

**Attachment A:**

**2013 NSCNC  
Questionnaire**

# NSCNC telephone questionnaire

## NATIONAL SURVEY OF CHILDREN IN NONPARENTAL CARE

**The following public burden estimate statement will be available as a CATI screen:**

According to the Paperwork Reduction Act (PRA) of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 0920-0406. The time required to complete this information collection is estimated to average 30 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have any comments about the accuracy of the time estimate(s) or suggestions for improving this form please write to: CDC Reports Clearance Officer, 1600 Clifton Road, MS-D74, Atlanta, GA 30333; call 404-639-4794; or send an email to [omb@cdc.gov](mailto:omb@cdc.gov).

Data collection conducted under contract to the CDC by NORC at the University of Chicago.

Form approved  
OMB No. 0920-0406  
Exp. Date 04/30/14

**Assurance of Confidentiality.** All information which would permit identification of any individual, a practice, or an establishment will be held confidential, will be used for statistical purposes only by NCHS staff, contractors, and agents only when required and with necessary controls, and will not be disclosed or released to other persons without the consent of the individual or the establishment in accordance with section 308(d) of the Public Health Service Act (42 USC 242m) and the Confidential Information Protection and Statistical Efficiency Act (PL-107-347).

**NOTE: ALL QUESTIONS HAVE DON'T KNOW (DK) AND REFUSED (RF) AS ANSWER OPTIONS, WHETHER OR NOT THOSE CHOICES ARE SPECIFICALLY INCLUDED IN THIS QUESTIONNAIRE.**

**NOTE: WHEN FILLING [INTERVIEW DATE] IN INTRO\_1 AND INTRO\_2, USE MONTH AND YEAR ONLY**

INTRO\_1. Hello, my name is \_\_\_\_\_. I'm calling on behalf of the CDC's National Center for Health Statistics (IF RECEIVED ADVANCE LETTER, "to follow up on a letter that was sent to your home"/ ELSE NO FILL). On [INTERVIEW DATE], we conducted a telephone survey on children's health with an adult at this phone number about a [Male/Female] child who would now be about [ESTIMATED AGE] years old. The person we spoke with told us [he was/she was/they were] the child's [RELATION]. We are interested in speaking with this child's [RELATION] again, or with a parent or guardian who is currently living with the child. Is this person available?

(1) YES, SPEAKING WITH THAT PERSON <IF RDD\_NCELL\_CCELL=1 THEN GO TO INTRO3; IF RDD\_NCELL\_CCELL=2, 3 THEN GO TO S\_WARM>

(2) YES, NEW PERSON COMES TO PHONE <GO TO INTRO2>

(3) NO, NOT AVAILABLE NOW <SET GCB AND TERMINATE>

- (5) NO, PERSON HAS MOVED OR HAS NEW PHONE NUMBER <GO TO LOC\_A>
- (6) DO NOT KNOW THIS PERSON <GO TO UNKNOWN>
- (7) NO, PERSON IS DECEASED <GO TO DECEASEDP>
- (8) NO, CHILD IS DECEASED <GO TO DECEASED>
- (9) CHILD NO LONGER LIVES IN HOUSE WITH R <GO TO MOVED>

S\_WARM If you are currently driving a car or doing any activity that requires your full attention I need to call you back at a later time.

- (1) CONTINUE [GO TO INTRO3]
- (2) R UNABLE TO CONTINUE [GO TO S\_ATTEN]
- (3) NOT A CELL PHONE [GO TO INTRO3]

S\_ATTEN For your safety, we will call you back at another time.

- (1) CALL BACK ANOTHER TIME [SET APPOINTMENT AND TERMINATE]

EVEN IF THE RESPONDENT IS USING A HANDS-FREE DEVICE WHILE DRIVING, YOU MUST END THE CALL.

UNKNOWN Do you know anyone who would be able to tell us how to get in contact with this child's current caregiver or guardian?

HELP TEXT: IF INFORMATION PROVIDED, WRITE IT DOWN AND GIVE IT TO YOUR SUPERVISOR WITH THE CASE SU\_ID.

UNKNOWN\_EXIT Thank you for your time. Have a nice day.

LOC\_A What is their new telephone number?

- (1) CONTINUE – R CAN PROVIDE A NEW NUMBER
- (2) NONE
- (77) DON'T KNOW
- (99) REFUSED

SKIP TO LOC\_F IF NONE/DK/RF.

LOC\_AA RECORD NUMBER \_\_\_\_-\_\_\_\_-\_\_\_\_\_

LOC\_B Is that a landline or cell phone number?

- (1) LANDLINE
- (2) CELLULAR
- (77) DON'T KNOW
- (99) REFUSED

LOC\_C Does this person have any other number where they might be reached?

- (1) YES [GO TO LOC\_D]
- (2) NO [GO TO LOC\_F]
- (77) DON'T KNOW [GO TO LOC\_F]
- (99) REFUSED [GO TO LOC\_F]

LOC\_D What is that telephone number?

RECORD NUMBER \_\_\_\_\_

- (77) DON'T KNOW
- (99) REFUSED

IF NUMBER RECORDED, SET NEWPHONE2\_FLAG=1  
SKIP TO LOC\_F IF NONE/DK/RF.

LOC\_E Is that a landline or cellular telephone number?

- (1) LANDLINE
- (2) CELLULAR
- (77) DON'T KNOW
- (99) REFUSED

LOC\_F What is their name?

RECORD VERBATIM RESPONSE

- (77) DON'T KNOW
- (99) REFUSED

GO TO LOC\_EXIT

LOC\_EXIT Thank you for providing contact information for [S.C.]’s caregiver. We will attempt to contact [him/her] as soon as possible to discuss this important survey.

<IF INTRO1=9 OR INTRO2=9 OR ELIG NE 1 THEN GO TO NLNPCG>  
ELSE CONTINUE

Thank you for your time and have a nice day.

SET CALLING RULES TO IMMEDIATELY DIAL THE NUMBER ENTERED AT LOC\_AA; SET RDD\_NCCELL\_CCELL=(1 OR 2 BASED ON LOC\_B). SET CALLING RULES TO TRY THE NUMBER ENTERED AT LOC\_D IF LOC\_AA IS NOT SUCCESSFUL

DECEASED I’m sorry to hear that. I do not need to continue. Thank you, and please accept my condolences. Goodbye. [TERMINATE]

DECEASEDP I’m sorry to hear that, please accept my condolences. Would you be able to tell us how to get in contact with this child’s current caregiver or guardian?

(1) YES <GO TO LOC\_A>

(2) NO [TERMINATE]

MOVED We are interested in speaking with a parent or guardian of the child who is currently living with the child. Would you be able to tell us how to get in contact with this person?

(1) YES <GO TO LOC\_A>

(2) NO <GO TO NLNPCG>

MOVED2 Would you be able to tell us how to get in contact with a parent or guardian of the child who is currently living with the child?

(1) YES <GO TO LOC\_A>

(2) NO <GO TO NLNPCG>

INTRO\_2 Hello, my name is \_\_\_\_\_. I’m calling on behalf of the CDC’s National Center for Health Statistics (IF RECEIVED ADVANCE LETTER, “to follow up on a letter that was sent to your home”/ ELSE NO FILL). On [INTERVIEW DATE], we conducted a telephone survey on children’s health with an adult at this phone number about a [Male/Female] child who would now be about [ESTIMATED AGE] years old. The person we spoke with told us [he was/she was/they were] the child’s [RELATION]. We are interested in speaking with this person again, or with a parent or guardian who is currently living with the child. Is this person available?

- (1) YES, SPEAKING WITH THAT PERSON <IF RDD\_NCCELL\_CCELL=1 THEN GO TO INTRO3; IF RDD\_NCCELL\_CCELL=2, 3 THEN GO TO S\_WARM>
- (2) YES, NEW PERSON COMES TO PHONE <REPEAT INTRO2>
- (3) NO, NOT AVAILABLE NOW <SET GCB AND TERMINATE>
- (5) NO, PERSON HAS MOVED OR HAS NEW PHONE NUMBER <GO TO LOC\_A>
- (6) DO NOT KNOW THIS PERSON <GO TO UNKNOWN>
- (7) NO, PERSON IS DECEASED <GO TO DECEASEDP>
- (8) NO, CHILD IS DECEASED <GO TO DECEASED>
- (9) CHILD NO LONGER LIVES IN HOUSE WITH R <GO TO MOVED>

INTRO3. Thank you for previously completing the National Survey of Children’s Health. We appreciate your household’s participation in this important survey.

The CDC’s National Center for Health Statistics is re-contacting caregivers and guardians of children who were living apart from their parents. This survey will help researchers to understand the living situations of these children and the problems they and their caregivers may have receiving needed services. If you qualify for and complete this survey, as a token of appreciation we will send you \$[MONEY] for your time.

CONTINUE

ELIG\_ We are interested in speaking with a parent or guardian of the child who is currently living with the child. Does the child live with you now?

- (1) YES [GO TO CONSENT]
- (2) NO [GO TO MOVED2]
- (77) DON'T KNOW [GO TO MOVED2]
- (99) REFUSED [GO TO MOVED2]

NLNPCG I only have a few additional questions for you.  
CONTINUE

CONSENT Before we continue, I'd like you to know that taking part in this research is voluntary. You may choose not to answer any question you don't wish to answer, or end the interview at any time with no impact on the benefits you may receive. We are required by Federal law to develop and follow strict procedures to protect the confidentiality of your information and use your answers only for statistical research. I can describe these laws if you wish. [FILL: IF INTRO1=9 OR INTRO2=9 OR ELIG NE 1, LEAVE BLANK; ELSE FILL: In appreciation for your time, we will send you \$[MONEY]. The survey will take about a half hour.] In order to review my work, this call will be recorded and my supervisor may listen as I ask the questions. I'd like to continue now unless you have any questions.

READ IF NECESSARY: The Public Health Service Act is Title 42 of the US Code, Section 242k. The collection of information in this survey is authorized by Section 306 of this Act. Through the National Center for Health Statistics, the confidentiality of your responses is assured by Section 308d of this Act and by the Confidential Information Protection and Statistical Efficiency Act. Would you like me to read the Confidential Information Protection provisions to you?

IF RESPONDENT WOULD LIKE TO HEAR PROVISIONS, READ: The information you provide will be used for statistical purposes only. In accordance with the Confidential Information Protection provisions of Title V, Subtitle A, Public Law 107-347 and other applicable Federal laws, your responses will be kept confidential and will not be disclosed in identifiable form to anyone other than NCHS employees or agents. By law, every employee of the National Center for Health Statistics, N-O-R-C at the University of Chicago, and their agents and contractors who works on this survey has taken an oath and is subject to a jail term of up to 5 years, a fine of up to \$250,000, or both, if he or she willingly discloses ANY identifiable information about you or your household members.

- (1) CONTINUE, RECORDING ACCEPTABLE
- (2) CONTINUE, DO NOT RECORD

IF INTRO1=9 OR INTRO2=9 OR ELIG NE 1 THEN GO TO NLNPCGSTART,  
ELSE GO TO H1.

**NLNPCGSTART**

(THESE 9 QUESTIONS ARE ASKED OF FORMER CAREGIVERS NO LONGER CARING FOR THE CHILD AND THE INTERVIEW THEN TERMINATES)

<b>N_L1</b>
<b>Universe: NLNPCG</b>

Just before coming to live with you, where did [SC] live?

**INTERVIEWER INSTRUCTION:** IF RESPONDENT SAYS THEY MOVED INTO [SC]'S HOUSEHOLD, RATHER THAN [SC] COMING TO LIVE WITH THEM, CODE "RESPONDENT MOVED INTO [SC]'S HOUSEHOLD."

**INTERVIEWER INSTRUCTION:** IF [SC] HAS LIVED WITH RESPONDENT SINCE BIRTH, CODE "[SC] HAS LIVED WITH RESPONDENT SINCE BIRTH"

**INTERVIEWER INSTRUCTION:** SELECT ONLY ONE.

WITH [HIS/HER] BIRTH PARENT(S)	1
WITH [HIS/HER] ADOPTIVE PARENT(S)	2
WITH OTHER MEMBERS OF [HIS/HER] BIRTH FAMILY, ANOTHER RELATIVE	3
WITH ANOTHER FOSTER PARENT	4
IN A GROUP HOME IN FOSTER CARE SYSTEM, THAT IS, A HOME WITH 4 FOSTER CHILDREN OR MORE	5
IN A RESIDENTIAL TREATMENT FACILITY, THAT IS, A FACILITY WHERE A NUMBER OF CHILDREN AND YOUTH LIVE	6
SOMEONE ELSE NOT MENTIONED (SPECIFY): _____	7
RESPONDENT MOVED INTO [SC]'S HOUSEHOLD	8
[SC] HAS LIVED WITH RESPONDENT SINCE BIRTH	9
DON'T KNOW	96
REFUSE	97

<b>N_H14</b>
<b>Universe: NLNPCG</b>

When did [SC] start living with you on a regular basis, without [his/her] parent or parents?

**HELP TEXT (READ IF NECESSARY):** Do you know the year?

**HELP TEXT (READ IF NECESSARY):** Do you know the month?

		DON'T	REFUSE
--	--	-------	--------



		KNOW	
H14_MONTH	RECORD MONTH _____	6	7
H14_DAY	RECORD DAY _____	6	7
H14_YEAR	RECORD YEAR _____	6	7

**N\_H16**

**Universe: NLNPCG**

Did anyone from child protective services or a foster care agency help arrange for you to care for [SC]?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**N1**

**Universe: NLNPCG**

How many months ago did [SC] stop living with you?

**INTERVIEWER INSTRUCTION: IF LESS THAN A MONTH, ENTER ZERO.**

ENTER NUMBER OF MONTHS.  __ __	
DON'T KNOW	96
REFUSE	97

**N2**

**Universe: NLNPCG**

What is the reason [SC] is no longer living with you?

