTS: e.g. baseball, basketball, soccer, organized or unorganized games in the yard or neighborhood.

CODES

1 YES
2 NO
REFUSED
DON'T KNOW

CHQ070b

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

BOLD "INDIVIDUAL SPORTS" IN HELP TEXT ONLY

QUESTION TEXT:

[What types of exercise or physical activity does {CHILD} get? How about...]

Individual sports?

HELP TEXT:

INDIVIDUAL SPORTS: e.g. tennis, swimming, gymnastics.

CODES

1 YES
2 NO
REFUSED

CHQ070c

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

BOLD "DANCE" IN HELP TEXT ONLY

QUESTION TEXT:

[What types of exercise or physical activity does {CHILD} get? How about...]

Dance?

HELP TEXT:

DANCE: e.g. tap, ballet, movement.

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

CHQ070d

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

BOLD "RECREATIONAL SPORTS/OUTDOOR ACTIVITIES" IN HELP TEXT ONLY

QUESTION TEXT:

[What types of exercise or physical activity does {CHILD} get? How about...]

Recreational sports or outdoor activities?

HELP TEXT:

RECREATIONAL SPORTS/OUTDOOR ACTIVITIES: e.g. biking, hiking.

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

DISPLAY INSTRUCTIONS:

BOLD "MARTIAL ARTS" IN HELP TEXT ONLY

QUESTION TEXT:

[What types of exercise or physical activity does {CHILD} get? How about...]

Martial Arts?

HELP TEXT:

MARTIAL ARTS: e.g., Karate, Judo, Tae Kwan Do

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

DISPLAY INSTRUCTIONS:

BOLD "PLAYGROUND ACTIVITIES" IN HELP TEXT ONLY

QUESTION TEXT:

[What types of exercise or physical activity does {CHILD} get? How about...]

Playground activities?

HELP TEXT:

PLAYGROUND ACTIVITIES: e.g. catch, jump-rope, tag; these do NOT need to occur necessarily in a "playground" but could occur in a backyard or common area.

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

DISPLAY INSTRUCTIONS:

BOLD "CALISTHENICS/GENERAL EXERCISING" IN HELP TEXT ONLY

QUESTION TEXT:

[What types of exercise or physical activity does {CHILD} get? How about...]

Calisthenics or general exercising?

HELP TEXT:

CALISTHENICS/GENERAL EXERCISING: e.g. jumping jacks, kid gyms.]

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

CHQ070h

HELP AVAILABLE

QUESTION TEXT:

[What types of exercise or physical activity does {CHILD} get? How about...]

Anything else?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

Box 4

IF CHQ.070h = 1, GO TO CHQ.070OS. ELSE, GO TO CHQ.095.

CHQ070OS

QUESTION TEXT:

[What types of exercise or physical activity does {CHILD} get?]

SPECIFY ACTIVITY

ENTER TEXT

Length

75

REFUSED

DON'T KNOW

CHQ095

QUESTION TEXT:

For the next set of questions, please base your answer on how {CHILD} compares to other children of the same age.

{CHILD} is independent and takes care of {himself/herself} ...

CODES

- 1 Better than other children {his/her} age,
- 2 As well as other children,
- 3 Slightly less well than other children, or
- 4 Much less well than other children?

REFUSED

DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY 'herself' IF CHILD IS FEMALE ACCORDING TO THE PRELOAD.
ELSE, DISPLAY 'himself'.

CHQ100

QUESTION TEXT:

Does {CHILD} pay attention

CODES

- 1 Better than other children {his/her} age,
- 2 As well as other children,
- 3 Slightly less well than other children, or
- 4 Much less well than other children?

REFUSED
DON'T KNOW

CHQ105

QUESTION TEXT:

Does {CHILD} learn, think, and solve problems ...

CODES

- 1 Better than other children {his/her} age,
 - 2 As well as other children,
 - 3 Slightly less well than other children, or
 - 4 Much less well than other children?
- REFUSED
DON'T KNOW

CHQ106

QUESTION TEXT:

Does {CHILD} show good coordination in moving {his/her} arms and legs? Would you say {he/she} does this ...

IF RESPONDENT REPORTS DIFFERENTIALLY FOR ARMS OR LEGS OR FOR SIDES OF THE BODY, SAY: Answer for the part of the body your child has the most difficulty using.

IF CHILD HAS EPISODIC TROUBLE, SAY: Answer for what you consider a typical day.

CODES

- 1 Better than other children {his/her} age,
 - 2 As well as other children,
 - 3 Slightly less well than other children, or
 - 4 Much less well than other children?
- REFUSED
DON'T KNOW

CHQ107

QUESTION TEXT:

Would you say {CHILD} behaves and relates to other children...

CODES

- 1 Better than other children {his/her} age,
 - 2 As well as other children,
 - 3 Slightly less well than other children, or
 - 4 Much less well than other children?
- REFUSED
DON'T KNOW

CHQ108

DISPLAY INSTRUCTIONS:

DISPLAY "adults" IN UNDERLINED TEXT.

QUESTION TEXT:

Would you say {CHILD} behaves and relates to adults ...

CODES

- 1 Better than other children {his/her} age,
 - 2 As well as other children,
 - 3 Slightly less well than other children, or
 - 4 Much less well than other children?
- REFUSED
DON'T KNOW

CHQ109

QUESTION TEXT:

Thinking about {CHILD}'s overall activity level, would you say {he/she} is ...

CODES

- 1 Less active than other children of {his/her} age,
 - 2 About as active,
 - 3 Slightly more active, or
 - 4 A lot more active than other children of {his/her} age?
- REFUSED

DON'T KNOW

CHQ110

QUESTION TEXT:

Does {CHILD} have any emotional or psychological difficulties?

CODES

1	YES	
2	NO	Box 5
	REFUSED	Box 5
	DON'T KNOW	Box 5

CHQ111

QUESTION TEXT:

Do you think this is a mild problem, a moderate problem, or a severe problem?

CODES

1	MILD PROBLEM
2	MODERATE PROBLEM
3	SEVERE PROBLEM
	REFUSED
	DON'T KNOW

Box 5

IF (CHQ.095 = 3 OR 4) OR (CHQ.100 = 3 OR 4) OR (CHQ.105 = 3 OR 4) OR (CHQ.106 = 3 OR 4), OR (CHQ.107 = 3 OR 4) OR (CHQ.108 = 3 OR 4) OR (CHQ.109 = 4) OR (CHQ.110 = 1), GO TO CHQ.115. ELSE, GO TO CHQ.200.

CHQ115

HELP AVAILABLE

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DISPLAY INSTRUCTIONS:

BOLD "Professional" IN FIRST LINE OF HELP TEXT

QUESTION TEXT:

Has {CHILD} ever been evaluated by a professional because of an issue with {independence and taking care of {himself/herself} {or}/paying attention {or}/learning, thinking, and solving problems {or}/ coordination in moving {his/her} arms and legs {or}/behaving and relating to other children {or}/ behaving and relating to adults {or}/{his/her} overall activity level {or}/{his/her} emotional or psychological difficulties?}

HELP TEXT: Professional: This includes health professionals such as doctors, pediatricians, and other licensed persons, including nurses or nurse practitioners, optometrists, ophthalmologists, ear-nose-throat (ENT) doctors, audiologists, school or other psychologists, school or other psychiatrists, psychiatric social workers, speech-language pathologists, etc. Do not include teachers or some other non-health professional.

CODES

1	YES	
2	NO	CHQ200
	REFUSED	CHQ200
	DON'T KNOW	CHQ200

PROGRAMMER INSTRUCTIONS:

DISPLAY ALL THE ISSUES THAT THE CHILD HAS ACCORDING TO THE INSTRUCTIONS BELOW. IF THERE IS MORE THAN ONE ISSUE, DISPLAY THE "or" FOLLOWING THE DISPLAY (E.G., IF A CHILD HAS PROBLEMS WITH BOTH PAYING ATTENTION AND BEHAVING AND RELATING TO ADULTS, THE DISPLAY WOULD BE "paying attention or behaving and relating to adults.").

IF CHQ.095 = 3 OR 4, DISPLAY "independence and taking care of {himself/herself}". DISPLAY "herself" IF THE CHILD IS FEMALE ACCORDING TO THE PRELOAD. ELSE, DISPLAY "himself".

IF CHQ.100 = 3 OR 4, DISPLAY "paying attention".

IF CHQ.105 = 3 OR 4, DISPLAY "learning, thinking, and solving problems".

IF CHQ.106 = 3 OR 4, DISPLAY "coordination in moving {his/her} arms and legs".

IF CHQ.107 = 3 OR 4, DISPLAY "behaving and relating to other children".

IF CHQ.108 = 3 OR 4, DISPLAY "behaving and relating to adults".

IF CHQ.109 = 4, DISPLAY "overall activity level".

IF CHQ.110 = 1, DISPLAY "{his/her} emotional or psychological difficulties".

CHQ120

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

BOLD "Professional" IN HELP TEXT ONLY

QUESTION TEXT:

Did you obtain a diagnosis or diagnoses of a problem from a professional?

HELP TEXT: Professional: This includes health professionals such as doctors, pediatricians, and other licensed persons, including nurses or nurse practitioners, optometrists, ophthalmologists, ear-nose-throat (ENT) doctors, audiologists, school or other psychologists, school or other psychiatrists, psychiatric social workers, speech-language pathologists, etc. Do not include teachers or some other non-health professional.

CODES

1	YES	
2	NO	CHQ200

REFUSED
DON'T KNOW

CHQ200
CHQ200

CHQ125**HELP AVAILABLE****DISPLAY INSTRUCTIONS:**

BOLD, IN HELP TEXT ON FIRST INSTANCE ONLY: "Learning disability", "Attention Deficit Disorder (ADD)", "Attention Deficit Hyperactivity Disorder (ADHD)", "Developmental delay", "Autism", "Asperger's Disorder, Pervasive Developmental Disorder (PDD), or any other autism spectrum disorder may be coded here", "Pervasive developmental disorder or delay", "after" SHOULD BE BOLDED IN THE PHRASE "but typically has an onset after 30 months of age", "Dyslexia", "Dyscalculia", "Mental Retardation/Severe cognitive disability", "Orthopedic impairment", "Serious Emotional Disturbance or SED", "Traumatic Brain Injury", "Panic Disorder", "Separation Anxiety Disorder", "Obsessive Compulsive Disorder", "Generalized Anxiety Disorder", "Other Anxiety Disorder", "Bipolar Disorder", "Depression"

QUESTION TEXT:

What was the diagnosis or were the diagnoses?

PROBE: Anything else?

CODE ALL THAT APPLY.

HELP TEXT:

Learning disability: This is a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which shows up as difficulty to listen, think, speak, read, write, spell, or do mathematical calculations. In some cases the child can perform at grade level, but only with special help. Some names of learning disabilities are dyslexia (CODE UNDER DYSLEXIA), dyscalculia (CODE UNDER DYS CALCULIA), developmental aphasia, minimal brain dysfunction, brain injury, and perceptual disabilities. The term does not include learning problems that are primarily the result of problems with seeing, hearing, or walking (or visual, hearing or motor disabilities); mental retardation; emotional disturbance; or environmental, cultural, or economic disadvantage. A commonly used acronym is "LD."

Attention Deficit Disorder (ADD): A childhood syndrome characterized by short attention span that is inappropriate for his/her age group.

Attention Deficit Hyperactivity Disorder (ADHD): The child displays signs of inattention, impulsivity, and hyperactivity that are inappropriate for his or her mental and chronological age. Adults in the child's environment, such as parents and teachers must report the signs. Inattention means difficulty concentrating, easily distracted, and not finishing things started. Impulsivity means often acts before thinking, shifts excessively from one activity to another, needs a lot of supervision. Hyperactivity means runs about or climbs on things excessively, has difficulty staying seated, always on the go, as if driven by a motor. Onset is typically before age seven and condition lasts at least six months.

Developmental delay: A condition in which a young child falls significantly behind his/her age-mates in physical, mental (cognitive), speech (communication), social/emotional, adaptive (behavioral) development. It does not simply mean that the child talked somewhat later than some children talked or was smaller than average. It is not to be confused with autism or pervasive developmental delay. If the child's social behavior and relationships with other people are generally consistent with his or her delayed cognitive development, then the classification of the condition as developmental delay is probably appropriate. If this is not the case, see the definitions of autism and pervasive developmental disorder or delay.

Autism is a developmental disability significantly affecting verbal and nonverbal communication as well as social interaction, generally evident before age three. Other characteristics often associated with autism are a pervasive lack of responsiveness to other people, and engagement in repetitive activities and stereotyped movements (such as hand-flapping or rocking). There is also often an insistence on sameness, as shown by

stereotyped play, abnormal preoccupations, or resistance to change. With autism, the impaired social development and delayed or deviant language development are not merely predictable from the child's cognitive retardation. Some children with autism are actually advanced in their reading skills, memory skills, or musical abilities. The term autism does not apply if the child's educational performance is negatively affected primarily because the child has an emotional disturbance. Asperger's Disorder, Pervasive Developmental Disorder (PDD), or any other autism spectrum disorder may be coded here; the subtype will be captured in the next question. Pervasive developmental disorder or delay is also characterized by gross and sustained impairment in social relationships, but typically has an onset after 30 months of age. Other characteristics are sudden excessive anxiety, inappropriate affect or emotions, resistance to change in the environment, oddities of motor movement, abnormalities of speech, hypersensitivity to sensory stimuli, and self-mutilation. This condition generally does not involve delusions, hallucinations, incoherence, or bizarre associations.

Dyslexia: A learning disability (see above definition) marked by impairment of the ability to recognize and comprehend the written word.

Dyscalculia: A learning disability (see above definition) marked by impairment in the ability to perform and remember calculations in mathematics.

Intellectual or Severe cognitive disability/Mental Retardation: The child's mental development is significantly and noticeably behind what would ordinarily be expected for a child of his or her age. This significantly below average general intellectual functioning exists at the same time as problems in adaptive behavior, and negatively affects the child's educational performance.

Orthopedic impairment: A bodily (or physical) impairment that is severe enough to negatively affect a child's educational performance. Disabling physical problems such as those resulting from poliomyelitis (often called polio or infantile paralysis), bone tuberculosis, cerebral palsy, amputations, and fractures or contractures (shortening of tissue) from burns would be considered as orthopedic impairments.

Serious Emotional Disturbance or SED: A condition that has one or more of the following characteristics over a long period of time that negatively affect a child's educational performance: (a) an inability to learn that cannot be explained by other factors; (b) an inability to build or maintain satisfactory interpersonal relationships with peers and teachers; (c) inappropriate behavior or feelings; (d) a general mood of unhappiness or depression; or (e) a tendency to develop physical symptoms or fears associated with personal or school problems. The term includes schizophrenia but does not apply to children who are socially maladjusted, unless it is determined that they have a serious emotional disturbance.

Traumatic Brain Injury: An acquired injury to the brain caused by an external force, resulting in total or partial functional disability or psychosocial impairment, or both, that adversely affects a child's educational performance. The term applies to open or closed head injuries resulting in impairments in one or more areas, such as cognition; language; memory; attention; reasoning; abstract thinking; judgment; problem-solving; sensory, perceptual, and motor abilities; psycho-social behavior; physical functions; information processing; and speech. The term does not apply to brain injuries that are congenital (there at birth) or degenerative (problem that grows worse over time), or to brain injuries brought on by birth trauma (injuries during birth). The term is used when an external force has caused the injury.

Panic Disorder: A disorder in which there is the sudden onset of several different physical signs, such as rapid heart rate, shaking, sweating, nausea, dizziness, and difficulty breathing. A panic disorder may make a child think that something horrible is about to happen.

Separation Anxiety Disorder: This is the fear a child has of being separated from his/her parents which is far more than would be expected for the child's developmental stage.

Obsessive Compulsive Disorder: A child must have obsessions or compulsions or both to have this disorder, and these obsessions and/or compulsions must be disabling to the child. Obsessions are thoughts that aren't visible to others but cause the child distress. The thoughts occur over and over and the child spends so much time on them that they have a hard time taking care of themselves or relating to others. Compulsions are mental acts that a child feels driven to perform in response to an obsession.

Generalized Anxiety Disorder: Children who have this disorder worry all the time over nothing, themselves, other's safety, their health, and/or the world to a far greater extent than average. They often have many physical signs of anxiety such as headache, abdominal pain, cramps, diarrhea, vomiting, and dizziness.

Other Anxiety Disorder: An anxiety disorder that is not one of the specific disorders in this list.

Bipolar Disorder: A child with bipolar disorder displays signs of major mood changes, sometimes sad, as in depression, or the opposite, mania. All bipolar disorders are a combination of mania with or without depression. Some signs of mania include inflated self-esteem, decreased need for sleep, distractibility and increased activity. Some signs of depression are sleeping too much, poor appetite, feelings of severe worthlessness, hallucinations or strange beliefs about the past.

Depression: Some signs of depression are frequent sadness, loss of interest or enjoyment of activities, low energy, isolation from friends, sleeping too much, poor appetite, a severe sense of worthlessness, problems with concentration, frequent complaints of physical illnesses, and thoughts of suicide or destructive behavior.

CODES	Code All That Apply
1	LEARNING DISABILITY
2	ATTENTION DEFICIT DISORDER (ADD)
3	ATTENTION DEFICIT HYPERACTIVE DISORDER (ADHD)
4	DEVELOPMENTAL DELAY
5	AUTISM
6	DYSLEXIA
7	DYSCALCULIA
8	INTELLECTUAL OR SEVERE COGNITIVE DISABILITY/MENTAL RETARDATION
9	ORTHOPEDIC IMPAIRMENT
10	SERIOUS EMOTIONAL DISTURBANCE
11	TRAUMATIC BRAIN INJURY
12	PANIC DISORDER
13	SEPARATION ANXIETY DISORDER
14	OBSESSIVE COMPULSIVE DISORDER
15	GENERALIZED ANXIETY DISORDER
16	OTHER ANXIETY DISORDER
17	BIPOLAR DISORDER
18	DEPRESSION
91	OTHER (SPECIFY)
	REFUSED
	DON'T KNOW

PROGRAMMER INSTRUCTIONS:

Other Specify Allowed

Box 6

IF CHQ.125 = 91, GO TO CHQ.125OS. ELSE, GO TO BOX 7.

CHQ125OS

QUESTION TEXT:

[What {was the diagnosis/were the diagnoses?}]

SPECIFY DIAGNOSIS/DIAGNOSES.

ENTER TEXT

Length

50

Box 7

IF CHQ.125 HAS A CODE OF 5, GO TO CHQ.126. ELSE, GO TO BOX 8.

CHQ126

QUESTION TEXT:

What type of autistic spectrum disorder does {CHILD} have? Is it autism, Asperger's Disorder, Pervasive Developmental Disorder, or something else?

CODES

- | | |
|----|--|
| 1 | AUTISM |
| 2 | ASPERGER'S DISORDER |
| 3 | PERVASIVE DEVELOPMENTAL DISORDER (PDD) |
| 91 | OTHER, SPECIFY |
| | REFUSED |
| | DON'T KNOW |

Box 7B

IF CHQ.126 = 91, GO TO CHQ.126OS. ELSE, GO TO BOX 8.

CHQ126OS

QUESTION TEXT:

[What type of autistic spectrum disorder does {CHILD} have?]

SPECIFY TYPE OF AUTISTIC SPECTRUM DISORDER.

ENTER TEXT

Length 70
REFUSED
DON'T KNOW

Box 8

LOOP 1

ASK CHQ.130, CHQ.131, CHQ.135, CHQ.140, CHQ.145, CHQ.150, CHQ.155, AND CHQ.173 (IF APPLICABLE ACCORDING TO THE SKIPS BETWEEN THE ITEMS) FOR EACH DIAGNOSIS IN CHQ.125, UP TO 19 TIMES. THE DIAGNOSIS LISTED AS AN "OTHER SPECIFY" SHOULD ALSO BE PART OF THIS LOOP.

LOOPING ELIGIBILITY:

IF CHQ.125 = 1, ASK ABOUT A LEARNING DISABILITY.

IF CHQ.125 = 2, ASK ABOUT ATTENTION DEFICIT DISORDER (ADD).

IF CHQ.125 = 3, ASK ABOUT ATTENTION DEFICIT HYPERACTIVE DISORDER (ADHD).

IF CHQ.125 = 4, ASK ABOUT DEVELOPMENTAL DELAY.

IF CHQ.125 = 5, ASK ABOUT AUTISM.

IF CHQ.125 = 6, ASK ABOUT DYSLLEXIA.

IF CHQ.125 = 7, ASK ABOUT DYSCALCULIA.

IF CHQ.125 = 8, ASK ABOUT INTELLECTUAL OR SEVERE COGNITIVE DISABILITY/MENTAL RETARDATION.

IF CHQ.125 = 9, ASK ABOUT ORTHOPEDIC IMPAIRMENT.

IF CHQ.125 = 10, ASK ABOUT SERIOUS EMOTIONAL DISTURBANCE.

IF CHQ.125 = 11, ASK ABOUT TRAUMATIC BRAIN INJURY.

IF CHQ.125 = 12, ASK ABOUT PANIC DISORDER.

IF CHQ.125 = 13, ASK ABOUT SEPARATION ANXIETY DISORDER.

IF CHQ.125 = 14, ASK ABOUT OBSESSIVE COMPULSIVE DISORDER.

IF CHQ.125 = 15, ASK ABOUT GENERALIZED ANXIETY DISORDER.

IF CHQ.125 = 16, ASK ABOUT OTHER ANXIETY DISORDER.

IF CHQ.125 = 17, ASK ABOUT BIPOLAR DISORDER.

IF CHQ.125 = 18, ASK ABOUT DEPRESSION.

IF CHQ.125 = 91, ASK ABOUT THE DIAGNOSIS AS LISTED IN THE OTHER SPECIFY TEXT OF CHQ.125OS.

