****

|  |  |
| --- | --- |
| **Event:** | Household Enumeration, Pregnancy Screener, Informed Consent, Pregnancy Probability, Pre-Pregnancy, Pregnancy Visit 1, Pregnancy Visit 2, Father, Birth, 3-Month, 6-Month, 9-Month, 12-Month, 18-Month, 24-Month, 30-Month |
| **Participant:**  **Respondent:** | Pregnant Woman, Non-Pregnant Woman, Father, Parent, Caregiver  Pregnant Woman, Non-Pregnant Woman, Father, Parent, Caregiver |
| **Domain:** | Questionnaire |
| **Type of Document:** | Interview |
| **Allowable Mode:** | In-person (CAPI), Telephone (CATI)\* |
| **Allowable Method:** | Interviewer-Administered |
| **Recruitment Groups:** | EH, PB, HI, LI, PBS |
| **Version:** | x.x |
| **Release:** | MDES 3.3 |

**Validation Instrument**

\*In addition to the allowable modes listed above, this instrument is OMB-approved for mail or Web but at this time there are no instruments available for this type of administration.

This page intentionally left blank.

Validation Instrument (All Events)

**TABLE OF CONTENTS**

[GENERAL PROGRAMMER INSTRUCTIONS 1](#_Toc331675489)

[INTERVIEWER INTRODUCTION 3](#_Toc331675490)

[PARTICIPANT IDENTIFICATION 7](#_Toc331675491)

[PRIVACY STATEMENT 9](#_Toc331675492)

[VISIT-SPECIFIC ITEMS 10](#_Toc331675493)

[PARTICIPANT SATISFACTION 22](#_Toc331675495)

[CLOSING STATEMENTS 24](#_Toc331675496)

Validation Instrument (All Events)

# GENERAL PROGRAMMER INSTRUCTIONS:

WHEN PROGRAMMING INSTRUMENTS, VALIDATE FIELD LENGTHS AND TYPES AGAINST THE MDES TO ENSURE DATA COLLECTION RESPONSES DO NOT EXCEED THOSE OF THE MDES. SOME GENERAL ITEM LIMITS USED ARE AS FOLLOWS:

|  |  |  |
| --- | --- | --- |
| **DATA ELEMENT FIELDS** | **MAXIMUM CHARACTERS PERMITTED** | **PROGRAMMER INSTRUCTIONS** |
| ADDRESS AND EMAIL FIELDS | 100 |  |
| UNIT AND PHONE FIELDS | 10 |  |
| \_OTH AND COMMENT FIELDS | 255 |  |
| FIRST NAME AND LAST NAME | 30 |  |
| ALL ID FIELDS | 36 |  |
| ZIP CODE | 5 |  |
| ZIP CODE LAST FOUR | 4 |  |
| CITY | 50 |  |
| DOB AND ALL OTHER DATE FIELDS (E.G., DT, DATE, ETC.) | 10 | * DISPLAY AS MM/DD/YYYY * STORE AS YYYY-MM-DD * HARD EDITS:   MM MUST EQUAL 00 TO 12  DD MUST EQUAL 01 TO 31  YYYY MUST BE BETWEEN 1900 AND CURRENT YEAR. |
| TIME VARIABLES | TWO-DIGIT HOUR AND TWO-DIGIT MINUTE, AM/PM DESIGNATION | * HARD EDITS:   HOURS MUST BE BETWEEN 00 AND 12;  MINUTES MUST BE BETWEEN 00 AND 59 |

**INSTRUMENT GUIDELINES FOR PARTICIPANT AND RESPONDENT IDS:**

PRENATALLY, THE P\_ID IN THE MDES HEADER IS THAT OF THE PARTICIPANT (E.G. THE NON-PREGNANT WOMAN, PREGNANT WOMAN, OR THE FATHER).

POSTNATALLY, A RESPONDENT ID WILL BE USED IN ADDITION TO THE PARTICIPANT ID BECAUSE SOMEBODY OTHER THAN THE PARTICIPANT MAY BE COMPLETING THE INTERVIEW. FOR EXAMPLE, THE PARTICIPANT MAY BE THE CHILD AND THE RESPONDENT MAY BE THE MOTHER, FATHER, OR ANOTHER CAREGIVER. THEREFORE, MDES VERSION 2.2 AND ALL FUTURE VERSIONS CONTAIN A **R\_P\_ID** (RESPONDENT PARTICIPANT ID) HEADER FIELD FOR EACH POST-BIRTH INSTRUMENT. THIS WILL ALLOW STUDY CENTERS TO INDICATE WHETHER THE RESPONDENT IS SOMEBODY OTHER THAN THE PARTICIPANT ABOUT WHOM THE QUESTIONS ARE BEING ASKED.

