

6M Questionnaire - Household

|  |  |
| --- | --- |
| Event Category: | Time-Based |
| Event: | 6M |
| Administration: | N/A |
| Instrument Target: | Child's Primary Residence |
| Instrument Respondent: | Primary Caregiver |
| Domain: | Questionnaire |
| Document Category: | Questionnaire |
| Method: | Data Collector Administered |
| Mode (for this instrument\*): | In-Person, CAI; Phone, CAI |
| OMB Approved Modes: | In-Person, CAI; Phone, CAI; Web-Based, CAI |
| Estimated Administration Time: | 3 minutes |
| Multiple Child/Sibling Consideration: | Per Event |
| Special Considerations: | N/A |
| Version: | 1.0 |
| MDES Release: | 4.0 |

\*This instrument is OMB-approved for multi-mode administration but this version of the instrument is designed for administration in this/these mode(s) only.

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TABLE OF CONTENTS

[GENERAL PROGRAMMER INSTRUCTIONS: 1](#_Toc371091277)

[FINANCIAL SECURITY 3](#_Toc371091278)

[LANGUAGE USE 6](#_Toc371091279)

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6M Questionnaire - Household

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** | **DATA TYPE** | **PROGRAMMER INSTRUCTIONS** |
| ADDRESS AND EMAIL FIELDS | 100 | CHARACTER |  |
| UNIT AND PHONE FIELDS | 10 | CHARACTER |  |
| \_OTH AND COMMENT FIELDS | 255 | CHARACTER | * Limit text to 255 characters |
| FIRST NAME AND LAST NAME | 30 | CHARACTER | * Limit text to 30 characters |
| ALL ID FIELDS | 36 | CHARACTER |  |
| ZIP CODE | 5 | NUMERIC |  |
| ZIP CODE LAST FOUR | 4 | NUMERIC |  |
| CITY | 50 | CHARACTER |  |
| DOB AND ALL OTHER DATE FIELDS (E.G., DT, DATE, ETC.) | 10 | NUMERIC  CHARACTER | * DISPLAY AS MM/DD/YYYY * STORE AS YYYY-MM-DD * HARD EDITS:   MM MUST EQUAL 01 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 | NUMERIC | * 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 ROCs 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.**

FINANCIAL SECURITY

**(TIME\_STAMP\_FS\_ST).**

|  |
| --- |
| PROGRAMMER INSTRUCTIONS |
| * INSERT DATE/TIME STAMP * PRELOAD PRIMARY RESIDENCE ID (**VARIABLE NAME**) AND RESPONDENT ID (**R\_P\_ID**) FOR ADULT CAREGIVER. * PRELOAD **MULT\_CHILD**FROM PARTICIPANT VERIFICATION, SCHEDULING, & TRACING QUESTIONNAIRE. * IF **MULT\_CHILD**IN PARTICIPANT VERFICATION, SCHEDULING & TRACING QUESTIONNAIRE = 1, DISPLAY “the children” IN APPROPRIATE FIELDS THROUGHOUT THE INSTRUMENT * IF **MULT\_CHILD** IN PARTICIPANT VERFICATION, SCHEDULING & TRACING QUESTIONNAIRE = 2, DISPLAY “the child” IN APPROPRIATE FIELDS THROUGHOUT THE INSTRUMENT. |

**FS01000/(AFFORD\_HOME).** At this time, do you feel you are able to afford a home suitable for yourself and your family?

|  |  |  |
| --- | --- | --- |
| Label | Code | Go To |
| YES | 1 |  |
| NO | 2 |  |
| REFUSED | -1 |  |
| DON'T KNOW | -2 |  |

|  |
| --- |
| SOURCE |
| Pregnancy Infection and Nutrition Study (PINS) |

**FS02000/(AFFORD\_FURNITURE).** Do you feel you are able to afford the furniture or household equipment that you need?

|  |  |  |
| --- | --- | --- |
| Label | Code | Go To |
| YES | 1 |  |
| NO | 2 |  |
| REFUSED | -1 |  |
| DON'T KNOW | -2 |  |

|  |
| --- |
| SOURCE |
| Pregnancy Infection and Nutrition Study (PINS) |

**FS03000/(AFFORD\_CAR).** Do you feel you are able to afford the kind of car you need?

|  |  |  |
| --- | --- | --- |
| Label | Code | Go To |
| YES | 1 |  |
| NO | 2 |  |
| REFUSED | -1 |  |
| DON'T KNOW | -2 |  |

|  |
| --- |
| SOURCE |
| Pregnancy Infection and Nutrition Study (PINS) |

**FS04000/(AFFORD\_FOOD).** At this time, do you have enough money for the kinds of food you think you and your family should have?

