

**Pathways for Advancing  
Careers and Education  
(PACE) Third Follow-Up  
Data Collection**

**OMB Information Collection  
Request  
OMB No. 0970-0397**

**Appendix C: 72-Month  
Follow-Up Survey  
Instrument**

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**Contents**

HPOG 72-month Follow-Up Survey.....	4
INTRODUCTION.....	4
A.  SCREENER/VERIFICATION:.....	5
B.  EMPLOYMENT SUCCESS.....	6
Advancement in Career Pathway.....	6
C.  CURRENT/MOST RECENT JOB.....	14
Job Quality.....	15
D.  EDUCATION AND CREDENTIALS.....	20
Current Enrollment.....	20
Credentials.....	21
E.  ADULT WELL-BEING.....	30
Career Network.....	30
Support Network.....	30
Life Challenges.....	31
Perceived Stress.....	32
Physical Health.....	32
F.  HOUSEHOLD COMPOSITION.....	33
G.  ECONOMIC WELL-BEING.....	37
Income and Receipt of Public Assistance.....	37
Assets.....	40
Student Loan-Respondent Debt.....	40
Student Loan-Family Debt.....	42
Other Debt.....	42
Expenses.....	43
Food Insecurity.....	43
Financial Resilience.....	43
Health Insurance.....	45
Housing Status and Neighborhood Satisfaction.....	45
H.  PARENT REPORTS: CHILD MODULE.....	47
Child Introduction/Screeners.....	47
I.  CONTACT INFORMATION.....	62

## Reviewer Notes:

Throughout the instrument, there are places where the CAPI software will insert text to customize the question for the respondent. A couple of key text inserts are defined here:

**[MYLI]:** For those who responded to the 36-month follow-up survey, the three year reference point is month and year of their 36-month interview date. If the participant did not respond to the 36-month follow-up, the recall period is the month of the interview, three years earlier—December 2014 for a participant interviewed in December 2017.

**[EMPLOYER]:** Sections B and C refer to the current or most recent employer. EMPLOYER is defined as

- B2\_NAME if B3=YES (still employed); or
- 'for yourself' if B2=6 (volunteered self-employed) and B3=YES (employed/working for self); or
- B16\_name if B13=YES (currently employed); or
- B16\_name if B13=NO and B14=YES (not currently employed but employed in the last three years);
- "For yourself" if B2=6 VOLUNTEERED SELF-EMPLOYED and B3=Yes; or
- "For yourself" if B16=6 VOLUNTEERED SELF-EMPLOYED.

**[CHILD]:** this is the name of the focal child, who was selected for the 36-month follow-up survey—if one was selected. It is used throughout Section H.

Sections B and C, current versus most recent employer: Throughout Sections B and C, questions ask about the respondent's current or most recent job. If B3 or B13=Yes (currently employed) all questions in Section C are asked in present tense. If not currently employed, but worked in past three years (B14=Yes), then all questions in Section C are asked in past tense. CAPI programming will insert the appropriate verbiage based on B3, B13 and B14 responses.

CAPI notes, which begin with **CAPI:**, are instructions for the programmers. They are noted in bold font and the skip logic for CAPI is noted with numeric values, for example: **CAPI: IF B2≠6 SKIP TO B7.**

**Plain text descriptions of who is asked each question are noted in bold font in orange text boxes.** Skip logic for plain text descriptions are noted with alpha values, for example: **Ask B6 if they were self-employed (B2=Self-employed).**

## PACE 72-month Follow-Up Survey

### INTRODUCTION

Hello, my name is [ ]. May I please speak with \_\_\_\_\_?

Thank you for taking the time to talk with me today. I work for Abt Associates. Abt Associates is an independent research company and we are helping the Administration for Children and Families (ACF) in the U.S. Department of Health and Human Services (HHS) with its study called Pathways for Advancing Careers and Education. We are conducting interviews with people who agreed to be in a study about a program offered at [NAME OF ORGANIZATION] called [PROGRAM NAME].]

This interview will include questions on your employment, education, and training activities, and your overall well-being. We will also ask a few questions about the people living with you and your children. This interview will take about 45 minutes to complete. When we are done, we will send you a gift card valued at \$45 as a token of appreciation. You agreed to be part of the study around [RAD] when you signed a consent form to let researchers collect information from you. [CAPI: IF RESPONDENT COMPLETED 15 or 36-MONTH SURVEY DISPLAY: This is a follow-up to the interview you participated in [MONTH/YEAR OF LAST INTERVIEW].

By participating in this study, you will help ACF learn if and how programs like [PROGRAM NAME] make a difference in people's lives and how to improve these kinds of training programs in the future. We need to talk with people who got into the program and those who did not. Your experiences are unique.

Before we begin the survey, I would like to assure you that all of your responses on this survey will be kept private and only used for this study. Your name will not appear in any written reports we produce. Your responses to these questions are completely voluntary. That means you may choose not to answer any question, or you may stop the interview if you wish, but we hope you don't. Your responses to these questions will in no way affect your participation in any programs or your receipt of any kinds of public benefits or services.

According to the Paperwork Reduction Act (PRA), an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this collection is 0970-0397 and it expires xx/xx/xxxx. If you have comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, please send them to Larry Buron at 4550 Montgomery Ave Bethesda, MD 20814; Attn: OMB-PRA 0970-0397. Do you have any questions before we begin?

Let's begin now.

**A. SCREENER/VERIFICATION:**

First I just need to verify that I am speaking with the correct person.

A1. What is your date of birth? \_\_\_\_\_ (MM/DD/YYYY)

**INTERVIEWER:** ENTER DATE USING FORMAT BELOW.

**CAPI NOTE: DISPLAY DOB**

Respondent's Birthday: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
MM DD YYYY

REFUSED.....  7

DON'T KNOW.....  8

**CAPI: IF DOB AGREES WITH THE BIRTH DATE ON THE FILE, SKIP TO B1. ELSE, CONTINUE.**

**Ask A2 if the response is NOT the same as the DOB on file**

A2. What are the last 4 digits of your Social Security Number?