**INTERVIEWER INSTRUCTION: CODE ALL THAT APPLY.**

YOU HAD LEGAL CUSTODY AGREEMENT THAT THE CHILD WOULD LIVE ELSEWHERE	1
YOU VOLUNTARILY GAVE UP CUSTODY	2
YOU HAD AN INFORMAL AGREEMENT THAT SOMEONE ELSE WOULD TAKE CARE OF THE CHILD	3
CHILD WENT TO LIVE WITH PARENT/REUNIFIED	4

CHILD PROTECTIVE SERVICES, ANOTHER AGENCY, OR THE COURT REMOVED THE CHILD FROM YOUR HOME	5
CHILD WENT AWAY TO SCHOOL	6
FINANCIAL PROBLEMS/COULD NOT AFFORD THE COST OF CARING FOR THE CHILD	7
YOU HAD HEALTH PROBLEMS	8
THE CHILD HAD HEALTH PROBLEMS	9
FELT CHILD WAS UNSAFE IN YOUR NEIGHBORHOOD	10
COULD NOT HANDLE/MANAGE THE CHILD	11
THE CHILD CHOSE TO LIVE WITH DIFFERENT CAREGIVERS	12
TOO MUCH CONFLICT BETWEEN THE CHILD AND OTHER CHILDREN IN THE HOUSEHOLD	13
SPOUSE/PARTNER WANTED THE CHILD TO MOVE	14
CHILD WANTED TO LIVE BY HIM/HERSELF	15
CHILD WANTED TO LIVE WITH GIRLFRIEND/BOYFRIEND OR ROOMMATES/ FRIENDS	16
CHILD RAN AWAY	17
CHILD WAS PLACED IN JUVENILE DETENTION CENTER/INCARCERATED	18
FAMILY EMERGENCY	19
OTHER (SPECIFY): _____	20
DON'T KNOW	96
REFUSE	97

<b>N3</b>
<b>Universe: NLNPCG</b>

With whom did [SC] live immediately after leaving your household?

WITH [HIS/HER] BIRTH PARENTS	1
WITH [HIS/HER] ADOPTIVE PARENTS	2
WITH OTHER MEMBERS OF [HIS/HER] BIRTH OR ADOPTIVE FAMILY, ANOTHER RELATIVE	3
WITH A FOSTER PARENT	4
IN A GROUP HOME IN FOSTER CARE SYSTEM, THAT IS, A HOME WITH 4 FOSTER CHILDREN OR MORE	5
IN A RESIDENTIAL TREATMENT FACILITY, THAT IS, A FACILITY WHERE A NUMBER OF CHILDREN AND YOUTH LIVE	6
IN A JUVENILE DETENTION CENTER OR PRISON	7
ON HIS/HER OWN	8
WITH GIRLFRIEND/BOYFRIEND, OR WITH ROOMMATES/FRIENDS	9

SOMEONE ELSE NOT MENTIONED (SPECIFY): _____	10
DON'T KNOW	96
REFUSE	97

<b>N4</b>
<b>Universe: NLNPCG</b>

Did you agree with the decision to change [SC]'s living arrangement?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

<b>N_P5</b>
<b>Universe: NLNPCG</b>

When you were caring for [SC] and [SC] was living with you, why didn't [he/she] live with [her/his] mother?

**INTERVIEWER INSTRUCTION: CODE ALL THAT APPLY.**

MOTHER IN JAIL	1
MOTHER DETAINED/DEPORTED FOR IMMIGRATION VIOLATIONS	2
MOTHER WAS NOT A GOOD MOTHER/WAS ABUSIVE/MISTREATED CHILD	3
CHILD REMOVED BY CHILD PROTECTIVE SERVICES	4
MOTHER IS SICK	5
MOTHER TOO BUSY/WORK SCHEDULE TOO DEMANDING	6
MOTHER HAS PROBLEMS WITH HUSBAND/BOYFRIEND	7
MOTHER HAS FINANCIAL PROBLEMS/CAN'T AFFORD TO KEEP CHILD	8
MOTHER HAS DRUG/ALCOHOL PROBLEMS	9
MOTHER DOESN'T WANT TO CARE FOR CHILD/GAVE CHILD UP	10
MOTHER THINKS CURRENT CARETAKER CAN DO A BETTER JOB	11
MOTHER'S NEIGHBORHOOD NOT GOOD FOR RAISING CHILDREN	12
MOTHER DECEASED	13
OTHER (SPECIFY) _____	14
DON'T KNOW	96
REFUSE	97

**N\_P23**

**Universe: NLNPCG**

When you were caring for [SC] and [SC] was living with you, why didn't [he/she] live with [her/his] father?

**INTERVIEWER INSTRUCTION: CODE ALL THAT APPLY.**

FATHER IN JAIL	1
FATHER DETAINED/DEPORTED FOR IMMIGRATION VIOLATIONS	2
FATHER WAS NOT A GOOD FATHER/WAS ABUSIVE/MISTREATED CHILD	3
CHILD REMOVED BY CHILD PROTECTIVE SERVICES	4
FATHER IS SICK	5
FATHER TOO BUSY/WORK SCHEDULE TOO DEMANDING	6
FATHER HAS PROBLEMS WITH WIFE/GIRLFRIEND	7
FATHER HAS FINANCIAL PROBLEMS/CAN'T AFFORD TO KEEP CHILD	8
FATHER HAS DRUG/ALCOHOL PROBLEMS	9
FATHER DOESN'T WANT TO CARE FOR CHILD/GAVE CHILD UP	10
FATHER THINKS CURRENT CARETAKER CAN DO A BETTER JOB	11
FATHER'S NEIGHBORHOOD NOT GOOD FOR RAISING CHILDREN	12
FATHER DECEASED	13
OTHER (SPECIFY) _____	14
DON'T KNOW	96
REFUSE	97

**NLNPCG END**

Those are all the questions I have. I'd like to thank you on behalf of the CDC's National Center for Health Statistics for the time and effort you've spent answering these questions. If you have any questions about this survey, you may call my supervisor toll-free at [TEXTFILL: to be determined]. If you have questions about your rights as a survey participant, you may call the chairman of the Research Ethics Review Board at [TEXTFILL: Phone number to be determined]. Thank you again.

# HOUSEHOLD STRUCTURE, HOUSING (H)

**H1**

**Universe: All**

How many adults age 18 or older live in this household?

RECORD NUMBER OF PEOPLE: _____	
DON'T KNOW	96
REFUSE	97

**INTERVIEWER INSTRUCTION:** EACH PERSON IN THE HOUSEHOLD MUST BE A CURRENT RESIDENT OF THE HOUSEHOLD. CHILDREN WHO ONLY LIVE PART-TIME IN THE HOUSEHOLD BECAUSE OF CUSTODY ISSUES SHOULD BE INCLUDED IF THEY ARE STAYING THERE WHEN CONTACT WITH THE HOUSEHOLD IS MADE. A CURRENT RESIDENCE IS DEFINED AS A PLACE WHERE THE PERSON IS STAYING FOR MORE THAN TWO MONTHS AT THE TIME OF THE SURVEY CONTACT. IF A PERSON HAS NO PLACE WHERE HE OR SHE USUALLY STAYS, THE PERSON SHOULD BE CONSIDERED A CURRENT RESIDENT REGARDLESS OF THE LENGTH OF THE CURRENT STAY. PERSONS AWAY FROM THEIR RESIDENCE FOR TWO MONTHS OR LESS, WHETHER TRAVELING OR IN THE HOSPITAL, ARE CONSIDERED "IN RESIDENCE." PERSONS AWAY FROM THEIR RESIDENCE FOR MORE THAN TWO MONTHS ARE CONSIDERED "NOT IN RESIDENCE" UNLESS THE PERSON IS AWAY AT SCHOOL (I.E., BOARDING SCHOOL, MILITARY ACADEMY, PREP SCHOOL, ETC.).

**H2**

**Universe: All**

How many children age 17 or younger live in this household?

RECORD NUMBER OF PEOPLE: _____	
DON'T KNOW	96
REFUSE	97

**INTERVIEWER INSTRUCTION:** EACH PERSON IN THE HOUSEHOLD MUST BE A CURRENT RESIDENT OF THE HOUSEHOLD. CHILDREN WHO ONLY LIVE PART-TIME IN THE HOUSEHOLD BECAUSE OF CUSTODY ISSUES SHOULD BE INCLUDED IF THEY ARE STAYING THERE WHEN CONTACT WITH THE HOUSEHOLD IS MADE. A CURRENT RESIDENCE IS DEFINED AS A PLACE WHERE THE PERSON IS STAYING FOR MORE THAN TWO MONTHS AT THE TIME OF THE SURVEY CONTACT. IF A PERSON HAS NO PLACE WHERE HE OR SHE USUALLY STAYS, THE PERSON SHOULD BE CONSIDERED A CURRENT RESIDENT REGARDLESS OF THE LENGTH OF THE CURRENT

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**H4**

**Universe: All**

**INTERVIEWER INSTRUCTION:** IF INTRO\_1=1 OR INTRO\_1=2 OR INTRO\_2=1, FILL= “when we last spoke with you.” ELSE FILL “When we last spoke with someone in your household.”

[When we last spoke with you/When we last spoke with someone in your household], [SC] did not have any parents living in the household with [him/her]. Does [SC] have any parents living in your household now?

NO [GO TO H6]	1
YES, RESPONDENT IS THE CHILD’S BIOLOGICAL PARENT OR PARENT WHO ADOPTED THE CHILD <u>PRIOR TO</u> THE NSCH SURVEY	2
RESPONDENT IS NOT A BIOLOGICAL OR ADOPTIVE PARENT, BUT A BIOLOGICAL OR ADOPTIVE PARENT LIVES IN THE HOUSEHOLD [GO TO H6]	3
YES, RESPONDENT IS ADOPTIVE PARENT WHO ADOPTED THE CHILD <u>AFTER</u> THE NSCH SURVEY [GO TO H6]	4
DON’T KNOW [GO TO H6]	6
REFUSE [GO TO H6]	7

**H5**

**Universe: Respondents who are parents**

**INTERVIEWER INSTRUCTION:** IF NOT OBVIOUS, ASK WHETHER THE PARENT IS THE CHILD’S MOTHER OR FATHER. ELSE, CODE THE APPROPRIATE RESPONSE WITHOUT ASKING.

MOTHER	1
FATHER	2
DON’T KNOW	6
REFUSE	7

**H6****Universe: All**

Are you married, widowed, divorced, separated or never married?

MARRIED	1
WIDOWED [GO TO H8]	2
DIVORCED [GO TO H8]	3
SEPARATED [GO TO H8]	4
NEVER MARRIED [GO TO H8]	5
DON'T KNOW [GO TO H8]	6
REFUSE [GO TO H8]	7

**H7****Universe: All married Rs**

Does your spouse currently live with you?

YES [GO TO H9]	1
NO	2
DON'T KNOW	6
REFUSE	7

**H8****Universe: Rs who are not married and not currently living with spouse**

Are you currently living with a boyfriend, girlfriend, or partner?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**H9****Universe: All except parents****IF H4=2, THEN GO TO H10**

What is your relationship to [SC]?

**HELP TEXT (READ IF NECESSARY):** Are you related on the mother’s side of [SC’s] family or on the father’s side of [SC’s] family? If not related, how do you know [SC]?

**INTERVIEWER INSTRUCTION:** IF CARETAKER IS BOTH A RELATIVE AND A FOSTER PARENT, CODE BOTH. IF CARETAKER IS BOTH A FRIEND OF THE FAMILY AND A FOSTER PARENT, CODE BOTH.

MATERNAL GRANDPARENT	1
PATERNAL GRANDPARENT	2
MATERNAL AUNT/UNCLE	3
PATERNAL AUNT/UNCLE	4
SIBLING	5
OTHER RELATIVE	6
STEP-PARENT	7
FOSTER PARENT	8
FRIEND OF CHILD’S MOTHER OR FATHER	9
OTHER FAMILY FRIEND, INCLUDING THOSE NOT SURE IF FRIEND OF MOTHER OR FATHER	10
OTHER (SPECIFY): _____	11
DON’T KNOW	96
REFUSE	97

<b>H10</b>
<b>Universe: All</b>

IF RESPONDENT IS CHILD’S PARENT (H4=2), ASK: Are [you/you and/or your spouse/partner] SC’s biological parent[s], or are you [his/her] legal adoptive parent[s]?

ELSE, ASK: Have [you/you and/or your spouse/partner] legally adopted [SC]?

**INTERVIEWER INSTRUCTION:** IF RESPONDENT IS PARENT AND ANSWERS HE/SHE IS THE BIOLOGICAL PARENT CODE ‘2’.

YES (R AND/OR SPOUSE/PARTNER IS LEGAL ADOPTIVE PARENT) [GO TO H13]	1
NO (NEITHER R NOR SPOUSE/PARTNER IS LEGAL ADOPTIVE PARENT)	2
DON’T KNOW	6
REFUSE	7



**H11****Universe: All except parents**

Did [you/you or your spouse/partner] know [SC] before you began caring for [him/her]?

YES (R OR SPOUSE/PARTNER KNEW CHILD PREVIOUSLY)	1
NO (NEITHER R NOR SPOUSE/PARTNER KNEW CHILD)	2
DON'T KNOW	6
REFUSE	7

**H12****Universe: All except parents**

Since [SC] has been living in your household, have [you/you or your spouse/partner] ever been officially a foster parent to [him/her]?

**HELP TEXT (READ IF NECESSARY):** Foster parents have to complete an application process called a home study, including a home inspection by the child protective services agency. Often to become a foster parent, you also have to participate and complete training.

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**H13****Universe: All**

What is your current housing situation? Please stop me when I read the statement that describes your situation. Do you rent your own apartment or house, live with family or friends who rent and you contribute part of the rent, live with family or friends who rent but you do not pay rent, own your own home, or live in a house or condo owned by another family member?

**INTERVIEWER INSTRUCTION: CODE ONLY ONE.**

RENT YOUR OWN APARTMENT OR HOUSE	1
LIVE WITH FAMILY OR FRIENDS WHO RENT AND YOU CONTRIBUTE PART OF THE RENT	2
LIVE WITH FAMILY OR FRIENDS WHO RENT BUT YOU DO NOT PAY RENT	3
OWN YOUR OWN HOME	4

LIVE IN A HOUSE OR CONDO OWNED BY ANOTHER FAMILY MEMBER	5
OTHER	6
DON'T KNOW	96
REFUSE	97

#### H14

**Universe: All**

IF RESPONDENT IS A PARENT (H4=2), ASK: Now, I'd like to ask you some questions about [SC]. Thinking about the time when you and SC weren't living together, when was it that [SC] stopped living with you on a regular basis?

ELSE, ASK: Now, I'd like to ask you some questions about [SC]. When did [SC] start living with you on a regular basis, without [his/her] parent or parents?