CHQ130

QUESTION TEXT:

How old was {CHILD} when the first diagnosis of a problem related to {a learning disability/Attention Deficit Disorder (ADD)/Attention Deficit Hyperactive Disorder (ADHD)/developmental delay/autism/dyslexia/dyscalculia/an intellectual or severe cognitive disability, or mental retardation/orthopedic impairment/a serious emotional disturbance/a traumatic brain injury/a panic disorder/separation anxiety disorder/obsessive compulsive disorder/generalized anxiety disorder/an {other} anxiety disorder/bipolar disorder/depression/{TEXT FROM OTHER SPECIFY}} was made?

|_|_|
ENTER AGE

ENTER NUMBER

Range	0 to 23
REFUSED	CHQ140
DON'T KNOW	CHQ135

PROGRAMMER INSTRUCTIONS:

DISPLAY THE FOLLOWING FOR THE PARTICULAR LOOP THE R IS ON:

IF CHQ.125 = 1, DISPLAY "a learning disability".
IF CHQ.125 = 2, DISPLAY "Attention Deficit Disorder (ADD)".
IF CHQ.125 = 3, DISPLAY "Attention Deficit Hyperactive Disorder (ADHD)".
IF CHQ.125 = 4, DISPLAY "developmental delay".
IF CHQ.125 = 5, DISPLAY "autism".
IF CHQ.125 = 6, DISPLAY "dyslexia".
IF CHQ.125 = 7, DISPLAY "dyscalculia".
IF CHQ.125 = 8, DISPLAY "an intellectual or severe cognitive disability, or mental retardation".
IF CHQ.125 = 9, DISPLAY "orthopedic impairment".
IF CHQ.125 = 10, DISPLAY "a serious emotional disturbance".
IF CHQ.125 = 11, DISPLAY "a traumatic brain injury".
IF CHQ.125 = 12, DISPLAY "a panic disorder".
IF CHQ.125 = 13, DISPLAY "separation anxiety disorder".
IF CHQ.125 = 14, DISPLAY "obsessive compulsive disorder".
IF CHQ.125 = 15, DISPLAY "generalized anxiety disorder".
IF CHQ.125 = 16, DISPLAY "an {other} anxiety disorder" DISPLAY "other" IF (CHQ.125 = 12 OR CHQ.125 = 13 OR CHQ.125 = 14 OR CHQ.125 = 15). ELSE, USE A NULL DISPLAY FOR "other".
IF CHQ.125 = 17, DISPLAY "bipolar disorder".
IF CHQ.125 = 18, DISPLAY "depression".
IF CHQ.125 = 91, DISPLAY "{TEXT FROM OTHER SPECIFY}" FROM CHQ.125OS.

RANGE CHECK: 0-23.

CHQ131

QUESTION TEXT:

Spring 2011 Parent Interview: ECLS-K: 2010-2011 :: CHQ

[How old was {CHILD} when the first diagnosis of a problem related to {a learning disability/Attention Deficit Disorder (ADD)/Attention Deficit Hyperactive Disorder (ADHD)/developmental delay/autism/dyslexia/dyscalculia/an intellectual or severe cognitive disability, or mental retardation/orthopedic impairment/a serious emotional disturbance/a traumatic brain injury/a panic disorder/separation anxiety disorder/obsessive compulsive disorder/generalized anxiety disorder/an {other} anxiety disorder/bipolar disorder/depression/{TEXT FROM OTHER SPECIFY} was made?]

ENTER UNIT

CODES

1	MONTHS	CHQ140
2	YEARS	CHQ140
	REFUSED	CHQ140
	DON'T KNOW	CHQ135

PROGRAMMER INSTRUCTIONS:

IF CHQ.125 = 1, DISPLAY "a learning disability".
IF CHQ.125 = 2, DISPLAY "Attention Deficit Disorder (ADD)".
IF CHQ.125 = 3, DISPLAY "Attention Deficit Hyperactive Disorder (ADHD)".
IF CHQ.125 = 4, DISPLAY "developmental delay".
IF CHQ.125 = 5, DISPLAY "autism".
IF CHQ.125 = 6, DISPLAY "dyslexia".
IF CHQ.125 = 7, DISPLAY "dyscalculia".
IF CHQ.125 = 8, DISPLAY "an intellectual or severe cognitive disability, or mental retardation".
IF CHQ.125 = 9, DISPLAY "orthopedic impairment".
IF CHQ.125 = 10, DISPLAY "a serious emotional disturbance".
IF CHQ.125 = 11, DISPLAY "a traumatic brain injury".
IF CHQ.125 = 12, DISPLAY "a panic disorder".
IF CHQ.125 = 13, DISPLAY "separation anxiety disorder".
IF CHQ.125 = 14, DISPLAY "obsessive compulsive disorder".
IF CHQ.125 = 15, DISPLAY "generalized anxiety disorder".
IF CHQ.125 = 16, DISPLAY "an {other} anxiety disorder" DISPLAY "other" IF (CHQ.125 = 12 OR CHQ.125 = 13 OR CHQ.125 = 14 OR CHQ.125 = 15). ELSE, USE A NULL DISPLAY FOR "other".
IF CHQ.125 = 17, DISPLAY "bipolar disorder".
IF CHQ.125 = 18, DISPLAY "depression".
IF CHQ.125 = 91, DISPLAY "{TEXT FROM OTHER SPECIFY}" FROM CHQ.125OS.

RANGE CHECK: 0-23 IF MONTHS IS THE UNIT; 0-CHILD'S CURRENT AGE IF YEARS IS THE UNIT. IF NUMBER OF YEARS IS GREATER THAN THE CHILD'S AGE, DISPLAY THIS MESSAGE: THE AGE OF DIAGNOSIS CANNOT BE GREATER THAN THE CHILD'S CURRENT AGE. VERIFY INFORMATION AND CHANGE TO CORRECTED AGE, OR HIT "S" TO SUPPRESS AND ACCEPT THE AGE YOU ENTERED.

ENTER UNIT

CHQ135a

QUESTION TEXT:

What was the month and year when the diagnosis was made?

IF R DOESN'T KNOW MONTH, ASK: Do you remember the year?

IF THERE WAS MORE THAN ONE DIAGNOSIS, ASK FOR THE EARLIEST.

ENTER MONTH

ENTER NUMBER

Range	1 to 12
REFUSED	CHQ140
DON'T KNOW	CHQ135b

PROGRAMMER INSTRUCTIONS:

RANGE CHECK: 1-12 FOR MONTH

EDIT: YEAR ENTERED MUST BE EQUAL TO OR GREATER THAN CHILD'S BIRTHDATE AND LESS THAN OR EQUAL TO INTERVIEW DATE.

CHQ135b

QUESTION TEXT:

[What was the month and year when the diagnosis was made?

IF R DOESN'T KNOW MONTH, ASK: Do you remember the year?

IF THERE WAS MORE THAN ONE DIAGNOSIS, ASK FOR THE EARLIEST.]

ENTER YEAR

ENTER NUMBER

Range	2003 to 2011
REFUSED	
DON'T KNOW	

PROGRAMMER INSTRUCTIONS:

RANGE CHECK: 2003-2011 FOR YEAR.

EDIT: YEAR ENTERED MUST BE EQUAL TO OR GREATER THAN CHILD'S BIRTHDATE AND LESS THAN OR EQUAL TO INTERVIEW DATE. IF THE YEAR ENTERED IS 2011, THE MONTH CANNOT BE GREATER THAN THE INTERVIEW DATE MONTH. IF EDIT IS VIOLATED, DISPLAY MESSAGE: MONTH AND YEAR MUST BE BETWEEN CHILD'S BIRTHDATE AND THE CURRENT DATE. VERIFY INFORMATION AND CHANGE MONTH AND/OR YEAR, OR HIT "S" TO SUPPRESS AND ACCEPT THE INFORMATION YOU ENTERED.

CHQ140

QUESTION TEXT:

Is {CHILD} now taking any prescription medicine for the condition related to {his/her} {learning disability/Attention Deficit Disorder (ADD)/Attention Deficit Hyperactive Disorder (ADHD)/developmental delay/autism/dyslexia/dyscalculia/intellectual or severe cognitive disability, or mental retardation/orthopedic impairment/a serious emotional disturbance/a traumatic brain injury/a panic disorder/separation anxiety disorder/obsessive compulsive disorder/generalized anxiety disorder/{other} anxiety disorder/bipolar disorder/depression/{TEXT FROM OTHER SPECIFY}?

CODES

1	YES
2	NO

REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

IF CHQ.125 = 1, DISPLAY "learning disability".
IF CHQ.125 = 2, DISPLAY "Attention Deficit Disorder (ADD)".
IF CHQ.125 = 3, DISPLAY "Attention Deficit Hyperactive Disorder (ADHD)".
IF CHQ.125 = 4, DISPLAY "developmental delay".
IF CHQ.125 = 5, DISPLAY "autism".
IF CHQ.125 = 6, DISPLAY "dyslexia".
IF CHQ.125 = 7, DISPLAY "dyscalculia".
IF CHQ.125 = 8, DISPLAY "intellectual or severe cognitive disability, or mental retardation".
IF CHQ.125 = 9, DISPLAY "orthopedic impairment".
IF CHQ.125 = 10, DISPLAY "serious emotional disturbance".
IF CHQ.125 = 11, DISPLAY "traumatic brain injury".
IF CHQ.125 = 12, DISPLAY "panic disorder".
IF CHQ.125 = 13, DISPLAY "separation anxiety disorder".
IF CHQ.125 = 14, DISPLAY "obsessive compulsive disorder".
IF CHQ.125 = 15, DISPLAY "generalized anxiety disorder".
IF CHQ.125 = 16, DISPLAY "{other} anxiety disorder" DISPLAY "other" IF (CHQ.125 = 12 OR CHQ.125 = 13 OR CHQ.125 = 14 OR CHQ.125 = 15). ELSE, USE A NULL DISPLAY FOR "other".
IF CHQ.125 = 17, DISPLAY "bipolar disorder".
IF CHQ.125 = 18, DISPLAY "depression".
IF CHQ.125 = 91, DISPLAY "{TEXT FROM OTHER SPECIFY}" FROM CHQ.125OS.

Box 9

IF CHQ.140 = 1 AND CHQ.125 = 2 OR 3, GO TO CHQ.145. ELSE, IF CHQ.140 =1, GO TO CHQ.173. ELSE, GO TO BOX 11.

CHQ145a

QUESTION TEXT:

What medication or medications is {CHILD} currently taking for ADD or ADHD? Does {he/she} take ...

Ritalin (METHYLPHENIDATE)?

CODES

1 YES
2 NO
REFUSED
DON'T KNOW

CHQ145b

QUESTION TEXT:

[What medication or medications is {CHILD} currently taking for ADD or ADHD? Does {he/she} take ...]

Adderall (AMPHETAMINE)?

CODES

- | | |
|---|------------|
| 1 | YES |
| 2 | NO |
| | REFUSED |
| | DON'T KNOW |

PROGRAMMER INSTRUCTIONS:

DISPLAY "What... ADHD?" IN SQUARE BRACKETS FOR B-G.

CHQ145c

QUESTION TEXT:

[What medication or medications is {CHILD} currently taking for ADD or ADHD? Does {he/she} take ...]

Dexedrine (DEXTRO-AMPHETAMINE)?

CODES

- | | |
|---|------------|
| 1 | YES |
| 2 | NO |
| | REFUSED |
| | DON'T KNOW |

PROGRAMMER INSTRUCTIONS:

DISPLAY "What... ADHD?" IN SQUARE BRACKETS FOR B-G.

CHQ145d

QUESTION TEXT:

[What medication or medications is {CHILD} currently taking for ADD or ADHD? Does {he/she} take ...]

Metadate (METHYLPHENIDATE)?

CODES

- | | |
|---|------------|
| 1 | YES |
| 2 | NO |
| | REFUSED |
| | DON'T KNOW |

PROGRAMMER INSTRUCTIONS:

DISPLAY "What...ADHD?" IN SQUARE BRACKETS FOR B-G.

CHQ145e

QUESTION TEXT:

[What medication or medications is {CHILD} currently taking for ADD or ADHD? Does {he/she} take ...]

Concerta (METHYLPHENIDATE)?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY "What...ADHD?" IN SQUARE BRACKETS FOR B-G.

CHQ145f

QUESTION TEXT:

[What medication or medications is {CHILD} currently taking for ADD or ADHD? Does {he/she} take ...]

Strattera (ATOMOXETINE)?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY "What...ADHD?" IN SQUARE BRACKETS FOR B-G.

CHQ145g

QUESTION TEXT:

[What medication or medications is {CHILD} currently taking for ADD or ADHD? Does {he/she} take ...]

Something else? (SPECIFY)

CODES

- 1 YES

2 NO
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY "What... ADHD?" IN SQUARE BRACKETS FOR B-G.

Box 9B

IF CHQ.145g = 1, GO TO CHQ.145gOS. ELSE, GO TO BOX 10.

CHQ145gOS

QUESTION TEXT:

[What medications or medications is {CHILD} currently taking for ADD or ADHD?]

SPECIFY MEDICATION OR MEDICATIONS.

ENTER TEXT

Length 50
REFUSED
DON'T KNOW

Box 10

IF CHQ.145b = 1, GO TO CHQ.150. ELSE, IF ANY ANSWER IN CHQ.145 A - G =1, GO TO CHQ.155. ELSE, IF CHQ.140 = 1, GO TO CHQ.173.

CHQ150

QUESTION TEXT:

Is {CHILD} taking Adderall (short acting) or Adderall XR (long acting/extended release)?

CODES

- 1 ADDERALL (SHORT ACTING)
- 2 ADDERALL XR (LONG ACTING/EXTENDED RELEASE)
- REFUSED
- DON'T KNOW

CHQ155

QUESTION TEXT:

Is {CHILD} medicated for ADD or ADHD at school, at home, or both?

CODES

- 1 AT SCHOOL
- 2 AT HOME
- 3 BOTH AT SCHOOL AND AT HOME
- REFUSED
- DON'T KNOW

CHQ173

QUESTION TEXT:

How long has {CHILD} taken such prescription medicine for {a learning disability/Attention Deficit Disorder (ADD)/Attention Deficit Hyperactive Disorder (ADHD)/developmental delay/autism/dyslexia/dyscalculia/an intellectual or severe cognitive disability, or mental retardation/an orthopedic impairment/a serious emotional disturbance/a traumatic brain injury/a panic disorder/separation anxiety disorder/obsessive compulsive disorder/generalized anxiety disorder/an {other} anxiety disorder/bipolar disorder/depression/{TEXT FROM OTHER SPECIFY}}, in total?

CODES

- 1 Less than one month,
- 2 Less than a year,
- 3 1 to 2 years,
- 4 3 to 4 years, or
- 5 5 years or more?
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

IF CHQ.125 = 1, DISPLAY "a learning disability".
 IF CHQ.125 = 2, DISPLAY "Attention Deficit Disorder (ADD)".
 IF CHQ.125 = 3, DISPLAY "Attention Deficit Hyperactive Disorder (ADHD)".
 IF CHQ.125 = 4, DISPLAY "developmental delay".
 IF CHQ.125 = 5, DISPLAY "autism".
 IF CHQ.125 = 6, DISPLAY "dyslexia".
 IF CHQ.125 = 7, DISPLAY "dyscalculia".
 IF CHQ.125 = 8, DISPLAY "an intellectual or severe cognitive disability, or mental retardation".
 IF CHQ.125 = 9, DISPLAY "orthopedic impairment".
 IF CHQ.125 = 10, DISPLAY "a serious emotional disturbance".
 IF CHQ.125 = 11, DISPLAY "a traumatic brain injury".
 IF CHQ.125 = 12, DISPLAY "a panic disorder".
 IF CHQ.125 = 13, DISPLAY "separation anxiety disorder".
 IF CHQ.125 = 14, DISPLAY "obsessive compulsive disorder".
 IF CHQ.125 = 15, DISPLAY "generalized anxiety disorder".
 IF CHQ.125 = 16, DISPLAY "an {other} anxiety disorder" DISPLAY "other" IF (CHQ.125 = 12 OR CHQ.125 = 13 OR CHQ.125 = 14 OR CHQ.125 = 15). ELSE, USE A NULL DISPLAY FOR "other".
 IF CHQ.125 = 17, DISPLAY "bipolar disorder".
 IF CHQ.125 = 18, DISPLAY "depression".
 IF CHQ.125 = 91, DISPLAY "{TEXT FROM OTHER SPECIFY}" FROM CHQ.125OS.

Box 11

END OF LOOP 1.

IF ALL CODES INDICATED IN CHQ.125 HAVE BEEN ASKED ABOUT IN LOOP 1 (ALL DIAGNOSES THE CHILD HAS HAVE BEEN ASKED ABOUT), GO TO CHQ.200. ELSE, GO BACK UP TO BOX 8 AND ASK ABOUT THE NEXT DIAGNOSIS.

CHQ200

QUESTION TEXT:

For the next question, please base your answer on how {CHILD} compares to other children of the same age. Does {CHILD} pronounce words, communicate with and understand others...

IF RESPONDENT INDICATES CHILD DIFFERS ON ANY OF THE AREAS (E.G., CAN UNDERSTAND BUT NOT PRONOUNCE), SAY: Answer for the area in which the child has the most difficulty.

CODES

- 1 Better than other children {his/her} age,
 - 2 As well as other children,
 - 3 Slightly less well than other children, CHQ206
 - 4 Much less well than other children? CHQ206
- REFUSED

DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY "IF ... SAY: IN LIGHT BLUE "AND DISPLAY "Answer ...difficulty" IN BLACK.

CHQ205

QUESTION TEXT:

When {CHILD} was younger, did {he/she} ever have unusual difficulty pronouncing words, communicating with, or understanding others, as compared to other children {his/her} age?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

CHQ206a

QUESTION TEXT:

Did or does {CHILD} have any of the following?

Problem with talking too loudly

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

CHQ206b

QUESTION TEXT:

[Did or does {CHILD} have any of the following?]

Problem with talking too softly

CODES

- 1 YES

- 2 NO
- REFUSED
- DON'T KNOW

CHQ206c

QUESTION TEXT:

[Did or does {CHILD} have any of the following?]

A problem chewing

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

CHQ206d

QUESTION TEXT:

[Did or does {CHILD} have any of the following?]

A problem swallowing

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

CHQ206e

QUESTION TEXT:

[Did or does {CHILD} have any of the following?]

A problem with stuttering

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

CHQ206f

QUESTION TEXT:

[Did or does {CHILD} have any of the following?]

A cleft lip and/or palate

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

CHQ206g

QUESTION TEXT:

[Did or does {CHILD} have any of the following?]

Abnormalities of the face or head

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

CHQ206h

QUESTION TEXT:

[Did or does {CHILD} have any of the following?]

Malformation of the ear

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

Box 11B

IF (CHQ.200 = 3 OR 4) OR (CHQ.205 = 1) OR (ANY CHQ.206a-h = 1), GO TO CHQ.210. ELSE, GO TO CHQ.216 .

CHQ210

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

BOLD "Professional" IN FIRST INSTANCE OF HELP TEXT ONLY

QUESTION TEXT:

Has {CHILD} ever been evaluated by a professional because of {his/her} ability to communicate?

HELP TEXT: Professional: This includes health professionals such as doctors, pediatricians, and other licensed persons, including nurses or nurse practitioners, optometrists, ophthalmologists, ear-nose-throat (ENT) doctors, audiologists, school or other psychologists, school or other psychiatrists, psychiatric social workers, speech-language pathologists, etc. Do not include teachers or some other non-health professional.

CODES

- 1 YES
- 2 NO CHQ216
- REFUSED CHQ216
- DON'T KNOW CHQ216

CHQ215

QUESTION TEXT:

Did you obtain a diagnosis or diagnoses of a problem related to {his/her} ability to communicate from a professional?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

CHQ216

QUESTION TEXT:

Which best describes {CHILD}'s hearing? If {CHILD} has a hearing aid or other assistive device, please consider {his/her} hearing without the hearing aid or assistive device. Would you say {CHILD} has...

CODES

- 1 excellent hearing, CHQ221
- 2 good hearing, CHQ221
- 3 a little trouble hearing,
- 4 moderate trouble hearing,
- 5 a lot of trouble hearing, or
- 6 is deaf?
- REFUSED CHQ221
- DON'T KNOW CHQ221

CHQ217

DISPLAY INSTRUCTIONS:

DISPLAY "hear and understand" AND "whispers" IN UNDERLINED TEXT.

QUESTION TEXT:

Please indicate whether the following statement describes {CHILD}'s hearing. If {CHILD} has a hearing aid or other assistive device, please consider {his/her} hearing without the hearing aid or assistive device.

{CHILD} can usually hear and understand what a person says without seeing his or her face if that person whispers to {him/her} from across a quiet room.

CODES

- 1 YES CHQ221
- 2 NO
- REFUSED

DON'T KNOW

CHQ218

DISPLAY INSTRUCTIONS:

DISPLAY “hear and understand” AND ”talks in a normal voice” IN UNDERLINED TEXT.

QUESTION TEXT:

[Please indicate whether the following statement describes {CHILD}'s hearing. If {CHILD} has a hearing aid or other assistive device, please consider {his/her} hearing without the hearing aid or assistive device.]

{CHILD} can usually hear and understand what a person says without seeing his or her face if that person talks in a normal voice to {him/her} from across a quiet room.

CODES

1	YES	CHQ221
2	NO	
	REFUSED	
	DON'T KNOW	

CHQ219

DISPLAY INSTRUCTIONS:

DISPLAY “hear and understand” AND ”shouts” IN UNDERLINED TEXT.

QUESTION TEXT:

[Please indicate whether the following statement describes {CHILD}'s hearing. If {CHILD} has a hearing aid or other assistive device, please consider {his/her} hearing without the hearing aid or assistive device.]

{CHILD} can usually hear and understand what a person says without seeing his or her face if that person shouts to {him/her} from across a quiet room.

CODES

1	YES	CHQ221
2	NO	
	REFUSED	
	DON'T KNOW	

CHQ220

DISPLAY INSTRUCTIONS:

DISPLAY “hear and understand” AND ”speaks loudly” IN UNDERLINED TEXT.

QUESTION TEXT:

[Please indicate whether the following statement describes {CHILD}'s hearing. If {CHILD} has a hearing aid or other assistive device, please consider {his/her} hearing without the hearing aid or assistive device.]