**INTERVIEWER – ENTER LAST 4 DIGITS OF SSN CAPI NOTE: DISPLAY LAST 4 DIGITS SSN**

RECORD LAST 4 DIGITS: \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_

REFUSED.....  7

DON'T KNOW.....  8

**CAPI: IF THE 4 DIGITS GIVEN BY RESPONDENT AGREE WITH THE NUMBER ON THE FILE, SKIP TO B1.**

**IF SSN IS MISSING IN THE SAMPLE OR IS A MISMATCH WITH WHAT IS ENTERED AND THERE IS A MISMATCH IN DOB, DISPLAY DISCONTINUED TEXT:**

**Read discontinue text if the DOB AND the SSN are NOT the same as what is on file**

**DISCONTINUED TEXT:** *I'm sorry. I was unable to pull up the correct questionnaire. I will need to check with my supervisor to look into the problem. I will re-contact you when the problem is resolved. Thank you for your time.*



**B. EMPLOYMENT SUCCESS*****Advancement in Career Pathway***

One of the important parts of this study is learning about the types of jobs participants had since the start of the study. The first set of questions asks specifically about any jobs you may have had in the past three years.

\*[IF 36-MONTH RESPONDER and NOT SELECTED TO VALIDATE 36-MONTH RESPONSES: We would like to start by asking about your current or most recent job since [MYLI].]

**CAPI: if this type of R, SKIP TO B13**

\*[IF 36-MONTH RESPONDER and SELECTED TO VALIDATE 36-MONTH RESPONSES OR IF 36 MONTH NON-RESPONDER: We would like to start by asking about any job you may have had back in [MYLI].]

**Employment Status At 36-Months If 36-Month Non-responder or 36-Month Validation**

B1. In [MYLI], were you working at a job for pay?

1. YES
2. NO [SKIP TO B13]
7. REFUSED [SKIP TO B13]
8. DON'T KNOW [SKIP TO B13]

**Ask B2 if they were working at a job for pay (B1=Yes.).**

B2. What was the name of your employer in [MYLI]?

<B2\_NAME>\_\_\_\_\_ (CHECK SPELLING)

6. [IF VOLUNTEERED:] SELF-EMPLOYED
7. REFUSED [SKIP TO B13]
8. DON'T KNOW

**Ask B3 if they named an employer, reported they were self-employed, or didn't know their employer's name (B2≠REFUSED)**

B3. Are you still working [IF B2≠6: at [B2\_NAME]/ IF B2=6: for yourself]?

1. YES [SKIP TO B5]
2. NO
7. REFUSED [SKIP TO B5]
8. DON'T KNOW [SKIP TO B5]





**Ask B4 if they are NOT still working for the same employer/or self-employed (B3=No).**

B4. When did you stop working [IF B2≠6: at [B2\_NAME]/ IF B2=6: for yourself]?

\_\_\_\_/\_\_\_\_/\_\_\_\_  
M M/ Y Y Y Y

6. [IF VOLUNTEERED:] STILL WORKING THERE  
7. REFUSED  
8. DON'T KNOW

**Ask B5 if they are NOT self-employed (B2≠Self-employed).****CAPI: IF B2=6 SKIP TO B6**

B5. In [MYLI] when you were working IF B2≠6: at [B2\_NAME]/ IF B2=6: for yourself], about how much did you typically earn per hour before taxes?

- \$ (2.50-75.00)\_\_\_\_ . \_\_\_\_ PER HOUR [SKIP TO B7]  
-2 REFUSED  
-1 DON'T KNOW

**Ask B5a if they do NOT know how much they earned per hour working for their employer (B5=Refused or Don't know).**

B5a. [IF B5=REFUSED OR DON'T KNOW] Can you tell me how much you earned for some other time period besides hourly, such as per day, per week, every two weeks, every month, or every year?

- \$(2.50-75.00) \_\_\_\_ . \_\_\_\_ PER HOUR (INCLUDE DECIMALS)  
\$(1-400)\_\_\_\_ PER DAY  
\$(1-4,000)\_\_\_\_ PER WEEK  
\$(1-8,000)\_\_\_\_ EVERY 2 WEEKS/TWICE A MONTH  
\$(1-16,000)\_\_\_\_ EVERY MONTH  
\$(1-99,999)\_\_\_\_ ANNUALLY  
-2 REFUSED  
-1 DON'T KNOW

**Ask B6 if they were self-employed (B2=Self-employed).****CAPI: IF B2≠ 6 SKIP TO B7.**

B6. How much did you earn per week working for yourself?

- \$ \_\_\_\_ PER WEEK (\$1-1,000) [SKIP TO B7]  
-2 REFUSED  
-1 DON'T KNOW

**Ask B6a if they were working for themselves (B2= Self-employed) AND they refused to answer or do not know how much they earned per week working for themselves (B6=Refused OR Don't know).**

B6a. Can you tell me how much you earned working for yourself for some other time period besides weekly, such as per hour, per day, every two weeks, every month, or every year?

\$(2.50-75.00) \_\_\_\_ . \_\_\_\_ PER HOUR (INCLUDE DECIMALS)

\$(1-400) \_\_\_\_ \_ PER DAY

\$(1-8,000) \_\_\_\_ \_ EVERY 2 WEEKS/TWICE A MONTH

\$(1-16,000) \_\_\_\_ \_ EVERY MONTH

\$(1-99,999) \_\_\_\_ \_ ANNUALLY/EVERY YEAR

-2 REFUSED

-1 DON'T KNOW

**Ask B7 if they were working in [MYLI] (B1=Yes).**

B7. In [MYLI] while working [IF B2≠6: at [B2\_NAME]/ IF B2=6: for yourself], about how many hours a week did you work in a typical week?

INTERVIEWER IF RESPONDENT INDICATES THAT THE HOURS VARY, INSTRUCT THEM: Please use the last week that you worked at this job.