**HELP TEXT (READ IF NECESSARY):** Do you know the year?

**HELP TEXT (READ IF NECESSARY):** Do you know the month?

		DON'T KNOW	REFUSE
H14_MONTH	RECORD MONTH _____	6	7
H14_DAY	RECORD DAY _____	6	7
H14_YEAR	RECORD YEAR _____	6	7

#### H15

**Universe: All respondents who don't know the year and month in H14**

About how long ago do you think it was? Was it a year ago, or two or three years ago, [TEXTFILL if AGE >= 4: or four or five years ago,] [TEXTFILL if AGE >= 6: or six or seven years ago,] [TEXTFILL if AGE >= 8: or eight or nine years ago,] [TEXTFILL if AGE >= 10: or 10 or more years ago]?

A YEAR AGO	1
TWO OR THREE YEARS AGO	2
FOUR OR FIVE YEARS AGO	3
SIX OR SEVEN YEARS AGO	4
EIGHT OR NINE YEARS AGO	5
10 MORE YEARS AGO	6
DON'T KNOW	96
REFUSE	97

#### H16

**Universe: All except parents**  
**IF H4=2, THEN GO TO H18**

Did anyone from child protective services or a foster care agency help arrange for you to care for [SC]?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**H17**

**Universe: All except parents**

When the arrangement was made for you to care for [SC], did a court or judge make you responsible for the care of [SC]?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**H18**

**Universe: All**

To your knowledge, has [SC] ever had an open child protective services case?

**HELP TEXT (READ IF NECESSARY):** Has a child protective services or social services worker ever visited [SC] on a regular basis?

**HELP TEXT (READ IF NECESSARY):** Child protective services is the agency designated (in most States) to receive and investigate reports that a child has been abused or neglected. This agency may be part of the larger social services agency. When the agency finds that abuse or neglect has occurred or is at risk of occurring, it will typically open a case and provide intervention and treatment services to the child and family involved.

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**H19****Universe: All except parents****IF H4=2, THEN GO TO N5**

As part of the process of [SC] coming to live with you, did someone from the child protective services agency visit your home?

**INTERVIEWER INSTRUCTION:** IF RESPONDENT SAYS THEY MOVED INTO [SC]'S HOUSEHOLD, RATHER THAN [SC] COMING TO LIVE WITH THEM, READ: Please think about the process of you coming to live with SC.

**HELP TEXT (READ IF NECESSARY):** It may have been someone from your state or county's child welfare agency, department of social services, or department of human resources.

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**H20****Universe: All except parents**

As part of the process of [SC] coming to live with you, were you required to undergo a local, state, or federal criminal background check?

**INTERVIEWER INSTRUCTION:** IF RESPONDENT SAYS THEY MOVED INTO [SC]'S HOUSEHOLD, RATHER THAN [SC] COMING TO LIVE WITH THEM, READ: Please think about the process of you coming to live with [SC].

**HELP TEXT (READ IF NECESSARY):** Did you have to get fingerprinted?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**GO TO L1****N5****Universe: Fathers****IF H5=1, THEN GO TO N6; ELSE IF H5 IN [6,7] THEN GO TO L1**

Does [SC]'s mother live with you and [SC] in this household, or somewhere else?

**HELP TEXT (READ IF NECESSARY):** If [SC] has had more than one person who has been a legal mother, please consider the individual who was the child's legal guardian, either biological or adoptive, when we last interviewed someone in your household on [INTERVIEW DATE].

IN THIS HOUSEHOLD [GO TO L1]	1
SOMEWHERE ELSE [GO TO L1]	2
DON'T KNOW WHO MOTHER IS, OR DON'T KNOW ANYTHING ABOUT THE MOTHER [GO TO L1]	3
MOTHER IS DECEASED	4
DON'T KNOW [GO TO L1]	6
REFUSE [GO TO L1]	7

**N6**

**Universe: Mothers**

Does [SC]'s father live with you and [SC] in this household, or somewhere else?

**HELP TEXT (READ IF NECESSARY):** If [SC] has had more than one person who has been a legal father, please consider the individual who was the child's legal guardian, either biological or adoptive, when we last interviewed someone in your household on [INTERVIEW DATE].

IN THIS HOUSEHOLD	1
SOMEWHERE ELSE	2
DON'T KNOW WHO FATHER IS, OR DON'T KNOW ANYTHING ABOUT FATHER	3
FATHER IS DECEASED	4
DON'T KNOW	6
REFUSE	7

## LIVING ARRANGEMENT (L)

### L1

**Universe: All except parents**  
**IF H4=2, THEN GO TO L2**

Just before coming to live with you, with whom did [SC] live?

**INTERVIEWER INSTRUCTION:** IF RESPONDENT SAYS THEY MOVED INTO [SC]'S HOUSEHOLD, RATHER THAN [SC] COMING TO LIVE WITH THEM, CODE "RESPONDENT MOVED INTO [SC]'S HOUSEHOLD."

**INTERVIEWER INSTRUCTION:** IF [SC] HAS LIVED WITH RESPONDENT SINCE BIRTH, CODE "[SC] HAS LIVED WITH RESPONDENT SINCE BIRTH"

**INTERVIEWER INSTRUCTION:** SELECT ONLY ONE.

WITH [HIS/HER] BIRTH PARENT(S)	1
WITH [HIS/HER] ADOPTIVE PARENT(S)	2
WITH OTHER MEMBERS OF [HIS/HER] BIRTH FAMILY, ANOTHER RELATIVE	3
WITH ANOTHER FOSTER PARENT	4
IN A GROUP HOME IN FOSTER CARE SYSTEM, THAT IS, A HOME WITH 4 FOSTER CHILDREN OR MORE	5
IN A RESIDENTIAL TREATMENT FACILITY, THAT IS, A FACILITY WHERE A NUMBER OF CHILDREN AND YOUTH LIVE	6
SOMEONE ELSE NOT MENTIONED (SPECIFY): _____	7
RESPONDENT MOVED INTO [SC]'S HOUSEHOLD	8
[SC] HAS LIVED WITH RESPONDENT SINCE BIRTH	9
DON'T KNOW	96
REFUSE	97

### L2

**Universe: All**

How much of the time does [SC] live with you? Is it all or most of the time, weekdays only, about half of the time, weekends only, or less than all of these?

ALL OR MOST OF THE TIME	1
WEEKDAYS ONLY	2
ABOUT HALF OF THE TIME	3

WEEKENDS ONLY	4
LESS THAN OTHER OPTIONS GIVEN	5
DON'T KNOW	6
REFUSE	7

**L3**

**Universe: All**

Since [SC] began living with you, has there been any time lasting a month or more when [SC] did not live with you?

**INTERVIEWER INSTRUCTION:** IF RESPONDENT SAYS THEY MOVED INTO [SC]'S HOUSEHOLD, RATHER THAN [SC] COMING TO LIVE WITH THEM, READ: "Please think about when you came to live with [SC]."

YES	1
NO [GO TO L5]	2
DON'T KNOW [GO TO L5]	6
REFUSE [GO TO L5]	7

**L4**

**Universe: All; where R has lived apart from [SC] for one month or more since [SC] came to live with them**

When [SC] was not living with you for a month or more, did [he/she] ever spend time living with [his/her] mother, [his/her] father, [his/her] grandparent(s), an aunt or uncle, other relatives, a foster home, a group home, or a residential treatment center or hospital?

**INTERVIEWER INSTRUCTION:** CODE ALL THAT APPLY.

HIS/HER MOTHER	1
HIS/HER FATHER	2
HIS/HER GRANDPARENT(S)	3
HIS/HER AUNT/UNCLE	4
OTHER RELATIVES	5
FOSTER HOME	6
GROUP HOME	7
RESIDENTIAL TREATMENT CENTER OR HOSPITAL	8
OTHER (SPECIFY): _____	9
DON'T KNOW	96
REFUSE	97

<b>L5</b>
<b>Universe: All</b>

How many biological or adoptive brother or sisters does [SC] have?

**INTERVIEWER INSTRUCTION:** INCLUDE STEP AND HALF BROTHERS AND SISTERS.

ENTER NUMBER OF SIBLINGS: _____	___
[SC] HAS SIBLING(S), BUT DON'T KNOW HOW MANY	95
DON'T KNOW IF [SC] HAS ANY SIBLINGS [GO TO P1]	96
REFUSE [GO TO P1]	97

<b>L6</b>
<b>Universe: [SC] has any siblings</b>
<b>IF L5=0, THEN GO TO P1</b>

How many of these siblings are living with you now?

ENTER NUMBER OF SIBLINGS: _____	___
DON'T KNOW	96
REFUSE	97

**INTERVIEWER INSTRUCTION:** IF L6 > L5 AND L6 NOT = [96,97], THEN READ:

**L6\_CONF** Just to confirm, earlier I entered that [SC] has [fill response from L5] siblings. Is this correct?

(1) CONFIRMED - CHILD HAS [fill response from L5] SIBLINGS - RETURN TO L6 AND ENTER CORRECT RESPONSE

(2) NOT CORRECT - CHILD DOES NOT HAVE [fill response from L5] SIBLINGS - RETURN TO L5 AND ENTER CORRECT RESPONSE

<b>L7</b>
<b>Universe: All except parents; where [SC] has non-residential siblings</b>
<b>IF L5=L6 OR H4=2, THEN GO TO P1</b>

During the past 12 months, about how often did [SC] see [his/her] sibling(s) that don't live with you?

NOT AT ALL	1
------------	---



ABOUT ONCE A YEAR	2
SEVERAL TIMES A YEAR	3
1-3 TIMES A MONTH	4
ABOUT ONCE A WEEK	5
SEVERAL TIMES A WEEK/EVERYDAY	6
DON'T KNOW	96
REFUSE	97

**L8**

**Universe: All except parents; where [SC] has non-residential siblings & [SC] is at least 3 years old  
IF L5=L6 OR H4=2 OR AGE<3, THEN GO TO P1**

During the past 12 months, about how often did [SC] talk on the telephone, text, email, or connect on Facebook or other social media with [his/her] sibling(s) that don't live with you?

NOT AT ALL	1
ABOUT ONCE A YEAR	2
SEVERAL TIMES A YEAR	3
1-3 TIMES A MONTH	4
ABOUT ONCE A WEEK	5
SEVERAL TIMES A WEEK/EVERYDAY	6
DON'T KNOW THE EXACT FREQUENCY, BUT KNOW THIS TYPE OF CONTACT OCCURS	7
DON'T KNOW	96
REFUSE	97

## PARENTS: CHARACTERISTICS AND INTERACTION WITH CHILD (P)

**P1**

**Universe: All except parents**

**IF H4=2 THEN GO TO P2**

I'd like to ask you a few questions about [SC]'s mother.

IF RESPONDENT HAS ADOPTED CHILD SINCE THE TIME OF THE NSCH INTERVIEW (H10=1), ASK: Is [SC]'s previous legal mother currently living? By previous legal mother, we mean [SC's] legal guardian, either biological or adoptive, before you adopted [him/her].

ELSE ASK: Is [SC]'s mother currently living? By mother, we mean the child's most recent legal guardian, either biological or adoptive.

YES	1
NO	2
DON'T KNOW WHO MOTHER IS, OR DON'T KNOW ANYTHING ABOUT THE MOTHER [GO TO P5]	3
DON'T KNOW	6
REFUSE	7

**P2**

**Universe: All except Rs who don't know who mother is or don't know anything about her**

IF RESPONDENT IS CHILD'S PARENT WHO IS MOTHER (H5=1), ASK: Are you of Hispanic, Latino or Spanish origin?

IF MOTHER IS DECEASED (N5=4 OR P1=2) FILL= "Was." ELSE FILL "Is."

ELSE ASK: [Is/Was] [SC]'s mother of Hispanic, Latino or Spanish origin?

**INTERVIEWER INSTRUCTION:** HISPANIC OR LATINO INCLUDES MEXICAN, MEXICAN-AMERICAN, CENTRAL AMERICAN, SOUTH AMERICAN OR PUERTO RICAN, CUBAN, OR OTHER SPANISH CARIBBEAN.

YES	1
NO	2

DON'T KNOW	6
REFUSE	7

**P3**

**Universe: All except Rs who don't know who mother is or don't know anything about her**

IF RESPONDENT IS CHILD'S PARENT WHO IS MOTHER (H5=1), ASK: Are you White, Black or African American, American Indian, Alaska Native, Asian, or Native Hawaiian or other Pacific Islander?

**INTERVIEWER INSTRUCTION:** MARK ALL THAT APPLY. IF CHILD'S MOTHER IS DECEASED (N5=4 OR P1=2) FILL = "Was."

ELSE ASK: [Is/Was] [SC]'s mother White, Black or African American, American Indian, Alaska Native, Asian, or Native Hawaiian or other Pacific Islander?

WHITE / CAUCASIAN	1
BLACK/AFRICAN-AMERICAN	2
AMERICAN INDIAN / NATIVE AMERICAN	3
ALASKA NATIVE	4
ASIAN	5
NATIVE HAWAIIAN	6
PACIFIC ISLANDER	7
OTHER [RECORD RESPONSE VERBATIM: _____ ]	8
DON'T KNOW	96
REFUSE	97

**P4**

**Universe: All except Rs who don't know who mother is or don't know anything about her**

IF R IS CHILD'S PARENT WHO IS MOTHER (H5=1), ASK: What is the highest grade or year of school you completed?

ELSE ASK: What is the highest grade or year of school [SC]'s mother completed?

8 <sup>th</sup> GRADE OR LESS	1
9 <sup>th</sup> -12 <sup>th</sup> GRADE NO DIPLOMA	2
HIGH SCHOOL GRADUATE OR GED COMPLETED	3
COMPLETED A VOCATIONAL, TRADE, OR BUSINESS SCHOOL PROGRAM	4
SOME COLLEGE CREDIT BUT NO DEGREE	5
ASSOCIATE DEGREE (AA, AS)	6
BACHELOR'S DEGREE (BA, BS, AB)	7
MASTER'S DEGREE (MA, MS, MSW, MBA)	8

DOCTORATE (PhD, EdD) or PROFESSIONAL DEGREE (MD, DDS, DVM, JD)	9
DON'T KNOW	96
REFUSE	97

**P5**

**Universe: All except those who reported that mother is deceased  
IF P1=2 OR N5=4 THEN GO TO P6**

IF R IS CHILD'S MOTHER (H5=1), ASK: Why weren't you living with [SC] previously?