**A REMINDER:**

ALL RESPONDENTS MUST BE CONSENTED AND HAVE RECORDS IN THE PERSON, PARTICIPANT, PARTICIPANT\_CONSENT AND LINK\_PERSON\_PARTICIPANT TABLES, WHICH CAN BE PRELOADED INTO EACH INSTRUMENT. ADDITIONALLY, IN POST-BIRTH QUESTIONNAIRES WHERE THERE IS THE ABILITY TO LOOP THROUGH A SET OF QUESTIONS FOR MULTIPLE CHILDREN, IT IS IMPORTANT TO CAPTURE AND STORE THE CORRECT CHILD **P\_ID** ALONG WITH THE LOOP INFORMATION. IN THE MDES VARIABLE LABEL/DEFINITION COLUMN, THIS IS INDICATED AS FOLLOWS: **EXTERNAL IDENTIFIER: PARTICIPANT ID FOR CHILD DETAIL.**

Interviewer Introduction

**(TIME\_STAMP\_1) PROGRAMMER INSTRUCTIONS:**

* INSERT DATE/TIME STAMP
* PRELOAD PARTICIPANT ID **(P\_ID)** AND RESPONDENT ID **(R\_P\_ID)**.
* PRELOAD **R\_FNAME** AND **CHILD\_SEX** FROM PARTICIPANT VERIFICATION INTERVIEW.
* PRELOAD C\_FNAME FROM ASSOCIATED PARTICIPANT VERIFICATION INSTRUMENT, AND DISPLAY AS {C\_FNAME} THROUGHOUT INSTRUMENT.
* IF VALIDATING ENUMERATION INTERVIEW AND **R\_GENDER** = 1, OR IF VALIDATING FATHER AND SUBSEQUENT FATHER INTERVIEW, DISPLAY “he” OR “him” AS APPROPRIATE THROUGHOUT THE INSTRUMENT.
* IF VALIDATING 3-MONTH INTERVIEW, 6-MONTH INTERVIEW, 9-MONTH INTERVIEW, 12-MONTH INTERVIEW, 18-MONTH INTERVIEW, OR 24-MONTH INTERVIEW, DISPLAY “he/she” OR “him/her” AS APPROPRIATE THROUGHOUT THE INSTRUMENT.
* OTHERWISE, IF VALIDATING PREGNANCY SCREENER, PREGNANCY PROBABILITY, PRE-PREGNANCY, PREGNANCY VISIT 1, OR PREGNANCY VISIT 2, DISPLAY “she” OR “her” AS APPROPRIATE THROUGHOUT THE INSTRUMENT.

IN001/(INTRO\_1). Hello, my name is [INTERVIEWER’S NAME] and I am calling on behalf of the National Children’s Study. May I please speak with {R\_FNAME}?

YES 1 **(TIME\_STAMP\_2)**

NO 2 **(BEST\_TTC1)**

NO SUCH PERSON AT ADDRESS/PHONE 3

REFUSED -1 **(BEST\_TTC1)**

DON’T KNOW -2 **(BEST\_TTC1)**

**PROGRAMMER INSTRUCTION:**

* PRELOAD NAME OF RESPONDENT/ PARTICIPANT.

IN002/(VER\_NUMBER). Just to verify, is this {TELEPHONE NUMBER FOR RESPONDENT/ PARTICIPANT}?

YES 1 **(CS001)**

NO 2 **(CS001)**

REFUSED -1 **(CS001)**

DON’T KNOW -2 **(CS001)**

**PROGRAMMER INSTRUCTION:**

* PRELOAD RESPONDENT/PARTICIPANT BEST TELEPHONE NUMBER.

IN003/(BEST\_TTC\_1). What would be a good day and time to reach [him/her]?

**INTERVIEWER INSTRUCTION:**

* USE ”him” OR “her” AS APPROPRIATE.
* ENTER HOUR AND MINUTE VALUES.

|\_\_\_|\_\_\_| : |\_\_\_|\_\_\_|

H H M M

REFUSED -1

DON’T KNOW -2

**IN004/(DAY\_WEEK\_1)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(**DAY\_WEEK\_1)**

REFUSED -1

DON’T KNOW -2

**INTERVIEWER INSTRUCTION:**

* ENTER DAY(S) OF WEEK.

IN005/(BEST\_TTC\_2).

AM 1

PM 2

REFUSED -1

DON’T KNOW -2

**INTERVIEWER INSTRUCTION:**

* SELECT AM OR PM

IN007/(BEST\_TTC\_3).

AFTER TIME REPORTED 1

BEFORE TIME REPORTED 2

AT TIME REPORTED 3

REFUSED -1

DON’T KNOW -2

NOT APPLICABLE -7

**INTERVIEWER INSTRUCTION:**

* SELECT APPROPRIATE RESPONSE

IN009/(PHONE). Is this a good phone number to reach {R\_FNAME}?