\_\_\_\_\_ HOURS PER WEEK (1-80)

-2 REFUSED

-1 DON'T KNOW

B8. In [MYLI] while working [IF B2≠6: at [B2\_NAME]/ IF B2=6: for yourself] what kind of work did you do, that is, what was your occupation? (For example: registered nurse, personnel manager, supervisor or order department, secretary, accountant.)

\_\_\_\_\_

7. REFUSED

8. DON'T KNOW

B9. What were your usual activities or duties while working [IF B2≠6: at [B2\_NAME]/ IF B2=6: for yourself] in [MYLI]? (For example: patient care, directing hiring policies, supervising order clerks, typing and filing, reconciling financial records)

\_\_\_\_\_

7. REFUSED

8. DON'T KNOW

B10. What was your job title while working [IF B2≠6: at [B2\_NAME]/ IF B2=6: for yourself] in [MYLI]? \_\_\_\_\_

7. REFUSED

8. DON'T KNOW

**Ask B11 if they ARE in a DUAL site.**

**CAPI: IF PACE SITE ONLY SKIP TO B13**

B11. [ONLY ASK IF DUAL SITE] Was this occupation in the field of healthcare?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

B12. **OMITTED**

B12a. **Omitted**

**Current Employment Status**

**Ask B13 if they are NOT still working for the same employer or for themselves (B3=No, Refused, Don't know). If they are still working at same job as three years ago (B3=Yes) skip to B17.**

B13. Are you currently working at a job for pay?

1. YES

[[SKIP TO NOTE PRIOR TO B16]

2. NO
7. REFUSED

8. DON'T KNOW

**Employment Status in Past Three Years**

**Ask B14 if they are NOT currently working at a job for pay (B13=NO, REFUSED, DON'T KNOW).**

B14. Since [MYLI], have you worked at a job for pay?

1. YES

2. NO
7. REFUSED

8. DON'T KNOW

**B15 is asked only of those not currently working (B13=No).**

**CAPI: IF B13=YES, REFUSED, DON'T KNOW SKIP TO NOTE BEFORE B16**

B15. What is the main reason that you are not working now? (DO NOT READ RESPONSES)

1. DOES NOT WANT TO WORK
2. COULD NOT FIND A JOB
3. UNABLE TO WORK BECAUSE OF INJURY, ILLNESS, OR DISABILITY
4. INCARCERATED
5. PREGNANCY/CHILDBIRTH
6. FAMILY RESPONSIBILITIES
7. TRANSPORTATION
8. ON LAYOFF (TEMPORARY OR INDEFINITE)
9. WAITING FOR NEW JOB TO BEGIN
10. IN MILITARY/DEPLOYED
11. IN SCHOOL OR TRAINING PROGRAM
12. OTHER, SPECIFY: \_\_\_\_\_
97. REFUSED
98. DON'T KNOW

**CAPI: IF B3=YES (still employed/self-employed) SKIP TO B17; IF B13=YES OR B14=YES (i.e., currently working or worked last 3 years) ASK B16; IF B14=NO, REFUSED, DON'T KNOW (i.e., not currently working and no work in last 3 years) SKIP TO SECTION D**

**Read the following text and ask B16 if they are either currently working for pay or have worked for pay in the past 3 years (B13 or B14=Yes).**

*Okay, I am going to start with some questions about your [IF B3=YES or B13=YES: current job/IF B14=YES: most recent job]. If you have more than one job, please talk about your main job.*

INTERVIEWER: IF ASKED HOW TO DETERMINE MAIN JOB: *This would be about the job where you worked the most hours.* INTERVIEWER IF HOURS ARE THE SAME: *OK, then please answer about the job you've worked at the longest.* INTERVIEWER: IF HOURS ARE THE SAME AND TENURE IS THE SAME: *Ok, then please pick one of those jobs and answer the next set of questions about that job.*

B16. What is the name of your [IF B13=YES: current /IF B14=YES: most recent] employer?

<B16\_NAME>\_\_\_\_\_

6. [IF VOLUNTEERED:] SELF-EMPLOYED
7. REFUSED
8. DON'T KNOW

**Ask B17-B18 if they are either currently working for pay or have worked for pay in the past 3 years (B3 or B13 or B14=Yes).**

B17. When did you start working for [EMPLOYER]?

\_\_\_\_\_( 01-12) / \_\_\_\_\_ (2011-2020)

M M / Y Y Y Y

7. REFUSED
8. DON'T KNOW

B18. At your job with [EMPLOYER], about how much [IF B3=YES or B13=YES: do/IF B14=YES: did] you typically earn per hour before taxes?

\$ (2.50-75.00)\_\_\_ \_\_ . \_\_\_ \_\_ PER HOUR [SKIP TO B19]

- 2 REFUSED
- 1 DON'T KNOW

**Ask B18a if they don't know how much they typically earn/earned at their employer or for themselves (B18= Refused or Don't know).**

B18a. Can you tell me how much you [IF B3=YES or B13=YES: earn/IF B14=YES: earned] for some other time period besides hourly, such as per day, per week, every two weeks, every month or annually?

- \$(2.50-75.00) \_\_\_\_ . \_\_\_\_ PER HOUR
- \$(1-400) \_\_\_\_ \_\_ \_\_ \_\_ PER DAY
- \$(1-4,000) \_\_\_\_ \_\_ \_\_ \_\_ PER WEEK
- \$(1-8,000) \_\_\_\_ \_\_ \_\_ \_\_ EVERY 2 WEEKS/TWICE A MONTH
- \$(1-16,000) \_\_\_\_ \_\_ \_\_ \_\_ EVERY MONTH
- \$(1-99,999) \_\_\_\_ \_\_ \_\_ \_\_ ANNUALLY
- 2 REFUSED
- 1 DON'T KNOW

**CAPI: IF (B2=6 AND B3=1) OR (B16=6), ASK B19; OTHERWISE SKIP TO B20**

**Ask B19 if they ARE self-employed ((B2= Self-employed AND B3=Yes) OR (B16=Self-employed)).**

B19. How much [IF B3=YES or B13=YES: do/IF B14=YES: did] you earn per week working for yourself?