ELSE, IF R IS CHILD'S FATHER (H5=2), ASK: Why wasn't [SC] living with [his/her] mother previously?

ELSE, IF MOTHER IS NOT DECEASED (P1 = 1,3,6,7) ASK: Why doesn't [SC] live with [his/her] mother now?

**INTERVIEWER INSTRUCTION: CODE ALL THAT APPLY.**

MOTHER IN JAIL	1
MOTHER DETAINED/DEPORTED FOR IMMIGRATION VIOLATIONS	2
MOTHER WAS NOT A GOOD MOTHER/WAS ABUSIVE/MISTREATED CHILD	3
CHILD REMOVED BY CHILD PROTECTIVE SERVICES	4
MOTHER IS SICK	5
MOTHER TOO BUSY/WORK SCHEDULE TOO DEMANDING	6
MOTHER HAS PROBLEMS WITH HUSBAND/BOYFRIEND	7
MOTHER HAS FINANCIAL PROBLEMS/CAN'T AFFORD TO KEEP CHILD	8
MOTHER HAS DRUG/ALCOHOL PROBLEMS	9
MOTHER DOESN'T WANT TO CARE FOR CHILD/GAVE CHILD UP	10
MOTHER THINKS CURRENT CARETAKER CAN DO A BETTER JOB	11
MOTHER'S NEIGHBORHOOD NOT GOOD FOR RAISING CHILDREN	12
OTHER (SPECIFY) _____	13
DON'T KNOW	96
REFUSE	97

**P6**

**Universe: All except parents  
IF H4=2 THEN GO TO P18**

Why didn't [SC] live with [his/her] mother originally?

**INTERVIEWER INSTRUCTION: CODE ALL THAT APPLY.**

MOTHER IN JAIL	1
MOTHER DETAINED/DEPORTED FOR IMMIGRATION VIOLATIONS	2
MOTHER WAS NOT A GOOD MOTHER/WAS ABUSIVE/MISTREATED CHILD	3
CHILD REMOVED BY CHILD PROTECTIVE SERVICES	4
MOTHER WAS SICK	5
MOTHER TOO BUSY/WORK SCHEDULE TOO DEMANDING	6
MOTHER HAS PROBLEMS WITH HUSBAND/BOYFRIEND	7
MOTHER HAS FINANCIAL PROBLEMS/CAN'T AFFORD TO KEEP CHILD	8
MOTHER HAS DRUG/ALCOHOL PROBLEMS	9
MOTHER DOESN'T WANT TO CARE FOR CHILD/GAVE CHILD UP	10
MOTHER THINKS CURRENT CARETAKER CAN DO A BETTER JOB	11
MOTHER'S NEIGHBORHOOD NOT GOOD FOR RAISING CHILDREN	12
MOTHER DECEASED	13
SAME REASON THAT CHILD DOESN'T LIVE WITH MOTHER NOW	14
OTHER (SPECIFY) _____	15
DON'T KNOW	96
REFUSE	97

**P7**

**Universe: All except parents, Rs who do not know who mother is or don't know anything about her, and [SC]'s mother is deceased**  
**IF P1 IN [2, 3, 6] THEN GO TO P18**

Is [SC]'s mother currently living in a hospital, in an institution or residential treatment facility, or in jail, prison or a detention center, or none of these?

IN THE HOSPITAL	1
IN AN INSTITUTION OR RESIDENTIAL TREATMENT FACILITY	2
IN JAIL, PRISON OR DETENTION CENTER	3
NONE OF THE ABOVE	4
DON'T KNOW	6
REFUSE	7

**P8**

**Universe: All except parents, Rs who do not know who mother is or don't know anything about her, and [SC]'s mother is deceased**

During the past 12 months how often has [SC] seen [his/her] mother?

NOT AT ALL	1
------------	---

ABOUT ONCE A YEAR	2
SEVERAL TIMES A YEAR	3
1-3 TIMES A MONTH	4
ABOUT ONCE A WEEK	5
SEVERAL TIMES A WEEK/EVERYDAY	6
DON'T KNOW	96
REFUSE	97

**P9**

**Universe: All except parents, Rs who do not know who mother is or don't know anything about her, and [SC]'s mother is deceased; where [SC] is at least 3 years old  
IF AGE<3 THEN GO TO P10**

During the past 12 months, about how often did [SC] talk on the telephone, text, email, or connect on Facebook or other social media with [his/her] mother?

NOT AT ALL	1
ABOUT ONCE A YEAR	2
SEVERAL TIMES A YEAR	3
1-3 TIMES A MONTH	4
ABOUT ONCE A WEEK	5
SEVERAL TIMES A WEEK/EVERYDAY	6
DON'T KNOW EXACT FREQUENCY BUT KNOW [SC] AND MOTHER CONNECT	7
DON'T KNOW	96
REFUSE	97

**P10**

**Universe: All except parents, Rs who do not know who mother is or don't know anything about her, and [SC]'s mother is deceased**

During the past 12 months, about how often did [SC] receive a card, letter, or package from [his/her] mother?

NOT AT ALL	1
ABOUT ONCE A YEAR	2
SEVERAL TIMES A YEAR	3
1-3 TIMES A MONTH	4
ABOUT ONCE A WEEK	5
SEVERAL TIMES A WEEK/EVERYDAY	6
DON'T KNOW	96

REFUSE	97
--------	----

**P11**

**Universe: All except parents, Rs who do not know who mother is or don't know anything about her, and [SC]'s mother is deceased**

During the past 12 months, has [SC]'s mother ever cared for [him/her] during the day?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**P12**

**Universe: All except parents, Rs who do not know who mother is or don't know anything about her, and [SC]'s mother is deceased**

What about overnight?

**HELP TEXT (READ IF NECESSARY):** During the past 12 months, has [SC]'s mother ever cared for [him/her] overnight?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**P13**

**Universe: All except parents, Rs who do not know who mother is or don't know anything about her, and [SC]'s mother is deceased**

How well do you get along with [SC]'s mother? Would you say that you and she get along very well, get along somewhat well, don't get along very well, or don't get along at all?

GET ALONG VERY WELL	1
GET ALONG SOMEWHAT WELL	2
DON'T GET ALONG VERY WELL	3
DON'T GET ALONG AT ALL	4
DON'T KNOW	6
REFUSE	7

**P14**

**Universe: All except parents, Rs who do not know who mother is or don't know anything about her, and [SC]'s mother is deceased**

When there are decisions to make about [SC]'s school or day care arrangements, how often do you talk it over with [SC]'s mother first? Is it all the time, most of the time, about half the time, sometimes, or never?

ALL THE TIME	1
MOST OF THE TIME	2
ABOUT HALF THE TIME	3
SOMETIMES	4
NEVER	5
DON'T KNOW	6
REFUSE	7

**P15**

**Universe: All except parents, Rs who do not know who mother is or don't know anything about her, and [SC]'s mother is deceased**

When there are decisions to make about [SC]'s health or health care, how often do you talk it over with [SC]'s mother first? Is it all the time, most of the time, about half the time, sometimes, or never?

ALL THE TIME	1
MOST OF THE TIME	2
ABOUT HALF THE TIME	3
SOMETIMES	4
NEVER	5
DON'T KNOW	6
REFUSE	7

**P16**

**Universe: All except parents, Rs who do not know who mother is or don't know anything about her, and [SC]'s mother is deceased**

Have you ever asked [SC]'s mother to spend more time with [him/her]?

YES	1
NO	2



DON'T KNOW	6
REFUSE	7

**P17**

**Universe: All except parents, Rs who do not know who mother is or don't know anything about her, and [SC]'s mother is deceased**

Have you ever refused to let [SC]'s mother see [him/her]?

YES	1
NO	2
IT'S NOT MY DECISION WHETHER THE MOTHER CAN SEE CHILD	3
DON'T KNOW	6
REFUSE	7

**END MOTHER SERIES**

---

**START FATHER SERIES**

**P18**

**Universe: All except parents  
IF H4=2, THEN GO TO P19**

I'd like to ask you a few questions about [SC]'s father.

IF RESPONDENT HAS ADOPTED CHILD SINCE THE TIME OF THE NSCH INTERVIEW (H10=1), ASK:  
Is [SC]'s previous legal father currently living? By previous legal father, we mean the child's most recent legal guardian, either biological or adoptive, before you adopted [him/her].

ELSE ASK: Is [SC]'s father currently living? By father, we mean [SC]'s most recent legal guardian, either biological or adoptive.

YES	1
NO	2
DON'T KNOW WHO FATHER IS, OR DON'T KNOW ANYTHING ABOUT FATHER [GO TO P23]	3
DON'T KNOW	6
REFUSE	7

**P19****Universe: All except Rs who don't know who father is or don't know anything about him**

IF RESPONDENT IS CHILD'S PARENT WHO IS FATHER (H5=2), ASK: Are you of Hispanic, Latino or Spanish origin?

**INTERVIEWER INSTRUCTION:** IF FATHER IS DECEASED FILL (N6=4 OR P18=2) "Was." ELSE ASK: [Is/Was] [SC]'s father of Hispanic, Latino or Spanish origin?

**INTERVIEWER INSTRUCTION:** HISPANIC OR LATINO INCLUDES MEXICAN, MEXICAN-AMERICAN, CENTRAL AMERICAN, SOUTH AMERICAN OR PUERTO RICAN, CUBAN, OR OTHER SPANISHCARIBBEAN.

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**P20****Universe: All except Rs who don't know who father is or don't know anything about him**

IF R IS [SC]'S PARENT WHO IS FATHER (H5=2), ASK: Are you White, Black or African American, American Indian, Alaska Native, Asian, or Native Hawaiian, or other Pacific Islander?

**INTERVIEWER INSTRUCTION:** MARK ALL THAT APPLY. IF FATHER IS DECEASED (N6=4 OR P18=2) FILL= "Was."

ELSE, ASK: [IS/WAS] [SC]'s father White, Black or African American, American Indian, Alaska Native, Asian, or Native Hawaiian, or other Pacific Islander?

WHITE / CAUCASIAN	1
BLACK/AFRICAN-AMERICAN	2
AMERICAN INDIAN / NATIVE AMERICAN	3
ALASKA NATIVE	4
ASIAN	5
NATIVE HAWAIIAN	6
PACIFIC ISLANDER	7
OTHER [RECORD RESPONSE VERBATIM: _____ ]	8
DON'T KNOW	96
REFUSE	97

**P21****Universe: All except Rs who don't know who father is or don't know anything about him**

IF R IS [SC]'S PARENT WHO IS FATHER (H5=2), ASK: What is the highest grade or year of school you completed?

ELSE ASK: What is the highest grade or year of school [SC]'s father completed?

8th GRADE OR LESS	1
9 <sup>th</sup> -12th GRADE NO DIPLOMA	2
HIGH SCHOOL GRADUATE OR GED COMPLETED	3
COMPLETED A VOCATIONAL, TRADE, OR BUSINESS SCHOOL PROGRAM	4
SOME COLLEGE CREDIT BUT NO DEGREE	5
ASSOCIATE DEGREE (AA, AS)	6
BACHELOR'S DEGREE (BA, BS, AB)	7
MASTER'S DEGREE (MA, MS, MSW, MBA)	8
DOCTORATE (PhD, EdD) or PROFESSIONAL DEGREE (MD, DDS, DVM, JD)	9
DON'T KNOW	96
REFUSE	97

**P22****Universe: All except fathers and Rs who don't know who father is or don't know anything about him****IF H5=2 THEN GO TO P23**

Has legal paternity been established? That is, has the father signed a document identifying himself as [SC's] father or has a court or administrative agency, such as the child support agency, established the child's father as his legal father?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**P23****Universe: All except those who reported that father is deceased****IF P18=2 or N6=4 THEN GO TO P24**

IF R IS CHILD'S FATHER (H5=2), ASK: Why weren't you living with [SC] previously?

ELSE, IF R IS CHILD'S MOTHER (H5=1), ASK: Why wasn't [SC] living with [his/her] father previously?

ELSE, IF FATHER IS NOT DECEASED (P18 = 1,3,6,7) ASK: Why doesn't [SC] live with [his/her] father now?

**INTERVIEWER INSTRUCTION:** CODE ALL THAT APPLY.

FATHER IN JAIL	1
FATHER DETAINED/DEPORTED FOR IMMIGRATION VIOLATIONS	2
FATHER WAS NOT A GOOD FATHER/WAS ABUSIVE/MISTREATED CHILD	3
CHILD REMOVED BY CHILD PROTECTIVE SERVICES	4
FATHER IS SICK	5
FATHER TOO BUSY/WORK SCHEDULE TOO DEMANDING	6
FATHER HAS PROBLEMS WITH WIFE/GIRLFRIEND	7
FATHER HAS FINANCIAL PROBLEMS/CAN'T AFFORD TO KEEP CHILD	8
FATHER HAS DRUG/ALCOHOL PROBLEMS	9
FATHER DOESN'T WANT TO CARE FOR CHILD/GAVE CHILD UP	10
FATHER THINKS CURRENT CARETAKER CAN DO A BETTER JOB	11
FATHER'S NEIGHBORHOOD NOT GOOD FOR RAISING CHILDREN	12
OTHER (SPECIFY) _____	13
DON'T KNOW	96
REFUSE	97

**P24**

**Universe: All except parents**  
**IF H4=2 THEN GO TO C3**

Why didn't [SC] live with [his/her] father originally?

**INTERVIEWER INSTRUCTION:** CODE ALL THAT APPLY.

FATHER IN JAIL	1
FATHER DETAINED/DEPORTED FOR IMMIGRATION VIOLATIONS	2
FATHER WAS NOT A GOOD FATHER/WAS ABUSIVE/MISTREATED CHILD	3
CHILD REMOVED BY CHILD PROTECTIVE SERVICES	4
FATHER WAS SICK	5
FATHER TOO BUSY/WORK SCHEDULE TOO DEMANDING	6
FATHER HAS PROBLEMS WITH WIFE/GIRLFRIEND	7
FATHER HAS FINANCIAL PROBLEMS/CAN'T AFFORD TO KEEP CHILD	8
FATHER HAS DRUG/ALCOHOL PROBLEMS	9

FATHER DOESN'T WANT TO CARE FOR CHILD/GAVE CHILD UP	10
FATHER THINKS CURRENT CARETAKER CAN DO A BETTER JOB	11
FATHER'S NEIGHBORHOOD NOT GOOD FOR RAISING CHILDREN	12
FATHER DECEASED	13
SAME REASON THAT CHILD DOESN'T LIVE WITH FATHER NOW	14
OTHER (SPECIFY) _____	15
DON'T KNOW	96
REFUSE	97

**P25**

**Universe: All except parents, Rs who do not know who father is or don't know anything about him, and [SC]'s father is deceased**  
**IF P18 IN [2, 3, 6] THEN GO TO F1**

Is [SC]'s father currently living in a hospital, in an institution or residential treatment facility, or in jail, prison or a detention center, or none of these?