|  |  |  |
| --- | --- | --- |
| Label | Code | Go To |
| YES | 1 |  |
| NO | 2 |  |
| REFUSED | -1 |  |
| DON'T KNOW | -2 |  |

|  |
| --- |
| SOURCE |
| Pregnancy Infection and Nutrition Study (PINS) |

**FS05000/(AFFORD\_MED\_CARE).** Do you have enough money for the kind of medical care you and your family should have?

|  |  |  |
| --- | --- | --- |
| Label | Code | Go To |
| YES | 1 |  |
| NO | 2 |  |
| REFUSED | -1 |  |
| DON'T KNOW | 2 |  |

|  |
| --- |
| SOURCE |
| Pregnancy Infection and Nutrition Study (PINS) |

**FS06000/(AFFORD\_CLOTHING).** At this time, do you have enough money for the kind of clothing you and your family should have?

|  |  |  |
| --- | --- | --- |
| Label | Code | Go To |
| YES | 1 |  |
| NO | 2 |  |
| REFUSED | -1 |  |
| DON'T KNOW | -2 |  |

|  |
| --- |
| SOURCE |
| Pregnancy Infection and Nutrition Study (PINS) |

**FS07000/(AFFORD\_LEISURE).** Do you have enough money for the leisure activities you and your family want?

|  |  |  |
| --- | --- | --- |
| Label | Code | Go To |
| YES | 1 |  |
| NO | 2 |  |
| REFUSED | -1 |  |
| DON'T KNOW | -2 |  |

|  |
| --- |
| SOURCE |
| Pregnancy Infection and Nutrition Study (PINS) |

**FS08000/(DIFF\_PAY\_BILLS).** How difficult is it for you and your family to pay your bills? Would you say it is…

|  |  |  |
| --- | --- | --- |
| Label | Code | Go To |
| Very difficult | 1 |  |
| Somewhat difficult | 2 |  |
| Not very difficult | 3 |  |
| Not difficult at all | 4 |  |
| REFUSED | -1 |  |
| DON’T’ KNOW | -2 |  |

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| SOURCE |
| Pregnancy Infection and Nutrition Study (PINS) |

**FS09000/(MONEY\_END\_MONTH).** At the end of the month, how much money would you say you end up with?

|  |  |  |
| --- | --- | --- |
| Label | Code | Go To |
| Not enough money | 1 |  |
| Just enough money | 2 |  |
| Some money left over | 3 |  |
| A lot of money left over | 4 |  |
| REFUSED | -1 |  |
| DON’T’ KNOW | -2 |  |

|  |
| --- |
| SOURCE |
| Pregnancy Infection and Nutrition Study (PINS) |

**(TIME\_STAMP\_FS\_ET).**

|  |
| --- |
| PROGRAMMER INSTRUCTIONS |
| * INSERT DATE/TIME STAMP |

LANGUAGE USE

**(TIME\_STAMP\_LU\_ST).**

|  |
| --- |
| PROGRAMMER INSTRUCTIONS |
| * INSERT DATE/TIME STAMP |

**LU01000.** These next questions are about the primary language spoken at home or to {the child/children}.

**LU02000/(LANGUAGE\_NON\_ENG).** Is any language other than English regularly spoken in your home?

|  |  |  |
| --- | --- | --- |
| Label | Code | Go To |
| YES | 1 |  |
| NO | 2 | TIME\_STAMP\_LU\_ET |
| REFUSED | -1 | TIME\_STAMP\_LU\_ET |
| DON'T KNOW | -2 | TIME\_STAMP\_LU\_ET |

|  |
| --- |
| SOURCE |
| Early Childhood Longitudinal Study, Kindergarten Cohort Spring Parent Interview |

**LU03000/(LANGUAGE\_TYPE).** What languages other than English are spoken in your home?

|  |
| --- |
| INTERVIEWER INSTRUCTIONS |
| * LANGUAGES ARE LISTED IN ALPHABETICAL ORDER EXCEPT FOR SPANISH. |

|  |  |  |
| --- | --- | --- |
| Label | Code | Go To |
| SPANISH | 1 |  |
| ARABIC | 2 |  |
| BENGALI | 3 |  |
| CHINESE (INCLUDING MANDARIN, CANTONESE) | 4 |  |
| FARSI (PERSIAN) | 5 |  |
| FRENCH | 6 |  |
| FRENCH CREOLE | 7 |  |
| GERMAN | 8 |  |
| GREEK | 9 |  |
| HINDI | 10 |  |
| ITALIAN | 11 |  |
| KOREAN | 12 |  |
| POLISH | 13 |  |
| PORTUGUESE | 14 |  |
| PUNJABI | 15 |  |
| RUSSIAN | 16 |  |
| TAGALOG | 17 |  |
| VIETNAMESE | 18 |  |
| URDU | 19 |  |
| SIGN LANGUAGE | 20 |  |
| OTHER | -5 |  |
| REFUSED | -1 |  |
| DON’T KNOW | -2 |  |