- \$ \_\_\_\_ \_\_ \_\_ \_\_ PER WEEK (\$1-1,000 NO DECIMAL) [SKIP TO B20]
- 2 REFUSED
- 1 DON'T KNOW

**Ask B19a if they ARE self-employed AND don't know how much they earn/earned working for themselves (B19= Refused or Don't know).**

B19a. Can you tell me how much you [IF B3=YES or B13=YES: earn/IF B14=YES: earned] for some other time period besides weekly, such as per day, per week, every two weeks, every month, or annually?

- \$(2.50-75.00) \_\_\_\_ . \_\_\_\_ PER HOUR
- \$(1-400) \_\_\_\_ \_\_ \_\_ \_\_ PER DAY
- \$(1-4,000) \_\_\_\_ \_\_ \_\_ \_\_ PER WEEK
- \$(1-8,000) \_\_\_\_ \_\_ \_\_ \_\_ EVERY 2 WEEKS/TWICE A MONTH
- \$(1-16,000) \_\_\_\_ \_\_ \_\_ \_\_ EVERY MONTH

\$ (1-99,999)\_\_\_ \_\_\_ \_\_\_ ANNUALLY  
-2 REFUSED  
-1 DON'T KNOW

**Ask B20 if they are currently working for pay or have worked for pay in the past 3 years (B3 or B13 or B14=Yes).**

B20. At your job with [EMPLOYER], about how many hours a week [IF B3=YES or B13=YES: do/IF B14=YES: did] you work in a typical week? INTERVIEWER IF R INDICATES THAT THE HOURS VARY INSTRUCT THEM: Please use the last week that you worked at this job.

\_\_\_\_\_ HOURS PER WEEK (1-80)  
-2 REFUSED  
-1 DON'T KNOW

**Promotions**

**Read the following text and B21 if they are currently working for pay or have worked for pay in the past 3 years (B3 or B13 or B14=Yes).**

The next set of questions is about any promotions you may have received. A promotion could be a change in job title, or an increase in job responsibilities with or without an increase in pay. These changes could be at the same employer or a new employer.

B21. Since [MYLI] have you received any promotions? Please include promotions you received from any employer since [MYLI]. If you changed employers to obtain a promotion, please include that as well.?

- |               |                     |
|---------------|---------------------|
| 1. YES        |                     |
| 2. NO         | [SKIP TO SECTION C] |
| 7. REFUSED    | [SKIP TO SECTION C] |
| 8. DON'T KNOW | [SKIP TO SECTION C] |

**Ask B22-B24 if they are currently working for pay or have worked for pay in the past 3 years (B3 or B13 or B14=Yes) AND have received a promotion in the past 3 years (B21=Yes).**

B22. How many promotions have you received since [MYLI]?

1. One promotion
2. Two promotions
3. Three or more promotions
7. REFUSED
8. DON'T KNOW

B23. Since [MYLI]...

	YES	NO	REFUSED	DON'T KNOW
a. has an employer promoted you to the next level in your line of work?	1	2	7	8
b. have you been assigned increased job responsibilities/difficulty with a pay increase?	1	2	7	8
c. have you been assigned increased job responsibilities or more difficult tasks with no change in pay?	1	2	7	8
d. have you changed employers to take a new job at a higher level—that is a job with more responsibility/difficulty?	1	2	7	8

	YES	NO	REFUSED	DON'T KNOW
e. have you changed employers to take a new job with a higher pay rate?	1	2	7	8



B24. Thinking about the promotions you have received over the past three years, that is since [MYLI], have the promotions required you to have...

	YES	NO	REFUSED	DON'T KNOW
a. a new educational degree or certificate ?	1	2	7	8
b. additional coursework or training ?	1	2	7	8
c. more work experience?	1	2	7	8

**C. CURRENT/MOST RECENT JOB**

**CAPI: THIS SECTION IS ASKED FOR THE CURRENT OR MOST RECENT JOB. IF CURRENT JOB (B3 OR B13=1) USE WORDING 1 (PRESENT TENSE); IF MOST RECENT JOB (B14=YES) USE WORDING 2 (PAST TENSE).**

**Read the following text and ask C1-C5 of any respondent that has worked at all in the past three years (since 36-month survey)—that is where: (B3 OR B13 OR B14=Yes)**

This next set of questions is about your [current job/most recent job].

**Industry and Occupation**

C1. In your [IF B3=YES OR B13=YES: current /IF B14=YES: most recent] job, [do /did] you work:

1. as an employee of a private for-profit company or business, or of an individual, for wages, salaries or commissions?
2. as an employee of a private not for-profit, tax exempt, or charitable organization?
3. as a local government employee (city, county, etc.)?
4. as a state government employee?
5. as a federal government employee?
6. self-employed, in your own not incorporated business, professional practice, or farm?
7. self-employed, in your own incorporated business, professional practice, or farm?
8. without pay in family business or farm?
97. REFUSED
98. DON'T KNOW

C2. What kind of business or industry [is/was] your [IF B3 OR B13=YES: current /IF B14=YES: most recent] job?

- 
7. REFUSED
  8. DON'T KNOW

C2a. [Is/was] your [IF B3 OR B13=YES: current /IF B14=YES: most recent] job mainly...

1. Manufacturing
2. Wholesale trade
3. Retail trade
4. Other (agriculture, construction, service, government, etc.)
7. REFUSED

## 8. DON'T KNOW

C3. What kind of work [do you do in your current job/did you do in your most recent job], that is, what [is/was] your occupation? (For example: registered nurse, personnel manager, supervisor or order department, secretary, accountant.) If you [have/had] more than one job, please answer for your main job.

---

7. REFUSED

8. DON'T KNOW

C4. What [are/were] your usual activities or duties at this job? (For example: patient care, directing hiring policies, supervising order clerks, typing and filing, reconciling financial records.)

---

7. REFUSED

8. DON'T KNOW

C5. What [is/was] your job title?