IN THE HOSPITAL	1
IN AN INSTITUTION OR RESIDENTIAL TREATMENT FACILITY	2
IN JAIL, PRISON OR DETENTION CENTER	3
NONE OF THE ABOVE	4
DON'T KNOW	6
REFUSE	7

**P26**

**Universe: All except parents, Rs who do not know who father is or don't know anything about him, and [SC]'s father is deceased**

During the past 12 months how often has [SC] seen [his/her] father?

NOT AT ALL	1
ABOUT ONCE A YEAR	2
SEVERAL TIMES A YEAR	3
1-3 TIMES A MONTH	4
ABOUT ONCE A WEEK	5
SEVERAL TIMES A WEEK/EVERYDAY	6
DON'T KNOW	96
REFUSE	97

**P27**

**Universe: All except parents, Rs who do not know who father is or don't know anything about him, and [SC]'s father is deceased; where [SC] at least 3 years old  
IF AGE<3, GO TO P28**

During the past 12 months, about how often did [SC] talk on the telephone, text, email, or connect on Facebook or other social media with [his/her] father?

NOT AT ALL	1
ABOUT ONCE A YEAR	2
SEVERAL TIMES A YEAR	3
1-3 TIMES A MONTH	4
ABOUT ONCE A WEEK	5
SEVERAL TIMES A WEEK/EVERYDAY	6
DON'T KNOW EXACT FREQUENCY BUT KNOW [SC] AND FATHER CONNECT	7
DON'T KNOW	96
REFUSE	97

**P28**

**Universe: All except parents, Rs who do not know who father is or don't know anything about him, and [SC]'s father is deceased**

During the past 12 months, about how often did [SC] receive a card, letter, or package from [his/her] father?

NOT AT ALL	1
ABOUT ONCE A YEAR	2
SEVERAL TIMES A YEAR	3
1-3 TIMES A MONTH	4
ABOUT ONCE A WEEK	5
SEVERAL TIMES A WEEK/EVERY DAY	6
DON'T KNOW	96
REFUSE	97

**P29**

**Universe: All except parents, Rs who do not know who father is or don't know anything about him, and [SC]'s father is deceased**

During the past 12 months, has [SC]'s father ever cared for [him/her] during the day?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**P30**

**Universe: All except parents, Rs who do not know who father is or don't know anything about him, and [SC]'s father is deceased**

What about overnight?

**HELP TEXT (READ IF NECESSARY):** During the past 12 months, has [SC]'s father ever cared for [him/her] overnight?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**P31**

**Universe: All except parents, Rs who do not know who father is or don't know anything about him, and [SC]'s father is deceased**

How well do you get along with [SC]'s father? Would you say that you and he get along very well, get along somewhat well, don't get along very well, or don't get along at all?

GET ALONG VERY WELL	1
GET ALONG SOMEWHAT WELL	2
DON'T GET ALONG VERY WELL	3
DON'T GET ALONG AT ALL	4
DON'T KNOW	6
REFUSE	7

**P32**

**Universe: All except parents, Rs who do not know who father is or don't know anything about him, and [SC]'s father is deceased**

When there are decisions to make about [SC]'s school or day care arrangements, how often do you talk it over with [SC]'s father first? Is it all the time, most of the time, about half the time, sometimes, or never?

ALL THE TIME	1
MOST OF THE TIME	2
ABOUT HALF THE TIME	3
SOMETIMES	4
NEVER	5
DON'T KNOW	6
REFUSE	7

**P33**

**Universe: All except parents, Rs who do not know who father is or don't know anything about him, and [SC]'s father is deceased**

When there are decisions to make about [SC]'s health or health care, how often do you talk it over with [SC]'s father first? Is it all the time, most of the time, about half the time, sometimes, or never?

ALL THE TIME	1
MOST OF THE TIME	2
ABOUT HALF THE TIME	3
SOMETIMES	4
NEVER	5
DON'T KNOW	6
REFUSE	7

**P34**

**Universe: All except parents, Rs who do not know who father is or don't know anything about him, and [SC]'s father is deceased**

Have you ever asked [SC]'s father to spend more time with [him/her]?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**P35**

**Universe: All except parents, Rs who do not know who father is or don't know anything about him, and [SC]'s father is deceased**



Have you ever refused to let [SC]'s father see [him/her]?

YES	1
NO	2
IT'S NOT MY DECISION WHETHER THE FATHER CAN SEE CHILD	3
DON'T KNOW	6
REFUSE	7

**END FATHER SERIES**

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## FINANCIAL SUPPORT (F)

**F1**

**Universe: All except parents**

Next, I'd like to ask some questions about child support. Have child support payments for [SC] ever been awarded to you by a court or a judge, agreed to in writing, agreed to informally, the award is pending, or do you not have an agreement of any kind?

**INTERVIEWER INSTRUCTION: CODE ALL THAT APPLY. CODE 5 CANNOT BE CODED WITH ANY OTHER.**

YES, AWARDED BY A COURT OR JUDGE	1
YES, AGREED TO IN WRITING	2
YES, AGREED TO INFORMALLY	3
YES, AWARD PENDING	4
NO AGREEMENT [GO TO F3]	5
DON'T KNOW [GO TO F3]	6
REFUSE [GO TO F3]	7

**F2**

**Universe: All except parents; where there is any child support agreement**

What parent do you have this agreement with?

**HELP TEXT (READ IF NECESSARY):** Any other parent?

**INTERVIEWER INSTRUCTION: CODE ALL THAT APPLY**

[SC]'s MOTHER [GO TO F4]	1
[SC]'S FATHER[GO TO F4]	2
DON'T KNOW [GO TO F4]	6
REFUSE [GO TO F4]	7

**F3**

**Universe: All except parents; where there is no child support agreement**

Have you ever contacted a child support enforcement office, a department of social services, welfare office, or any government agency to find out about child support for [SC]?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**F4**

**Universe: All except parents**

In the past 12 months, did you receive any payment for taking care of [SC]? Please include any foster care payments or any payments from Temporary Assistance for Needy Families (TANF) or welfare, as well as child support payments from a parent.

YES	1
NO [GO TO F6]	2
DON'T KNOW [GO TO F6]	6
REFUSE [GO TO F6]	7

**F5**

**Universe: All except parents; where any payment is received for caring for [SC]**

From whom do you receive payments?

**INTERVIEWER INSTRUCTION: CODE ALL THAT APPLY**

CHILD'S MOTHER	1
CHILD'S FATHER	2
FOSTER CARE PAYMENT/STIPEND	3
TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF) / WELFARE	4
SOCIAL SECURITY FOR CHILD	5
UNSPECIFIED GOVERNMENT SOURCE	6
FRIENDS OR RELATIVES	7
OTHER (SPECIFY): _____	8
DON'T KNOW	96
REFUSE	97

**F6**

**Universe: All except parents**

IF F5=4, THEN ASK: Did you apply for the TANF or welfare payments for [SC]?

IF F5 NE 4, THEN ASK: Have you ever applied for TANF or welfare payments on behalf of [SC]?

YES	1
NO	2
DON'T KNOW[GO TO F10]	6
REFUSE[GO TO F10]	7

**F7**

**Universe: All except parents; where R does not receive TANF**

**IF F5=4, THEN GO TO F8**

IF F6=1, THEN ASK: Why didn't you receive Temporary Assistance for Needy Families (TANF), that is, welfare payments, for [SC]?

IF F6=2, THEN ASK: Why didn't you apply for Temporary Assistance for Needy Families (TANF), that is, welfare payments, for [SC]?

**HELP TEXT:** Any other reason?

**INTERVIEWER INSTRUCTION:** CODE ALL THAT APPLY

NOT ELIGIBLE/MAKE TOO MUCH MONEY	1
ASSISTANCE NOT AVAILABLE	2
PUT ON WAITLIST	3
DISCOURAGED/GAVE UP/ TOO MUCH HASSLE	4
DECIDED DIDN'T WANT/NEED HELP FROM GOVERNMENT	5
DIDN'T KNOW ASSISTANCE WAS AVAILABLE	6
DIDN'T KNOW HOW TO APPLY	7
OTHER (SPECIFY)	8
DON'T KNOW	96
REFUSE	97

**F8**

**Universe: All except parents; where R applied for TANF/welfare payments**

**IF F6=2, THEN GO TO F10**

How did you hear about or learn that you could apply for TANF or Welfare payments for [SC]?

CHILD PROTECTIVE SERVICES AGENCY [GO TO F10]	1
OTHER GOVERNMENT AGENCY [GO TO F10]	2

CAREGIVER SUPPORT GROUP [GO TO F10]	3
CHURCH/PASTOR/RELIGIOUS COUNSELOR	4
OTHER SOCIAL SERVICES PROVIDER	5
Other (specify: _____) [GO TO F10]	6
DON'T KNOW	96
REFUSE	97

**F9**

**Universe: All except parents; where R received TANF/welfare payments and R did not apply for TANF/welfare payments**

**IF F5 NE 4, THEN GO TO F10**

Was [SC] already receiving TANF or welfare benefits before coming to live with you?

**INTERVIEWER INSTRUCTION:** IF RESPONDENT SAYS THEY MOVED INTO [SC]'S HOUSEHOLD, RATHER THAN [SC] COMING TO LIVE WITH THEM, READ: Please think about when you came to live with [SC].

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**F10**

**Universe: All except parents; where R receives child support payments from [SC]'s mother and/or father**

**IF F5 NE [1, 2], THEN GO TO F11**

IF F5 = 1 AND 2, THEN ASK: Do [SC]'s parents give you a regular amount of money each month or just money once in a while to help out?

IF F5 = 1, THEN ASK: Does [SC]'s mother give you a regular amount of money each month or just money once in a while to help out?

IF F5 = 2, THEN ASK: Does [SC]'s father give you a regular amount of money each month or just money once in a while to help out?

REGULAR AMOUNT	1
MONEY ONCE IN A WHILE	2
DON'T KNOW	6
REFUSE	7

**F11****Universe: All except parents**

Do you receive any non-monetary support from [SC]'s parents or your friends or other relatives for taking care of [SC]? Non-monetary support may include diapers, formula, food, clothes, or bedding.

**HELP TEXT (READ IF NECESSARY):** Relatives could include relatives of the child or your own relatives.

YES	1
NO [GO TO C1]	2
DON'T KNOW [GO TO C1]	6
REFUSE [GO TO C1]	7

**F12****Universe: All except parents; where R receives non-monetary support from [SC]'s parents or friends or other relatives**

Who do you receive the non-monetary supports from?

**INTERVIEWER INSTRUCTION:** CODE ALL THAT APPLY

CHILD'S MOTHER	1
CHILD'S FATHER	2
FRIENDS OR RELATIVES	3
CHURCH OR OTHER GROUP	4
DON'T KNOW	6
REFUSE	7

## CAREGIVER PREPARATION, LONG TERM PLANNING, LEGAL CUSTODY (C)

Now I'd like to ask some questions about how prepared you were to care for [SC] and any plans you may have for the future.

**C1**

**Universe: All except parents**

Overall, how well prepared were you to care for [SC] when he/she first came to live with you? Would you say you were very well prepared, somewhat prepared, not very well prepared, or not at all prepared?

**INTERVIEWER INSTRUCTION:** IF RESPONDENT SAYS THEY MOVED INTO [SC]'S HOUSEHOLD, RATHER THAN [SC] COMING TO LIVE WITH THEM, READ: Please think about when you came to live with [SC].

VERY WELL PREPARED	1
SOMEWHAT PREPARED	2
NOT VERY WELL PREPARED	3
NOT AT ALL PREPARED	4
DON'T KNOW	6
REFUSE	7

**C2**

**Universe: All except parents**

I am going to ask you about specific services or items you may have needed at the time [SC] first came to live with you. I'd like you to tell me how easy or difficult each item or service was to obtain.

**INTERVIEWER INSTRUCTION:** IF RESPONDENT SAYS THEY MOVED INTO [SC]'S HOUSEHOLD, RATHER THAN [SC] COMING TO LIVE WITH THEM, READ: Please think about when you came to live with [SC].

**HELP TEXT (REPEAT FOR EACH ITEM AS NEEDED):** Would you say it was very easy, somewhat easy, somewhat difficult, very difficult, or you never needed it for [SC]?

	Please tell me how easy or difficult it was to obtain...	Very easy	Somewhat easy	Somewhat difficult	Very difficult	Never needed for [SC]	DK	REF
C2A	Child care for [SC]	1	2	3	4	5	6	7
C2B	Clothing for [SC]	1	2	3	4	5	6	7
C2C	A bed or other furniture for [SC]	1	2	3	4	5	6	7
C2D	Legal assistance	1	2	3	4	5	6	7
C2E	Food from a pantry or food bank	1	2	3	4	5	6	7
C2F	A parent/grandparent support group	1	2	3	4	5	6	7
C2G	Transportation assistance	1	2	3	4	5	6	7
C2H	Help obtaining public assistance such as food stamps, Medicaid, Social Security, or TANF	1	2	3	4	5	6	7
C2I	Education or training about special needs that [SC] has	1	2	3	4	5	6	7
C2J	Education or training about legal matters	1	2	3	4	5	6	7
C2K	Information about the school system	1	2	3	4	5	6	7
C2L	Information about adoption, guardianship, or custody	1	2	3	4	5	6	7
C2M	Information about medical services and doctors	1	2	3	4	5	6	7
C2N	An overview of available programs or services	1	2	3	4	5	6	7

### C3

**Universe: All**

When you need to find out about services, training, or supports that will help you meet [SC]'s needs, where do you turn?