{CHILD} can usually hear and understand what a person says without seeing his or her face if that person speaks loudly into {his/her} ears or better ear.

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

CHQ221

QUESTION TEXT:

Is {CHILD}'s hearing worse in one ear?

CODES

- 1 YES
- 2 NO CHQ235
- REFUSED CHQ235
- DON'T KNOW CHQ235

CHQ222

DISPLAY INSTRUCTIONS:

DISPLAY “worse” IN UNDERLINED TEXT.

QUESTION TEXT:

Which best describes {CHILD}'s hearing in {his/her} worse ear? If {CHILD} has a hearing aid or other assistive device, please consider {his/her} hearing without the hearing aid or assistive device.

Is {CHILD}'s hearing ...

CODES

- 1 Excellent,
- 2 Good,
- 3 A little trouble hearing,
- 4 Moderate trouble hearing,

- 5 A lot of trouble hearing, or
 - 6 Deaf?
- REFUSED
DON'T KNOW

CHQ235**HELP AVAILABLE****DISPLAY INSTRUCTIONS:**

BOLD "vision and hearing questions" AND "does"

QUESTION TEXT:

Has {CHILD}'s hearing ever been evaluated by a professional?

HELP TEXT: Professional: This includes health professionals such as doctors, pediatricians, and other licensed persons, including nurses or nurse practitioners, optometrists, ophthalmologists, school or other psychologists, school or other psychiatrists, psychiatric social workers, speech pathologists, etc. Do not include teachers or some other non-health professional.

For the vision and hearing questions, having been evaluated at the school by a health professional does count as being evaluated by a professional.

CODES

- 1 YES
 - 2 NO
- REFUSED
DON'T KNOW

Box 12

IF CHQ.235 = 1, GO TO CHQ.245. ELSE, IF CHQ215=1, GO TO BOX 13. ELSE, GO TO CHQ.285.

CHQ245**QUESTION TEXT:**

Did you obtain a diagnosis of a problem from a professional?

CODES

1	YES	
2	NO	BOX 13
	REFUSED	BOX 13
	DON'T KNOW	BOX 13

CHQ246

QUESTION TEXT:

What was the diagnosis?

PROBE: Anything else ?

CODES

Code All That Apply

- 1 DUE TO EAR WAX (EXTERNAL EAR CANAL EAR WAX)
- 2 DUE TO EAR CANAL DEFORMITY (“ATRESIA” (EAR CANAL NOT NORMALLY FORMED), CRANIAL-FACIAL DISORDER, ETC.)
- 3 DUE TO EAR INFECTION (ACUTE OR RECURRENT EPISODES (INFECTION BEGINS AND PROGRESSES QUICKLY OR KEEPS COMING BACK) OFTEN WITH EAR ACHE AND FEVER – ACUTE OTITIS MEDIA)
- 4 DUE TO FLUID IN THE EAR (FLUID BEHIND THE EARDRUM, RUNNY EARS, FLUID OR PUS DRAINING FROM THE MIDDLE EAR SPACE, CHRONIC OTITIS MEDIA, GLUE EAR)
- 5 DUE TO EAR DRUM PROBLEM (INCLUDES PERFORATED/TORN/RUPTURED) EARDRUM)
- 6 DUE TO ILLNESS (MENINGITIS, MEASLES, MUMPS, RUBELLA, SCARLET FEVER, ETC.)
- 7 DUE TO CMV (CYTOMEGALOVIRUS, A TYPE OF HERPES VIRUS)
- 8 DUE TO OTOTOXIC EXPOSURE TO DRUGS/MEDICINES (DAMAGE TO THE EARS BY DRUGS OR CHEMICALS . INCLUDES DAMAGE FROM MYCIN DRUGS, SUCH AS, STREPTOMYCIN, GENTAMYCIN, ETC., SALICYLATE, LASIX, CISPLATIN
- 9 DUE TO NOISE EXPOSURE (FROM GUNFIRE, FIRECRACKERS, etc.)
- 10 DUE TO GENETIC CAUSE (INCLUDES CONGENITAL (THERE AT BIRTH) HEARING LOSS, HEREDITARY HEARING LOSS, SYNDROMAL HEARING LOSS – DOWN SYNDROME, USHER’S SYNDROME, ETC.)
- 11 DUE TO INJURY OR TRAUMA TO HEAD & NECK

- 12 DUE TO EAR OR FACIAL SURGERY
- 13 DUE TO NERVE DEAFNESS (NERVE HEARING LOSS OR SENSORI-NEURAL HEARING LOSS)
- 14 DUE TO CENTRAL AUDITORY PROCESSING DISORDER (PROBLEM WITH BEING ABLE TO RECOGNIZE, TELL THE DIFFERENCE BETWEEN, OR UNDERSTAND SOUNDS)
- 15 DEAF
- 91 OTHER, SPECIFY
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

NOTE: Because of Specwriter string limits, this gets cut off in response option 8. The full text for response option 8 should be:

DUE TO OTOTOXIC EXPOSURE TO DRUGS/MEDICINES (DAMAGE TO THE EARS BY DRUGS OR CHEMICALS. INCLUDES DAMAGE FROM MYCIN DRUGS, SUCH AS, STREPTOMYCIN, GENTAMYCIN, ETC., SALICYLATE, LASIX, CISPLATIN – MAY RESULT FROM TREATMENT OF RESPIRATORY PROBLEMS OF PRETERM INFANTS, OR AS TREATMENTS DUE TO CHILDHOOD CANCER, ETC.)

Box 12B

If CHQ.246 = 91, GO TO CHQ. 246OS. ELSE, GO TO BOX 13.

CHQ246OS

QUESTION TEXT:

[What was the diagnosis?]

SPECIFY DIAGNOSIS

ENTER TEXT

Length 80
REFUSED
DON'T KNOW

Box 13

ASK CHQ.250a, CHQ.250b (IF APPLICABLE), CHQ.250c (IF APPLICABLE), AND CHQ.255 (IF APPLICABLE) FOR THE FOLLOWING:

IF CHQ.215 = 1 AND CHQ.245 NE 1, ASK ABOUT ABILITY TO COMMUNICATE.

IF CHQ.215 NE 1 AND CHQ.245 = 1, ASK ABOUT HEARING.

IF CHQ.215 = 1 AND CHQ.245 = 1, ASK ABOUT BOTH ABILITY TO COMMUNICATE AND HEARING SEPARATELY IN A LOOP.

ELSE, GO TO CHQ.285.

CHQ250a

QUESTION TEXT:

How old was {CHILD} when the first diagnosis of a problem related to {his/her} {ability to communicate/hearing} was made?

ENTER UNIT

CODES

1	MONTHS	CHQ250b
2	YEARS	CHQ250c
	REFUSED	BOX 14
	DON'T KNOW	CHQ255

PROGRAMMER INSTRUCTIONS:

CAPI INSTRUCTIONS: IF CHQ.215 =1 AND CHQ.245 NE 1, DISPLAY "ability to communicate". ELSE, IF CHQ.215 NE 1 AND CHQ.245 = 1, DISPLAY "hearing". ELSE, IF CHQ.215 = 1 AND CHQ.245 = 1 DISPLAY "ability to communicate" THE FIRST TIME THE LOOP IS ASKED AND DISPLAY "hearing" THE SECOND TIME THE LOOP IS ASKED.

CHQ250b

QUESTION TEXT:

[How old was {CHILD} when the first diagnosis of a problem related to {his/her} {ability to communicate/hearing} was made?]

ENTER THE NUMBER OF MONTHS.

|_|_|

ENTER MONTHS (BOX 14)

ENTER NUMBER

Range

0 to 23

REFUSED
DON'T KNOW

BOX 14
CHQ255

PROGRAMMER INSTRUCTIONS:

IF CHQ.215 =1 AND CHQ.245 NE 1, DISPLAY "ability to communicate". ELSE, IF CHQ.215 NE 1 AND CHQ.245 = 1, DISPLAY "hearing". ELSE, IF CHQ.215 = 1 AND CHQ.245 = 1 DISPLAY "ability to communicate" THE FIRST TIME THE LOOP IS ASKED AND DISPLAY "hearing" THE SECOND TIME THE LOOP IS ASKED.

RANGE CHECK: 0-23.

CHQ250c

QUESTION TEXT:

[How old was {CHILD} when the first diagnosis of a problem related to {his/her} {ability to communicate/hearing} was made?]

ENTER THE NUMBER OF YEARS.

YEARS

ENTER NUMBER

Range	0 to 8
REFUSED	BOX 14
DON'T KNOW	CHQ255

PROGRAMMER INSTRUCTIONS:

IF CHQ.215 =1 AND CHQ.245 NE 1, DISPLAY "ability to communicate". ELSE, IF CHQ.215 NE 1 AND CHQ.245 = 1, DISPLAY "hearing". ELSE, IF CHQ.215 = 1 AND CHQ.245 = 1 DISPLAY "ability to communicate" THE FIRST TIME THE LOOP IS ASKED AND DISPLAY "hearing" THE SECOND TIME THE LOOP IS ASKED.

RANGE CHECK: 0-"CHILD'S CURRENT AGE". IF NUMBER OF YEARS IS GREATER THAN THE CHILD'S AGE, DISPLAY A MESSAGE: THE AGE OF DIAGNOSIS CANNOT BE GREATER THAN CHILD'S CURRENT AGE. VERIFY INFORMATION AND CHANGE TO CORRECTED AGE, OR HIT "S" TO SUPPRESS AND ACCEPT THE AGE YOU ENTERED..

Box 14

IF CHQ.215 = 1 AND CHQ.245 = 1, AND THE FIRST LOOP IN BOX 13 FOR ABILITY TO COMMUNICATE HAS BEEN ANSWERED BUT NOT THE LOOP FOR HEARING, GO BACK TO CHQ.250a AND ASK ABOUT HEARING. ELSE, IF CHQ.245 = 1, GO TO CHQ.256. ELSE, GO TO CHQ.285.

CHQ255a

QUESTION TEXT:

What was the month and year the problem with {CHILD}'s {ability to communicate /hearing/ability to communicate or hearing} was diagnosed?
IF R DOESN'T KNOW MONTH, ASK: Do you remember the year?
IF THERE WAS MORE THAN ONE DIAGNOSIS, ASK FOR THE EARLIEST.
|_|_|
ENTER MONTH

ENTER NUMBER

Range 1 to 12
REFUSED BOX 16
DON'T KNOW CHQ255b

PROGRAMMER INSTRUCTIONS:

RANGE CHECK: 1-12 FOR MONTH.
IF CHQ.215 =1 AND CHQ.245 NE 1, DISPLAY "ability to communicate". ELSE, IF CHQ.215 NE 1 AND CHQ.245 = 1, DISPLAY "hearing". ELSE, IF CHQ.215 = 1 AND CHQ.245 = 1 DISPLAY "ability to communicate" THE FIRST TIME THE LOOP IS ASKED AND DISPLAY "hearing" THE SECOND TIME THE LOOP IS ASKED.
EDIT: YEAR ENTERED MUST BE EQUAL TO OR GREATER THAN CHILD'S BIRTHDATE AND LESS THAN OR EQUAL TO INTERVIEW DATE.

CHQ255b

QUESTION TEXT:

[What was the month and year the problem with {CHILD}'s {ability to communicate /hearing/ability to communicate or hearing} was diagnosed?
IF R DOESN'T KNOW MONTH, ASK: Do you remember the year?
IF THERE WAS MORE THAN ONE DIAGNOSIS, ASK FOR THE EARLIEST.]
|_|_|_|_|
ENTER YEAR

ENTER NUMBER

Range 2003 to 2011
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

RANGE CHECK: 2003-2011 FOR YEAR.
IF CHQ.215 =1 AND CHQ.245 NE 1, DISPLAY "ability to communicate". ELSE, IF CHQ.215 NE 1 AND CHQ.245 = 1, DISPLAY "hearing". ELSE, IF CHQ.215 = 1 AND CHQ.245 = 1 DISPLAY "ability to communicate" THE FIRST TIME THE LOOP IS ASKED AND DISPLAY "hearing" THE SECOND TIME THE LOOP IS ASKED.
EDIT: YEAR ENTERED MUST BE EQUAL TO OR GREATER THAN CHILD'S BIRTHDATE AND LESS THAN OR EQUAL TO INTERVIEW DATE. IF THE YEAR ENTERED IS 2011, THE MONTH CANNOT BE GREATER THAN THE INTERVIEW DATE MONTH. IF EDIT IS VIOLATED, DISPLAY MESSAGE: MONTH AND YEAR MUST BE BETWEEN

CHILD'S BIRTHDATE AND THE CURRENT DATE. VERIFY INFORMATION AND CHANGE MONTH AND/OR YEAR, OR HIT "S" TO SUPPRESS AND ACCEPT THE INFORMATION YOU ENTERED.

Box 16

IF CHQ.215 = 1 AND CHQ.245 = 1, AND THE FIRST LOOP IN BOX 13 FOR ABILITY TO COMMUNICATE HAS BEEN ANSWERED BUT NOT THE LOOP FOR HEARING, GO BACK TO CHQ.250a AND ASK ABOUT HEARING. ELSE, IF CHQ.245 =1, GO TO CHQ.256. ELSE, GO TO CHQ.285.

CHQ256

HELP AVAILABLE

QUESTION TEXT:

Has {CHILD} ever worn a hearing aid?

HELP TEXT: Hearing Aid: A small electronic sound amplifier worn in or behind the ear that compensates for impaired hearing.

IF RESPONDENT SAYS "Yes" OR "CHILD USED TO WEAR ONE," ASK "Does {CHILD} wear one now?"

CODES

- | | | |
|---|------------------|--------|
| 1 | YES, CURRENTLY | |
| 2 | YES, IN THE PAST | |
| 3 | NO | CHQ263 |
| | REFUSED | CHQ263 |
| | DON'T KNOW | CHQ263 |

CHQ257a

HELP AVAILABLE

QUESTION TEXT:

At what age was the recommendation that {CHILD} wear a hearing aid first made?

HELP TEXT: This question asks the age at which the recommendation to wear a hearing aid was first made, not the age at which the child first started wearing a hearing aid. Some children may have started wearing a hearing aid right after the recommendation was first made. For other children, there may have been a period of time between when the recommendation was first made and when the child started wearing a hearing aid.

ENTER UNIT

CODES

1	MONTHS	257b
2	YEARS	257c
	REFUSED	CHQ258
	DON'T KNOW	CHQ258

CHQ257b

HELP AVAILABLE

QUESTION TEXT:

[At what age was the recommendation that {CHILD} wear a hearing aid first made?

HELP TEXT: This question asks the age at which the recommendation to wear a hearing aid was first made, not the age at which the child first started wearing a hearing aid. Some children may have started wearing a hearing aid right after the recommendation was first made. For other children, there may have been a period of time between when the recommendation was first made and when the child started wearing a hearing aid.]

|_|_| (CHQ258)
ENTER MONTHS

ENTER NUMBER

Range	0 to 36
REFUSED	CHQ258
DON'T KNOW	CHQ257c

PROGRAMMER INSTRUCTIONS:

RANGE CHECK: 0-36 IF MONTHS

CHQ257c

HELP AVAILABLE

QUESTION TEXT:

[At what age was the recommendation that {CHILD} wear a hearing aid first made?

HELP TEXT: This question asks the age at which the recommendation to wear a hearing aid was first made, not the age at which the child first started wearing a hearing aid. Some children may have started wearing a hearing aid right after the recommendation was first made. For other children, there may have been a period of time between when the recommendation was first made and when the child started wearing a hearing aid.]

|_|_|
ENTER YEARS

ENTER NUMBER

Range	0 to 8
REFUSED	
DON'T KNOW	

PROGRAMMER INSTRUCTIONS:

RANGE CHECK: 0- CHILD'S CURRENT AGE IF UNIT IS YEARS. IF NUMBER OF YEARS IS GREATER THAN THE CHILD'S AGE, DISPLAY A MESSAGE: THE AGE OF DIAGNOSIS CANNOT BE GREATER THAN CHILD'S CURRENT AGE. VERIFY INFORMATION AND CHANGE TO CORRECTED AGE, OR HIT "S" TO SUPPRESS AND ACCEPT THE AGE YOU ENTERED.

CHQ258

QUESTION TEXT:

How often does {CHILD} use the hearing aid(s) in school? Would you say ...

CODES

- 1 All of the time,
 - 2 Most of the time,
 - 3 Sometimes,
 - 4 Rarely, or
 - 5 Never?
- REFUSED
DON'T KNOW
-

CHQ259

DISPLAY INSTRUCTIONS:

DISPLAY "when wearing {his/her} hearing aid[s]" AND "hear and understand" AND "whispers" IN UNDERLINED TEXT.

QUESTION TEXT:

Please indicate whether the following statement describes {CHILD}'s hearing when wearing {his/her} hearing aid{s}.

{CHILD} can usually hear and understand what a person says without seeing his or her face if that person whispers to {him/her} from across a quiet room.

CODES

- 1 YES CHQ270
 - 2 NO
- REFUSED
DON'T KNOW
-

CHQ260

DISPLAY INSTRUCTIONS:

DISPLAY “when wearing {his/her} hearing aid[s]” AND “hear and understand” AND “talks in a normal voice” IN UNDERLINED TEXT.

QUESTION TEXT:

[Please indicate whether the following statement describes {CHILD}'s hearing when wearing {his/her} hearing aid{s}.]

{CHILD} can usually hear and understand what a person says without seeing his or her face if that person talks in a normal voice to {him/her} from across a quiet room.

CODES

- 1 YES CHQ270
- 2 NO
- REFUSED
- DON'T KNOW

CHQ261

DISPLAY INSTRUCTIONS:

DISPLAY “when wearing {his/her} hearing aid[s]” AND “hear and understand” AND “shouts” IN UNDERLINED TEXT.

QUESTION TEXT:

[Please indicate whether the following statement describes {CHILD}'s hearing when wearing {his/her} hearing aid{s}.]

{CHILD} can usually hear and understand what a person says without seeing his or her face if that person shouts to {him/her} from across a quiet room.

CODES

- 1 YES CHQ270
- 2 NO
- REFUSED
- DON'T KNOW

CHQ262

DISPLAY INSTRUCTIONS:

DISPLAY “when wearing {his/her} hearing aid[s]” AND “hear and understand” AND “speaks loudly” IN UNDERLINED TEXT.

QUESTION TEXT:

[Please indicate whether the following statement describes {CHILD}'s hearing when wearing {his/her} hearing aid{s}.]

{CHILD} can usually hear and understand what a person says without seeing his or her face if that person speaks loudly into {his/her} {better} ear.

CODES

1	YES	CHQ270
2	NO	CHQ270
	REFUSED	CHQ270
	DON'T KNOW	CHQ270

PROGRAMMER INSTRUCTIONS:

DISPLAY "better" IF CHQ.221 = 1. ELSE, USE A NULL DISPLAY.

CHQ263

HELP AVAILABLE

QUESTION TEXT:

Has a doctor or other health care professional ever recommended that {CHILD} wear a hearing aid?

HELP TEXT: Hearing Aid: A small electronic sound amplifier worn in or behind the ear that compensates for impaired hearing.

CODES

1	YES	
2	NO	CHQ270
	REFUSED	CHQ270
	DON'T KNOW	CHQ270

CHQ264a

QUESTION TEXT:

At what age was the recommendation that {CHILD} wear a hearing aid first made?

ALLOW RESPONSES IN MONTHS OR YEARS, BUT NOT BOTH.

ENTER UNIT

CODES

1	MONTHS	CHQ264b
2	YEARS	CHQ264c
	REFUSED	CHQ270
	DON'T KNOW	CHQ270

CHQ264b

QUESTION TEXT:

[At what age was the recommendation that {CHILD} wear a hearing aid first made?]

__|__| (CHQ270)
ENTER MONTHS

ENTER NUMBER

Range	0 to 36
REFUSED	CHQ270
DON'T KNOW	CHQ264c

PROGRAMMER INSTRUCTIONS:

RANGE CHECK: 0-36 IF UNIT IS MONTHS.

CHQ246c

QUESTION TEXT:

[At what age was the recommendation that {CHILD} wear a hearing aid first made?]

__|__|
ENTER YEARS

ENTER NUMBER

Range	0 to 8
REFUSED	
DON'T KNOW	

PROGRAMMER INSTRUCTIONS:

RANGE CHECK: 0-CHILD'S CURRENT AGE IF UNIT IS YEARS. IF NUMBER OF YEARS IS GREATER THAN THE CHILD'S AGE, DISPLAY A MESSAGE: THE AGE OF DIAGNOSIS CANNOT BE GREATER THAN CHILD'S CURRENT AGE. VERIFY INFORMATION AND CHANGE TO CORRECTED AGE, OR HIT "S" TO SUPPRESS AND ACCEPT THE AGE YOU ENTERED.

CHQ270

HELP AVAILABLE

QUESTION TEXT:

Does {CHILD} have a cochlear implant?

PROBE: IF RESPONDENT SAYS "YES," BUT WHICH EAR IS NOT SPECIFIED, PROBE Is the cochlear implant in the right or left ear or does {CHILD} have them in both ears?

HELP TEXT: Cochlear Implants: An electronic device that is surgically placed in the inner ear which is designed to provide useful hearing and improved communication ability to individuals who are profoundly hearing impaired and unable to understand speech with hearing aids.

CODES

1	YES, ONE EAR ONLY – RIGHT EAR	CHQ271
2	YES, ONE EAR ONLY – LEFT EAR	CHQ271
3	YES, IN BOTH EARS	CHQ273
4	NO	CHQ285
	REFUSED	CHQ285
	DON'T KNOW	CHQ285

CHQ271

QUESTION TEXT:

In what year was it implanted?
|_|_|_|_|_| (CHQ.277)
ENTER YEAR

ENTER NUMBER

Range	2003 to 2011
REFUSED	CHQ272
DON'T KNOW	CHQ272

PROGRAMMER INSTRUCTIONS:

RANGE CHECK: 2003-2011.

EDIT: YEAR ENTERED MUST BE EQUAL TO OR GREATER THAN CHILD'S BIRTHDATE AND LESS THAN OR EQUAL TO INTERVIEW DATE.