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| SOURCE |
| Early Childhood Longitudinal Study, Kindergarten Cohort Fall Parent Interview (modified) |

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| PROGRAMMER INSTRUCTIONS |
| * IF **LANGUAGE\_TYPE** = 1 THROUGH 20, -1, OR -2, GO TO **PRIMARY\_LANGUAGE**. * IF **LANGUAGE\_TYPE** = -5 OR ANY COMBINATION OF 1 THROUGH 20 AND -5, GO TO **LANGUAGE\_TYPE\_OTH.** |

**LU04000/(LANGUAGE\_TYPE\_OTH).** SPECIFY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- |
| SOURCE |
| Early Childhood Longitudinal Study, Kindergarten Cohort Fall Parent Interview (modified) |

**LU05000/(PRIMARY\_LANGUAGE).** What is the primary language spoken in your home?

|  |
| --- |
| INTERVIEWER INSTRUCTIONS |
| * LANGUAGES ARE LISTED IN ALPHABETICAL ORDER EXCEPT FOR ENGLISH AND SPANISH. |

|  |  |  |
| --- | --- | --- |
| Label | Code | Go To |
| ENGLISH | 1 | TIME\_STAMP\_LU\_ET |
| SPANISH | 2 | ENGLISH\_REGULAR |
| ARABIC | 3 | ENGLISH\_REGULAR |
| BENGALI | 4 | ENGLISH\_REGULAR |
| CHINESE (INCLUDING MANDARIN, CANTONESE) | 5 | ENGLISH\_REGULAR |
| FARSI (PERSIAN) | 6 | ENGLISH\_REGULAR |
| FRENCH | 7 | ENGLISH\_REGULAR |
| FRENCH CREOLE | 8 | ENGLISH\_REGULAR |
| GERMAN | 9 | ENGLISH\_REGULAR |
| GREEK | 10 | ENGLISH\_REGULAR |
| HINDI | 11 | ENGLISH\_REGULAR |
| ITALIAN | 12 | ENGLISH\_REGULAR |
| KOREAN | 13 | ENGLISH\_REGULAR |
| POLISH | 14 | ENGLISH\_REGULAR |
| PORTUGUESE | 15 | ENGLISH\_REGULAR |
| PUNJABI | 16 | ENGLISH\_REGULAR |
| RUSSIAN | 17 | ENGLISH\_REGULAR |
| TAGALOG | 18 | ENGLISH\_REGULAR |
| VIETNAMESE | 19 | ENGLISH\_REGULAR |
| URDU | 20 | ENGLISH\_REGULAR |
| SIGN LANGUAGE | 21 | ENGLISH\_REGULAR |
| OTHER | -5 |  |
| REFUSED | -1 | TIME\_STAMP\_LU\_ET |
| DON’T KNOW | -2 | TIME\_STAMP\_LU\_ET |

|  |
| --- |
| SOURCE |
| Early Childhood Longitudinal Study, Kindergarten Cohort Fall Parent Interview (modified) |

**LU06000/(PRIMARY\_LANGUAGE\_OTH).** SPECIFY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| SOURCE |
| Early Childhood Longitudinal Study, Kindergarten Cohort Fall Parent Interview (modified) |

**LU07000/(ENGLISH\_REGULAR).** Is English also regularly spoken in your home?

|  |  |  |
| --- | --- | --- |
| Label | Code | Go To |
| YES | 1 |  |
| NO | 2 |  |
| REFUSED | -1 |  |
| DON'T KNOW | -2 |  |

|  |
| --- |
| SOURCE |
| High School Longitudinal Study of 2009, First Follow-Up Questionnaire |

**LU08000/(CHILD\_LANGUAGE).** What language do you usually speak to {the child/children} in your home?

|  |  |  |
| --- | --- | --- |
| Label | Code | Go To |
| ENGLISH | 1 | NONENGLISH\_FREQ |
| SPANISH | 2 | NONENGLISH\_FREQ |
| ARABIC | 3 | NONENGLISH\_FREQ |
| BENGALI | 4 | NONENGLISH\_FREQ |
| CHINESE (INCLUDING MANDARIN, CANTONESE) | 5 | NONENGLISH\_FREQ |
| FARSI (PERSIAN) | 6 | NONENGLISH\_FREQ |
| FRENCH | 7 | NONENGLISH\_FREQ |
| FRENCH CREOLE | 8 | NONENGLISH\_FREQ |
| GERMAN | 9 | NONENGLISH\_FREQ |
| GREEK | 10 | NONENGLISH\_FREQ |
| HINDI | 11 | NONENGLISH\_FREQ |
| ITALIAN | 12 | NONENGLISH\_FREQ |
| KOREAN | 13 | NONENGLISH\_FREQ |
| POLISH | 14 | NONENGLISH\_FREQ |
| PORTUGUESE | 15 | NONENGLISH\_FREQ |
| PUNJABI | 16 | NONENGLISH\_FREQ |
| RUSSIAN | 17 | NONENGLISH\_FREQ |
| TAGALOG | 18 | NONENGLISH\_FREQ |
| VIETNAMESE | 19 | NONENGLISH\_FREQ |
| URDU | 20 | NONENGLISH\_FREQ |
| SIGN LANGUAGE | 21 | NONENGLISH\_FREQ |
| OTHER | -5 |  |
| REFUSED | -1 | LANG\_CHILD\_SPEAK |
| DON’T KNOW | -2 | LANG\_CHILD\_SPEAK |