**INTERVIEWER INSTRUCTION: CODE ALL THAT APPLY**

CHILD'S SCHOOL	1
PEDIATRICIAN/MEDICAL PROFESSIONAL	2
SOCIAL WORKER OR SOCIAL SERVICES AGENCY	3
ATTORNEY	4
COMMUNITY/LOCAL NEWSPAPER	5
INTERNET OR LISTSERV	6
OTHER PARENTS OR CAREGIVERS	7
CO-WORKERS/JOB	8



CHURCH	9
LIBRARY	10
OTHER (SPECIFY)	11
DON'T HAVE ANY SOURCE OF INFORMATION	12
DON'T KNOW	96
REFUSE	97

**C4**

**Universe: All except parents**

**IF H4=2, THEN GO TO C5**

How much did you know about [SC]'s background before [SC] came to live with you? By background, we mean [his/her] family, medical, school, or behavioral history. Would you say you were very informed, somewhat informed, not very informed, or not at all informed?

**INTERVIEWER INSTRUCTION:** IF RESPONDENT SAYS THEY MOVED INTO [SC]'S HOUSEHOLD, RATHER THAN [SC] COMING TO LIVE WITH THEM, READ: Please think about when you came to live with [SC].

VERY INFORMED	1
SOMEWHAT INFORMED	2
NOT VERY INFORMED	3
NOT AT ALL INFORMED	4
DON'T KNOW	6
REFUSE	7

**C5**

**Universe: All**

Do you think that [SC] will live with you until [he/she] grows up?

YES [GO TO C8]	1
NO	2
DON'T KNOW	6
REFUSE	7

**C6**

**Universe: All; where R thinks [SC] won't live with R until [SC] grows up or R doesn't know or refuses to answer if [SC] will live with R until [SC] grows up**

How much longer do you think [SC] will stay with you?

**HELP TEXT (READ IF NECESSARY):** Your best estimate is fine.

**INTERVIEWER INSTRUCTION:** CODE ONE OF TWO WAYS: MONTHS OR YEARS

GAVE NUMBER OF MONTHS: _____	1
GAVE NUMBER OF YEARS: _____	2
DON'T KNOW	6
REFUSE	7

**C7**

**Universe: All; where R thinks [SC] won't live with R until [SC] grows up or R doesn't know or refuses to answer if [SC] will live with R until [SC] grows up**

Who do you think [SC] will live with after you?

MOTHER	1
FATHER	2
MOTHER AND FATHER	3
OTHER RELATIVE OF CHILD	4
FRIEND	5
FOSTER PARENT/FAMILY	6
ADOPTIVE PARENT/FAMILY	7
INDEPENDENTLY BY HIMSELF/HERSELF OR WITH ROOMMATES OR SPOUSE/PARTNER	8
OTHER (SPECIFY): _____	9
DON'T KNOW	96
REFUSE	97

**C8**

**Universe: All except parents, and Rs who have adopted [SC]  
IF H4 IN [2, 4], THEN GO TO CC1**

Do you have a formal or legal agreement about custody or guardianship for [SC]?

**HELP TEXT (READ IF NECESSARY):** Custody refers to the legal right to make decisions about children, including where they live. Parents have legal custody of their children unless they

voluntarily give custody to someone else or a court takes this right away and gives it to someone else. For instance, a court may give legal custody to a relative or to a child welfare agency.

YES [GO TO C11]	1
NO	2
DON'T KNOW	6
REFUSE	7

**C9**

**Universe: All except parents, and Rs who have adopted [SC]; where R does not have custody/guardianship of [SC]**

Are you currently trying or planning to seek legal custody of [SC] or become [SC]'s legal guardian?

YES [GO TO C11]	1
NO	2
DON'T KNOW [GO TO C11]	6
REFUSE [GO TO C11]	7

**HELP TEXT (READ IF NECESSARY):** Legal custody or guardianship means that the parental responsibility and legal authority for [SC] have been transferred to you, with the intention that you plan to provide permanent care for [SC]. This can be done without terminating the parental rights of the child's parents. If [SC] was in foster care, then establishing custody or guardianship would have ended [his/her] involvement in the child welfare system, allowing you to make important decisions on the child's behalf, and establishing you as a long-term caregiver for the child.

**C10**

**Universe: All except parents, and Rs who have adopted [SC]; where R is not seeking or not planning to seek custody or guardianship of [SC]**

What discouraged you from seeking custody or guardianship of [SC] or prevented you from making such a plan?

CHILD HAS DISABILITIES/HEALTH PROBLEMS THAT RESPONDENT MAY NOT BE ABLE TO HANDLE IN A LONG-TERM SITUATION	1
PROBLEMS BETWEEN CHILD AND OTHER FAMILY MEMBERS	2
PROCESS SEEMED TOO COMPLICATED/DIFFICULT	3
FINANCIAL CONCERNS	4
RESPONDENT'S HEALTH OR AGE	5

CHILD'S PARENTS DISCOURAGED IT	6
COURT REFUSED TO GRANT CUSTODY/GUARDIANSHIP	7
ATTORNEY OR SOCIAL WORKER RECOMMENDED AGAINST	8
CHILD'S AGE/CHILD TOO OLD	9
CHILD'S BEHAVIOR PROBLEMS OR JUVENILE JUSTICE SYSTEM INVOLVEMENT	10
NO DISCOURAGING FACTORS	11
OTHER, SPECIFY: _____	12
DON'T KNOW	96
REFUSE	97

**C11**

**Universe: All except parents, and Rs who have adopted [SC]**

Have you ever considered legally adopting [SC] if [he/she] cannot return to [his/her] parents?

**HELP TEXT (READ IF NECESSARY):** By adoption, I mean the court process through which a child would become a full and permanent legal member of your family. Although a child could maintain contact with their birth family, the parents' rights have to be terminated or relinquished for an adoption to be finalized.

YES	1
NO [GO TO C13]	2
DON'T KNOW	6
REFUSE	7

**C12**

**Universe: All except parents, and Rs who have adopted [SC]**

Are you currently planning to adopt [SC]?

YES [GO TO CC1]	1
NO	2
DON'T KNOW	6
REFUSE	7

**C13**

**Universe: All except parents; where R has not adopted [SC] and is not currently planning to adopt [SC]**

What discouraged you from wanting to adopt [SC] or prevented you from making such a plan?

CHILD STILL EMOTIONALLY ATTACHED TO BIOLOGICAL PARENT(S)	1
BIOLOGICAL PARENT HAS NOT RELINQUISHED RIGHTS, OR RIGHTS HAVE NOT BEEN TERMINATED BY COURT	2
CHILD'S RACE/ETHNICITY DIFFERS FROM RESPONDENT'S FAMILY	3
CHILD HAS DISABILITIES/HEALTH PROBLEMS THAT RESPONDENT MAY NOT BE ABLE TO HANDLE IN A LONG-TERM SITUATION	4
PROBLEMS BETWEEN CHILD AND OTHER MEMBERS OF RESPONDENT'S FAMILY	5
PROCESS SEEMED TOO COMPLICATED/DIFFICULT	6
FINANCIAL CONCERNS	7
RESPONDENT'S HEALTH OR AGE	8
CHILD'S PARENTS DISCOURAGED IT	9
CHILD'S AGE/CHILD TOO OLD	10
CHILD'S BEHAVIOR PROBLEMS/JUVENILE JUSTICE SYSTEM INVOLVEMENT	11
NO DISCOURAGING FACTORS	12
OTHER, SPECIFY: _____	13
DON'T KNOW	96
REFUSE	97

## CAREGIVER AND CHILD INTERACTIONS, RELATIONSHIP, MONITORING AND SUPERVISION (CC)

**CC1**

**Universe: All**

How would you describe your relationship to [SC]? Would you say it is very warm and close, somewhat warm and close, somewhat distant, or very distant? Please describe your relationship as it exists now.

VERY WARM AND CLOSE	1
SOMEWHAT WARM AND CLOSE	2
SOMEWHAT DISTANT	3
VERY DISTANT	4
DON'T KNOW	6
REFUSE	7

**CC2**

**Universe: All; where child meets age requirements for question  
IF AGE < 6, THEN GO TO WB1**

Different children need different amounts of supervision. In the past month, please tell me how often you know where [SC] is when [he/she] is not at home or in school. Would you say it is always, usually, sometimes, rarely, or never?

**HELP TEXT (REPEAT AS NECESSARY):** Would you say you did this with [SC] always, usually, sometimes, rarely, or never?

		ALWAYS	USUALLY	SOMETIMES	RARELY	NEVER	DON'T KNOW	REFUSE
	How often do you...							
CC2A	<b>[IF AGE &lt; 10, GO TO CC2D]</b> ...know where [SC] is when [he/she] is not at home or in school	1	2	3	4	5	6	7
CC2B	...know <u>who</u> [SC] is with when (he/she) is away not at home or in school?	1	2	3	4	5	6	7
CC2C	...know if [SC] arrived back home when (he/she) was supposed to?	1	2	3	4	5	6	7
CC2D	...know whether [SC] has finished any homework?	1	2	3	4	5	6	7
CC2E	<b>[IF AGE &lt; 10, GO TO CC2G]</b> ...try to control how SC spends [his/her] free time?	1	2	3	4	5	6	7
CC2F	...you know what [SC] spends [his/her] money on?	1	2	3	4	5	6	7
CC2G	...require [SC] to do work or chores	1	2	3	4	5	6	7
CC2H	<b>[IF AGE &lt; 10, GO TO WB1]</b> ... leave [SC] at home without an adult or sitter?	1	2	3	4	5	6	7

## CHILD WELL-BEING, CHILD CARE, AND SCHOOL (WB)

### WB1

**Universe: All except parents**  
**IF H4=2, THEN GO TO WB2**

Overall, how do you think [SC] feels about [his/her] living arrangement with you? Would you say [SC] feels positive about it, feels mostly positive about it, feels mostly negative about it, or feels negative about it?

FEELS POSITIVE	1
FEELS MOSTLY POSITIVE	2
FEELS MOSTLY NEGATIVE	3
FEELS NEGATIVE	4
DON'T KNOW	6
REFUSE	7

### WB2

**Universe: All**

Now I want to ask about mental health care [SC] may have received during the last 12 months. Mental health professionals include psychiatrists, psychologists, psychiatric nurses, and clinical social workers. During the past 12 months, has [SC] received any treatment or counseling from a mental health professional?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

### WB3

**Universe: All where [SC] is age 5 or older**  
**IF AGE <5, THEN GO TO WB8**

How easy or difficult was it to enroll [SC] in school? Would you say it was very easy, somewhat easy, somewhat difficult, or very difficult?

VERY EASY [GO TO WB5]	1
SOMEWHAT EASY	2



SOMEWHAT DIFFICULT	3
VERY DIFFICULT	4
NOT EVER HAD TO ENROLL IN SCHOOL [GO TO WB5]	5
DON'T KNOW	6
REFUSE	7

**WB4**

**Universe: All where [SC] is age 5 or older and respondent ever enrolled child in school but did not report that doing so was very easy**

What difficulties did you face in enrolling [SC] in school?

**INTERVIEWER INSTRUCTION: CODE ALL THAT APPLY.**

LACK OF TRANSPORTATION	1
LACK OF IMMUNIZATION AND MEDICAL RECORDS	2
LACK OF SCHOOL RECORDS	3
LACK OF GUARDIANSHIP OR CUSTODY OF CHILD	4
LACK OF PROOF OF CHILD'S RESIDENCY	5
LACK OF BIRTH CERTIFICATE	6
SCHOOL FEES	7
CHILD'S LEARNING OR BEHAVIORAL ISSUES	8
DID NOT KNOW WHOM TO CALL OR WHERE TO GO TO ENROLL CHILD	9
SCHOOL CREDIT ACCRUAL/COURSEWORK NOT CONSISTENT IN DIFFERENT SCHOOLS CHILD HAS ATTENDED	10
OTHER (SPECIFY): _____	11
DON'T KNOW	96
REFUSE	97

**WB5**

**Universe: All; where child is age 5 or older  
IF H3=2, THEN GO TO WB9**

IF CURRENT MONTH IS JUNE, JULY, OR AUGUST, ASK: "During the last school year, what kind of school was [SC] enrolled in? Was it a public school, private school, or home-school?"

ELSE ASK: "What kind of school is [SC] currently enrolled in? Is it a public school, private school, or home-school?"

**INTERVIEWER INSTRUCTION:** IF THE CHILD WAS ENROLLED IN MORE THAN ONE TYPE OF SCHOOL DURING THE CURRENT OR LAST SCHOOL YEAR, ASK THE TYPE OF SCHOOL THAT THE CHILD HAS MOST RECENTLY ATTENDED.

PUBLIC	1
PRIVATE	2
HOME-SCHOOLED	3
[SC] IS NOT CURRENTLY ENROLLED IN SCHOOL [GO TO WB8]	4
DON'T KNOW	6
REFUSE	7

**WB6**

**Universe: All; where child is age 5 or older and was enrolled in school (or homeschooled) during last school year**

How would you describe [SC]'s school performance in reading and writing? Would you say that it is excellent, very good, good, fair, or poor?

EXCELLENT	1
VERY GOOD	2
GOOD	3
FAIR	4
POOR	5
DON'T KNOW	6
REFUSE	7

**WB7**

**Universe: All; where child is age 5 or older and was enrolled in school (or homeschooled) at during last school year**

How would you describe [SC]'s school performance in math? Would you say that it is excellent, very good, good, fair, or poor?

EXCELLENT	1
VERY GOOD	2
GOOD	3
FAIR	4
POOR	5
DON'T KNOW	6
REFUSE	7

**WB6.2****Universe: All; where child age is 5 or more**

How well does [SC] speak English?

VERY WELL	1
WELL	2
NOT WELL	3
NOT AT ALL	4
DON'T KNOW	6
REFUSE	7

**WB8****Universe: All; where child age is 0 to 12****IF AGE >12, THEN GO TO WB9**

We'd like to know how [SC] spent [his/her] time when [he/she] was not with you during the last month. I'm going to read a list of different kinds of programs children attend and of people who care for children. I'd like you to tell me which ones you used for [SC], at least once a week during the last month.

[TYPE OF CHILD CARE USED FOR [SC] AT LEAST ONCE A WEEK DURING THE LAST MONTH.]