CHQ272a

QUESTION TEXT:

How old was {CHILD} when it was implanted?
ENTER UNIT

CODES

1	MONTHS	CHQ272b
2	YEARS	CHQ272c
	REFUSED	CHQ277
	DON'T KNOW	CHQ277

CHQ272b

QUESTION TEXT:

How old was {CHILD} when it was implanted?

|_|_| (CHQ. 277)
ENTER MONTHS

ENTER NUMBER

Range	0 to 36
REFUSED	CHQ277
DON'T KNOW	CHQ272c

PROGRAMMER INSTRUCTIONS:

RANGE CHECK: 0-36 IF UNIT IS MONTHS

CHQ272c

QUESTION TEXT:

How old was {CHILD} when it was implanted?

|_|_| (CHQ. 277)
ENTER YEARS

ENTER NUMBER

Range	0 to 8
REFUSED	CHQ277
DON'T KNOW	CHQ277

PROGRAMMER INSTRUCTIONS:

RANGE CHECK: 0-CHILD'S CURRENT AGE IF UNIT IS YEARS. IF NUMBER OF YEARS IS GREATER THAN THE CHILD'S AGE, DISPLAY A MESSAGE: THE AGE OF DIAGNOSIS CANNOT BE GREATER THAN CHILD'S CURRENT AGE. VERIFY INFORMATION AND CHANGE TO CORRECTED AGE, OR HIT "S" TO SUPPRESS AND ACCEPT THE AGE YOU ENTERED.

CHQ273

QUESTION TEXT:

In what years were they implanted?

ENTER YEAR FOR LEFT EAR.

PROBE: When was it implanted in the left ear ?

|_|_|_|
ENTER YEAR FOR LEFT EAR

ENTER NUMBER

Range
REFUSED
DON'T KNOW

2003 to 2011

PROGRAMMER INSTRUCTIONS:

RANGE CHECK: 2003-2011.

EDIT: YEAR ENTERED MUST BE EQUAL TO OR GREATER THAN CHILD'S BIRTHDATE AND LESS THAN OR EQUAL TO INTERVIEW DATE.

CHQ274

QUESTION TEXT:

[In what years were they implanted?]
ENTER YEAR FOR RIGHT EAR.
PROBE: When was it implanted in the right ear?
|_|_|_|_| (CHQ.277)
ENTER YEAR FOR RIGHT EAR

ENTER NUMBER

Range
REFUSED
DON'T KNOW

2003 to 2011

PROGRAMMER INSTRUCTIONS:

RANGE CHECK: 2003-2011.

EDIT: YEAR ENTERED MUST BE EQUAL TO OR GREATER THAN CHILD'S BIRTHDATE AND LESS THAN OR EQUAL TO INTERVIEW DATE.

CHQ275a

QUESTION TEXT:

How old was {CHILD} when they were implanted?
ENTER AGE IN MONTHS OR YEARS FOR LEFT EAR.
PROBE: How old was {CHILD} when it was implanted in the left ear?
ENTER UNIT

CODES

1	MONTHS	CHQ275b
2	YEARS	CHQ275c
	REFUSED	CHQ276a

CHQ275b**QUESTION TEXT:**

How old was {CHILD} when they were implanted?

ENTER AGE IN MONTHS FOR LEFT EAR.

PROBE: How old was {CHILD} when it was implanted in the left ear?

|_|_| (CHQ276a)

ENTER NUMBER FOR LEFT EAR

ENTER NUMBER

Range	0 to 36
REFUSED	CHQ276a
DON'T KNOW	CHQ275c

PROGRAMMER INSTRUCTIONS:

RANGE CHECK: 0-36 IF UNIT IS MONTHS.

CHQ275c**QUESTION TEXT:**

How old was {CHILD} when they were implanted?

ENTER AGE IN YEARS FOR LEFT EAR.

PROBE: How old was {CHILD} when it was implanted in the left ear?

|_|_|

ENTER NUMBER FOR LEFT EAR

ENTER NUMBER

Range	0 to 8
REFUSED	
DON'T KNOW	

PROGRAMMER INSTRUCTIONS:

RANGE CHECK: 0-CHILD'S CURRENT AGE IF UNIT IS YEARS. IF NUMBER OF YEARS IS GREATER THAN THE CHILD'S AGE, DISPLAY A MESSAGE: THE AGE OF DIAGNOSIS CANNOT BE GREATER THAN CHILD'S CURRENT AGE. VERIFY INFORMATION AND CHANGE TO CORRECTED AGE, OR HIT "S" TO SUPPRESS AND ACCEPT THE AGE YOU ENTERED.

CHQ276a

QUESTION TEXT:

[How old was {CHILD} when they were implanted?]
ENTER AGE IN MONTHS OR YEARS FOR RIGHT EAR.
PROBE: How old was {CHILD} when it was implanted in the right ear?
ENTER UNIT

CODES

1	MONTHS	CHQ276b
2	YEARS	CHQ276c
	REFUSED	CHQ277
	DON'T KNOW	CHQ277

CHQ276b

QUESTION TEXT:

[How old was {CHILD} when they were implanted?]
ENTER AGE IN MONTHS FOR RIGHT EAR.
PROBE: How old was {CHILD} when it was implanted in the right ear?
|_|_| (CHQ277)
ENTER NUMBER FOR RIGHT EAR

ENTER NUMBER

Range	0 to 36
REFUSED	CHQ277
DON'T KNOW	CHQ276c

PROGRAMMER INSTRUCTIONS:

RANGE CHECK: 0-36 IF UNIT IS MONTHS.

CHQ276c

QUESTION TEXT:

[How old was {CHILD} when they were implanted?]
ENTER AGE IN YEARS FOR RIGHT EAR.
PROBE: How old was {CHILD} when it was implanted in the right ear?

ENTER NUMBER FOR RIGHT EAR

ENTER NUMBER

Range o to 8
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

RANGE CHECK: 1-CHILD'S CURRENT AGE IF UNIT IS YEARS. IF NUMBER OF YEARS IS GREATER THAN THE CHILD'S AGE, DISPLAY A MESSAGE: THE AGE OF DIAGNOSIS CANNOT BE GREATER THAN CHILD'S CURRENT AGE. VERIFY INFORMATION AND CHANGE TO CORRECTED AGE, OR HIT "S" TO SUPPRESS AND ACCEPT THE AGE YOU ENTERED.

CHQ277

DISPLAY INSTRUCTIONS:

DISPLAY "when wearing {his/her} cochlear implant{s}", "hear and understand" AND "whispers" IN UNDERLINED TEXT.

QUESTION TEXT:

Please indicate whether the following statement describes {CHILD}'s hearing when wearing {his/her} cochlear implant(s).

{CHILD} can usually hear and understand what a person says without seeing his or her face if that person whispers to {him/her} from across a quiet room.

CODES

1	YES	CHQ285
2	NO	
	REFUSED	
	DON'T KNOW	

CHQ278

DISPLAY INSTRUCTIONS:

DISPLAY "when wearing {his/her} cochlear implant {s}", "hear and understand" AND "talks in a normal voice" IN UNDERLINED TEXT.

QUESTION TEXT:

[Please indicate whether the following statement describes {CHILD}'s hearing when wearing {his/her} cochlear implant(s).]

{CHILD} can usually hear and understand what a person says without seeing his or her face if that person talks in a normal voice to {him/her} from across a quiet room.

CODES

1	YES	CHQ285
---	-----	--------

2 NO
REFUSED
DON'T KNOW

CHQ279

DISPLAY INSTRUCTIONS:

DISPLAY "when wearing {his/her} cochlear implant {s}", "hear and understand" AND "shouts" IN UNDERLINED TEXT.

QUESTION TEXT:

[Please indicate whether the following statement describes {CHILD}'s hearing when wearing {his/her} cochlear implant(s).]

{CHILD} can usually hear and understand what a person says without seeing his or her face if that person shouts to {him/her} from across a quiet room.

CODES

1	YES	CHQ285
2	NO	
	REFUSED	
	DON'T KNOW	

CHQ280

DISPLAY INSTRUCTIONS:

DISPLAY "when wearing {his/her} cochlear implant {s}", "hear and understand" AND "speaks loudly" IN UNDERLINED TEXT.

QUESTION TEXT:

[Please indicate whether the following statement describes {CHILD}'s hearing when wearing {his/her} cochlear implant(s).]

{CHILD} can usually hear and understand what a person says without seeing his or her face if that person speaks loudly into {his/her} {better} ear.

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY "better" IF CHQ.221 = 1. ELSE, USE A NULL DISPLAY.

CHQ285

CARI: Sampling at 100%

QUESTION TEXT:

Now I want to ask you about {CHILD}'s vision. Without the use of eyeglasses or contact lenses, does {CHILD} have difficulty seeing objects in the distance or letters on paper?

CODES

1	YES	CHQ286
2	NO	CHQ290
	REFUSED	
	DON'T KNOW	

CHQ286

QUESTION TEXT:

Is {CHILD}'s difficulty with seeing objects in the distance, things up close, like letters on paper, or both?

CODES

1	SEEING THINGS UP CLOSE
2	SEEING THINGS IN THE DISTANCE
3	BOTH
	REFUSED
	DON'T KNOW

CHQ290

HELP AVAILABLE

QUESTION TEXT:

Has {CHILD}'s vision ever been evaluated by an eye care professional?

HELP TEXT: Eye Care Professional: This includes optometrists and ophthalmologists. Include a school nurse who gives a vision test, but do not include teachers or some other non-health professional, or a doctor who simply looks in the child's eyes.

CODES

1	YES	
2	NO	CHQ330
	REFUSED	CHQ330
	DON'T KNOW	CHQ330

Spring 2011 Parent Interview: ECLS-K: 2010-2011 :: CHQ

CHQ300

DISPLAY INSTRUCTIONS:

DISPLAY "vision-related" IN UNDERLINED TEXT.

QUESTION TEXT:

Did you obtain a diagnosis of a vision-related problem from an eye care professional?

CODES

1	YES	
2	NO	CHQ330
	REFUSED	CHQ330
	DON'T KNOW	CHQ330

CHQ301

QUESTION TEXT:

What was the diagnosis?

PROBE: Anything else ?

CODE ALL THAT APPLY.

CODES

Code All That Apply

1	NEARSIGHTEDNESS (MYOPIA)
2	FARSIGHTED (HYPEROPIA)
3	COLOR BLINDNESS OR DEFICIENCY
4	ASTIGMATISM
5	CROSSED OR WANDERING EYE (STRABISMUS)
6	AMBLYOPIA OR "LAZY EYE"
7	RETINOPATHY
8	BLINDNESS
91	OTHER (SPECIFY) _____
	REFUSED
	DON'T KNOW

Box 17

IF CHQ.301 = 91, CONTINUE WITH CHQ.301OS. OTHERWISE, GO TO CHQ305.

CHQ301OS

QUESTION TEXT:

[What was the diagnosis?]

SPECIFY DIAGNOSIS.

ENTER TEXT

Length	80
REFUSED	
DON'T KNOW	

CHQ305a

QUESTION TEXT:

How old was {CHILD} when the first diagnosis of a problem was made?

ENTER AGE IN MONTHS OR YEARS.

ENTER UNIT

CODES

1	MONTHS	CHQ305b
2	YEARS	CHQ305c
	REFUSED	CHQ311
	DON'T KNOW	CHQ310a

CHQ305b

QUESTION TEXT:

How old was {CHILD} when the first diagnosis of a problem was made?

ENTER AGE IN MONTHS

|_|_| (CHQ311)
ENTER MONTHS

ENTER NUMBER

Range	0 to 36
REFUSED	CHQ311
DON'T KNOW	CHQ305c

PROGRAMMER INSTRUCTIONS:

RANGE CHECK: 0-36 IF UNIT IS MONTHS.

CHQ305c

QUESTION TEXT:

How old was {CHILD} when the first diagnosis of a problem was made?

ENTER AGE IN YEARS.

|_|_| (CHQ311)
ENTER YEARS

ENTER NUMBER

Range	0 to 8
REFUSED	CHQ311
DON'T KNOW	CHQ310a

PROGRAMMER INSTRUCTIONS:

RANGE CHECK: 0-CHILD'S CURRENT AGE IF UNIT IS YEARS. IF NUMBER OF YEARS IS GREATER THAN THE CHILD'S AGE, DISPLAY A MESSAGE: THE AGE OF DIAGNOSIS CANNOT BE GREATER THAN CHILD'S CURRENT AGE. VERIFY INFORMATION AND CHANGE TO CORRECTED AGE, OR HIT "S" TO SUPPRESS AND ACCEPT THE AGE YOU ENTERED.

CHQ310a

QUESTION TEXT:

What was the month and year the diagnosis was made?

IF R DOESN'T KNOW MONTH, ASK: Do you remember the year?

IF THERE WAS MORE THAN ONE DIAGNOSIS, ASK FOR THE EARLIEST.

|_|_|
ENTER MONTH

ENTER NUMBER

Range	1 to 12
REFUSED	CHQ311
DON'T KNOW	CHQ310b

PROGRAMMER INSTRUCTIONS:

RANGE CHECK: 1-12 FOR MONTH.

EDIT: YEAR ENTERED MUST BE EQUAL TO OR GREATER THAN CHILD'S BIRTHDATE AND LESS THAN OR EQUAL TO INTERVIEW DATE.

CHQ310b

QUESTION TEXT:

[What was the month and year the diagnosis was made?]

IF R DOESN'T KNOW MONTH, ASK: Do you remember the year?

IF THERE WAS MORE THAN ONE DIAGNOSIS, ASK FOR THE EARLIEST.

____|____|____|____|
ENTER YEAR

ENTER NUMBER

Range	2003 to 2011
REFUSED	
DON'T KNOW	

PROGRAMMER INSTRUCTIONS:

RANGE CHECK: 2003-2011 FOR YEAR.

EDIT: YEAR ENTERED MUST BE EQUAL TO OR GREATER THAN CHILD'S BIRTHDATE AND LESS THAN OR EQUAL TO INTERVIEW DATE. IF THE YEAR ENTERED IS 2011, THE MONTH CANNOT BE GREATER THAN THE INTERVIEW DATE MONTH. IF EDIT IS VIOLATED, DISPLAY MESSAGE: MONTH AND YEAR MUST BE BETWEEN CHILD'S BIRTHDATE AND THE CURRENT DATE. VERIFY INFORMATION AND CHANGE MONTH AND/OR YEAR, OR HIT "S" TO SUPPRESS AND ACCEPT THE INFORMATION YOU ENTERED.

CHQ311

QUESTION TEXT:

Has {CHILD} been prescribed glasses or contact lenses to improve {his/her} vision?

CODES

1	YES	
2	NO	CHQ330
	REFUSED	CHQ330
	DON'T KNOW	CHQ330

CHQ312

QUESTION TEXT:

How often does {CHILD} wear glasses or contact lenses?

CODES

1	All of the time,	CHQ314
2	Most of the time,	CHQ314
3	Sometimes,	CHQ314
4	Rarely, or	CHQ314
5	Never?	CHQ313
6	CHILD DOES NOT HAVE GLASSES OR CONTACTS	CHQ330
	REFUSED	CHQ330
	DON'T KNOW	CHQ330

CHQ313

QUESTION TEXT:

Does {CHILD} have glasses or contact lenses?

CODES

1	YES	
2	NO	CHQ330
	REFUSED	CHQ330
	DON'T KNOW	CHQ330

CHQ314

QUESTION TEXT:

Do {CHILD}'s glasses or contacts help {him/her} see things up close, see things in the distance, or both?

CODES

1	SEE THINGS UP CLOSE
2	SEE THINGS IN THE DISTANCE

3 BOTH
REFUSED
DON'T KNOW

CHQ330

QUESTION TEXT:

Would you say {CHILD}'s health is ...

CODES

1 Excellent,
2 Very good,
3 Good,
4 Fair, or
5 Poor?
REFUSED
DON'T KNOW

Box 18

IF CHILD DOES NOT HAVE ANY DISABILITIES AND HIS OR HER HEALTH IS GOOD TO EXCELLENT, THAT IS:
CHQ.095=1, 2, 8, 9 (INDEPENDENCE)
AND
CHQ.100=1, 2, 8, 9 (ATTENTION)
AND
CHQ.105=1, 2, 8, 9 (THINK/LEARN/SOLVE)
AND
CHQ.106=1, 2, 8, 9 (COORDINATION)
AND
CHQ.107=1, 2, 8, 9 (BEHAVIOR WITH OTHER CHILDREN)
AND
CHQ.108=1, 2, 8, 9 (BEHAVIOR WITH ADULTS)
AND
CHQ.109=1, 2, 3, 8, 9 (HYPERACTIVE)
AND
CHQ.110=2, 8, 9 (EMOTIONAL/PSYCHOLOGICAL DIFICULTIES)
AND
CHQ.200=1, 2, 8, 9 (COMMUNICATION)
AND
CHQ205=2, 8, 9 (COMMUNICATION PROBLEMS WHEN YOUNGER)
AND
CHQ.216=1, 2, 8, 9 (HEARING)
AND

CHQ.285=2, 8, 9 (VISION)
AND
CHQ.330=1, 2, 3, 8, 9 (HEALTH),
GO TO BOX 22.
OTHERWISE, CONTINUE WITH CHQ.340.

CHQ340**HELP AVAILABLE****QUESTION TEXT:**

During this school year, has {CHILD} received therapy services or taken part in a program for children with disabilities?

HELP TEXT: Children with disabilities include children with developmental delays, communication impairments, or special health care needs.

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

CHQ341**HELP AVAILABLE****QUESTION TEXT:**

Prior to this school year, did {CHILD} ever receive therapy services or take part in a program for children with disabilities?

HELP TEXT: Children with disabilities include children with developmental delays, communication impairments, or special health care needs.

CODES

1	YES	
2	NO	Box 22
	REFUSED	Box 22
	DON'T KNOW	Box 22

CHQ345a**HELP AVAILABLE**

DISPLAY INSTRUCTIONS:

BOLD "Speech or language therapy" IN HELP TEXT ONLY

QUESTION TEXT:

I'm going to read a list of services. For each service, please tell me if {CHILD} or your family ever received this service before this school year to help with {CHILD}'s special needs.

Speech or language therapy?

HELP TEXT:

Speech or language therapy: Therapy involving the evaluation or treatment of the student's speech or language abilities. Impairments to speech can include one or more of the following: articulation errors (includes omitting words, substituting words, or distorting sounds), inappropriate voice (including pitch, loudness, or voice quality), or abnormal fluency (including abnormal rate of speaking, speech interruptions, repetitions of sounds, words, phrases or sentences). Impairments to language can include improper use of phonemes, syntax, or semantics. Language impairments can also stem from improper practical use of language. Therapy includes special techniques to overcome speech or language limitations. Therapy should be provided only by a teacher of the speech or language impaired who is certified by the state, or by a certified Speech and Language Therapist/Pathologist.

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

CHQ345b

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

BOLD "Occupational theory" IN HELP TEXT ONLY

QUESTION TEXT:

[I'm going to read a list of services. For each service, please tell me if {CHILD} or your family ever received this service before this school year to help with {CHILD}'s special needs.]

Occupational therapy?

HELP TEXT

Occupational therapy: Therapy involving the evaluation or treatment of the student's level of independence in daily living activities. The goal of occupational therapy is to promote maximum independence in daily living. Therapy can include the use of work, play, or self-care activities to improve functional ability, promote health, prevent injury or further disability. Therapy should be provided only by a therapist who has been certified by the American Occupational Therapy Association or by an occupational therapy assistant who provides therapy under the supervision of a certified occupational therapist.

CODES

- 1 YES
- 2 NO

REFUSED
DON'T KNOW

CHQ345c

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

BOLD "Physical therapy" IN HELP TEXT ONLY

QUESTION TEXT:

[I'm going to read a list of services. For each service, please tell me if {CHILD} or your family ever received this service before this school year to help with {CHILD}'s special needs.]

Physical therapy?

HELP TEXT:

Physical therapy: Therapy involving the evaluation or treatment of health problems resulting from injury or disease. It is also sometimes called physiotherapy. Physical therapists assess joint motion, muscle strength and endurance, how well the heart and lungs work, and how well children can do activities required for daily living. Treatment includes therapeutic exercise, cardiovascular endurance training, and training in activities of daily living, as well as the use of massage, light, cold, heat, electricity, and mechanical devices to treat physical disorders. Physical therapy does not include the use of X-Ray technology. Therapy should be provided only by a therapist who has been state-certified to provide such services.

CODES

- | | |
|---|------------|
| 1 | YES |
| 2 | NO |
| | REFUSED |
| | DON'T KNOW |

CHQ345d

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

BOLD "Vision services" IN HELP TEXT ONLY

QUESTION TEXT:

[I'm going to read a list of services. For each service, please tell me if {CHILD} or your family ever received this service before this school year to help with {CHILD}'s special needs.]

Vision services?

HELP AVAILABLE

Vision services: Therapy combines health and education professions to improve the student's independence in daily living and access to educational materials. Health professionals include ophthalmologists and optometrists. Ophthalmologists are medical doctors who specialize in medical and surgical care of the eyes and visual system. Optometrists are health service providers who evaluate vision conditions such as nearsightedness, farsightedness, astigmatism, and presbyopia. They test the student's ability to focus and

coordinate the eyes, judge depth, and see colors accurately. They prescribe eyeglasses, contact lenses, low vision aids, and vision therapy. Teachers of the visually impaired are state-certified to teach students who are visually impaired or blind.

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

CHQ345e

QUESTION TEXT:

[I'm going to read a list of services. For each service, please tell me if {CHILD} or your family ever received this service before this school year to help with {CHILD}'s special needs.]

Hearing services ?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

CHQ345f

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

BOLD "Social work services" IN HELP TEXT ONLY

QUESTION TEXT:

[I'm going to read a list of services. For each service, please tell me if {CHILD} or your family ever received this service before this school year to help with {CHILD}'s special needs.]

Social work services?