---

7. REFUSED

8. DON'T KNOW

**Job Quality****Job Schedule**

**Ask C6 of everyone who was employed at all in the past three years (since 36-month survey) (B3 OR B13 OR B14=YES).**

C6. [Do/Did] you usually work a regular daytime schedule or some other schedule [IF B16=6: when working / IF B16<>6: at] [EMPLOYER]? INTERVIEWER READ IF ASKED: A regular daytime schedule is one in which you work anytime between the hours of 6AM to 6PM.

1. A REGULAR DAYTIME SCHEDULE (ANYTIME BETWEEN 6AM TO 6PM) [SKIP TO C7]

2. SOME OTHER SCHEDULE

7. REFUSED [SKIP TO C7]

8. DON'T KNOW [SKIP TO C7]

**Ask C6a-C6b if they work or worked some other schedule (C6=Some other schedule).**

C6a. Which of the following best describes the type of schedule you usually (work/worked) [IF B16=6: when working for yourself / IF B16<>6: at [EMPLOYER]]?

1. A regular evening schedule (Anytime between 2 pm to Midnight),
2. A regular night schedule (Anytime around 9pm to 8am),
3. A rotating schedule - one that changes periodically from day to evenings or night,
4. A split schedule - one consisting of two distinct periods each day,
5. An irregular schedule arranged by employer, or
6. Some other schedule? (**SPECIFY**)
7. REFUSED
8. DON'T KNOW

C6b. How far in advance do you receive your work schedule? Would you say...

1. A day in advance,
2. Two or three days in advance,
3. A week in advance,
4. Two weeks to a month in advance, or
5. More than a month in advance?
6. IF VOLUNTEERED: SCHEDULE DOESN'T CHANGE
7. REFUSED
8. DON'T KNOW

**Ask C7 of everyone who has worked at all in the past three years (since 36-month survey) (B3 OR B13 OR B14=Yes).**

C7. How much do you agree or disagree with the following statements about your job for [EMPLOYER]:

	STRONGLY AGREE	SOMEWHAT AGREE	SOMEWHAT DISAGREE	STRONGLY DISAGREE	REFUSED	DON'T KNOW
a. I [am/was] able to balance work and family responsibilities. Do you strongly agree, somewhat agree, somewhat disagree, or strongly disagree?	1	2	3	4	7	8
b. I [have/had] some choice in setting my regular work hours to meet my needs.	1	2	3	4	7	8
c. If I [have/had] a	1	2	3	4	7	8

	STRONGLY AGREE	SOMEWHAT AGREE	SOMEWHAT DISAGREE	STRONGLY DISAGREE	REFUSED	DON'T KNOW
family emergency like a sick child, my employer [will allow/allowed] me to take the time off or change my schedule.						

### Job Benefits

**Ask C8 of everyone who has worked at all in the past three years (since 36-month survey) (B3 OR B13 OR B14=YES).**

C8. [Are/Were] any of the following benefits available to you at [EMPLOYER]? That is, if you [had] wanted it, [can you receive/could you have received]:

	YES	NO	REFUSED	DON'T KNOW
a. Health insurance?	1	2	7	8
b. Paid vacation?	1	2	7	8
c. Paid holidays?	1	2	7	8
d. Paid sick days?	1	2	7	8
e. Retirement or pension benefits?	1	2	7	8

### Quality of Work Life

**Ask C9-C10 of everyone who has worked at all in the past three years (since 36-month survey) (B3 OR B13 OR B14=YES).**

C9. Overall, how satisfied [are/were] you [IF B16<>6: with your job at [EMPLOYER]/IF B16=6: working for yourself]?

1. Very satisfied
2. Somewhat satisfied
3. Neither satisfied nor dissatisfied
4. Somewhat dissatisfied
5. Very dissatisfied
7. REFUSED
8. DON'T KNOW

C10. How much do you agree or disagree with the following statement: There [are/were] many opportunities for career advancement for me with [EMPLOYER]. Would you say you...

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree
7. REFUSED
8. DON'T KNOW

### Employer Support of Education and Training

**Read the following text and ask C11 of everyone who has worked at all in the past three years (since 36-month survey) (B3=YES OR B13=YES OR B14=YES).**

Now I would like to ask you about any education and training support your [current/most recent] employer may offer.

C11. Sometimes employers offer financial support to help offset costs of education or training. [Does your current/Did your most recent] employer offer any of the following financial supports to offset the costs of::

	YES	NO	REFUSED	DON'T KNOW
a. Tuition	1	2	7	8
b. Books or supplies	1	2	7	8
c. Uniforms or equipment	1	2	7	8
d. Any other financial support (SPECIFY: _____)	1	2	7	8

C12. Next I'd like to ask about any other types of support your [current/most recent] employer offers to employees participating in education and training programs? Does [EMPLOYER] offer....

	YES	NO	REFUSED	DON'T KNOW
a. A flexible schedule to work around class schedule	1	2	7	8
b. Courses offered on site	1	2	7	8

c. Paid time off during the work day to attend class	1	2	7	8
d. Any other support (SPECIFY:_____)	1	2	7	8

**D. EDUCATION AND CREDENTIALS**

<b>Read the following text and ask D1 of everyone.</b>
--

Now I'd like to ask some questions about your current education.

**Current Enrollment**

D1. What is the highest degree or level of school that you have completed?

1. Grades 1-11
2. 12<sup>th</sup> grade – NO DIPLOMA
3. Regular high school diploma
4. GED or alternative credential
5. Some college, but less than 1 year of college credit
6. 1 or more years of college, no degree
7. Associate's degree (for example, AA or AS)
8. Bachelor's degree (for example, BA or BS)
9. Master's degree (for example, MA, MS, MEng, Med, MSW, MBA)
10. Professional degree beyond a bachelor's degree (for example, MD, DDS, DVM, LLB, JD)
11. Doctorate degree (for example, PhD, EdD)
97. REFUSED
98. DON'T KNOW

Next I'd like to talk about any classes you are taking or training courses you are participating in. Later, I will also ask you about any diplomas or academic degrees, certificates, professional certifications or state or industry licenses you have received.

D2. Are you currently enrolled in any classes, or enrolled but between terms, at some place that is providing education or training?