YES 1 **(TIME\_STAMP\_22)**

NO 2

REFUSED -1

DON’T KNOW -2

**PROGRAMMER INSTRUCTION:**

* PRELOAD NAME OF RESPONDENT/ PARTICIPANT

IN011/(PHONE\_NBR). Would you please tell me a telephone number where {he/she} can be reached?

INTERVIEWER INSTRUCTION:

* USE “he” OR “she” AS APPROPRIATE.

|\_\_\_|\_\_\_|\_\_\_| - |\_\_\_|\_\_\_|\_\_\_| - |\_\_\_|\_\_\_|\_\_\_|\_\_\_| **(TIME\_STAMP\_22)**

REFUSED -1 **(TIME\_STAMP\_22)**

DON’T KNOW -2 **(TIME\_STAMP\_22)**

**(TIME\_STAMP\_2**) **PROGRAMMER INSTRUCTION:**

* INSERT DATE/TIME STAMP

PARTICIPANT Identification

**[WHEN SPEAKING TO PARTICIPANT]**

**PI001.** Hello, my name is [INTERVIEWER’S NAME] and I am calling on behalf of the National Children’s Study.

**INTERVIEWER INSTRUCTION:**

* REPEAT AS NEEDED.

PI001A/(INTRO\_2). You recently spoke with one of our staff members. We routinely re-contact some people to see if circumstances have changed.

CONTINUE 1 **(INTRO\_3)**

RESPONDENT/PARTICIPANT STATES THAT NO INTERVIEW TOOK PLACE 2

PI002/(SCHEDULE). I’m sorry for the misunderstanding. May I schedule a time with you to complete that interview?

YES 1 **(TIME\_STAMP\_22)**

NO 2 **(TIME\_STAMP\_22)**

INTERVIEWER INSTRUCTION:

* SCHEDULE INTERVIEW WITH PARTICIPANT.

PI004/(INTRO\_3). Is this a good time to talk?

YES 1 **(TIME\_STAMP\_3)**

NO 2

REFUSED -1

DON’T KNOW -2

PI005/(R\_BEST\_TTC\_1). What would be a better time for you?

**INTERVIEWER INSTRUCTION:**

* ENTER HOUR AND MINUTE VALUES

|\_\_\_|\_\_\_| : |\_\_\_|\_\_\_|

H H M M

REFUSED -1

DON’T KNOW -2

PI005A/(DAY\_WEEK\_2).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(DAY\_WEEK\_2)**

REFUSED -1

DON’T KNOW -2

PI006/(R\_BEST\_TTC\_2).

AM 1

PM 2

REFUSED -1

DON’T KNOW -2

PI007/(R\_BEST\_TTC\_3).

AFTER TIME REPORTED 1 **(TIME\_STAMP\_22)**

BEFORE TIME REPORTED 2 **(TIME\_STAMP\_22)**

REFUSED -1 **(TIME\_STAMP\_22)**

DON’T KNOW -2 **(TIME\_STAMP\_22)**

**PRIVACY STATEMENT**

**(TIME\_STAMP\_3) PROGRAMMER INSTRUCTION:**

* INSERT DATE/TIME STAMP

PRS001. All information will be kept private and used for Study purposes only. You may refuse to answer any question or stop at any time.

PRS001A/(INT\_CONFIRM). According to our records, {INTERVIEWER’S NAME} spoke with you on {DAY AND DATE OF INTERVIEW}. Do you remember speaking with our staff member?

YES 1

NO 2 **(SCHEDULE)**

REFUSED -1 **(SCHEDULE)**

DON’T KNOW -2 **(SCHEDULE)**

**PROGRAMMER INSTRUCTIONS:**

* PRELOAD NAME OF INTERVIEWER AND DAY/DATE OF INTERVIEW
* SKIP TO NEXT QUESTION BASED ON WHICH INSTRUMENT/DOCUMENT WAS ADMINISTERED
* HOUSEHOLD ENUMERATION 🡪 GO TO **TIME\_STAMP\_4**
* PREGNANCY SCREENER 🡪 GO TO **TIME\_STAMP\_5**
* INFORMED CONSENT 🡪 GO TO **TIME\_STAMP\_6**
* PPG CALLS 🡪 GO TO **TIME\_STAMP\_7**
* PRE-PREGNANCY 🡪 GO TO **TIME\_STAMP\_8**
* PREGNANCY VISIT 1 🡪 GO TO **TIME\_STAMP\_9**
* PREGNANCY VISIT 2 🡪 GO TO **TIME\_STAMP\_10**
* FATHER 🡪 GO TO **TIME\_STAMP\_11**
* BIRTH 🡪 GO TO **TIME\_STAMP\_12**
* 3-MONTH 🡪 GO TO **TIME\_STAMP\_13**
* 6-MONTH 🡪 GO TO **TIME\_STAMP\_14**
* 9-MONTH 🡪 GO TO **TIME\_STAMP\_15**
* 12-MONTH🡪 GO TO **TIME\_STAMP\_16**
* 18-MONTH 🡪 GO TO **TIME\_STAMP\_17**
* 24-MONTH 🡪 GO TO **TIME\_STAMP\_18**
* 30-MONTH 🡪 GO TO **TIME\_STAMP\_19**

Visit-Specific Items

**(TIME\_STAMP\_4) PROGRAMMER INSTRUCTION:**

* INSERT DATE/TIME STAMP

VS001/(HH\_ENUM). Were you asked questions about the number of people who live at this address?