HELP TEXT:

Social work services: Services that provide support to students and their families to meet individual human needs. Particular attention is devoted to the needs and empowerment of students and their families who are disadvantaged, vulnerable, or at risk. Social workers strive to focus on the well being of the student and his/her family in the context of their school and community. Social workers attend to the environmental forces that create, contribute to, and address problems of daily living. Services should be provided only by a social worker who has been certified by the state to provide such services.

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

CHQ345g

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

BOLD "Psychological services" IN HELP TEXT ONLY

QUESTION TEXT:

[I'm going to read a list of services. For each service, please tell me if {CHILD} or your family ever received this service before this school year to help with {CHILD}'s special needs.]

Psychological services?

HELP TEXT:

Psychological services: Services that involve the assessment of academic skills and learning aptitudes, personality and emotional development, social skills and school climates, and eligibility for special education. Treatment involves one-on-one interaction with students or parents to resolve personal conflicts and problems in learning and adjustment, psychological counseling for students and parents, social skills training, and assistance through separation and loss. Within school systems, psychological services are typically provided by certified school psychologists. However, assessment and treatment can be extended to the health community and include services provided by clinical psychologists, psychiatric social workers, or psychiatrists (who are medical doctors).

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

CHQ345h

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

BOLD "Home visits" IN HELP TEXT ONLY

QUESTION TEXT:

[I'm going to read a list of services. For each service, please tell me if {CHILD} or your family ever received this service before this school year to help with {CHILD}'s special needs.]

Home visits?

HELP TEXT:

Home visits: Refer to formal visits to the homes of students by a certified health or education professional. Home visits can involve therapy or education services. Home visits are typically made by teachers of preschool or kindergarten age students with disabilities, occupational or physical therapists, school social workers, school psychologists, or regular classroom teachers.

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

CHQ345i

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

BOLD "Parent support or training" IN HELP TEXT ONLY

QUESTION TEXT:

[I'm going to read a list of services. For each service, please tell me if {CHILD} or your family ever received this service before this school year to help with {CHILD}'s special needs.]

Parent support or training?

HELP TEXT:

Parent support or training: Refer to assistance provided by the schools or other organizations to parents who have students with unique educational needs, such as the student with a disability. Parent support ranges from the provision of information or referral to assistance in accessing community services for their child. Parent training can involve learning to use special instructional techniques, assistive devices (such as low vision aids) or other equipment needed by their child, or general understanding of the unique educational needs of their child.

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

CHQ345j

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

BOLD "Special class with other children some or all of whom also had special needs" IN HELP TEXT ONLY

QUESTION TEXT:

[I'm going to read a list of services. For each service, please tell me if {CHILD} or your family ever received this service before this school year to help with {CHILD}'s special needs.]

Special class with other children some or all of whom also had special needs?

HELP TEXT:

Special class with other children some or all of whom also had special needs: Refers to a classroom with a smaller number of students than found in the regular classroom. Students in special classes have unique learning needs often resulting from a disability or limited English proficiency. All students in such classrooms require individual attention to their educational needs.

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

CHQ345k

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

BOLD "Private tutoring or schooling for learning problems" IN HELP TEXT ONLY

QUESTION TEXT:

[I'm going to read a list of services. For each service, please tell me if {CHILD} or your family ever received this service before this school year to help with {CHILD}'s special needs.]

Private tutoring or schooling for learning problems?

HELP TEXT:

Private tutoring or schooling for learning problems: Refer to education or training associated with a specific learning problem or need. The term "private" suggests either that there is a cost associated with the service or education is not provided by the public school system. Individuals, organizations, or businesses in school, home, or community settings can provide private tutoring designed to improve the student's educational achievement, typically in math or reading. Special schools are available to students with particular needs such as emotional problems, learning disabilities, blindness, or deafness. Such schools charge parents for their child's education. However, the education of students with disabilities may be subsidized by their home school district if the district cannot provide a similar appropriate education.

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

Box 19

IF CHILD DOES NOT HAVE DIFFICULTY SEEING (CHQ.285=2, 8, 9) , GO TO BOX 20. OTHERWISE, CONTINUE WITH CHQ.345l.

CHQ345l**HELP AVAILABLE****DISPLAY INSTRUCTIONS:**

BOLD "Instruction in Braille" IN HELP TEXT ONLY

QUESTION TEXT:

[I'm going to read a list of services. For each service, please tell me if {CHILD} or your family ever received this service before this school year to help with {CHILD}'s special needs.]

Instruction in Braille

HELP TEXT:

Instruction in Braille: Braille is a touch system of reading using as the basic graphic symbol a cell composed of six dots, two dots wide and three dots high. The dots are "read" by running the hand over the paper rather than looking at it. Sixty-three possible dot combinations of the cell form the basis of the Braille code, and numerous rules govern the usage of the code. Learners who are totally blind, near-blind, and with profound low vision need mastery of reading Braille since it is likely their only means of gaining access to educational information in print form. Reading in Braille is a system of reading that differs in many significant ways from reading in print. Teachers receive special training to teach Braille.

CODES

- | | |
|---|------------|
| 1 | YES |
| 2 | NO |
| | REFUSED |
| | DON'T KNOW |

Box 20

IF CHILD DOES NOT HAVE DIFFICULTY HEARING (CHQ.216=1, 2, 8, 9), GO TO CHQ.345n. OTHERWISE, CONTINUE WITH CHQ.345m.

CHQ345m**HELP AVAILABLE**

DISPLAY INSTRUCTIONS:

BOLD "Instruction in sign language, Cued Speech, ASL, total communication" IN HELP TEXT ONLY

QUESTION TEXT:

[I'm going to read a list of services. For each service, please tell me if {CHILD} or your family ever received this service before this school year to help with {CHILD}'s special needs.]

Instruction in sign language, Cued Speech, ASL, total communication

HELP TEXT:

Instruction in sign language, Cued speech, ASL, TOCO: Refers to various manual methods that replace the use of speech only as a means of communication. Manual communication is a system of teaching individuals with hearing impairments that makes use of sign language and fingerspelling. Sign language is a general term for using the hands to form words and phrases. There are many forms of sign language, including American Sign Language (ASL), Signed English, Sign Exact English (SEE), etc. Cued Speech uses hand signals to symbolize sounds. TOCO refers to total communication. TOCO employs a combination of oral and manual approaches to communication and includes speech, sign language, lip-reading, natural gestures, fingerspelling, residual hearing, reading and writing.

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

CHQ345n

QUESTION TEXT:

[I'm going to read a list of services. For each service, please tell me if {CHILD} or your family ever received this service before this school year to help with {CHILD}'s special needs.]

Any other service? (SPECIFY)

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

Box 21

IF CHQ.345n = 1, GO TO CHQ.345nOS. ELSE, GO TO CHQ.375.

CHQ345nOS

QUESTION TEXT:

[I'm going to read a list of services. For each service, please tell me if {CHILD} or your family ever received this service before this school year to help with {CHILD}'s special needs.]

SPECIFY OTHER SERVICE

ENTER TEXT

Length

75

CHQ375a

QUESTION TEXT:

How old was {CHILD} when {this service/the earliest of these services} began?

ENTER UNIT

CODES

1	MONTH	CHQ375b
2	YEAR	CHQ375c
	REFUSED	CHQ385
	DON'T KNOW	CHQ380a

PROGRAMMER INSTRUCTIONS:

DISPLAY "this service" IF ONLY ONE ITEM CODED 1 (YES) FOR CHQ.345/LETTERS A-N). OTHERWISE, DISPLAY "the earliest of these services."

DISPLAY "this service" IF ONLY ONE ITEM CODED 1 (YES) FOR CHQ.345/LETTERS A-N). OTHERWISE, DISPLAY "the earliest of these services."

CHQ375b

QUESTION TEXT:

[How old was {CHILD} when {this service/the earliest of these services} began?]

ENTER MONTHS

|_|_| (CHQ.385)
ENTER MONTHS

ENTER NUMBER

Range	0 to 36
REFUSED	CHQ385
DON'T KNOW	CHQ380a

PROGRAMMER INSTRUCTIONS:

DISPLAY "this service" IF ONLY ONE ITEM CODED 1 (YES) FOR CHQ.345/LETTERS A-N). OTHERWISE, DISPLAY "the earliest of these services."

RANGE CHECK: 0-36 IF UNIT IS MONTHS

CHQ375c

QUESTION TEXT:

[How old was {CHILD} when {this service/the earliest of these services} began?]

ENTER YEARS.

|_|_|
ENTER YEARS

ENTER NUMBER

Range	1 to 8
REFUSED	CHQ385
DON'T KNOW	CHQ380a

PROGRAMMER INSTRUCTIONS:

DISPLAY "this service" IF ONLY ONE ITEM CODED 1 (YES) FOR CHQ.345/LETTERS A-N). OTHERWISE, DISPLAY "the earliest of these services."

RANGE CHECK: 1-CHILD'S CURRENT AGE IF UNIT IS YEARS. IF NUMBER OF YEARS IS GREATER THAN THE CHILD'S AGE, DISPLAY A MESSAGE: THE AGE OF DIAGNOSIS CANNOT BE GREATER THAN CHILD'S CURRENT AGE. VERIFY INFORMATION AND CHANGE TO CORRECTED AGE, OR HIT "S" TO SUPPRESS AND ACCEPT THE AGE YOU ENTERED.

CHQ380a

QUESTION TEXT:

What is the month and year when {{CHILD}} first received {{NAME OF SINGLE SERVICE}}/{{this service}}/{{the first of these services began}}?

IF R DOESN'T KNOW MONTH, ASK: Do you remember the year?

|_|_|
ENTER MONTH

ENTER NUMBER

Range	1 to 12
REFUSED	CHQ385
DON'T KNOW	CHQ380b

PROGRAMMER INSTRUCTIONS:

DISPLAY "{{CHILD}} first received {NAME OF SINGLE SERVICE}" IF ONLY ONE ITEM CODED 1 (YES) FOR CHQ.345/LETTERS A-N). FOR "{NAME OF SINGLE SERVICE}" DISPLAY THE NAME OF THE SERVICE CODED AT CHQ.345A-N. ELSE, IF CHQ.340 = 1 AND EVERY ITEM AT CHQ.345/ LETTERS A-N = 2, 8, OR 9. DISPLAY "{{CHILD} first received this service}." OTHERWISE, DISPLAY "the first of these services began."

RANGE CHECK: 1-12 FOR MONTH

EDIT: YEAR ENTERED MUST BE EQUAL TO OR GREATER THAN CHILD'S BIRTHDATE IN INQ.170 (OR YEAR OF BIRTH ESTIMATED FROM CHILD'S AGE IN INQ.175/INQ.176) AND LESS THAN OR EQUAL TO INTERVIEW DATE.

CHQ380b

QUESTION TEXT:

[What is the month and year when {{CHILD}} first received {{NAME OF SINGLE SERVICE}}/this service}/the first of these services began}]?

IF R DOESN'T KNOW MONTH, ASK: Do you remember the year?]

|_|_|_|_|
ENTER YEAR

ENTER NUMBER

Range	2003 to 2011
REFUSED	
DON'T KNOW	

PROGRAMMER INSTRUCTIONS:

DISPLAY "{{CHILD}} first received {NAME OF SINGLE SERVICE}" IF ONLY ONE ITEM CODED 1 (YES) FOR CHQ.345/LETTERS A-N). FOR "{NAME OF SINGLE SERVICE}" DISPLAY THE NAME OF THE SERVICE CODED AT CHQ.345A-N. ELSE, IF CHQ.340 = 1 AND EVERY ITEM AT CHQ.345/ LETTERS A-N = 2, 8, OR 9. DISPLAY "{{CHILD} first received this service}." OTHERWISE, DISPLAY "the first of these services began."

RANGE CHECK: 2003-2011 FOR YEAR.

EDIT: YEAR ENTERED MUST BE EQUAL TO OR GREATER THAN CHILD'S BIRTHDATE IN INQ.170 (OR YEAR OF BIRTH ESTIMATED FROM CHILD'S AGE IN INQ.175/INQ.176) AND LESS THAN OR EQUAL TO INTERVIEW DATE. IF THE YEAR ENTERED IS 2011, THE MONTH CANNOT BE GREATER THAN THE INTERVIEW DATE MONTH. IF EDIT IS VIOLATED, DISPLAY MESSAGE: MONTH AND YEAR MUST BE BETWEEN CHILD'S BIRTHDATE AND THE CURRENT DATE. VERIFY INFORMATION AND CHANGE MONTH AND/OR YEAR, OR HIT "S" TO SUPPRESS AND ACCEPT THE INFORMATION YOU ENTERED.

CHQ385

QUESTION TEXT:

Is {CHILD} still receiving {this service/any of these services}?

CODES

1	YES	CHQ420
2	NO	
	REFUSED	CHQ420
	DON'T KNOW	CHQ420

PROGRAMMER INSTRUCTIONS:

DISPLAY "this service" IF ONLY ONE ITEM CODED 1 (YES) FOR CHQ.345/LETTERS A-N) OR IF CHQ.340 = 1 AND EVERY ITEM AT CHQ.345 = 2, 8, OR 9. OTHERWISE, DISPLAY "any of these services."

CHQ390a

QUESTION TEXT:

What is the month and year when {{CHILD}} last received {NAME OF SINGLE SERVICE}/the last of these services was received? :

|_|_|
ENTER MONTH

ENTER NUMBER

Range 1 to 12
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY "{CHILD} last received {NAME OF SINGLE SERVICE}" IF ONLY ONE ITEM CODED 1 (YES) FOR CHQ.345/LETTERS A-N) OR IF CHQ.340 = 1 AND EVERY ITEM AT CHQ.345 = 2, 8, OR 9. OTHERWISE, DISPLAY "the last of these services was received."

DISPLAY "this service" FOR {NAME OF SINGLE SERVICE} IF CHQ.340 = 1 AND EVERY ITEM AT CHQ.345 = 2, 8, OR 9. OTHERWISE, DISPLAY THE NAME OF THE SERVICE CODED AT CHQ.345.

RANGE CHECK: 1-12 FOR MONTH, 2003-2011 FOR YEAR.

EDIT: YEAR ENTERED MUST BE EQUAL TO OR GREATER THAN CHILD'S BIRTHDATE AND LESS THAN OR EQUAL TO INTERVIEW DATE.

CHQ390b

QUESTION TEXT:

What is the month and year when {{CHILD}} last received {NAME OF SINGLE SERVICE}/the last of these services was received? :

|_|_|_|_|
ENTER YEAR

ENTER NUMBER

Range

2003 to 2011

REFUSED

DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY "{CHILD} last received {NAME OF SINGLE SERVICE}" IF ONLY ONE ITEM CODED 1 (YES) FOR CHQ.345/LETTERS A-N) OR IF CHQ.340 = 1 AND EVERY ITEM AT CHQ.345 = 2, 8, OR 9. OTHERWISE, DISPLAY "the last of these services was received."

DISPLAY "this service" FOR {NAME OF SINGLE SERVICE} IF CHQ.340 = 1 AND EVERY ITEM AT CHQ.345 = 2, 8, OR 9. OTHERWISE, DISPLAY THE NAME OF THE SERVICE CODED AT CHQ.345.

RANGE CHECK: 2003-2011 FOR YEAR.

EDIT: YEAR ENTERED MUST BE EQUAL TO OR GREATER THAN CHILD'S BIRTHDATE AND LESS THAN OR EQUAL TO INTERVIEW DATE. IF THE YEAR ENTERED IS 2011, THE MONTH CANNOT BE GREATER THAN THE INTERVIEW DATE MONTH. IF EDIT IS VIOLATED, DISPLAY MESSAGE: MONTH AND YEAR MUST BE BETWEEN CHILD'S BIRTHDATE AND THE CURRENT DATE. VERIFY INFORMATION AND CHANGE MONTH AND/OR YEAR, OR HIT "S" TO SUPPRESS AND ACCEPT THE INFORMATION YOU ENTERED.

CHQ420

DISPLAY INSTRUCTIONS:

DISPLAY 'this school year' IN UNDERLINED TEXT.

QUESTION TEXT:

During this school year, did {CHILD} receive any services for children with special needs such as speech or occupational therapy or did (he/she) participate in a special education program?

CODES

1	YES	CHQ430
2	NO	BOX 22
	REFUSED	BOX 22
	DON'T KNOW	BOX 22

CHQ430

DISPLAY INSTRUCTIONS:

DISPLAY 'this school year' IN UNDERLINED TEXT.

QUESTION TEXT:

Overall, how satisfied are you with the progress {CHILD} has made in the special services or special education program this school year? Are you...

CODES

1	Completely satisfied,
2	Very satisfied,

- 3 Fairly satisfied,
 - 4 Somewhat dissatisfied, or
 - 5 Very dissatisfied?
- REFUSED
DON'T KNOW

Box 22

GO TO SECTION PPQ (PARENT'S PSYCHOLOGICAL WELL-BEING AND HEALTH).

Spring 2011 Parent Interview: ECLS-K: 2010-2011

Section PPQ [Parent's Psychological Well-Being and Health]

Sequence: 9

BOX 1

IF PERSON FLAGGED AS R SCORES '1' OR '2' AT FSQ.130
OR IF NO HOUSEHOLD MEMBER SCORES '1' OR '2' AT FSQ.130,
CONTINUE WITH PPQ.100. OTHERWISE, GO TO PPQ.261.

PPQ100

QUESTION TEXT:

I'm going to read some statements that may relate to how you have felt about yourself and your life during the past week. For each statement I read, please indicate how often in the past week you felt or behaved this way. There are no right or wrong answers.

How often during the past week have you felt that you were bothered by things that don't usually bother you? Would you say never, some of the time, a moderate amount of the time, or most of the time?

CODES

- 1 NEVER
 - 2 SOME OF THE TIME
 - 3 A MODERATE AMOUNT OF THE TIME
 - 4 MOST OF THE TIME
- REFUSED
DON'T KNOW

PPQ110

QUESTION TEXT:

How often during the past week have you felt that you did not feel like eating, that your appetite was poor?

☒[PROBE: Would you say never, some of the time, a moderate amount of the time, or most of the time?]

CODES

- 1 NEVER
 - 2 SOME OF THE TIME
 - 3 A MODERATE AMOUNT OF THE TIME
 - 4 MOST OF THE TIME
- REFUSED
DON'T KNOW

PPQ120

QUESTION TEXT:

How often during the past week have you felt that you could not shake off the blues even with help from your family or friends?

☒[PROBE: Would you say never, some of the time, a moderate amount of the time, or most of the time?]

CODES

- 1 NEVER
 - 2 SOME OF THE TIME
 - 3 A MODERATE AMOUNT OF THE TIME
 - 4 MOST OF THE TIME
- REFUSED
DON'T KNOW

PPQ130

QUESTION TEXT:

How often during the past week have you felt that you had trouble keeping your mind on what you were doing?

☒[PROBE: Would you say never, some of the time, a moderate amount of the time, or most of the time?]

CODES

- 1 NEVER
 - 2 SOME OF THE TIME
 - 3 A MODERATE AMOUNT OF THE TIME
 - 4 MOST OF THE TIME
- REFUSED
DON'T KNOW

PPQ140

QUESTION TEXT:

How often during the past week have you felt depressed?

[PROBE: Would you say never, some of the time, a moderate amount of the time, or most of the time?]

CODES

- 1 NEVER
- 2 SOME OF THE TIME
- 3 A MODERATE AMOUNT OF THE TIME
- 4 MOST OF THE TIME
- REFUSED
- DON'T KNOW

PPQ150

QUESTION TEXT:

How often during the past week have you felt that everything you did was an effort?

[PROBE: Would you say never, some of the time, a moderate amount of the time, or most of the time?]

CODES

- 1 NEVER
- 2 SOME OF THE TIME
- 3 A MODERATE AMOUNT OF THE TIME
- 4 MOST OF THE TIME
- REFUSED
- DON'T KNOW

PPQ160

QUESTION TEXT:

How often during the past week have you felt fearful?

[PROBE: Would you say never, some of the time, a moderate amount of the time, or most of the time?]

CODES

- 1 NEVER
 - 2 SOME OF THE TIME
 - 3 A MODERATE AMOUNT OF THE TIME
 - 4 MOST OF THE TIME
- REFUSED
DON'T KNOW

PPQ170

QUESTION TEXT:

How often during the past week have you felt that your sleep was restless?

[PROBE: Would you say never, some of the time, a moderate amount of the time, or most of the time?]

CODES

- 1 NEVER
 - 2 SOME OF THE TIME
 - 3 A MODERATE AMOUNT OF THE TIME
 - 4 MOST OF THE TIME
- REFUSED
DON'T KNOW

PPQ180

QUESTION TEXT:

How often during the past week have you felt that you talked less than usual?

[PROBE: Would you say never, some of the time, a moderate amount of the time, or most of the time?]

CODES

- 1 NEVER
 - 2 SOME OF THE TIME
 - 3 A MODERATE AMOUNT OF THE TIME
 - 4 MOST OF THE TIME
- REFUSED
DON'T KNOW

PPQ190

QUESTION TEXT:

How often during the past week have you felt lonely?

[PROBE: Would you say never, some of the time, a moderate amount of the time, or most of the time?]

CODES

- | | |
|---|-------------------------------|
| 1 | NEVER |
| 2 | SOME OF THE TIME |
| 3 | A MODERATE AMOUNT OF THE TIME |
| 4 | MOST OF THE TIME |
| | REFUSED |
| | DON'T KNOW |

PPQ200

QUESTION TEXT:

How often during the past week have you felt sad?

[PROBE: Would you say never, some of the time, a moderate amount of the time, or most of the time?]

CODES

- | | |
|---|-------------------------------|
| 1 | NEVER |
| 2 | SOME OF THE TIME |
| 3 | A MODERATE AMOUNT OF THE TIME |
| 4 | MOST OF THE TIME |
| | REFUSED |
| | DON'T KNOW |

PPQ210

QUESTION TEXT:

How often during the past week have you felt that you could not get going?

[PROBE: Would you say never, some of the time, a moderate amount of the time, or most of the time?]

CODES

- 1 NEVER
- 2 SOME OF THE TIME
- 3 A MODERATE AMOUNT OF THE TIME
- 4 MOST OF THE TIME
- REFUSED
- DON'T KNOW

PPQ220

QUESTION TEXT:

Now, I would like to ask you about your health. In general, would you say that your health is...