- |               |              |
|---------------|--------------|
| 1. YES        | [SKIP TO D3] |
| 2. NO         |              |
| 7. REFUSED    | [SKIP TO D3] |
| 8. DON'T KNOW | [SKIP TO D3] |

D2a. Think about the time between [MYLI] and today. At any time during that period, have you been enrolled in any classes at some place that is providing education or training for? Please consider only trainings that lasted for one month or more.

- |               |              |
|---------------|--------------|
| 1. YES        |              |
| 2. NO         | [SKIP TO D4] |
| 7. REFUSED    | [SKIP TO D4] |
| 8. DON'T KNOW | [SKIP TO D4] |



**Ask D3-D3c if they are currently enrolled in classes or between terms (D2=Yes) or if they were enrolled in classes lasting a month or more since [MYLI] (D2a=Yes).**

**CAPI: If D2=YES, ASK D3-D3d IN PRESENT TENSE. If D2a=Yes DISPLAY THE FOLLOWING INTRODUCTION TEXT:**

The next few questions are about the time when you were enrolled in classes that lasted at least a month or more. If you were enrolled in more than one place, please think about the place you were enrolled most recently.

D3. [IF D2=YES: Are/IF D2a=YES: Were] you a student mainly full-time, mainly part-time, or an equal mix of full-time and part time??

1. FULL-TIME
2. PART-TIME
3. EQUAL MIX
7. REFUSED
8. DON'T KNOW

D3a. What type of place are you currently taking classes at? Is it..

1. Adult education /adult high school/community school (*excluding community colleges*)
2. Community based/non-profit organization
3. Private school/company that provides training
4. Community or technical college (2 year college)
5. 4 year college/university
6. State unemployment/employment office
7. One-stop career center
8. Your place of employment
9. Someplace else (SPECIFY)
97. REFUSED
98. DON'T KNOW

D3b. [IF D2=YES: What is the name of the place that you are taking these classes at now/IF D2a=YES: What was the name of the place that you took classes at most recently?]

- 
7. REFUSED
  8. DON'T KNOW

D3c. About when did you start taking these classes? Please give me the month and year you started.

\_\_\_\_\_(1-12) / \_\_\_\_\_(2011-2020)  
M M/ Y Y Y Y  
-2. REFUSED  
-1 DON'T KNOW

**Ask D3d if they were enrolled in classes lasting a month or more since [MYLI] (D2a=YES).; if they are currently enrolled in classes or between terms (D2=YES) SKIP TO D3e.**

D3d. [IF D2a=YES] About when did you stop taking these classes? Please give me the month and year you started.

\_\_\_\_\_/\_\_\_\_\_  
M M/ Y Y Y Y  
-2. REFUSED  
-1 DON'T KNOW

**Ask D3e if they are currently enrolled in classes or between terms (D2=YES) or if they were enrolled in classes lasting a month or more since [MYLI] (D2a=YES).**

D3e. I am going to read you a list of funding sources that you might have used to pay these school or living expenses while attending classes at [D3b\_NAME] For each of them, please tell me if the source helped pay for any of these expenses:

	YES	NO	REF	DK
a Your own earnings?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	7 <input type="checkbox"/>	8 <input type="checkbox"/>
b Earnings from a spouse or partner? [MARK NO IF NOT APPLICABLE]	1 <input type="checkbox"/>	2 <input type="checkbox"/>	7 <input type="checkbox"/>	8 <input type="checkbox"/>
c Savings—either your own or a spouse/partner’s savings?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	7 <input type="checkbox"/>	8 <input type="checkbox"/>
d Financial help from a parent or other family member?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	7 <input type="checkbox"/>	8 <input type="checkbox"/>
e Loans in your name?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	7 <input type="checkbox"/>	8 <input type="checkbox"/>
f Loans in your parents’ names?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	7 <input type="checkbox"/>	8 <input type="checkbox"/>
g A Pell grant or other government grant or scholarship—not counting loans you have to pay back?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	7 <input type="checkbox"/>	8 <input type="checkbox"/>
.h A grant or scholarship from a non-government source (such as a community based or non-profit organization)—not counting loans that you have to pay back?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	7 <input type="checkbox"/>	8 <input type="checkbox"/>
i Financial support from your employer? [MARK NO IF NOT APPLICABLE]	1 <input type="checkbox"/>	2 <input type="checkbox"/>	7 <input type="checkbox"/>	8 <input type="checkbox"/>
j Financial support from (PLACE) – including providing instruction or services you didn't have to pay for?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	7 <input type="checkbox"/>	8 <input type="checkbox"/>
k Financial support from another funding source such as a church, community-based organization, non-profit organization, or local employment office?_____ [SPECIFY]	1 <input type="checkbox"/>	2 <input type="checkbox"/>	7 <input type="checkbox"/>	8 <input type="checkbox"/>

**Credentials**

**Read the following text and ask D4 of everyone.**

Now I'm going to ask you questions about any diplomas or academic degrees you may have received since [MYLI]. I will ask you about any certificate programs, professional certifications and state or industry licenses you may have received later in this survey.

[IF 36-MONTH RESPONDER: When we last talked, you told me you received the following diplomas or academic degrees [INSERT LIST OF DIPLOMAS OR ACADEMIC DEGREES FROM 36-MONTH SURVEY]. Now I'd like to know if you have received any other diplomas or academic degrees since [MYLI].

**College diplomas or academic degrees**

D4. Since [MYLI], have you received a diploma or academic degree for completing **any regular college classes**?

1. YES
2. NO [SKIP TO D5]
7. REFUSED [SKIP TO D5]
8. DON'T KNOW [SKIP TO D5]

**Ask D4i if they have received a diploma or academic degree from college classes since the last interview (D4=YES).**

- D4i. How many diplomas or academic degrees did you receive since [MYLI]?  
# \_\_\_\_\_ (MAX=4)  
-2 REFUSED [SKIP TO D5]  
-1 DON'T KNOW [SKIP TO D5]

**Ask D4a if they have received at least 1 diploma or academic degree from college classes since the last interview (D4i≥1).**

D4a. [CAPI: IF D4i=1] What kind of diploma or academic degree have you received?