YES 1

NO 2

REFUSED -1

DON’T KNOW -2

VS003/(NUM\_FEMALE). In {MONTH OF INTERVIEW}, how many women {LOCAL AGE OF MAJORITY} or older were living in your household? Please include anyone who usually stays there but was temporarily away on business, vacation, in the hospital, on full-time active military duty, or is a student temporarily living away from home. Do not include anyone who was in a nursing home or other institution.

|\_\_\_|\_\_\_| **(TIME\_STAMP\_20)**

NUMBER OF ADULT FEMALES

REFUSED -1 **(TIME\_STAMP\_20)**

DON’T KNOW -2 **(TIME\_STAMP\_20)**

**PROGRAMMER INSTRUCTION:**

* PRELOAD MONTH OF INTERVIEW AND LOCAL AGE OF MAJORITY.

**(TIME\_STAMP**\_**5) PROGRAMMER INSTRUCTION:**

* INSERT DATE/TIME STAMP

VS005/(PREG\_SCR). Were you asked if you or others in your household might be pregnant?

YES 1

NO 2

REFUSED -1

DON’T KNOW -2

VS007/(AGE). During {MONTH OF INTERVIEW} how old were you?

|\_\_\_|\_\_\_| **(TIME\_STAMP\_20)**

AGE

REFUSED -1 **(TIME\_STAMP\_20)**

DON’T KNOW -2 **(TIME\_STAMP\_20)**

**PROGRAMMER INSTRUCTION:**

* PRELOAD MONTH OF INTERVIEW.

**(TIME\_STAMP\_6) PROGRAMMER INSTRUCTION:**

* INSERT DATE/TIME STAMP

VS009/(INF\_CONSENT). Were you given information about the National Children’s Study and asked if you would like to participate?

YES 1

NO 2

REFUSED -1

DON’T KNOW -2

VS011/(INF\_CONSENT2). Were you given an opportunity to ask all the questions you had about joining the Study before being asked to agree to join?

YES 1 **(TIME\_STAMP\_20)**

NO 2 **(TIME\_STAMP\_20)**

REFUSED -1 **(TIME\_STAMP\_20)**

DON’T KNOW -2 **(TIME\_STAMP\_20)**

**(TIME\_STAMP\_7) PROGRAMMER INSTRUCTION:**

* INSERT DATE/TIME STAMP

VS013/(PPG\_CATI). Were you asked whether or not you were pregnant or trying to become pregnant?

YES 1

NO 2

REFUSED -1

DON’T KNOW -2

VS015/(PPG\_CATI2). At that time were you pregnant or trying to become pregnant?

YES 1 **(TIME\_STAMP\_20)**

NO 2 **(TIME\_STAMP\_20)**

NO, RECENT PREGNANCY LOSS 3 **(TIME\_STAMP\_20)**

NO, RECENTLY GAVE BIRTH 4 **(TIME\_STAMP\_20)**

NO, UNABLE TO HAVE CHILDREN 5 **(TIME\_STAMP\_20)**

REFUSED -1 **(TIME\_STAMP\_20)**

DON’T KNOW -2 **(TIME\_STAMP\_20)**

**(TIME\_STAMP\_8) PROGRAMMER INSTRUCTION:**

* INSERT DATE/TIME STAMP

VS017/(PREPREG). Were you asked if you have ever been pregnant?

YES 1

NO 2

REFUSED -1

DON’T KNOW -2

VS019/(PREPREG2). At that time had you ever been pregnant? Please include live births, miscarriages, stillbirths, ectopic pregnancies, and pregnancy terminations.

YES 1 **(TIME\_STAMP\_20)**

NO 2 **(TIME\_STAMP\_20)**

REFUSED -1 **(TIME\_STAMP\_20)**

DON’T KNOW -2 **(TIME\_STAMP\_20)**

**(TIME\_STAMP\_9) PROGRAMMER INSTRUCTION:**

* INSERT DATE/TIME STAMP

VS021/(PREG1). During that interview were you asked about your baby’s due date?