CODES

- 1 Excellent,
- 2 Very good,
- 3 Good,
- 4 Fair, or
- 5 Poor?
- REFUSED
- DON'T KNOW

PPQ230

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

BOLD 'Impairment/health problem'

QUESTION TEXT:

Does any impairment or health problem now keep you from working at a job or business?

HELP TEXT:

Impairment/health problem: an ongoing health problem that limits one's strength or mental alertness. Examples might be a heart condition, severe asthma, sickle cell anemia, leukemia, or autism.

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

PPQ240

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

BOLD 'Impairment/health problem" IN HELP TEXT ONLY

QUESTION TEXT:

Are you limited in the kind or amount of work you can do because of any impairment or health problem?

HELP TEXT:

Impairment/health problem: An ongoing health problem that limits one's strength or mental alertness. Examples might be a heart condition, severe asthma, sickle cell anemia, leukemia, or autism.

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

PPQ250

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

BOLD 'Emotional problems" IN HELP TEXT ONLY

QUESTION TEXT:

During the past 12 months, have you felt or has anyone suggested that you needed professional help for any emotional problem or for drug or alcohol use?

HELP TEXT:

Emotional problems: Conditions in which an individual shows one or more of the following characteristics to a significant and noticeable degree: (1) an inability to get along with others; (2) display of inappropriate feelings or actions in normal circumstances; (3) depression; (4) unreasonable fears. This term includes those who are schizophrenic.

CODES

1	YES	PPQ260
2	NO	PPQ261
	REFUSED	PPQ261
	DON'T KNOW	PPQ261

PPQ260

QUESTION TEXT:

Did you get help for your problem?

CODES

- 1 YES
- 2 NO
REFUSED
DON'T KNOW

PPQ261a

QUESTION TEXT:

About how tall are you without shoes?

ENTER FEET

FEET

ENTER NUMBER

- Range 4 to 7
- REFUSED PPQ262
- DON'T KNOW PPQ262

PROGRAMMER INSTRUCTIONS:

RANGE FOR FEET: 4 TO 7

PPQ261b

QUESTION TEXT:

About how tall are you without shoes?

ENTER INCHES

INCHES

ENTER NUMBER

- Range 0 to 11
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

RANGE FOR INCHES: 0-11

PPQ262

CARI: Sampling at 100%

QUESTION TEXT:

About how much do you weigh without shoes?

ENTER POUNDS

|_|_|_|_|
POUNDS

ENTER NUMBER

Range	80 to 600
Soft Range	95 to 400
REFUSED	
DON'T KNOW	

PROGRAMMER INSTRUCTIONS:

HARD RANGE: 80-600

SOFT RANGE: 95-400

BOX 2

ASK PPQ.270 ONLY IF BIOLOGICAL FATHER IS NOW LIVING WITH CHILD (FSQ.150=1 FOR AT LEAST ONE HOUSEHOLD MEMBER) AND R IS NOT CHILD'S BIOLOGICAL FATHER. ELSE GO TO BOX 3.

PPQ270

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

BOLD 'Emotional problems' IN HELP TEXT ONLY

QUESTION TEXT:

During the past 12 months, has {CHILD}'s biological father felt or has anyone suggested that he needed professional help for any emotional problem or for drug or alcohol use?

HELP TEXT:

Emotional problems: Conditions in which an individual shows one or more of the following characteristics to a significant and noticeable degree: (1) an inability to get along with others; (2) display of inappropriate feelings or actions in normal circumstances; (3) depression; (4) unreasonable fears. This term includes those who are schizophrenic.

CODES

1	YES	PPQ280
2	NO	BOX 3
	REFUSED	BOX 3
	DON'T KNOW	BOX 3

PPQ280

QUESTION TEXT:

Did he get help for his problem?

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

BOX 3

ASK PPQ.290 ONLY IF THERE IS A STEPFATHER LIVING IN THE HOME (FSQ.150=3) AND R IS NOT CHILD'S STEPFATHER. OTHERWISE, GO TO BOX 4.

PPQ290

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

BOLD 'Emotional problems' IN HELP TEXT ONLY

QUESTION TEXT:

During the past 12 months, has {CHILD}'s stepfather felt or has anyone suggested that he needed professional help for any emotional problem or for drug or alcohol use?

HELP TEXT:

Emotional problems: Conditions in which an individual shows one or more of the following characteristics to a significant and noticeable degree: (1) an inability to get along with others; (2) display of inappropriate feelings or actions in normal circumstances; (3) depression; (4) unreasonable fears. This term includes those who are schizophrenic.

CODES

1	YES	PPQ300
2	NO	BOX 4
	REFUSED	BOX 4
	DON'T KNOW	BOX 4

PPQ300

QUESTION TEXT:

Did he get help for his problem?

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

BOX 4

GO TO SECTION FDQ (FOOD SECURITY).

Spring 2011 Parent Interview: ECLS-K: 2010-2011

Section FDQ [Food Security]

Sequence: 10

FDQ130a

DISPLAY INSTRUCTIONS:

DISPLAY 'often,' 'sometimes,' AND 'never' AS UNDERLINED AT EACH APPEARANCE

QUESTION TEXT:

These next questions are about whether your family is able to afford the food that you need. I am going to read you several statements that people have made about their food situation. For these statements, please tell me whether the statement was often true, sometimes true, or never true for {you/your household} in the last 12 months, that is, since last {CURRENT MONTH}, 2010.

a. {I/We} worried whether {my/our} food would run out before {I/we} got money to buy more.

Was that often true, sometimes true, or never true for {you/your household} in the last 12 months?

CODES

- | | |
|---|----------------|
| 1 | OFTEN TRUE |
| 2 | SOMETIMES TRUE |
| 3 | NEVER TRUE |
| | REFUSED |
| | DON'T KNOW |

PROGRAMMER INSTRUCTIONS:

DISPLAY CURRENT MONTH.

USE 'you,' 'I,' AND 'my' IF THE RESPONDENT IS THE ONLY HOUSEHOLD MEMBER AGE 18 OR OVER OR IF THERE ARE NO HOUSEHOLD MEMBERS 18 OR OVER OR WITH AN AGE OTHER THAN DK OR RF. OTHERWISE, DISPLAY "your household," "we," "our," AND "we."

FDQ130b

DISPLAY INSTRUCTIONS:

DISPLAY 'often,' 'sometimes,' AND 'never' AS UNDERLINED AT EACH APPEARANCE

QUESTION TEXT:

[These next questions are about whether your family is able to afford the food that you need. I am going to read you several statements that people have made about their food situation. For these statements, please tell me whether the statement was often true, sometimes true, or never true for {you/your household} in the last 12 months, that is, since last {current month}, 2010.]

b. The food that {I/we} bought just didn't last, and {I/we} didn't have money to get more. Was that often true, sometimes true, or never true for {you/your household} in the last 12 months?

CODES

- | | |
|---|------------|
| 1 | OFTEN TRUE |
|---|------------|

- 2 SOMETIMES TRUE
- 3 NEVER TRUE
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY CURRENT MONTH.

USE 'you,' 'I,' AND 'my' IF THE RESPONDENT IS THE ONLY HOUSEHOLD MEMBER AGE 18 OR OVER OR IF THERE ARE NO HOUSEHOLD MEMBERS 18 OR OVER OR WITH AN AGE OTHER THAN DK OR RF. OTHERWISE, DISPLAY "your household," "we," "our," AND "we."

FDQ130c

DISPLAY INSTRUCTIONS:

DISPLAY 'often,' 'sometimes,' AND 'never' IN THE MAIN QUESTION TEXT AND PROBE AS UNDERLINED.

QUESTION TEXT:

[These next questions are about whether your family is able to afford the food that you need. I am going to read you several statements that people have made about their food situation. For these statements, please tell me whether the statement was often true, sometimes true, or never true for {you/your household} in the last 12 months, that is, since last {current month}, 2010.]

[PROBE: Was that often true, sometimes true, or never true for {you/your household} in the last 12 months?]

c.{I/We} couldn't afford to eat balanced meals.

CODES

- 1 OFTEN TRUE
- 2 SOMETIMES TRUE
- 3 NEVER TRUE
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY CURRENT MONTH.

USE 'you,' 'I,' AND 'my' IF THE RESPONDENT IS THE ONLY HOUSEHOLD MEMBER AGE 18 OR OVER OR IF THERE ARE NO HOUSEHOLD MEMBERS 18 OR OVER OR WITH AN AGE OTHER THAN DK OR RF. OTHERWISE, DISPLAY "your household," "we," "our," AND "we."

DISPLAY "PROBE... months?" IN SQUARE BRACKETS FOR C.

BOX 1

IF (FDQ.130a = 1 OR 2) OR (FDQ.130b = 1 OR 2) OR (FDQ.130c = 1 OR 2), THEN GO TO FDQ.140. ELSE, GO TO FDQ.192.

FDQ140

QUESTION TEXT:

In the last 12 months, did {you/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?

CODES

1	YES	
2	NO	FDQ160
	REFUSED	FDQ160
	DON'T KNOW	FDQ160

PROGRAMMER INSTRUCTIONS:

DISPLAY 'you" IF THE RESPONDENT IS THE ONLY HOUSEHOLD MEMBER AGE 18 OR OVER OR IF THERE ARE NO HOUSEHOLD MEMBERS 18 OR OVER OR WITH AN AGE OTHER THAN DK OR REF. OTHERWISE, DISPLAY "you or other adults in your household."

FDQ150

QUESTION TEXT:

How often did this happen? Would you say...

CODES

1	Almost every month,
2	Some months, but not every month, or
3	In only 1 or 2 months?
	REFUSED
	DON'T KNOW

FDQ160

QUESTION TEXT:

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

CODES

1	YES
2	NO
	REFUSED

DON'T KNOW

FDQ170

QUESTION TEXT:

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

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

FDQ180

QUESTION TEXT:

In the last 12 months, did you lose weight because there wasn't enough money for food?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

BOX 2

IF (FDQ.140=1) OR (FDQ.160 =1) OR (FDQ.170 = 1) OR (FDQ.180=1), ASK FDQ.190.
OTHERWISE, GO TO FDQ.192.

FDQ190

QUESTION TEXT:

In the last 12 months, did {you/you or other adults in your household} ever not eat for a whole day because there wasn't enough money for food?

CODES

1	YES	
2	NO	FDQ192
	REFUSED	FDQ192
	DON'T KNOW	FDQ192

PROGRAMMER INSTRUCTIONS:

DISPLAY 'you" IF THE RESPONDENT IS THE ONLY HOUSEHOLD MEMBER AGE 18 OR OVER OR IF THERE ARE NO HOUSEHOLD MEMBERS 18 OR OVER OR WITH AN AGE OTHER THAN DK OR REF. OTHERWISE, DISPLAY "you or other adults in your household."

FDQ191

QUESTION TEXT:

How often did this happen? Would you say...

CODES

1	Almost every month,
2	Some months, but not every month, or
3	In only 1 or 2 months?
	REFUSED
	DON'T KNOW

FDQ192a

DISPLAY INSTRUCTIONS:

DISPLAY 'often,' 'sometimes,' AND 'never' IN THE MAIN QUESTION TEXT AND PROBE AS UNDERLINED.

QUESTION TEXT:

Now I am going to read you several statements that people have made about the food situation of their children. For these statements, please tell me whether the statement was often true, sometimes true, or never true in the last 12 months, that is, since last {CURRENT MONTH}, 2010, for {your child/children living in the household who are under 18 years old}.

a. {I/We} relied on only a few kinds of low-cost food to feed {{CHILD}/the children} because {I was/we were} running out of money to buy food.

Was that often true, sometimes true, or never true for {you/your household} in the last 12 months?

CODES

- 1 OFTEN TRUE
- 2 SOMETIMES TRUE
- 3 NEVER TRUE
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY CURRENT MONTH.

USE "I," "I was," and "you" IF THE RESPONDENT IS THE ONLY HOUSEHOLD MEMBER AGE 18 OR OVER OR IF THERE ARE NO HOUSEHOLD MEMBERS 18 OR OVER OR WITH AN AGE OTHER THAN DK OR RF. OTHERWISE, DISPLAY "your household," "we," AND "we were"

DISPLAY "children living in the household who are under 18 years old " AND "the children" IF (NumberOfChildren > 1) OR (THERE ARE CHILDREN IN THE HOUSEHOLD AGE 17 OR YOUNGER OTHER THAN THE FOCAL CHILD). OTHERWISE, DISPLAY "{CHILD}" AND "{CHILD} was."

FDQ192b

QUESTION TEXT:

[Now I am going to read you several statements that people have made about the food situation of their children. For these statements, please tell me whether the statement was often true, sometimes true, or never true in the last 12 months, that is, since last {CURRENT MONTH}, 2010, for {your child/children living in the household who are under 18 years old}.]

b.{I/We} couldn't feed {{CHILD}/the children} a balanced meal because {I/we} couldn't afford that. Was that often true, sometimes true, or never true for {you/your household} in the last 12 months?

CODES

- 1 OFTEN TRUE
- 2 SOMETIMES TRUE
- 3 NEVER TRUE
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY CURRENT MONTH.

DISPLAY 'often,' 'sometimes,' AND 'never' IN THE MAIN QUESTION TEXT AND PROBE AS UNDERLINED.

USE "I," "I was," and "you" IF THE RESPONDENT IS THE ONLY HOUSEHOLD MEMBER AGE 18 OR OVER OR IF THERE ARE NO HOUSEHOLD MEMBERS 18 OR OVER OR WITH AN AGE OTHER THAN DK OR RF. OTHERWISE, DISPLAY "your household," "we," AND "we were"

DISPLAY "children living in the household who are under 18 years old " AND "the children" IF (NumberOfChildren > 1) OR (THERE ARE CHILDREN IN THE HOUSEHOLD AGE 17 OR YOUNGER OTHER THAN THE FOCAL CHILD). OTHERWISE, DISPLAY "{CHILD}" AND "{CHILD} was."

FDQ192c

QUESTION TEXT:

[Now I am going to read you several statements that people have made about the food situation of their children. For these statements, please tell me whether the statement was often true, sometimes true, or never true in the last 12 months, that is, since last {CURRENT MONTH}, 2010, for {your child/children living in the household who are under 18 years old}.]

[PROBE: Was that often true, sometimes true, or never true for {you/your household} in the last 12 months?]

c. {{CHILD} was/The children were} not eating enough because {I/we} just couldn't afford enough food.

CODES

- 1 OFTEN TRUE
- 2 SOMETIMES TRUE
- 3 NEVER TRUE
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY CURRENT MONTH.

DISPLAY 'often,' 'sometimes,' AND 'never' IN THE MAIN QUESTION TEXT AND PROBE AS UNDERLINED.

USE "I," "I was," and "you" IF THE RESPONDENT IS THE ONLY HOUSEHOLD MEMBER AGE 18 OR OVER OR IF THERE ARE NO HOUSEHOLD MEMBERS 18 OR OVER OR WITH AN AGE OTHER THAN DK OR RF. OTHERWISE, DISPLAY "your household," "we," AND "we were"

DISPLAY "children living in the household who are under 18 years old" AND "the children" IF (NumberOfChildren > 1) OR (THERE ARE CHILDREN IN THE HOUSEHOLD AGE 17 OR YOUNGER OTHER THAN THE FOCAL CHILD). OTHERWISE, DISPLAY "{CHILD}" AND "{CHILD} was."

DISPLAY "PROBE:... months" IN SQUARE BRACKETS FOR C.

BOX 3

IF (FDQ.192a = 1 OR 2) OR (FDQ.192b = 1 OR 2) OR (FDQ.192c = 1 OR 2), GO TO FDQ.210. ELSE, GO TO BOX 4.

FDQ210

QUESTION TEXT:

In the last 12 months, that is, since last {CURRENT MONTH}, 2010, did you ever cut the size of {CHILD}'s/any of the children's} meals because there wasn't enough money for food?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY "any of the children's" IF (NumberOfChildren > 1) OR (THERE ARE CHILDREN IN THE HOUSEHOLD AGE 17 OR YOUNGER OTHER THAN THE FOCAL CHILD). OTHERWISE, DISPLAY "{CHILD}'s."

DISPLAY THE CURRENT MONTH IN {CURRENT MONTH}

FDQ240

QUESTION TEXT:

In the last 12 months, {was {CHILD}}/were any of the children} ever hungry but you just couldn't afford more food?

CODES

- 1 YES
- 2 NO
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY "were any of the children" IF (NumberOfChildren > 1) OR (THERE ARE CHILDREN IN THE HOUSEHOLD AGE 17 OR YOUNGER OTHER THAN THE FOCAL CHILD). OTHERWISE, DISPLAY "was {CHILD}."

FDQ242

QUESTION TEXT:

In the last 12 months, did {{CHILD}}/any of the children} ever skip a meal because there wasn't enough money for food?

CODES

- 1 YES
 - 2 NO
 - REFUSED
 - DON'T KNOW
- FDQ250
FDQ250
FDQ250

PROGRAMMER INSTRUCTIONS:

DISPLAY "any of the children" IF (NumberOfChildren > 1) OR (THERE ARE CHILDREN IN THE HOUSEHOLD AGE 17 OR YOUNGER OTHER THAN THE FOCAL CHILD). OTHERWISE, DISPLAY "{CHILD}."

FDQ243

QUESTION TEXT:

How often did this happen? Would you say...

CODES

- 1 Almost every month,
 - 2 Some months, but not every month, or
 - 3 In only 1 or 2 months?
- REFUSED
DON'T KNOW

FDQ250

QUESTION TEXT:

In the last 12 months, did {CHILD}/any of the children} ever not eat for a whole day because there wasn't enough money for food?

CODES

- 1 YES
 - 2 NO
- REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY "any of the children" IF (NumberOfChildren > 1) OR (THERE ARE CHILDREN IN THE HOUSEHOLD AGE 17 OR YOUNGER OTHER THAN THE FOCAL CHILD). OTHERWISE, DISPLAY "{CHILD}."

BOX 4

GO TO SECTION WPQ (WELFARE AND OTHER PUBLIC TRANSFERS).

Spring 2011 Parent Interview: ECLS-K: 2010-2011

Section WPQ [Welfare and Other Public Transfers]

Sequence: 11

WPQ100

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

BOLD 'TANF' (FIRST INSTANCE ONLY) IN HELP TEXT

QUESTION TEXT:

(Since {DATE OF LAST INTERVIEW})/In the past 12 months, have you or anyone in your household received Temporary Assistance for Needy Families, sometimes called TANF {or {STATE TANF PROGRAM NAME}}?

PROBE: TANF was formerly known as Aids to Families with Dependent Children, or AFDC.

IF NEEDED:

TANF: Temporary Assistance for Needy Families (TANF) or {STATE TANF PROGRAM NAME} in {STATE} is a government program that provides cash benefits to low-income families with children. Many states provide TANF money through an Electronic Benefits Transfer (EBT) card that is like a debit or ATM card.

Past 12 Months: For this question, consider whether or not TANF (or AFDC) was received in the past 12 calendar months, not the last calendar year.

CODES

1	YES	
2	NO	WPQ110
	REFUSED	
	DON'T KNOW	

PROGRAMMER INSTRUCTIONS:

IF FALL K NON-RESPONDENT, DISPLAY 'In the past 12 months'.

IF CONTINUING HOUSEHOLD, DISPLAY 'Since {DATE OF LAST INTERVIEW}.' USE THE LATEST DATE COMPLETED.

DISPLAY STATE TANF PROGRAM NAME.

WPQ105

QUESTION TEXT:

(Since {DATE OF LAST INTERVIEW})/During those 12 months, how many months did your household receive TANF {or {STATE TANF PROGRAM NAME}}?

ENTER NUMBER OF MONTH(S).

NUMBER OF MONTHS

ENTER NUMBER

Range

1 to 12

REFUSED

DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY 'Since {DATE OF LAST INTERVIEW}' ONLY IF CONTINUING HOUSEHOLD. USE THE LATEST DATE COMPLETED. OTHERWISE, DISPLAY 'During those 12 months'.

RANGE: 1 TO 12

DISPLAY STATE TANF PROGRAM NAME.

WPQ110

HELP AVAILABLE

DISPLAY INSTRUCTIONS:

BOLD IN HELP TEXT: 'Food Stamps or SNAP (Supplemental Nutrition Assistance Program)', "Past 12 Months"

QUESTION TEXT:

(Since {DATE OF LAST INTERVIEW}/In the past 12 months), have you or anyone in your household received food stamps , also called SNAP (the Supplemental Nutrition Assistance Program), or food benefits on EBT (Electronic Benefit Transfer)?

HELP TEXT:

Food Stamps or SNAP (Supplemental Nutrition Assistance Program). A government program that provides plastic cards that can be used to buy food. In the past, SNAP was called the Food Stamp Program and gave people benefits in paper coupons or food stamps.

Past 12 Months: For this question, consider whether or not food stamps were received in the past 12 calendar months, not the last calendar year.

CODES

1 YES

2 NO

REFUSED

DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY 'Since {DATE OF LAST INTERVIEW}' ONLY IF CONTINUING HOUSEHOLD. USE THE LATEST DATE COMPLETED. OTHERWISE, DISPLAY 'In the past 12 months'.

Box 0

IF WPQ.110 = 1, GO TO WPQ.120. ELSE, IF WPQ.100 = 1 AND WPQ.110 = 2, DK, OR REF, GO TO WPQ.125. ELSE, GO TO WPQ.150.

WPQ120

QUESTION TEXT:

(Since {DATE OF LAST INTERVIEW}/During those 12 months), how many months did your household receive food stamps or food benefits on EBT (Electronic Benefit Transfer) from SNAP?

__|__|

ENTER NUMBER OF MONTH(S).

ENTER NUMBER

Range 1 to 12
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY 'Since {DATE OF LAST INTERVIEW}' ONLY IF CONTINUING HOUSEHOLD. USE THE LATEST DATE COMPLETED. OTHERWISE, DISPLAY 'During those 12 months'.

RANGE: 1 TO 12.