|  |
| --- |
| SOURCE |
| High School Longitudinal Study (HSLS) of 2009, First Follow-Up Questionnaire (modified) |

**LU09000/(CHILD\_LANGUAGE\_OTH).** SPECIFY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- |
| SOURCE |
| High School Longitudinal Study (HSLS) of 2009, First Follow-Up Questionnaire (modified) |

**LU10000/(NONENGLISH\_FREQ).** How often do you use a language other than English when speaking to {the child/the children}? Would you say…

|  |
| --- |
| INTERVIEWER INSTRUCTIONS |
| * PROBE “We just need to know in general?” |

|  |  |  |
| --- | --- | --- |
| Label | Code | Go To |
| Never | 1 |  |
| Sometimes | 2 |  |
| Often | 3 |  |
| Very often | 4 |  |
| REFUSED | -1 |  |
| DON’T KNOW | -2 |  |

|  |
| --- |
| SOURCE |
| Early Childhood Longitudinal Program, Birth Cohort 9-Month Parent Interview (modified) |

**LU11000/(LANG\_CHILD\_SPEAK).** What language does {the child/children} usually speak to you in your home?

|  |  |  |
| --- | --- | --- |
| Label | Code | Go To |
| ENGLISH | 1 | TIME\_STAMP\_LU\_ET |
| SPANISH | 2 | OTHER\_LANG\_FREQ |
| ARABIC | 3 | OTHER\_LANG\_FREQ |
| BENGALI | 4 | OTHER\_LANG\_FREQ |
| CHINESE (INCLUDING MANDARIN, CANTONESE) | 5 | OTHER\_LANG\_FREQ |
| FARSI (PERSIAN) | 6 | OTHER\_LANG\_FREQ |
| FRENCH | 7 | OTHER\_LANG\_FREQ |
| FRENCH CREOLE | 8 | OTHER\_LANG\_FREQ |
| GERMAN | 9 | OTHER\_LANG\_FREQ |
| GREEK | 10 | OTHER\_LANG\_FREQ |
| HINDI | 11 | OTHER\_LANG\_FREQ |
| ITALIAN | 12 | OTHER\_LANG\_FREQ |
| KOREAN | 13 | OTHER\_LANG\_FREQ |
| POLISH | 14 | OTHER\_LANG\_FREQ |
| PORTUGUESE | 15 | OTHER\_LANG\_FREQ |
| PUNJABI | 16 | OTHER\_LANG\_FREQ |
| RUSSIAN | 17 | OTHER\_LANG\_FREQ |
| TAGALOG | 18 | OTHER\_LANG\_FREQ |
| VIETNAMESE | 19 | OTHER\_LANG\_FREQ |
| URDU | 20 | OTHER\_LANG\_FREQ |
| SIGN LANGUAGE | 21 | OTHER\_LANG\_FREQ |
| OTHER | -5 |  |
| REFUSED | -1 | TIME\_STAMP\_LU\_ET |
| DON’T KNOW | 2 | TIME\_STAMP\_LU\_ET |

|  |
| --- |
| SOURCE |
| High School Longitudinal Study (HSLS) of 2009, First Follow-Up Questionnaire (modified) |

**LU12000/(LANG\_CHILD\_SPEAK\_OTH).** SPECIFY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| SOURCE |
| High School Longitudinal Study (HSLS) of 2009, First Follow-Up Questionnaire (modified) |

**LU13000/(OTHER\_LANG\_FREQ).** How often does {the child/children} use this language when speaking to you? Would you say…

|  |
| --- |
| INTERVIEWER INSTRUCTIONS |
| * PROBE “We just need to know in general?” |

|  |  |  |
| --- | --- | --- |
| Label | Code | Go To |
| Rarely | 1 |  |
| Sometimes | 2 |  |
| Often | 3 |  |
| Very often | 4 |  |
| All the time | 5 |  |
| REFUSED | -1 |  |
| DON’T KNOW | -2 |  |

|  |
| --- |
| SOURCE |
| New |

**(TIME\_STAMP\_LU\_ET).**

|  |
| --- |
| PROGRAMMER INSTRUCTIONS |
| * INSERT DATE/TIME STAMP |