YES 1

NO 2

REFUSED -1

DON’T KNOW -2

**VS023/(HOME\_TEST)**. Did you use a home pregnancy test to help find out you were pregnant?

YES 1 **(TIME\_STAMP\_20)**

NO 2 **(TIME\_STAMP\_20)**

REFUSED -1 **(TIME\_STAMP\_20)**

DON’T KNOW -2 **(TIME\_STAMP\_20)**

**(TIME\_STAMP\_10) PROGRAMMER INSTRUCTION:**

* INSERT DATE/TIME STAMP

VS025/(PREG2). During that interview were you asked about where you planned to deliver your baby?

YES 1

NO 2

REFUSED -1

DON’T KNOW -2

VS027A/(HOSPITAL). Since becoming pregnant, had you spent at least one night in the hospital as of {DATE OF INTERVIEW}?

PROGRAMMER INSTRUCTION:

* PRELOAD DATE OF PREGNANCY VISIT 2 INTERVIEW

YES 1 **(TIME\_STAMP\_20)**

NO 2 **(TIME\_STAMP\_20)**

REFUSED -1 **(TIME\_STAMP\_20)**

DON’T KNOW -2 **(TIME\_STAMP\_20)**

**(TIME\_STAMP\_11) PROGRAMMER INSTRUCTION:**

* INSERT DATE/TIME STAMP

VS028/(PV1FATHER\_CANCER). Were you asked if you have ever been told by a doctor or other healthcare provider that you had cancer?

YES 1

NO 2

REFUSED -1

DON’T KNOW -2

VS028A/(PV1FATHER\_BIRTH). Were you asked whether you planned to be present at the birth of your child?

YES 1 **(TIME\_STAMP\_20)**

NO 2 **(TIME\_STAMP\_20)**

REFUSED -1 **(TIME\_STAMP\_20)**

DON’T KNOW -2 **(TIME\_STAMP\_20)**

**(TIME\_STAMP\_12) PROGRAMMER INSTRUCTION:**

* INSERT DATE/TIME STAMP

VS029/(BIRTH). Were you asked about where in your home you planned for the baby to sleep?

YES 1

NO 2

REFUSED -1

DON’T KNOW -2

VS031/(VACCINE). At that time did you plan for {C\_FNAME/the baby} to have well-baby shots or vaccinations?

YES 1 **(TIME\_STAMP\_20)**

NO 2 **(TIME\_STAMP\_20)**

REFUSED -1 **(TIME\_STAMP\_20)**

DON’T KNOW -2 **(TIME\_STAMP\_20)**

**PROGRAMMER INSTRUCTIONS:**

* IF **C\_FNAME** COLLECTED AT BIRTH EVENT AND VALID RESPONSE PROVIDED, DISPLAY “C\_FNAME”.
* OTHERWISE, DISPLAY “the baby”.

**(TIME\_STAMP\_13) PROGRAMMER INSTRUCTION:**

* INSERT DATE/TIME STAMP

VS041/(CHILDSLP). Were you asked about {C\_FNAME/the child}’s sleeping habits?

YES 1

NO 2

REFUSED -1

DON’T KNOW -2

**PROGRAMMER INSTRUCTIONS:**

* IF **C\_FNAME** CONFIRMED OR COLLECTED AT 3-MONTH EVENT AND VALID RESPONSE PROVIDED, DISPLAY “C\_FNAME”.
* OTHERWISE, DISPLAY “the child”.

VS043/(VCHILDCARE). Were you asked about arrangements for child care?

YES 1 **(TIME\_STAMP\_20)**

NO 2 **(TIME\_STAMP\_20)**

REFUSED -1 **(TIME\_STAMP\_20)**

DON’T KNOW -2 **(TIME\_STAMP\_20)**

**(TIME\_STAMP\_14) PROGRAMMER INSTRUCTION:**

* INSERT DATE/TIME STAMP

VS044/(SIX\_MONTH). Were you asked about {C\_FNAME/the child}’s health?

YES 1

NO 2

REFUSED -1

DON’T KNOW -2

**PROGRAMMER INSTRUCTIONS:**

* IF **C\_FNAME** CONFIRMED OR COLLECTED AT 6-MONTH EVENT AND VALID RESPONSE PROVIDED, DISPLAY “C\_FNAME”.
* OTHERWISE, DISPLAY “the child”.

**VS044A/(INSURE).** During {MONTH OF INTERVIEW} was the {C\_FNAME/the child} covered by any kind of health insurance or some other health care plan?

YES 1 **(TIME\_STAMP\_20)**

NO 2 **(TIME\_STAMP\_20)**

REFUSED -1 **(TIME\_STAMP\_20)**

DON’T KNOW -2 **(TIME\_STAMP\_20)**

**PROGRAMMER INSTRUCTIONS:**

* PRELOAD MONTH OF INTERVIEW.
* IF **C\_FNAME** CONFIRMED OR COLLECTED AT 6-MONTH EVENT AND VALID RESPONSE PROVIDED, DISPLAY “C\_FNAME”.
* OTHERWISE, DISPLAY “the child”.