		YES	NO	DON'T KNOW	REFUSE
WB8A	<b>[IF AGE &gt; 5, GO TO WB8C]</b> First, did [SC] attend Head Start?	1	2	6	7
WB8B	Other than Head Start, what about a nursery school, a preschool, a pre-kindergarten, or a day care center? Please do not include child care or babysitting in someone else's home.	1	2	6	7
WB8C	<b>[IF AGE &lt; 2 THEN GO TO WB8D]</b> <b>IF SC IS 2 TO 5 YEARS OLD ASK:</b> A program that provided before- or after-school care? <b>IF SC IS 6 TO 12 YEARS OLD ASK:</b> First, did [SC] attend a program that provided before- or after-school care?	1	2	6	7
WB8D	Did [SC] have child care or babysitting in your home by someone other than [you/you or your spouse/partner]?	1	2 [GO TO WB8H]	6 [GO TO WB8H]	7 [GO TO WB8H]

		YES	NO	DON'T KNOW	REFUSE
WB8E	Is this person related to [SC]?	1	2	6	7
WB8F	Is this person related to [you/you or your spouse/partner]?	1	2	6	7
WB8G	Does this person live with you?	1	2	6	7
WB8H	What about child care or babysitting in someone else's home?	1	2 [GO TO WB9]	6 [GO TO WB9]	7 [GO TO WB9]
WB8I	Is the person usually caring for [SC] in another home related to [SC]?	1	2	6	7
WB8J	Is this person related to than [you/you or your spouse/partner]?	1	2	6	7

### WB9

**Universe: All except parents; where [SC] age 5 or older at time R began caring for [SC] IF [CHILD AGE - (LENGTH OF TIME IN YEARS BETWEEN CURRENT DATE AND DATE WHEN [SC] BEGAN LIVING WITH R) < 5 YEARS] OR H4=2, THEN GO TO R1.**

Did [SC] change schools as a result of coming to live with you?

**INTERVIEWER INSTRUCTION:** IF RESPONDENT SAYS THEY MOVED INTO [SC]'S HOUSEHOLD, RATHER THAN [SC] COMING TO LIVE WITH THEM, READ: Please think about the time when you came to live with SC.

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

### WB10

**Universe: All**

Is [SC] deaf or have serious difficulty hearing?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**WB11****Universe: All**

Is [SC] blind or have serious difficulty seeing, even when wearing glasses?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**WB12****Universe: All; where child age is 5 or more**

Because of a physical, mental or emotional condition, does [SC] have serious difficulty concentrating, remembering, or making decisions?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**WB13****Universe: All; where child age is 5 or more**

Does [SC] have serious difficulty walking or climbing stairs?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**WB14****Universe: All; where child age is 5 or more**

Does [SC] have difficulty dressing or bathing?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**WB15**

**Universe: All; where child age is 15 or more**

Because of a physical, mental or emotional condition, does [SC] have difficulty doing errands alone such as visiting a doctor's office or shopping?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

## CAREGIVER WELL-BEING, CAREGIVER PHYSICAL AND MENTAL HEALTH, SOCIAL SUPPORTS (R)

Now I'm going to ask you some questions about your health and supports you may receive.

**R1**

**Universe: All**

Would you say that, in general, your health is excellent, very good, good, fair, or poor?

EXCELLENT	1
VERY GOOD	2
GOOD	3
FAIR	4
POOR	5
DON'T KNOW	6
REFUSE	7

**R2**

**Universe: Married or cohabiting Rs**

**IF H6 NE 1 AND H8 NE 1, THEN GO TO R3**

Would you say that, in general, your [spouse's/partner's] health is excellent, very good, good, fair, or poor?

EXCELLENT	1
VERY GOOD	2
GOOD	3
FAIR	4
POOR	5
DON'T KNOW	6
REFUSE	7

**R3****Universe: All**

Would you say that, in general, your mental and emotional health is excellent, very good, good, fair, or poor?

EXCELLENT	1
VERY GOOD	2
GOOD	3
FAIR	4
POOR	5
DON'T KNOW	6
REFUSE	7

**R4****Universe: Married or cohabiting Rs****IF H6 NE 1 AND H8 NE 1, THEN GO TO R5**

Would you say that, in general, your [spouse's/partner's] mental and emotional health is excellent, very good, good, fair, or poor?

EXCELLENT	1
VERY GOOD	2
GOOD	3
FAIR	4
POOR	5
DON'T KNOW	6
REFUSE	7

**R5****Universe: All**

Do you have a physical health condition that limits the amount or kind of work or activities that you can do in or outside the household?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7



**R6****Universe: Married or cohabiting Rs****IF H6 NE 1 AND H8 NE 1, THEN GO TO R7**

Does your [spouse/partner] have a physical health condition that limits the amount or kind of work or activities that they can do in or outside the household?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**R7****Universe: All except parents****IF H4=2, THEN GO TO R8**

The next questions are about how it is going having the [SC] living with you. How satisfied are you with how this arrangement is going? Would you say you are very satisfied, somewhat satisfied, somewhat dissatisfied, or very dissatisfied?

VERY SATISFIED	1
SOMEWHAT SATISFIED	2
SOMEWHAT DISSATISFIED	3
VERY DISSATISFIED	4
DON'T KNOW	6
REFUSE	7

**R8**

**Universe: All**

Now I'm going to read some statements. Please tell me whether each statement is never true for you, sometimes true for you, or always true for you.

**HELP TEXT (REPEAT AS NECESSARY):** Would you say it is never true for you, sometimes true for you, or always true for you?

		NEVER TRUE	SOMETIMES TRUE	ALWAYS TRUE	DON'T KNOW	REFUSE
R8A	<b>[IF AGE &gt; 11, THEN GO TO R8B]</b> If I need to do an errand, I can easily find someone to watch [SC].	1	2	3	6	7
R8B	If I need a ride to get [SC] to the doctor, friends or family will help me	1	2	3	6	7
R8C	If [SC] is sick, friends or family will call or come by to check on how things are going	1	2	3	6	7
R8D	If [SC] is having problems, there is a friend, relative, or neighbor I can talk it over with	1	2	3	6	7
R8E	If I have an emergency and need cash, family or friends will lend it to me	1	2	3	6	7

**R9**

**Universe: All**

**INTERVIEWER INSTRUCTION:** IF H4=[2,4] or H10=1, FILL “parenting” and “parent.” ELSE FILL “being a caregiver of children” and “caregiver.”

Now I’m going to read some statements about [parenting/being a caregiver of children]. Please tell me how much you agree or disagree with each statement.

I feel trapped by my responsibilities as a [parent/caregiver]. Do you strongly agree, somewhat agree, somewhat disagree, or strongly disagree?

STRONGLY AGREE	1
SOMEWHAT AGREE	2
SOMEWHAT DISAGREE	3
STRONGLY DISAGREE	4
DON’T KNOW	6
REFUSE	7

**R10**

**Universe: All**

**INTERVIEWER INSTRUCTION:** IF H2=1, FILL “a child.” ELSE FILL “children.”

I find that taking care of [a child/children] is much more work than pleasure.

**HELP TEXT (REPEAT AS NECESSARY):** Do you strongly agree, somewhat agree, somewhat disagree, or strongly disagree?

STRONGLY AGREE	1
SOMEWHAT AGREE	2
SOMEWHAT DISAGREE	3
STRONGLY DISAGREE	4
DON’T KNOW	6
REFUSE	7

**R11**

**Universe: All**

I often feel tired, worn out, or exhausted from raising a family.

**HELP TEXT (REPEAT AS NECESSARY):** Do you strongly agree, somewhat agree, somewhat disagree, or strongly disagree?

STRONGLY AGREE	1
SOMEWHAT AGREE	2
SOMEWHAT DISAGREE	3
STRONGLY DISAGREE	4
DON'T KNOW	6
REFUSE	7

**R12**

**Universe: All**

**INTERVIEWER INSTRUCTION:** IF H4=[2,4] or H10=1, FILL= "parent." ELSE FILL "caregiver."

The next questions are about your experience being a [parent/caregiver] to [SC].

First, please think about how you feel about yourself as a [parent/caregiver] to [SC]. Would you say you are an excellent [parent/caregiver], a very good [parent/caregiver], a good [parent/caregiver], or not a very good [parent/caregiver]?

AN EXCELLENT [PARENT/CAREGIVER]	1
A VERY GOOD [PARENT/CAREGIVER]	2
A GOOD [PARENT/CAREGIVER]	3
NOT A VERY GOOD [PARENT/CAREGIVER]	4
DON'T KNOW	6
REFUSE	7

**R13**

**Universe: All**

These questions are about feelings you may have experienced over the past 30 days. During the past 30 days, how often did you feel:

**INTERVIEWER INSTRUCTION:** IF YOU FEEL THAT THE RESPONDENT IS UNCOMFORTABLE WITH ANY QUESTIONS, SAY: I know some of these are sensitive questions.

**INTERVIEWER INSTRUCTION:** IF RESPONDENT FEELS UNCOMFORTABLE ABOUT ANSWERING, SAY: We can skip to the next question.

**HELP TEXT (REPEAT IF NECESSARY):** Would you say you feel this way always, usually, sometimes, rarely, or never?

		ALWAYS	USUALLY	SOMETIMES	RARELY	NEVER	DON'T KNOW	REFUSE
R13A	So sad nothing could cheer you up?	1	2	3	4	5	6	7
R13B	Nervous?	1	2	3	4	5	6	7
R13C	Restless or fidgety?	1	2	3	4	5	6	7
R13D	Hopeless?	1	2	3	4	5	6	7
R13E	That everything was an effort?	1	2	3	4	5	6	7
R13F	Worthless?	1	2	3	4	5	6	7

**R14****Universe: All**

Now I will read you a number of statements. Some of the statements describe how a parent or caregiver may feel about parenting, raising children, or their family life more generally. Other statements describe how a parent or caregiver who is receiving services or considering receiving services may feel about his or her situation. Please tell me whether each statement is very true, mostly true, somewhat true, mostly not true, or not true at all.

**HELP TEXT (REPEAT IF NECESSARY):** Would you say this is very true, mostly true, somewhat true, mostly not true, or not true at all?

		VERY TRUE	MOSTLY TRUE	SOMEWHAT TRUE	MOSTLY NOT TRUE	NOT TRUE AT ALL	DON'T KNOW	REFUSE
R14A	When problems arise with [SC], I handle them pretty well.	1	2	3	4	5	6	7
R14B	I feel confident in my ability to help [SC] grow and develop.	1	2	3	4	5	6	7
R14C	I know the steps to take when I am concerned someone in my family is receiving poor services.	1	2	3	4	5	6	7
R14D	I feel my family life is under control.	1	2	3	4	5	6	7
R14E	I tell professionals what I think about the services being provided to members of my family.	1	2	3	4	5	6	7
R14F	When I need help with problems in my family, I am able to ask for help from others.	1	2	3	4	5	6	7
R14G	When necessary, I try to find services that [SC] or my family need.	1	2	3	4	5	6	7
R14H	When dealing with [SC] I focus on the good things as well as the problems.	1	2	3	4	5	6	7
R14I	I have a good understanding of [SC]'s feelings and problems.	1	2	3	4	5	6	7
R14J	I have a good understanding of the services available in my community to help my family.	1	2	3	4	5	6	7

## SERVICES AND SUPPORTS (S)

**S1**

**Universe: All**

Now I have some questions about health insurance and other services and supports. At this time, do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicaid or Medicare?

YES	1
NO [GO TO S3]	2
DON'T KNOW [GO TO S3]	6
REFUSE [GO TO S3]	7

**S2**

**Universe: Rs with health coverage**

Is that health insurance provided through your current employer, former employer, union, Medicare, Medicaid, or some other source?

CURRENT EMPLOYER	1
FORMER EMPLOYER	2
UNION	3
MEDICARE	4
MEDICAID	5
SOME OTHER SOURCE [SPECIFY]: _____	6
DON'T KNOW	96
REFUSE	97

**S3**

**Universe: All**

Does [SC] have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicaid?

YES [GO TO S5]	1
NO	2
DON'T KNOW [GO TO S5]	6
REFUSE [GO TO S5]	7

**S4****Universe: All; where R indicates [SC] has no health coverage**

Just to confirm, I entered that [SC] is not covered by any type of health insurance. Is this correct?

CONFIRMED - CHILD IS NOT COVERED BY ANY TYPE OF HEALTH INSURANCE [GO TO S7]	1
NOT CORRECT - CHILD HAS INSURANCE - RETURN TO S3 AND ENTER CORRECT RESPONSE [GO TO S5]	2

**S5****Universe: All; where R indicates [SC] has health coverage or R doesn't know/refuses to answer whether [SC] has health coverage**

IF S3 = 1 THEN FILL "Is that coverage" ELSE, fill "Is [he/she] insured by."

[Is that coverage/Is [he/she] insured by] Medicaid or the Children's Health Insurance Program, CHIP? In [fill name of state from S5\_STATE IF AVAILABLE, ELSE FILL NAME OF STATE FROM NSCH], the program is sometimes called [FILL MEDICAID NAME, CHIP NAME].

**HELP TEXT (READ IF NECESSARY):** CHIP, also known as S-CHIP, is a type of state-sponsored health insurance coverage that a child may have. The name of the plan varies from state-to-state.

YES [GO TO S6]	1
NO [GO TO S6]	2
R DOESN'T LIVE IN THE STATE MENTIONED IN THE QUESTION	3
DON'T KNOW [GO TO S6]	6
REFUSE [GO TO S6]	7

**S5\_STATE****Universe: All; where R indicates [SC] has health coverage or R doesn't know/refuses to answer whether child has health coverage**

Because many health insurance programs are state specific, can you please tell me what state you live in?

_____ (DROP DOWN MENU OF STATE NAMES) [GO TO S5]	
DON'T KNOW	96



REFUSE	97
--------	----

**S6**

**Universe: All; where R indicates that [SC] has health coverage**

**IF S3 NE 1, THEN GO TO S7**

During the past 12 months, was there any time when [SC] was not covered by ANY health insurance?

YES [GO TO S8]	1
NO [GO TO S9]	2
DON'T KNOW [GO TO S9]	6
REFUSE [GO TO S9]	7

**S7**

**Universe: All; where R indicates that [SC] does not have health coverage**

**IF S3 NE 2, THEN GO TO S9**

During the past 12 months, was there any time when [SC] had health care coverage?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**S8**

**Universe: All; where R indicates that [SC] does not currently have health coverage or lacked coverage at any point in prior 12 months**

IF S3=2, FILL "is." ELSE IF S6=1 FILL "was."

What are the reasons why [SC] [is/was] not covered by insurance?