WPQ125

QUESTION TEXT:

Are you or anyone in your family required to work, attend school or anything else in order to receive these benefits?

CODES

1	YES	WPQ130
2	NO	WPQ150
	REFUSED	WPQ150
	DON'T KNOW	WPQ150

WPQ130

QUESTION TEXT:

What are you or anyone in your family required to do?

PROBE: Anything else?

CODE ALL THAT APPLY

CODES	Code All That Apply
1	LOOK FOR A JOB
2	WORK IN A PAID JOB
3	WORK IN AN UNPAID JOB
4	ATTEND SCHOOL OR TRAINING
91	SOMETHING ELSE? (SPECIFY)
	REFUSED
	DON'T KNOW

BOX 1

IF WPQ.130 = 91, GO TO WPQ.130OS. ELSE, GO TO WPQ.150.

WPQ130OS

QUESTION TEXT:

[What are you or anyone in your family required to do?]

SPECIFY OTHER

ENTER TEXT

Length	25
REFUSED	
DON'T KNOW	

WPQ150

QUESTION TEXT:

Does {CHILD}'s school offer lunch for its students?

CODES

1	YES	WPQ160
2	NO	WPQ200
	REFUSED	WPQ200
	DON'T KNOW	WPQ200

WPQ160**DISPLAY INSTRUCTIONS:**

BOLD 'PROBE'

QUESTION TEXT:

Does {CHILD} usually receive a complete lunch offered at school?

PROBE: By complete school lunch, I mean a complete meal such as a salad, soup, a sandwich, or a hot meal that is offered each day at a fixed price, not just milk, snacks, or ice cream. This does not include a lunch (he/she) brought from home.

CODES

1	YES	WPQ170
2	NO	WPQ200
	REFUSED	WPQ200
	DON'T KNOW	WPQ200

WPQ170**DISPLAY INSTRUCTIONS:**

DISPLAY 'free' AND 'reduced price' IN UNDERLINED TEXT.

QUESTION TEXT:

Does {Child} receive free or reduced price lunches at school?

CODES

1	YES	WPQ180
2	NO	WPQ200
	REFUSED	WPQ200
	DON'T KNOW	WPQ200

WPQ180

QUESTION TEXT:

Are these lunches free or reduced price?

CODES

1	FREE	
2	REDUCED PRICE	
	REFUSED	WPQ200
	DON'T KNOW	WPQ200

WPQ190

QUESTION TEXT:

During the last five days {CHILD} was in school, how many complete school lunches did (he/she) receive?

NUMBER OF DAYS

ENTER NUMBER

Range 0 to 5
 REFUSED
 DON'T KNOW

PROGRAMMER INSTRUCTIONS:

RANGE: 0 TO 5.

WPQ200

CARI: Sampling at 100%

QUESTION TEXT:

Does {CHILD}'s school offer breakfast for its students?

CODES

1	YES	WPQ210
2	NO	BOX 2
	REFUSED	BOX 2
	DON'T KNOW	BOX 2

WPQ210

QUESTION TEXT:

Does {CHILD} usually receive a breakfast provided by the school?

CODES

1	Yes	
2	No	BOX 2
	REFUSED	BOX 2
	DON'T KNOW	BOX 2

WPQ215

DISPLAY INSTRUCTIONS:

DISPLAY 'free' AND 'reduced price' IN UNDERLINED TEXT

QUESTION TEXT:

Does {CHILD} receive free or reduced price breakfasts at school?

CODES

1	YES	WPQ216
2	NO	BOX 2
	REFUSED	BOX 2
	DON'T KNOW	BOX 2

WPQ216

QUESTION TEXT:

Are these breakfasts free or reduced price?

CODES

1	FREE	
2	REDUCED PRICE	
	REFUSED	BOX 2
	DON'T KNOW	BOX 2

WPQ220

QUESTION TEXT:

During the last five days {CHILD} was in school, how many school breakfasts did (he/she) receive?

|_|
NUMBER OF DAYS

ENTER NUMBER

Range 0 to 5
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

RANGE: 0 TO 5.

BOX 2

GO TO SECTION PAQ (PARENT INCOME AND ASSETS).

Spring 2011 Parent Interview: ECLS-K: 2010-2011

Section PAQ [Parent Income and Assets]

Sequence: 12

PAQ100

QUESTION TEXT:

In studies like this, households are sometimes grouped according to income. What was the total income of all persons in your household over the past year, including salaries or other earnings, interest, retirement, and so on for all household members?
Was it...

CODES

1	\$25,000 or less, or	PAQ110a
2	More than \$25,000?	PAQ110b
	REFUSED	PAQ135
	DON'T KNOW	PAQ135

PAQ110a

QUESTION TEXT:

Was it...

[SET 1]

CODES

1	\$5,000 or less,	BOX 1
2	\$5,001 to \$10,000,	BOX 1
3	\$10,001 to \$15,000,	BOX 1
4	\$15,001 to \$20,000, or	BOX 1
5	\$20,001 to \$25,000?	BOX 1
	REFUSED	BOX 1
	DON'T KNOW	BOX 1

PAQ110b

QUESTION TEXT:

Was it...

[SET 2]

CODES

- 6 \$25,001 to \$30,000,
 - 7 \$30,001 to \$35,000,
 - 8 \$35,001 to \$40,000,
 - 9 \$40,001 to \$45,000,
 - 10 \$45,001 to \$50,000,
 - 11 \$50,001 to \$55,000,
 - 12 \$55,001 to \$60,000,
 - 13 \$60,001 to \$65,000,
 - 14 \$65,001 to \$70,000,
 - 15 \$70,001 to \$75,000,
 - 16 \$75,001 to \$100,000,
 - 17 \$100,001 to \$200,000, or
 - 18 \$200,001 or more?
- REFUSED
DON'T KNOW

BOX 1

IF PAQ.110 (SET 1 OR SET 2) IS RF/DK, GO TO PAQ.135.

ELSE, PAQ.120 IS ASKED IF HOUSEHOLD IS AT 200 PERCENT OF POVERTY OR BELOW.

ASK PAQ.120 IF

- (NUMBER IN HH = 1 AND PAQ.110 < 6) OR
- (NUMBER IN HH = 2 AND PAQ.110 < 7) OR
- (NUMBER IN HH = 3 AND PAQ.110 < 8) OR
- (NUMBER IN HH = 4 AND PAQ.110 < 10) OR
- (NUMBER IN HH = 5 AND PAQ.110 < 12) OR
- (NUMBER IN HH = 6 AND PAQ.110 < 13) OR
- (NUMBER IN HH = 7 AND PAQ.110 < 15) OR
- (NUMBER IN HH = 8 AND PAQ.110 < 16) OR
- (NUMBER IN HH g.e. 9 AND PAQ.110 < 17).

ELSE, GO TO PAQ.135.

PAQ120

QUESTION TEXT:

What was your total household income last year, to the nearest thousand?

|_|_|_|_|,|_|_|_|_|,|_|_|_|_|.
TOTAL INCOME

ENTER NUMBER

- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

RANGE CHECK - TOTAL INCOME SHOULD BE IN RANGE OF ANSWER TO PAQ.110

PAQ135

CARI: Sampling at 100%

QUESTION TEXT:

Is tuition paid for {CHILD}'s education?

CODES

1	YES	PAQ137
2	NO	BOX 2
	REFUSED	BOX 2
	DON'T KNOW	BOX 2

PAQ137

QUESTION TEXT:

Approximately, how much does {CHILD}'s family pay in tuition per year for {CHILD}'s education?

\$ |_|_|_|, |_|_|_|_|
ENTER AMOUNT OF TUITION

ENTER NUMBER

- Soft Range 1 to 33000
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

SOFT RANGE: 1 TO 33000.

BOX 2

QUESTION TEXT:

GO TO SECTION CMQ (MOBILITY AND TRACKING UPDATES).

Spring 2011 Parent Interview: ECLS-K: 2010-2011

Section CMQ [Mobility and Tracking Updates]

Sequence: 13

BOX 1

IF FALL K CONTINUING HOUSEHOLD (INCLUDES FALL K RESPONDENTS AND NEW SPRING RESPONDENTS):

CHECK FALL K CMQ.080:

IF (FALL K CMQ.080 HAS A TELEPHONE NUMBER) AND (THE RESPONDENT IN THE SPRING IS THE SAME AS IN THE FALL), GO TO CMQ.100.

ELSE, CONTINUE WITH CMQ.060.

IF FALL K NONRESPONSE HOUSEHOLD, CONTINUE WITH CMQ.060.

CMQ060

QUESTION TEXT:

Just to make sure I can reach you for the next interview, which will take place next school year, I'd like to ask a few questions about how to find you.

Is there a second phone number, such as a work number, a friend or relative's number, or a beeper or cell phone number, where you can sometimes be reached?

CODES

1	YES	CMQ140
2	NO	BOX2
	REFUSED	BOX2
	DON'T KNOW	BOX2

CMQ100

QUESTION TEXT:

Just to make sure I can reach you for the next interview, which will take place next school year, I'd like to ask a few questions about how to find you. I have recorded {PHONE NUMBER} as a second phone number where you can sometimes be reached. Is this the right number?

CODES

1	YES	BOX 2
2	NO	CMQ140
	REFUSED	BOX 2
	DON'T KNOW	BOX 2

PROGRAMMER INSTRUCTIONS:

DISPLAY SECOND PHONE NUMBER FROM FALL K COLLECTED AT CMQ.o8o.

CMQ140

QUESTION TEXT:

What is that telephone number?

ENTER {NEW} SECOND PHONE NUMBER.

____-____-____

SECOND TELEPHONE NUMBER EXTENSION

ENTER TEXT

REFUSED	BOX 2
DON'T KNOW	BOX 2

PROGRAMMER INSTRUCTIONS:

DISPLAY 'NEW' IF CMQ.100=2. OTHERWISE, USE A NULL DISPLAY.

EXTENSION FIELD SHOULD BE LIMITED TO FOUR NUMBERS.

CMQ150

QUESTION TEXT:

Where is that telephone located?

CODES

1	OFFICE/PLACE OF BUSINESS	BOX 2
2	RELATIVE (SPECIFY)	CMQ155
3	NEIGHBOR (SPECIFY)	CMQ155
4	FRIEND (SPECIFY)	CMQ155
5	BEEPER NUMBER	BOX 2
6	CELL PHONE	BOX 2
91	OTHER (SPECIFY)	CMQ155
	REFUSED	BOX 2
	DON'T KNOW	BOX 2

CMQ155

QUESTION TEXT:

[Where is that telephone located?]

SPECIFY {RELATIVE / NEIGHBOR / FRIEND / OTHER}.

ENTER TEXT

Length

25

PROGRAMMER INSTRUCTIONS:

DISPLAY 'RELATIVE' IF CMQ.150=2.

DISPLAY 'NEIGHBOR' IF CMQ.150=3.

DISPLAY 'FRIEND' IF CMQ.150=4.

DISPLAY 'OTHER' IF THE OTHER SPECIFY BOX OF CMQ.150 IS CHECKED.

BOX 2

IF FALL K CMQ100=1, CONTINUE WITH CMQ200.

IF (FALL K CMQ110 HAS FIRST CONTACT NAME, PHONE NUMBER, AND ADDRESS) AND (THE RESPONDENT IN THE SPRING IS THE SAME AS IN THE FALL), CONTINUE WITH CMQ.200.

ELSE, GO TO CMQ.205.

CMQ200

QUESTION TEXT:

I have recorded that {NAME OF RELATIVE/FRIEND}

at {PHONE NUMBER}

on

{STREET ADDRESS, LINE 1}

{STREET ADDRESS, LINE 2}

{CITY}

{STATE}

{ZIP CODE}

will always know where you are if you move. Is this still true?

IF NECESSARY SAY: I will only contact this person if I cannot locate you for the next interview.

CODES

1	YES -- NO CORRECTION NEEDED	BOX 3
2	YES -- MINOR CORRECTIONS NEEDED	CMQ210
3	NO	CMQ205
	REFUSED	BOX 3
	DON'T KNOW	BOX 3

PROGRAMMER INSTRUCTIONS:

DISPLAY FIRST CONTACT NAME, PHONE NUMBER, AND ADDRESS FROM FALL K CMQ.110.

DK AND RF FROM ROUND 1 MUST SHOW UP AS PART OF THE ITEM TEXT AS 'REFUSED,' "REF," "DK," OR "DON'T KNOW."

DISPLAY CITY, STATE, AND ZIP ON 1 LINE.

CMQ205

QUESTION TEXT:

Is there a relative or friend, who does not live in this household, who will always know where you are if you move?

IF NECESSARY SAY: I will only contact this person if I cannot locate you for the next interview.

CODES

1	YES	CMQ210
2	NO	BOX 5
	REFUSED	BOX 3
	DON'T KNOW	BOX 3

CMQ210

QUESTION TEXT:

What is the name, address, and telephone number of that person?
{ENTER / CORRECT / ENTER NEW} FIRST AND LAST NAME.

{IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

ENTER TEXT

Length

40

PROGRAMMER INSTRUCTIONS:

IF FALL K CONTINUING HOUSEHOLD AND FALL K CMQ.100=1, DISPLAY THE OLD INFORMATION FROM FALL K CMQ.110 IN THE RESPONSE FIELDS.

IF CMQ.200=2, DISPLAY 'CORRECT.' IF CMQ.200=3, DISPLAY 'ENTER NEW.'
OTHERWISE, DISPLAY 'ENTER.'

IF CMQ.200=2, DISPLAY 'IF FIELD... INFORMATION.'
OTHERWISE, USE A NULL DISPLAY.

CMQ220

QUESTION TEXT:

[What is the name, address, and telephone number of that person?]

{ENTER / CORRECT / ENTER NEW} STREET ADDRESS, LINE 1.

{IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

ENTER TEXT

Length	75
REFUSED	
DON'T KNOW	

PROGRAMMER INSTRUCTIONS:

IF FALL K CONTINUING HOUSEHOLD AND FALL K CMQ.100=1, DISPLAY THE OLD INFORMATION FROM FALL K CMQ.110 IN THE RESPONSE FIELDS.

IF CMQ.200=2, DISPLAY 'CORRECT.' IF CMQ.200=3, DISPLAY 'ENTER NEW.'
OTHERWISE, DISPLAY 'ENTER.'

IF CMQ.200=2, DISPLAY 'IF FIELD... INFORMATION.'
OTHERWISE, USE A NULL DISPLAY.

CMQ230

QUESTION TEXT:

[What is the name, address, and telephone number of that person?]

{ENTER / CORRECT / ENTER NEW} STREET ADDRESS, LINE 2.

{IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

ENTER TEXT

Length	75
REFUSED	
DON'T KNOW	

PROGRAMMER INSTRUCTIONS:

IF FALL K CONTINUING HOUSEHOLD AND FALL K CMQ.100=1, DISPLAY THE OLD INFORMATION FROM FALL K CMQ.110 IN THE RESPONSE FIELDS.

IF CMQ.200=2, DISPLAY 'CORRECT.' IF CMQ.200=3, DISPLAY 'ENTER NEW.'
OTHERWISE, DISPLAY 'ENTER.'

IF CMQ.200=2, DISPLAY 'IF FIELD... INFORMATION.'
OTHERWISE, USE A NULL DISPLAY.

CMQ240

QUESTION TEXT:

[What is the name, address, and telephone number of that person?]

{ENTER / CORRECT / ENTER NEW} CITY.

{IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

ENTER TEXT

Length	30
REFUSED	
DON'T KNOW	

PROGRAMMER INSTRUCTIONS:

IF FALL K CONTINUING HOUSEHOLD AND FALL K CMQ.100=1, DISPLAY THE OLD INFORMATION FROM FALL K CMQ.110 IN THE RESPONSE FIELDS.

IF CMQ.200=2, DISPLAY 'CORRECT.' IF CMQ.200=3, DISPLAY 'ENTER NEW.'
OTHERWISE, DISPLAY 'ENTER.'

IF CMQ.200=2, DISPLAY 'IF FIELD... INFORMATION.'
OTHERWISE, USE A NULL DISPLAY.

CMQ250

HELP AVAILABLE

QUESTION TEXT:

[What is the name, address, and telephone number of that person?]

{ENTER / CORRECT / ENTER NEW} STATE ABBREVIATION.

{IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY STATE ABBREVIATIONS.

IF FALL K CONTINUING HOUSEHOLD AND FALL K CMQ.100=1, DISPLAY THE OLD INFORMATION FROM FALL K CMQ.110 IN THE RESPONSE FIELDS.

IF CMQ.200=2, DISPLAY 'CORRECT.' IF CMQ.200=3, DISPLAY 'ENTER NEW.'
OTHERWISE, DISPLAY 'ENTER.'

IF CMQ.200=2, DISPLAY 'IF FIELD... INFORMATION.'
OTHERWISE, USE A NULL DISPLAY.

CMQ260

QUESTION TEXT:

[What is the name, address, and telephone number of that person?]

{ENTER / CORRECT / ENTER NEW} ZIP CODE.

{IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

ENTER TEXT

Length 9

REFUSED

DON'T KNOW

PROGRAMMER INSTRUCTIONS:

IF FALL K CONTINUING HOUSEHOLD AND FALL K CMQ.100=1, DISPLAY THE OLD INFORMATION FROM FALL K CMQ.110 IN THE RESPONSE FIELDS.

IF CMQ.200=2, DISPLAY 'CORRECT.' IF CMQ.200=3, DISPLAY 'ENTER NEW.'
OTHERWISE, DISPLAY 'ENTER.'

IF CMQ.200=2, DISPLAY 'IF FIELD... INFORMATION.'
OTHERWISE, USE A NULL DISPLAY.

CMQ270

QUESTION TEXT:

[What is the name, address, and telephone number of that person?]

{ENTER / CORRECT / ENTER NEW} PHONE NUMBER, INCLUDING AREA CODE.

{IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

ENTER TEXT

Length 15

REFUSED

DON'T KNOW

PROGRAMMER INSTRUCTIONS:

IF FALL K CONTINUING HOUSEHOLD AND FALL K CMQ100=1, DISPLAY THE OLD INFORMATION FROM FALL K CMQ.110 IN THE RESPONSE FIELDS.

IF CMQ.200=2, DISPLAY 'CORRECT.' IF CMQ.200=3, DISPLAY 'ENTER NEW.'
OTHERWISE, DISPLAY 'ENTER.'

IF CMQ.200=2, DISPLAY 'IF FIELD... INFORMATION.'
OTHERWISE, USE A NULL DISPLAY.

IF NO TELEPHONE, ENTER '000.'

CMQ280

QUESTION TEXT:

What is the person's relationship to you?

{ENTER / CORRECT / ENTER NEW} RELATIONSHIP OF PERSON TO RESPONDENT.

ENTER TEXT

Length 50
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

IF FALL K CONTINUING HOUSEHOLD AND FALL K CMQ.100=1, DISPLAY THE OLD INFORMATION FROM FALL K CMQ.110 IN THE RESPONSE FIELDS.

IF CMQ.200=2, DISPLAY 'CORRECT.' IF CMQ.200=3, DISPLAY 'ENTER NEW.'
OTHERWISE, DISPLAY 'ENTER.'

IF CMQ.200=2, DISPLAY 'IF FIELD... INFORMATION.' IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.
OTHERWISE, USE A NULL DISPLAY.

BOX 3

IF FALL K CONTINUING HOUSEHOLD:

IF (FALL K CMQ.140 HAS SECOND CONTACT NAME, PHONE NUMBER, AND ADDRESS) AND (THE RESPONDENT IN THE SPRING IS THE SAME AS IN THE FALL), CONTINUE WITH CMQ300.

ELSE, IF SPRING CMQ.205= DK OR RF, GO TO BOX 5.

ELSE, IF (SPRING CMQ.205 =1) OR (SPRING CMQ.205 WAS NOT ASKED) OR (THE RESPONDENT IN THE SPRING IS NOT THE SAME AS IN THE FALL), GO TO CMQ.305.

IF FALL K NONRESPONSE HOUSEHOLD:

IF CMQ.205=DK OR RF, GO TO BOX 5.

IF CMQ.205=1, GO TO CMQ.305.

CMQ300

QUESTION TEXT:

I have also recorded that {NAME OF RELATIVE/FRIEND}

at {PHONE NUMBER}

on
{STREET ADDRESS, LINE 1}
{STREET ADDRESS, LINE 2}
{CITY}
{STATE}
{ZIP CODE}

will always know where you are if you move. Is this still true?

IF NECESSARY SAY: I will only contact this person if I cannot locate you for the next interview.

CODES

1	YES -- NO CORRECTION NEEDED	BOX 5
2	YES -- MINOR CORRECTIONS NEEDED	CMQ310
3	NO	BOX 4
	REFUSED	BOX 5
	DON'T KNOW	BOX 5

PROGRAMMER INSTRUCTIONS:

IF FALL K CONTINUING HOUSEHOLD AND FALL K CMQ.130=1, DISPLAY NAME, ADDRESS, AND PHONE NUMBER OF RELATIVE FROM FALL K CMQ.140.

DK AND RF FROM ROUND 1 MUST SHOW UP AS PART OF THE ITEM TEXT AS 'REFUSED,' 'REF,' 'DK,' OR 'DON'T KNOW.'

DISPLAY CITY, STATE, AND ZIP ON 1 LINE.

BOX 4

IF CMQ.205=2, DK, RF, GO TO BOX 5.

IF CMQ.205 = 1 OR WAS NOT ASKED, CONTINUE WITH CMQ.305.

CMQ305

QUESTION TEXT:

Besides {PERSON AT FALL CMQ.110/PERSON AT SPRING CMQ.210}, is there another relative or friend, who does not live in this household, who will always know where you are if you move?

IF NECESSARY SAY: I will only contact this person if I cannot locate you for the next interview.

CODES

1	YES	CMQ310
2	NO	BOX 5
	REFUSED	BOX 5

PROGRAMMER INSTRUCTIONS:

IF CMQ.200 = REF/DK, DISPLAY NAME FROM PERSON IN FALL CMQ.110. ELSE, DISPLAY NAME FROM PERSON IN SPRING CMQ.210.

CMQ310**QUESTION TEXT:**

What is the name, address, and telephone number of that person?