**(TIME\_STAMP\_15) PROGRAMMER INSTRUCTION:**

* INSERT DATE/TIME STAMP

VS045/(CHILDSKILL). Were you asked about things that {C\_FNAME/the child} could do like following you with {his/her} eyes?

YES 1

NO 2

REFUSED -1

DON’T KNOW -2

**PROGRAMMER INSTRUCTIONS:**

* IF **C\_FNAME** CONFIRMED OR COLLECTED AT 9-MONTH EVENT AND VALID RESPONSE PROVIDED, DISPLAY “C\_FNAME”.
* OTHERWISE, DISPLAY “the child”.
* IF **CHILD\_SEX** = 1, DISPLAY “his”.
* IF **CHILD\_SEX** = 2, DISPLAY “her”.
* IF **CHILD\_SEX** = -1 OR -2, DISPLAY “his/her”.

VS047/(R\_HCARE). At that time, what kind of place did {C\_FNAME/the child} usually go to when {he/she} needed routine or well-child care, such as a check-up or well-baby shots (immunizations)?

Clinic or health center …………………… 1 **(TIME\_STAMP\_20)**

Doctor's office or Health Maintenance Organization (HMO) …………………… 2 **(TIME\_STAMP\_20)**

Hospital emergency room …………………… 3 (**TIME\_STAMP\_20)**

Hospital outpatient department …………………… 4 **(TIME\_STAMP\_20)**

Some other place …………………… 5 **(TIME\_STAMP\_20)**

DIDN'T GO TO ONE PLACE MOST OFTEN 6 **(TIME\_STAMP\_20)**

DIDN'T GET WELL-CHILD CARE ANYWHERE 7 **(TIME\_STAMP\_20)**

REFUSED …………………… -1 **(TIME\_STAMP\_20)**

DON’T KNOW …………………… -2 **(TIME\_STAMP\_20)**

**PROGRAMMER INSTRUCTIONS:**

* IF **C\_FNAME** CONFIRMED OR COLLECTED AT 9-MONTH EVENT AND VALID RESPONSE PROVIDED, DISPLAY “C\_FNAME”.
* OTHERWISE, DISPLAY “the child”.
* IF **CHILD\_SEX** = 1, DISPLAY “he”.
* IF **CHILD\_SEX** = 2, DISPLAY “she”.
* IF **CHILD\_SEX** = -1 OR -2, DISPLAY “he/she”.

**(TIME\_STAMP\_16) PROGRAMMER INSTRUCTION:**

* INSERT DATE/TIME STAMP

VS048/(TWELVE\_MONTH). Were you asked about {C\_FNAME/the child}’s personality?

YES 1

NO 2

REFUSED -1

DON’T KNOW -2

**PROGRAMMER INSTRUCTIONS:**

* IF **C\_FNAME** CONFIRMED OR COLLECTED AT 12-MONTH EVENT AND VALID RESPONSE PROVIDED, DISPLAY “C\_FNAME”.
* OTHERWISE, DISPLAY “the child”.

**VS049/(CHILDCARE).** During {MONTH OF INTERVIEW}, did the {C\_FNAME/the child} receive any regularly scheduled care from someone other than a parent or guardian, for example, from relatives, friends, or other non-relatives, or a child care center or program?

YES 1 **(TIME\_STAMP\_20)**

NO 2 **(TIME\_STAMP\_20)**

REFUSED -1 **(TIME\_STAMP\_20)**

DON’T KNOW -2 **(TIME\_STAMP\_20)**

**PROGRAMMER INSTRUCTIONS:**

* PRELOAD MONTH OF INTERVIEW.
* IF **C\_FNAME** CONFIRMED OR COLLECTED AT 12-MONTH EVENT AND VALID RESPONSE PROVIDED, DISPLAY “C\_FNAME”.
* OTHERWISE, DISPLAY “the child”.

**(TIME\_STAMP\_17) PROGRAMMER INSTRUCTION:**

* INSERT DATE/TIME STAMP

VS052/(EIGHTEENMO\_HHCHANGE). Were you asked whether there were any changes in your household members since the last contact?

YES 1

NO 2

REFUSED -1

DON’T KNOW -2

VS053/(EIGHTEENMO\_TV\_30D). Were you asked how many hours per day {C\_FNAME/the child} watched TV or DVDs in the last 30 days?

YES 1 **(TIME\_STAMP\_20)**

NO 2 **(TIME\_STAMP\_20)**

REFUSED -1 **(TIME\_STAMP\_20)**

DON’T KNOW -2 **(TIME\_STAMP\_20)**

**PROGRAMMER INSTRUCTIONS:**

* IF **C\_FNAME** CONFIRMED OR COLLECTED AT 18-MONTH EVENT AND VALID RESPONSE PROVIDED, DISPLAY “C\_FNAME”.
* OTHERWISE, DISPLAY “the child”.