[CAPI: IF D4i>1 FOR FIRST LOOP ASK]

What kind of diploma or degree did you receive first?

[CAPI: IF D4i>=2 FOR SUBSEQUENT DIPLOMAS:]

What kind of diploma or degree did you receive after that?

1. A diploma requiring less than a full year's worth of credit,
2. A diploma requiring a full year or more's worth of credit (but less than an Associate's Degree),
3. An Associate's Degree, or [SKIP TO D4a\_2]
4. Bachelor's degree or higher? [SKIP TO D4a\_2]
5. VOL: OTHER (SPECIFY: \_\_\_\_\_) [SKIP TO D4a\_2]
7. REFUSED [SKIP TO D4a\_2]
8. DON'T KNOW [SKIP TO D4a\_2]

**Ask D4a\_1 if they have received at least 1 diploma, or academic degree from college classes requiring less than an Associate's Degree since the last interview (D4a=a diploma requiring less than a full year's worth of credit or a diploma that requires a year or more of credit, but less than an associate's degree).**

D4a\_1. [ASK IF D4a=1 or 2] What is the name of the diploma or certificate you received?

\_\_\_\_\_

**Ask D4a\_2 if they have received at least 1 diploma, certificate, or degree from college classes (D4i>=1) since the last interview.**

D4a\_2. Where did you go to receive this diploma or academic degree?

\_\_\_\_\_ **SELECT FROM DROPDOWN MENU**

- 91.VOL: ON THE JOB TRAINING
- 95.VOL: OTHER (SPECIFY: \_\_\_\_\_)
- 97. REFUSED
- 98.DON'T KNOW

D4b. Is this diploma or degree related to working in the field of healthcare?

1. YES
2. NO

- 7. REFUSED
- 8. DON'T KNOW

D4c. Did this diploma or academic degree help you get or keep a job?

1. YES
2. NO

- 7. REFUSED
- 8. DON'T KNOW

D4d. When did you receive this diploma or degree? Please give me the month and year.

\_\_\_\_\_( 01-12) / \_\_\_\_\_ (2011-2020)  
 M M / Y Y Y Y  
 7. REFUSED  
 8. DON'T KNOW

**Ask D5 of everyone.**

### Certificates

The next set of questions asks about any certificates you may have earned. People sometimes earn certificates from an education or training program. An educational certificate is one that can be awarded by a training provider or an educational institution. A educational certificate is awarded based on completion of all course requirements. Educational certificates are different from professional certifications or state or industry licenses.

As we go through this next set of questions, please answer only about educational certificates you may have received. Please do not include professional certifications or state or industry licenses here we will talk about those in the next section.

IF 36-MONTH RESPONDER: When we last spoke in [MYLI], you told me that you had received the following educational certificates [INSERT LIST OF CERTIFICATES FROM 36-MONTH]. Now I'd like to know if you have received any other certificates since [MYLI].

D5. [Since [MYLI], have you received any] of the following types of certificates:

D5a. A certificate for completing a training program from an employer, employment agency, union, software or equipment manufacturer, or other training provider?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

D5b. A certificate for completing a vocational training program at a high school?

1. YES

2. NO
7. REFUSED
8. DON'T KNOW

D5c. A certificate—not a degree—for completing a program at a community or technical college, or other school after high school. Do not include teaching certificates or college degrees.

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

**CAPI: IF NO CERTIFICATES (D5a, D5b, AND D5c ARE ALL NO) SKIP TO D6**

**Ask D5\_1 if they have received any certificate since the last interview (D5a, b or c=Yes).**

D5\_1. How many certificates have you received since [MYLI]?  
# \_\_\_\_\_ (MAX=4)

- 2. REFUSED [SKIP TO D6]
- 1. DON'T KNOW [SKIP TO D6]

**Ask D5d-D5f if they have received at least 1 certificate since the last interview (D5\_1≥1).**

**CAPI: IF D51>1 CERTIFICATE, REPEAT a-c FOR UP TO 4**

D5d. [CAPI: IF D51=1] What is the name of certificate you received?

[CAPI: IF D51>=2 FOR FIRST LOOP ASK]

What is the name of the certificate you received first?

[CAPI:IF D51>=2 FORSUBSEQUENT DIPLOMAS:]

What is the name of the certificate you received after that?

- 
7. REFUSED
  8. DON'T KNOW

D5d\_1. Where did you go to receive this certificate?

**SELECT FROM PRE-POPULATED LIST OF SCHOOLS**

91. VOL: ON THE JOB TRAINING
95. VOL: OTHER (SPECIFY:\_\_\_\_\_)

97. REFUSED  
98. DON'T KNOW

D5e. Is this certificate related to working in the field of healthcare?

1. YES  
2. NO  
  
7. REFUSED  
8. DON'T KNOW

D5f. Did this certificate degree help you get or keep a job?

1. YES  
2. NO  
  
7. REFUSED  
8. DON'T KNOW

D5g. When did you receive the certificate? Please give me the month and year.

\_\_\_\_ (1-12) / \_\_\_\_ (2011-2020)  
M M / Y Y Y Y

7. REFUSED  
8. DON'T KNOW

**Ask D6 of everyone.**

### Certifications and Licenses

This next set of questions asks about any professional certifications or state or industry licenses you may have received since [MYLI].

A professional certification or license shows you are qualified to perform a specific job like Licensed Realtor, Certified Medical Assistant, Certified Construction Manager, or an IT certification. A certification is awarded by an organization; a state or industry license is awarded by a licensing agency. Both professional certifications and state or industry licenses need to be renewed periodically.

D6. **[IF 36-MONTH RESPONDER:** When we last spoke in [MYLI], you told me that you had received the following professional certifications or state, or industry licenses [INSERT LIST OF CERTIFICATIONS OR LICENSES FROM 36-MONTH].]

Since [MYLI], have you received **[IF 36-MONTH RESPONDER:** any other/ **IF 36-MONTH NON-RESPONDER:** any] professional certifications or a state, or industry licenses? Please do not include any licenses such as a liquor license or vending license.