**INTERVIEWER INSTRUCTION: CODE ALL THAT APPLY**

<b>COST</b>	
COST IS TOO HIGH	1
<b>ELIGIBILITY</b>	
INSURER REFUSES TO COVER / PREEXISTING CONDITION	2
CHILD NOT ELIGIBLE FOR INSURANCE THROUGH R OR R'S SPOUSE/PARTNER'S	3

EMPLOYER PROVIDED INSURANCE BECAUSE OF CUSTODY ISSUES	
R IS NOT ELIGIBLE FOR COVERAGE THROUGH OWN EMPLOYMENT OR THAT OF SPOUSE/PARTNER'S EMPLOYMENT	4
CHILD NOT ELIGIBLE FOR SOME OTHER REASON	5
<b>APPLICATION PROCESS</b>	
HAVE APPLIED - NOW JUST WAITING	6
INTEND TO APPLY BUT JUST HAVEN'T DONE SO	7
DON'T KNOW WHERE OR HOW TO APPLY	8
APPLICATION PROCESS TOO DIFFICULT, TAKES TOO MUCH TIME	9
<b>OTHER</b>	
R'S EMPLOYER AND SPOUSE/PARTNER'S EMPLOYER DO NOT OFFER INSURANCE	10
DO NOT LIKE DOCTORS / MEDICAL STAFF / CLINIC IN HEALTH PLAN AVAILABLE TO CHILD	11
<b>OTHER</b>	
CHILD DOES NOT NEED INSURANCE / DOES NOT GET SICK	12
EXPECT TO HAVE INSURANCE FROM ANOTHER SOURCE SOON	13
OTHER	14
DON'T KNOW	96
REFUSE	97

**S9**

**Universe: All**

In addition to earnings from work, families often receive other sources of income and supports, from the government, from private institutions or from their own savings. I would like to ask you a few questions about all sources of income and supports currently received by members of your household other than earnings from work.

Does anybody in your household receive Social Security retirement benefits or payments to survivors from the U.S. government?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**S10**

**Universe: All**

Does anybody in your household receive Social Security disability benefits, or SSDI?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**S11**

**Universe: All**

Does anybody in your household receive veterans' benefits?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**S12**

**Universe: All**

How about Food Stamps?

YES	1
NO [GO TO S14]	2
DON'T KNOW [GO TO S14]	6
REFUSE [GO TO S14]	7

**S13**

**Universe: All except parents; where R's household receives food stamps  
IF H4=2, THEN GO TO S14**

Are the Food Stamps received as a result of your caring for [SC]?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**S14**

**Universe: All; where child is 6 years old or younger  
IF AGE > 6, THEN GO TO S15**

Does [SC] receive WIC benefits?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**S15**

**Universe: All**

Does [SC] get free or reduced price meals while at child care or in school?

**HELP TEXT (READ IF NECESSARY):** “Free or reduced price meals” are paid or partially paid for by a government program or agency. Do not include meals that are covered by tuition you pay for school.

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**S16**

**Universe: Rs who rent own apartment/house or live with family/friends who rent and R contributes part of the rent  
IF H13=[3, 4, 5, 6, 96, 97], THEN GO TO S17**

Are (you/you and your family) paying lower rent because the federal, state, or local government is paying part of the rent?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**S17**

**Universe: All; where child uses any form of child care**

**IF [IF WB8A=[2, 6, 7] AND WB8B=[2, 6, 7] AND WB8C=[2, 6, 7] AND WB8D=[2, 6, 7] AND WB8H=[2, 6, 7]], THEN GO TO S18**

In addition to any child care for [SC] that you paid for, were any of [his/her] regular child care arrangements last month free or at a reduced fee or cost?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

When answering this next question, please remember to include your income PLUS the income of all family members living in this household.

What is your best estimate of the total income of all family members from all sources, before taxes, in [FILL: last calendar year in 4 digit format]?

INTERVIEWER INSTRUCTION: ENTER '999,995' IF THE REPORTED INCOME IS GREATER THAN \$999,995.

RECORD INCOME AMOUNT [GO TO D1]: _____	
INCOME GREATER THAN \$999,995 [GO TO D1]	999995
DON'T KNOW	6
REFUSE	7

**S19**

**Universe: Respondents who don't know or refuse to report income initially**

Was your total family income from all sources less than \$50,000 or \$50,000 or more?

LESS THAN \$50,000	1
\$50,000 OR MORE [GO TO S22]	2
DON'T KNOW [GO TO D1]	6
REFUSE [GO TO D1]	7

**S20**

**Universe: Respondents who don't know or refuse to report income initially, then report income of less than \$50,000**

Was your total family income from all sources less than \$35,000 or \$35,000 or more?

LESS THAN \$35,000	1
\$35,000 OR MORE [IF H1 + H2 = (8, 9) GO TO S21; ELSE GO TO D1]	2
DON'T KNOW [GO TO D1]	6
REFUSE [GO TO D1]	7

**S21**

**Universe: Respondents who don't know or refuse to report income initially, then report income of less than \$35,000 or report an income of \$35,000-\$50,000 for a family with 8-9 family members**

Was your total family income from all sources less than [FILL: Poverty threshold for household of size H1 + H2] or [FILL: Poverty threshold for household of size H1 + H2] or more?

IF H1+H2=1, FILL \$11,500 for poverty threshold

ELSE IF H1+H2=2, FILL \$15,000

ELSE IF H1+H2=3, FILL \$18,000

ELSE IF H1+H2=4, FILL \$23,000

ELSE IF H1+H2=5, FILL \$27,000

ELSE IF H1+H2=6, FILL \$31,000

ELSE IF H1+H2=7, FILL \$35,000

ELSE IF H1+H2=8, FILL \$39,000

ELSE IF H1+H2=9, FILL \$46,500

LESS THAN [FILL: Poverty threshold for household of size H1 + H2] [GO TO D1]	1
[FILL: Poverty threshold for household of size H1 + H2] OR MORE [GO TO D1]	2
DON'T KNOW [GO TO D1]	6
REFUSE [GO TO D1]	7

**S22**

**Universe: Respondents who don't know or refuse to report income initially, then report income of at least \$50,000**

Was your total family income from all sources less than \$100,000 or \$100,000 or more?

LESS THAN \$100,000	1
\$100,000 OR MORE [GO TO D1]	2
DON'T KNOW [GO TO D1]	6
REFUSE [GO TO D1]	7

**S23**

**Universe: Respondents who don't know or refuse to report income initially, then report income of less than \$100,000**

Was your total family income from all sources less than \$75,000 or \$75,000 or more?

LESS THAN \$75,000	1
\$75,000 OR MORE	2
DON'T KNOW	6
REFUSE	7

## DEMOGRAPHICS (D)

**D1**

**Universe: All**

Now I'm going to ask a few final questions about [you/you and your spouse/partner]. What year were you born?

YEAR: _____	
DON'T KNOW	6
REFUSE	7

**D2**

**Universe: All; where R has spouse/partner  
IF H6 NE 1 AND H8 NE 1, THEN GO TO D3**

What year was your [spouse/partner] born?

YEAR: _____	
DON'T KNOW	6
REFUSE	7

**D3**

**Universe: All**

Are you of Hispanic or Latino origin?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7



**D4**

**Universe: All**

Please choose one or more of the following categories to describe your race. Are you White, Black or African American, American Indian, Alaska Native, Asian, or Native Hawaiian or other Pacific Islander?

**INTERVIEWER INSTRUCTION: SELECT ALL THAT APPLY.**

WHITE	1
BLACK/AFRICAN AMERICAN	2
AMERICAN INDIAN/NATIVE AMERICAN	3
ALASKA NATIVE	4
ASIAN	5
NATIVE HAWAIIAN	6
PACIFIC ISLANDER	7
OTHER (SPECIFY)	8
DON'T KNOW	96
REFUSE	97

**D5**

**Universe: All**

Compared to yourself, is [SC] a different race or ethnicity or from a different culture?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**D6**

**Universe: All; where R has spouse/partner  
IF [H6 NE 1 AND H8 NE 1], THEN GO TO D9**

Is your [spouse/partner] of Hispanic or Latino origin?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**D7**

**Universe: All; where R has spouse/partner**

Please choose one or more of the following categories to describe your [spouse's/partner's] race. Is your spouse or partner White, Black or African American, American Indian, Alaska Native, Asian, or Native Hawaiian or other Pacific Islander?

**INTERVIEWER INSTRUCTION: SELECT ALL THAT APPLY.**

WHITE	1
BLACK/AFRICAN AMERICAN	2
AMERICAN INDIAN/NATIVE AMERICAN	3
ALASKA NATIVE	4
ASIAN	5
NATIVE HAWAIIAN	6
PACIFIC ISLANDER	7
OTHER (SPECIFY)	8
DON'T KNOW	96
REFUSE	97

**D8**

**Universe: All Rs with a spouse/partner**  
**IF [H6 NE 1 AND H8 NE 1] THEN GO TO D9**

Is [SC] a different race or ethnicity or from a different culture than your [spouse/partner]?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**D9**

**Universe: All**

What is your current employment status?

**INTERVIEWER INSTRUCTION: RECORD AS STUDENT ONLY IF THERE IS NO FULL- OR PART-TIME EMPLOYMENT.**

EMPLOYED FULL-TIME (MORE THAN 30 HOURS PER WEEK)	1
EMPLOYED PART-TIME (30 HOURS PER WEEK OR LESS)	2
NOT WORKING--ON VACATION	3
NOT WORKING--ON TEMPORARY LAYOFF OR STRIKE	4
NOT WORKING BUT LOOKING FOR WORK	5
HOMEMAKER/TAKING CARE OF HOME OR FAMILY	6
RETIRED	7
STUDENT	8
DISABLED	9
OTHER (SPECIFY): _____	10
DON'T KNOW	96
REFUSE	97

**D10**

**Universe: All Rs with a spouse or partner  
IF H6 NE 1 AND H8 NE 1, THEN GO TO D11**

What is your [spouse's/partner's] current employment status?

**INTERVIEWER INSTRUCTION: RECORD AS STUDENT ONLY IF THERE IS NO FULL- OR PART-TIME EMPLOYMENT.**

EMPLOYED FULL-TIME (MORE THAN 30 HOURS PER WEEK)	1
EMPLOYED PART-TIME (30 HOURS PER WEEK OR LESS)	2
NOT WORKING--ON VACATION	3
NOT WORKING--ON TEMPORARY LAYOFF OR STRIKE	4
NOT WORKING BUT LOOKING FOR WORK	5
HOMEMAKER/TAKING CARE OF HOME OR FAMILY	6
RETIRED	7
STUDENT	8
DISABLED	9
OTHER (SPECIFY): _____	10
DON'T KNOW	96
REFUSE	97

**D11**

**Universe: All**

IF NSCNC RESPONDENT IS SAME PERSON WHO RESPONDED TO NSCH (IF INTRO\_1=1 OR INTRO\_1=2 OR INTRO\_2=1,), FILL INFO FROM NSCH VARIABLE K11Q20 IF R WAS FOSTER MOTHER (i.e., IF NSCH VARIABLE C10Q02A=3), ELSE FROM NSCH VARIABLE K11Q21 IF R WAS FOSTER FATHER (i.e., IF NSCH VARIABLE C10Q02A=8), ELSE FROM K11Q22.

ELSE, ASK: What is the highest degree or year of school you have completed?

8th GRADE OR LESS	1
9 <sup>th</sup> -12th GRADE NO DIPLOMA	2
HIGH SCHOOL GRADUATE OR GED COMPLETED	3
COMPLETED A VOCATIONAL, TRADE, OR BUSINESS SCHOOL PROGRAM	4
SOME COLLEGE CREDIT BUT NO DEGREE	5
ASSOCIATE DEGREE (AA, AS)	6
BACHELOR'S DEGREE (BA, BS, AB)	7
MASTER'S DEGREE (MA, MS, MSW, MBA)	8

DOCTORATE (PhD, EdD) or PROFESSIONAL DEGREE (MD, DDS, DVM, JD)	9
DON'T KNOW	96
REFUSE	97

**D12**

**Universe: All; where R has spouse/partner  
IF H6 NE 1 AND H8 NE 1, THEN GO TO D13**

What is the highest grade or year of school your [spouse/partner] has completed?

8th GRADE OR LESS	1
9 <sup>th</sup> -12th GRADE NO DIPLOMA	2
HIGH SCHOOL GRADUATE OR GED COMPLETED	3
COMPLETED A VOCATIONAL, TRADE, OR BUSINESS SCHOOL PROGRAM	4
SOME COLLEGE CREDIT BUT NO DEGREE	5
ASSOCIATE DEGREE (AA, AS)	6
BACHELOR'S DEGREE (BA, BS, AB)	7
MASTER'S DEGREE (MA, MS, MSW, MBA)	8
DOCTORATE (PhD, EdD) or PROFESSIONAL DEGREE (MD, DDS, DVM, JD)	9
DON'T KNOW	96
REFUSE	97

**D13**

**Universe: All**

Were you born in the United States?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**D14**

**Universe: All Rs with a spouse or partner**  
**IF H6=1 OR H8=1 THEN GO TO D15**

Was your [spouse/partner] born in the United States?

YES	1
NO	2
DON'T KNOW	6
REFUSE	7

**D15**

**Universe: All except parents**  
**IF H4=2, THEN GO TO END**

Before we end the survey, I'd like to ask about what has been challenging and rewarding about having [SC] live with you.

INTERVIEWER INSTRUCTION: IF RESPONDENT SAYS THEY MOVED INTO [SC]'S HOUSEHOLD, RATHER THAN [SC] COMING TO LIVE WITH THEM, READ: Please think about when you came to live with [SC].

R21A. Please tell me what has been most challenging about caring for [SC]?

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R21B. Please tell me what has been most rewarding about caring for [SC]?

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**END**

Those are all the questions I have. Before I go, I'll need to confirm your mailing address so we can send you \$ [Text Fill: To be determined] as a token of our appreciation for taking the time to answer these questions.

<GET/CONFIRM ADDRESS and GO TO END\_2>

**END\_2**

I'd like to thank you on behalf of the CDC's National Center for Health Statistics for the time and effort you've spent answering these questions. If you have any questions about this survey, you may call my supervisor toll-free at [TEXTFILL: to be determined]. If you have questions about your rights as a survey participant, you may call the chairman of the Research Ethics Review Board at [TEXTFILL: Phone number to be determined]. Thank you again.

NSCNC\_END\_TIME