**(TIME\_STAMP\_18) PROGRAMMER INSTRUCTION:**

* INSERT DATE/TIME STAMP

VS054/(TWENTYFOURMO\_IC\_LOG). Were you asked whether you were using the Infant and Child Healthcare Log?

YES 1

NO 2

REFUSED -1

DON’T KNOW -2

VS055/(TWENTYFOURMO\_ASTHMA). Were you asked if a doctor of other healthcare provider had ever told you that {C\_FNAME/the child} had asthma?

YES 1 **(TIME\_STAMP\_20)**

NO 2 **(TIME\_STAMP\_20)**

REFUSED -1 **(TIME\_STAMP\_20)**

DON’T KNOW -2 **(TIME\_STAMP\_20)**

**PROGRAMMER INSTRUCTIONS:**

* IF **C\_FNAME** CONFIRMED OR COLLECTED AT 24-MONTH EVENT AND VALID RESPONSE PROVIDED, DISPLAY “C\_FNAME”.
* OTHERWISE, DISPLAY “the child”.

**(TIME\_STAMP\_19) PROGRAMMER INSTRUCTION:**

* INSERT DATE/TIME STAMP

VS060/(THIRTYMO\_ACTIVE). Were you asked whether {C\_FNAME/the child} was more active, about as active, or less active than other children {his/her} age?

YES 1

NO 2

REFUSED -1

DON’T KNOW -2

**PROGRAMMER INSTRUCTIONS:**

* IF **C\_FNAME** CONFIRMED OR COLLECTED AT 30-MONTH EVENT AND VALID RESPONSE PROVIDED, DISPLAY “C\_FNAME”.
* OTHERWISE, DISPLAY “the child”.
* IF **CHILD\_SEX** = 1, DISPLAY “his”.
* IF **CHILD\_SEX** = 2, DISPLAY “her”.
* IF **CHILD\_SEX** = -1 OR -2, DISPLAY “his/her”.

**VS061/(THIRTYMO\_DIET).** During {MONTH OF INTERVIEW}, how much choice did you allow {C\_FNAME/the child} in deciding what foods he or she ate at meals?

He or she could choose from any food available, 1

He or she was given a choice from a few alternatives that

I select, or 2

I decide what he or she will eat? 3

I AM NEVER IN CHARGE OF PREPARING HIS OR

HER MEALS -7

REFUSED -1

DON’T KNOW -2

**PROGRAMMER INSTRUCTIONS:**

* PRELOAD MONTH OF INTERVIEW.
* IF **C\_FNAME** CONFIRMED OR COLLECTED AT 30-MONTH EVENT AND VALID RESPONSE PROVIDED, DISPLAY “C\_FNAME”.
* OTHERWISE, DISPLAY “the child”.

**(TIME\_STAMP\_20) PROGRAMMER INSTRUCTIONS:**

* INSERT DATE/TIME STAMP

# PARTICIPANT SATISFACTION

(TIME\_STAMP\_21) PROGRAMMER INSTRUCTION:

* INSERT DATE/TIME STAMP

PTS001. These next questions are about your experience in the Study.

PTS010/(EXPERIENCE). In general, has your experience with the National Children’s Study been…

Mostly negative, 1

Somewhat negative, 2

Neither positive or negative, 3

Somewhat positive, or 4

Mostly positive? 5

REFUSED -1

DON’T KNOW -2

PTS020/(INT\_LENGTH). Did you think the interview was…

Too short, 1

Too long, or 2

Just about right? 3

REFUSED -1

DON’T KNOW -2

**PTS030/(SAT\_COMMENTS).** Is there anything else you would like to tell us about {your child or} your experience with the NCS?

YES 1

NO 2 **(TIME\_STAMP\_22)**

REFUSED -1 **(TIME\_STAMP\_22)**

DON’T KNOW -2 **(TIME\_STAMP\_22)**

**PROGRAMMER INSTRUCTION:**

* IF **EVENT\_TYPE** = BIRTH, 3-MONTH, 6-MONTH, 9-MONTH, 12-MONTH, 18-MONTH, 24-MONTH, OR 30-MONTH, DISPLAY “your child or”.

PTS040/(SAT\_COMMENTS\_OTH). SPECIFY

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REFUSED -1

DON’T KNOW -2

(TIME\_STAMP\_22) PROGRAMMER INSTRUCTIONS:

* INSERT DATE/TIME STAMP
* SKIP TO CLOSING STATEMENT BASED ON THE RESPONSES BELOW
* IF **PHONE** = 1, 2, -1, -2 🡪 GO TO **CS002.**
* IF **INTRO\_2** = 2, OR **INT\_CONFIRM**= 2, -1 OR -2 and **SCHEDULE** = 2🡪 GO TO **CS005.**
* IF **INTRO\_2** =2 AND IF **SCHEDULE** = 1 🡪 GO TO **CS003.**
* IF **INTRO\_3** = 2 AND **R\_BEST\_TTC\_1** ≠ -1 OR -2, GO TO **CS005**.
* ELSE 🡪GO TO **CS004.**

Closing Statements

CS001. I apologize for bothering you. I have the wrong number. Thank you for your time.