{ENTER / CORRECT / ENTER NEW} FIRST AND LAST NAME.

{IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

ENTER TEXT

Length

40

PROGRAMMER INSTRUCTIONS:

IF FALL K CONTINUING HOUSEHOLD AND FALL K CMQ.130=1, DISPLAY THE OLD INFORMATION FROM FALL K CMQ.140 IN THE RESPONSE FIELDS.

IF CMQ.300=2, DISPLAY 'CORRECT.'

IF CMQ.300=3, DISPLAY 'ENTER NEW.'
OTHERWISE, DISPLAY 'ENTER.'

IF CMQ.300=2, DISPLAY 'IF FIELD... INFORMATION.'
OTHERWISE, USE A NULL DISPLAY.

CMQ320**QUESTION TEXT:**

What is the name, address, and telephone number of that person?]

{ENTER / CORRECT / ENTER NEW} STREET ADDRESS, LINE 1.

{IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

ENTER TEXT

Length

75

REFUSED

DON'T KNOW

PROGRAMMER INSTRUCTIONS:

IF FALL K CONTINUING HOUSEHOLD AND FALL K CMQ.130=1, DISPLAY THE OLD INFORMATION FROM FALL K CMQ.140 IN THE RESPONSE FIELDS.

IF CMQ.300=2, DISPLAY 'CORRECT.'

IF CMQ.300=3, DISPLAY 'ENTER NEW.'
OTHERWISE, DISPLAY 'ENTER.'

IF CMQ.300=2, DISPLAY 'IF FIELD... INFORMATION.'
OTHERWISE, USE A NULL DISPLAY.

CMQ330

QUESTION TEXT:

[What is the name, address, and telephone number of that person?]

{ENTER / CORRECT / ENTER NEW} STREET ADDRESS, LINE 2.

{IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

ENTER TEXT

Length	75
REFUSED	
DON'T KNOW	

PROGRAMMER INSTRUCTIONS:

IF FALL K CONTINUING HOUSEHOLD AND FALL K CMQ130=1, DISPLAY THE OLD INFORMATION FROM FALL K CMQ1.40 IN THE RESPONSE FIELDS.

IF CMQ.300=2, DISPLAY 'CORRECT.'
IF CMQ.300=3, DISPLAY 'ENTER NEW.'
OTHERWISE, DISPLAY 'ENTER.'

IF CMQ.300=2, DISPLAY 'IF FIELD... INFORMATION.'
OTHERWISE, USE A NULL DISPLAY.

CMQ340

QUESTION TEXT:

[What is the name, address, and telephone number of that person?]

{ENTER / CORRECT / ENTER NEW} CITY.

{IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

ENTER TEXT

Length	30
REFUSED	
DON'T KNOW	

PROGRAMMER INSTRUCTIONS:

IF FALL K CONTINUING HOUSEHOLD AND FALL K CMQ.130=1, DISPLAY THE OLD INFORMATION FROM FALL K CMQ140 IN THE RESPONSE FIELDS.

IF CMQ.300=2, DISPLAY 'CORRECT.'
IF CMQ.300=3, DISPLAY 'ENTER NEW.'
OTHERWISE, DISPLAY 'ENTER.'

IF CMQ.300=2, DISPLAY 'IF FIELD... INFORMATION.'

CMQ350

HELP AVAILABLE

QUESTION TEXT:

[What is the name, address, and telephone number of that person?]

{ENTER / CORRECT / ENTER NEW} STATE.

{IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

REFUSED

DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY STATE ABBREVIATIONS.

IF FALL K CONTINUING HOUSEHOLD AND FALL K CMQ.130=1, DISPLAY THE OLD INFORMATION FROM FALL K CMQ140 IN THE RESPONSE FIELDS.

IF CMQ.300=2, DISPLAY 'CORRECT.'
IF CMQ.300=3, DISPLAY 'ENTER NEW.'
OTHERWISE, DISPLAY 'ENTER.'

IF CMQ.300=2, DISPLAY 'IF FIELD... INFORMATION.'
OTHERWISE, USE A NULL DISPLAY.

CMQ360

QUESTION TEXT:

[What is the name, address, and telephone number of that person?]

{ENTER / CORRECT / ENTER NEW} ZIP CODE.

{IF FIELD IS INCOMPLETE, ENTER NEW INFORMATION.}

ENTER TEXT

Length

9

REFUSED

DON'T KNOW

PROGRAMMER INSTRUCTIONS:

IF FALL K CONTINUING HOUSEHOLD AND FALL K CMQ.130=1, DISPLAY THE OLD INFORMATION FROM FALL K CMQ140 IN THE RESPONSE FIELDS.

IF CMQ.300=2, DISPLAY 'CORRECT.'
IF CMQ.300=3, DISPLAY 'ENTER NEW.'
OTHERWISE, DISPLAY 'ENTER.'

IF CMQ.300=2, DISPLAY 'IF FIELD... INFORMATION.'

OTHERWISE, USE A NULL DISPLAY.

CMQ370

QUESTION TEXT:

[What is the name, address, and telephone number of that person?]

IF NO TELEPHONE, ENTER 'ooo.'

{ENTER / CORRECT / ENTER NEW} PHONE NUMBER, INCLUDING AREA CODE.

{IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

ENTER TEXT

Length	15
REFUSED	
DON'T KNOW	

PROGRAMMER INSTRUCTIONS:

IF FALL K CONTINUING HOUSEHOLD AND FALL K CMQ.130=1, DISPLAY THE OLD INFORMATION FROM FALL K CMQ.140 IN THE RESPONSE FIELDS.

IF CMQ.300=2, DISPLAY 'CORRECT.'

IF CMQ.300=3, DISPLAY 'ENTER NEW.'

OTHERWISE, DISPLAY 'ENTER.'

IF CMQ.300=2, DISPLAY 'IF FIELD... INFORMATION.'

OTHERWISE, USE A NULL DISPLAY.

CMQ380

QUESTION TEXT:

What is the person's relationship to you?

{ENTER / CORRECT / ENTER NEW} RELATIONSHIP OF PERSON TO RESPONDENT.

{IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

ENTER TEXT

Length	50
REFUSED	
DON'T KNOW	

PROGRAMMER INSTRUCTIONS:

IF FALL K CONTINUING HOUSEHOLD AND FALL K CMQ.130=1, DISPLAY THE OLD INFORMATION FROM FALL K CMQ.140 IN THE RESPONSE FIELDS.

IF CMQ.300=2, DISPLAY 'CORRECT.'

IF CMQ.300=3, DISPLAY 'ENTER NEW.'

OTHERWISE, DISPLAY 'ENTER.'

IF CMQ.300=2, DISPLAY 'IF FIELD... INFORMATION.'
OTHERWISE, USE A NULL DISPLAY.

BOX 5

IF FALL K NONRESPONSE HOUSEHOLD, GO TO CMQ.383.

FALL K CONTINUING HOUSEHOLD:

IF FALL K CMQ.092 HAD AN ANSWER AND THE RESPONDENT IN SPRING K IS THE SAME AS THE RESPONDENT
IN FALL K, CONTINUE WITH CMQ.382.
ELSE, GO TO CMQ.383.

CMQ382

QUESTION TEXT:

I have also recorded that your e-mail address is {EMAIL ADDRESS}. Is that correct?

CODES

1	YES -- NO CORRECTION NEEDED	BOX 6
2	YES -- MINOR CORRECTIONS NEEDED	CMQ384
3	NO	CMQ383
	REFUSED	BOX 6
	DON'T KNOW	BOX 6

PROGRAMMER INSTRUCTIONS:

DISPLAY E-MAIL ADDRESS FROM FALL K CMQ092.

CMQ383

QUESTION TEXT:

Is there an e-mail address where we could reach you?

CODES

1	YES	
2	NO	BOX 6
	REFUSED	BOX 6
	DON'T KNOW	BOX 6

CMQ384

QUESTION TEXT:

What is your e-mail address?

IF EMAIL ADDRESS WILL NOT FIT THE SPACE PROVIDED, ENTER IT IN COMMENTS.

{CORRECT / ENTER NEW} E-MAIL ADDRESS.

{IF FIELD IS INCOMPLETE, ASK FOR NEW INFORMATION.}

ENTER TEXT

Length 70

REFUSED

DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY THE OLD INFORMATION FROM FALL K CMQ.092 IN THE RESPONSE FIELDS.

IF CMQ.382=2, DISPLAY 'CORRECT.' IF CMQ382=3, DISPLAY 'ENTER NEW.'

IF CMQ.382=2, DISPLAY 'IF FIELD... INFORMATION.'

OTHERWISE, USE A NULL DISPLAY.

ALLOW 33 TOTAL CHARACTERS FOR THE E-MAIL ADDRESS.

ALLOW FOR REFUSED AND DON'T KNOW ANSWERS.

?

BOX 6

IF (FALL K CONTINUING HOUSEHOLD) AND (FOCAL CHILD HAS AT LEAST ONE NON-RESIDENTIAL PARENT WHO THE CHILD HAS HAD CONTACT WITH (NRQ.040=1 OR 2 FOR AT LEAST ONE NON-RESIDENTIAL PARENT)) AND FALL K CMQ170 WAS COMPLETED AND THE RESPONDENT IN SPRING K IS THE SAME AS THE RESPONDENT IN FALL K, CONTINUE WITH CMQ395.

OTHERWISE, GO TO BOX 7.

DEFINITION OF "COMPLETED" NON-RESIDENT PARENT INFORMATION:

EITHER NAME + PHONE NUMBER OR NAME + CITY+ STATE WERE COLLECTED IN FALL K.

IF THE NON-RESIDENT PARENT ADDRESS COLLECTED IN FALL K DOES NOT MEET THE DEFINITION OF "COMPLETE," THEN CAPI ROUTES THAT CASE TO BOX 7.

CMQ395

QUESTION TEXT:

I have recorded {NAME OF NONRESIDENTIAL PARENT} at {PHONE NUMBER}

on
{STREET ADDRESS, LINE 1}
{STREET ADDRESS, LINE 2}
{CITY}
{STATE}
{ZIP CODE}

is {CHILD}'s {RELATIONSHIP AT CMQ170}.

Is this information still correct?

IF NECESSARY SAY: I will only contact this person if I cannot locate you for the next interview.

CODES

1	YES -- NO CORRECTION NEEDED	CMQ680
2	YES -- MINOR CORRECTIONS NEEDED	CMQ400
3	NO	BOX 7
4	INFORMATION ALREADY PROVIDED IN PREVIOUS ITEMS	CMQ680
	REFUSED	CMQ680
	DON'T KNOW	CMQ680

PROGRAMMER INSTRUCTIONS:

DISPLAY THE NAME, ADDRESS, PHONE NUMBER, AND RELATIONSHIP OF NON-RESIDENTIAL PARENT FROM FALL K CMQ.170.

DK AND RF FROM ROUND 1 MUST SHOW UP AS PART OF THE ITEM TEXT AS 'REFUSED,' "REF," "DK," OR "DON'T KNOW."

DISPLAY CITY, STATE, AND ZIP ON 1 LINE.

BOX 7

IF CMQ.395 WAS NOT ASKED AND IF FOCAL CHILD HAS AT LEAST ONE NON-RESIDENT PARENT WHO THE CHILD HAS HAD CONTACT WITH (NRQ.040=1 OR 2 FOR AT LEAST ONE NON-RESIDENT PARENT), CONTINUE WITH CMQ.400.

IF CMQ.395=3 (NO) AND THE FOCAL CHILD HAS AT LEAST ONE NON-RESIDENT PARENTS WHO THE CHILD HAS HAD CONTACT WITH (NRQ.040=1 OR 2 FOR AT LEAST ONE NON-RESIDENT PARENT), ALSO CONTINUE WITH CMQ.400.

OTHERWISE, GO TO CMQ.680.

CMQ400

QUESTION TEXT:

What is the name, address, and telephone number of {CHILD}'s {biological mother/ {or} biological father / {or} adoptive mother / {or} adoptive father}?

ENTER FIRST AND LAST NAME.

IF THE PARENT IS DECEASED OR THERE HAS BEEN NO CONTACT SINCE BIRTH/ADOPTION OR THERE IS NO ADOPTIVE MOTHER/FATHER, THEN CODE "8."

IF NECESSARY SAY: I will only contact this person if I cannot locate you for the next interview.

ENTER TEXT

Length

40

PROGRAMMER INSTRUCTIONS:

DISPLAY 'biological mother' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER.

DISPLAY '{or} biological father] IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL FATHER.
DISPLAY THE 'or' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER ALSO.

DISPLAY '{or} adoptive mother' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT ADOPTIVE MOTHER.
DISPLAY THE 'or' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT BIOLOGICAL FATHER ALSO.

DISPLAY '{or} adoptive father' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT ADOPTIVE FATHER.
DISPLAY THE 'or' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT BIOLOGICAL FATHER ALSO.

IF 8 CODED, GO TO CMQ.680

CMQ410

QUESTION TEXT:

[What is the name, address, and telephone number of {CHILD}'s {biological mother/ {or} biological father / {or} adoptive mother / {or} adoptive father}?:]

ENTER STREET ADDRESS, LINE 1.

ENTER TEXT

Length

75

REFUSED

DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY 'biological mother' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER.

DISPLAY '{or} biological father] IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL FATHER.
DISPLAY THE 'or' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER ALSO.

DISPLAY '{or} adoptive mother' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT ADOPTIVE MOTHER.
DISPLAY THE 'or' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT BIOLOGICAL FATHER ALSO.

DISPLAY '{or} adoptive father' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT ADOPTIVE FATHER.
DISPLAY THE 'or' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT BIOLOGICAL FATHER ALSO.

CMQ420

QUESTION TEXT:

[What is the name, address, and telephone number of {CHILD}'s {biological mother/ {or} biological father / {or} adoptive mother / {or} adoptive father}?:]

ENTER STREET ADDRESS, LINE 2.

ENTER TEXT

Length 75
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY 'biological mother' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER.

DISPLAY '{or} biological father' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL FATHER.
DISPLAY THE 'or' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER ALSO.

DISPLAY '{or} adoptive mother' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT ADOPTIVE MOTHER.
DISPLAY THE 'or' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT BIOLOGICAL FATHER ALSO.

DISPLAY '{or} adoptive father' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT ADOPTIVE FATHER.
DISPLAY THE 'or' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT BIOLOGICAL FATHER ALSO.

CMQ430

QUESTION TEXT:

[What is the name, address, and telephone number of {CHILD}'s {biological mother/ {or} biological father / {or} adoptive mother / {or} adoptive father}?:]

ENTER CITY.

ENTER TEXT

Length 30
REFUSED
DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY 'biological mother' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER.

DISPLAY '{or} biological father] IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL FATHER.
DISPLAY THE 'or' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER ALSO.
DISPLAY '{or} adoptive mother' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT ADOPTIVE MOTHER.
DISPLAY THE 'OR' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT
BIOLOGICAL FATHER ALSO.

DISPLAY '{or} adoptive father' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT ADOPTIVE FATHER.
DISPLAY THE 'or' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT
BIOLOGICAL FATHER ALSO.

CMQ440

HELP AVAILABLE

QUESTION TEXT:

[What is the name, address, and telephone number of {CHILD}'s {biological mother/ {or} biological father /
{or} adoptive mother / {or} adoptive father}?:]

ENTER STATE.

REFUSED

DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY 'biological mother' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER.

DISPLAY '{or} biological father] IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL FATHER.
DISPLAY THE 'or' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER ALSO.

DISPLAY '{or} adoptive mother' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT ADOPTIVE MOTHER.
DISPLAY THE 'or' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT
BIOLOGICAL FATHER ALSO.

DISPLAY '{or} adoptive father' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT ADOPTIVE FATHER.
DISPLAY THE 'or' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT
BIOLOGICAL FATHER ALSO.

CMQ450

QUESTION TEXT:

[What is the name, address, and telephone number of {CHILD}'s {biological mother/ {or} biological father /
{or} adoptive mother / {or} adoptive father}?:]

ENTER ZIP CODE.

ENTER TEXT

Length

9

REFUSED

DON'T KNOW

PROGRAMMER INSTRUCTIONS:

DISPLAY 'biological mother' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER.

DISPLAY '{or} biological father' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL FATHER.
DISPLAY THE 'or' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER ALSO.

DISPLAY '{or} adoptive mother' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT ADOPTIVE MOTHER.
DISPLAY THE 'or' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT BIOLOGICAL FATHER ALSO.

DISPLAY '{or} adoptive father' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT ADOPTIVE FATHER.
DISPLAY THE 'or' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT BIOLOGICAL FATHER ALSO.

CMQ460

QUESTION TEXT:

[What is the name, address, and telephone number of {CHILD}'s {biological mother / {or} biological father / {or} adoptive mother / {or} adoptive father}?

IF NO TELEPHONE, ENTER '000.'

ENTER PHONE NUMBER, INCLUDING AREA CODE.

ENTER TEXT

Length	15
REFUSED	
DON'T KNOW	

PROGRAMMER INSTRUCTIONS:

DISPLAY '{or} biological father' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL FATHER.
DISPLAY 'biological mother' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER.
DISPLAY THE 'or' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER ALSO.

DISPLAY '{or} adoptive mother' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT ADOPTIVE MOTHER.
DISPLAY THE 'or' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT BIOLOGICAL FATHER ALSO.

DISPLAY '{or} adoptive father' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT ADOPTIVE FATHER.
DISPLAY THE 'or' IF NRQ.040=1 OR 2 FOR A NON-RESIDENT BIOLOGICAL MOTHER OR NON-RESIDENT BIOLOGICAL FATHER ALSO.

CMQ470

QUESTION TEXT:

{Let me just confirm our information}. What is the person's relationship to {CHILD}?

ENTER RELATIONSHIP OF PERSON TO CHILD.

ENTER TEXT

Length	50
REFUSED	
DON'T KNOW	

PROGRAMMER INSTRUCTIONS:

DISPLAY “Let me... information” IF ONLY ONE TYPE OF NONRESIDENT PARENT WAS DISPLAYED IN CMQ.460 (E.G., ONLY “BIOLOGICAL MOTHER” AND NOT “BIOLOGICAL FATHER”, “ADOPTIVE MOTHER”, OR “ADOPTIVE FATHER”. ELSE, USE A NULL DISPLAY.

CMQ680

QUESTION TEXT:

WAS THIS INTERVIEW CONDUCTED BY TELEPHONE OR IN-PERSON?

CODES

- 1 ☐ TELEPHONE
- 2 ☐ IN-PERSON

CMQ690

QUESTION TEXT:

WAS THIS INTERVIEW CONDUCTED IN ENGLISH, SPANISH, OR ANOTHER LANGUAGE?

CODES

- 1 ENGLISH BOX 7A
- 2 SPANISH BOX 7A
- 91 ANOTHER LANGUAGE CMQ690OS

CMQ690OS

QUESTION TEXT:

SPECIFY OTHER LANGUAGE.

[WAS THIS INTERVIEW CONDUCTED IN ENGLISH, SPANISH, OR ANOTHER LANGUAGE?]

ENTER TEXT

Length

25

Box 7A

IF CMQ.680 =2, GO TO CMQ.695. ELSE, GO TO BOX 8.

CMQ695

QUESTION TEXT:

WHERE WAS THIS INTERVIEW CONDUCTED?

CODES

- | | |
|---|----------------|
| 1 | CHILD'S HOME |
| 2 | CHILD'S SCHOOL |
| 3 | SOMEWHERE ELSE |

BOX 8

SET FINAL DISPOSITION CODE:

IF CMQ.680=1 (TELEPHONE) AND CMQ.690=1 (ENGLISH), SET DISPOSITION CODE TO 60.

IF CMQ.680=1 (TELEPHONE) AND CMQ.690=2 (SPANISH), SET DISPOSITION CODE TO 61.

IF CMQ.680=1 (TELEPHONE) AND CMQ.690=3 (ANOTHER LANGUAGE), SET DISPOSITION CODE TO 62.

IF CMQ.680=2 (IN-PERSON) AND CMQ.690=1 (ENGLISH), SET DISPOSITION CODE TO 63.

IF CMQ.680=2 (IN-PERSON) AND CMQ.690=2 (SPANISH), SET DISPOSITION CODE TO 64.

IF CMQ.680=2 (IN-PERSON) AND CMQ.690=3 (ANOTHER LANGUAGE), SET DISPOSITION CODE TO 65.

CMQ700

QUESTION TEXT:

Thank you very much for your cooperation and for taking the time to participate in the Early Childhood

Longitudinal Study.

PRESS ENTER TO CONTINUE.

BOX 9

GO TO CMQ.720.

CMQ701

QUESTION TEXT:

We would like to call the parent or guardian for {CHILD} at the household where {he/she} lives. Please give me the name and telephone number for the home that I should call. AFTER EXITING ON THE NEXT SCREEN, ENTER CONTACT INFORMATION FOR CHILD'S RESIDENCE INTO THE ELECTRONIC RECORD OF CALLS.

PRESS ENTER TO CONTINUE.

ENTER TEXT

BOX 10

GO TO CMQ.720.

CMQ702

QUESTION TEXT:

We would like to call back when {CHILD}'s parent or guardian is available. Please tell me when we should call

back. AFTER EXITING ON THE NEXT SCREEN, ENTER CALL BACK TIME INTO THE ELECTRONIC RECORD OF CALLS.

PRESS ENTER TO CONTINUE.

ENTER TEXT

BOX 11

GO TO CMQ,720

CMQ703

QUESTION TEXT:

Thank you. AFTER EXITING ON THE NEXT SCREEN, ENTER INTO THE ELECTRONIC RECORD OF CALLS WHETHER YOU SPOKE TO THE CONTACT PERSON AND ANY INFORMATION YOU HAVE ABOUT WHY AN APPROPRIATE RESPONDENT WAS NOT AVAILABLE, NOT IN THE HOUSEHOLD, OR THE INFORMATION WAS REFUSED/DON'T KNOW.

PRESS ENTER TO CONTINUE.

CMQ720

QUESTION TEXT:

PRESS 1 AND ENTER TO SAVE AND EXIT THIS CASE.