PROGRAMMER INSTRUCTION:

* GO TO TIME\_STAMP\_23.

**INTERVIEWER INSTRUCTION:**

* END INTERVIEW AND DISPOSITION CASE AS APPROPRIATE.

CS002. I will try {him/her}{at the number you gave me.} Thank you again for speaking with me today. Please ask {him/her} to call us at {LOCAL SC TOLL-FREE NUMBER}.

INTERVIEWER INSTRUCTION:

* + USE “him” OR “her” AS APPROPRIATE.

PROGRAMMER INSTRUCTIONS:

* IF PHONE\_NBR COLLECTED AND ≠ -1 OR -2, DISPLAY “at the number you gave me”.
* IF VALIDATING ENUMERATION INTERVIEW AND **R\_GENDER** = 1, OR
* IF VALIDATING FATHER AND SUBSEQUENT FATHER INTERVIEW, DISPLAY “him.”
* IF VALIDATING 3-MONTH INTERVIEW, 6-MONTH INTERVIEW, 9-MONTH INTERVIEW, 12-MONTH INTERVIEW, 18-MONTH INTERVIEW, OR 24-MONTH INTERVIEW, DISPLAY “him/her.”
* OTHERWISE, IF VALIDATING PREGNANCY SCREENER, PREGNANCY PROBABILITY, PRE-PREGNANCY, PREGNANCY VISIT 1, OR PREGNANCY VISIT 2, DISPLAY “her”.
* PRELOAD LOCAL SC TOLL-FREE NUMBER.
* GO TO **TIME\_STAMP\_23.**

**INTERVIEWER INSTRUCTION:**

* END INTERVIEW AND DISPOSITION CASE AS APPROPRIATE.

CS003. Thank you for your time. I will call back again. Your interview is scheduled for {DAY OF WEEK}{DATE OF INTERVIEW} at {TIME OF INTERVIEW} with {INTERVIEWER NAME}. If you have any questions, please contact us at {LOCAL SC TOLL-FREE NUMBER}. Goodbye.

PROGRAMMER INSTRUCTIONS:

* IF SCHEDULE DATE ENTERED, PRELOAD DATE OF INTERVIEW, TIME OF INTERVIEW, AND DAY OF WEEK
* IF DAY\_WEEK\_1 ENTERED, PRELOAD DAY\_WEEK\_1 AS DAY OF WEEK, NEXT AVAILABLE DAY OF WEEK AS DATE OF INTERVIEW, AND BEST\_TTC\_1 AS TIME OF INTERVIEW
* IF DAY\_WEEK\_2 ENTERED, PRELOAD DAY\_WEEK\_2 AS DAY OF WEEK, NEXT AVAILABLE DAY OF WEEK AS DATE OF INTERVIEW, AND BEST\_TTC\_2 AS TIME OF INTERVIEW
* DISPLAY DATE OF INTERVIEW AS MMDDYYYY
* DISPLAY TIME OF INTERVIEW AS HH:MM FOLLOWED AM OR PM
* DISPLAY HARD EDIT IF DATE OF INTERVIEW ≤ CURRENT DATE.
* PRELOAD LOCAL SC TOLL-FREE NUMBER.
* GO TO TIME\_STAMP\_23.

**INTERVIEWER INSTRUCTION:**

* END INTERVIEW AND DISPOSITION CASE AS APPROPRIATE.

CS004. Those are all the questions I have. Thank you so much for your time and cooperation. If you have any questions, please contact us at {LOCAL SC TOLL-FREE NUMBER}. Goodbye.

PROGRAMMER INSTRUCTION:

* PRELOAD LOCAL SC TOLL-FREE NUMBER.
* GO TO TIME\_STAMP\_23.

**INTERVIEWER INSTRUCTION:**

* END INTERVIEW AND DISPOSITION CASE AS APPROPRIATE.

CS005. Thank you so much for your time. If you have any questions, please contact us at {LOCAL SC TOLL-FREE NUMBER}. Goodbye.

PROGRAMMER INSTRUCTION:

* PRELOAD LOCAL SC TOLL-FREE NUMBER.

**INTERVIEWER INSTRUCTION:**

* END INTERVIEW AND DISPOSITION CASE AS APPROPRIATE.

**(TIME\_STAMP\_23) PROGRAMMER INSTRUCTION:**

* INSERT DATE/TIME STAMP