1. YES  
2. NO

[SKIP TO D7]



7. REFUSED [SKIP TO D7]

8. DON'T KNOW [SKIP TO D7]

**Ask D6a if they have received a professional certification, or state or industry license since the last interview (D6=Yes).**

D6a. How many professional certifications, or state or industry licenses have you received since [MYLI]?

# \_\_\_\_\_ (MAX=4)

-2. REFUSED [SKIP TO D7]

-1. DON'T KNOW [SKIP TO D7]

**Ask D6b-f if they have received at least 1 professional certification, or state or industry license since the last interview?****CAPI: IF D6a>1 REPEAT b-f for up to 4**

D6b. [CAPI: IF D6a=1] What is the name of the professional certification or state, or industry license you received?

**[CAPI: IF D6a>=1]**

What is the name of the professional certification or state, or industry license you received first?

**[CAPI: IF D6a>=2]:**

What is the name of the professional certification or state, or industry license you received next?

\_\_\_\_\_  
7. REFUSED

8. DON'T KNOW

D6c. Is this professional certification, or state or industry license, related to working in the field of healthcare?

1. YES

2. NO

7. REFUSED

8. DON'T KNOW

D6d. Did this professional certification, or state or industry license, help you get or keep a job?

1. YES

2. NO

7. REFUSED

8. DON'T KNOW

D6e. What kind of work is this professional certification, or state or industry license, for? For example: teaching, vocational nursing, computer network administration, auditing, or truck driving.

- 
- 7. REFUSED
  - 8. DON'T KNOW

D6f. When did you receive this professional certification, or state or industry license? Please give me the month and year.

- \_\_\_ \_\_\_ (1-12) / \_\_\_ \_\_\_ \_\_\_ \_\_\_ (2011-2020)  
M M/ Y Y Y Y
- 7. REFUSED
  - 8. DON'T KNOW

D6g. Who issued the professional certification, or state or industry license?

- 1. A federal, state, or local government,
- 2. A professional or trade association,
- 3. A business or company,
- 4. Another group or organization (SPECIFY:\_\_\_\_\_)
- 7. REFUSED
- 8. DON'T KNOW

**Work Based Training**

**Read the following text and ask D7 of everyone who has worked at all in the past three years (since 36-month survey) (B3 OR B13 OR B14=Yes).**

Now I would like to ask you about any formal work related trainings or experiences you have had since [MYLI].

D7. Since [MYLI], have you completed an internship, co-op, practicum, clerkship, externship, residency, clinical experience, apprenticeship, or similar program? We refer to these as ‘work experience programs’.

- |               |              |
|---------------|--------------|
| 1. YES        |              |
| 2. NO         | [SKIP TO D9] |
| 7. REFUSED    | [SKIP TO D9] |
| 8. DON'T KNOW | [SKIP TO D9] |

D8. When you participated in these work experience programs, did you...

	YES	NO	REFUSED	DON'T KNOW
a. have instruction or training from a co-worker or supervisor?	1	2	7	8
b. take classes from a college, technical school, or trade school?	1	2	7	8
c. take classes or training from a company, association, union, or private instructor?	1	2	7	8

D9. Think about the jobs you've had over the past three years, since [MYLI]. Other than the ones you just told me about, have you participated in a formal training program offered by an employer or a union that helped you to learn or improve the skills needed to do your job?,?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

**Ask D10-D10c of everyone.**

D10. I am going to read you three statements. Please tell me whether you would you say you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with the following statements:

	STRONGLY AGREE	SOMEWHAT AGREE	SOMEWHAT DISAGREE	STRONGLY DISAGREE	REFUSED	DON'T KNOW
a. I am making progress towards my long-range <b>educational goals</b> . Would you say you:						
b. I am making progress towards my long-range <b>employment goals</b> . Would you say you:	1	2	3	4	7	8
c. I see myself on a career path. Would you say you:	1	2	3	4	7	8

**E. ADULT WELL-BEING**

**Ask E1-E5 of everyone.**

The next set of questions cover a wide range of beliefs and attitudes about yourself and life in general. First, I'd like to talk to you a bit about your education and career goals.

***Career Network***

E1. Say you needed advice or help in taking a next step on a a career pathway of interest to you. Please tell me if there is anyone you'd be comfortable turning to:

		YES	NO	REFUSED	DON'T KNOW
a.	Who has a college degree?	1	2	7	8
b.	Who is currently going to college?	1	2	7	8
c.	Who works at a local college, either as a teacher or staff member providing help to applicants or students?	1	2	7	8
d.	Who works for a local community organization helping people find education and training, work, and related supports?	1	2	7	8
e.	Who works in an occupation of interest to you?	1	2	7	8
f.	Who has a management job in a work setting matching to your career interests?	1	2	7	8

**Support Network**

E2. The following statements are about help from other people. Please indicate whether you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with each item. **(READ RESPONSE ITEMS AFTER FIRST 3 ITEMS AND THEN REPEAT AS NEEDED)**

		Strongly agree	Somewhat agree	Somewhat disagree	Strongly disagree	REFUSED	DON'T KNOW
a.	There are people I can depend on to help me if I really need it. Do you...	1	2	3	4	7	8
b.	I feel that I do not have close personal relationships with other people. Do you...	1	2	3	4	7	8
c.	There is no one I can turn to for guidance in times of stress. Do you...	1	2	3	4	7	8
d.	There are people who enjoy the same social activities that I do.	1	2	3	4	7	8
e.	I do not think other people respect my skills and abilities.	1	2	3	4	7	8
f.	If something went wrong, no one would come to my assistance.	1	2	3	4	7	8
g.	I have close relationships that provide me with a sense of emotional security and well-being.	1	2	3	4	7	8
h.	I have relationships where my competence and skills are recognized.	1	2	3	4	7	8
i.	There is no one who shares my interests and concerns.	1	2	3	4	7	8
j.	There is a trustworthy person I could turn to for advice if I were having problems.	1	2	3	4	7	8

**Life Challenges**

E3. In the past 12 months, please note how often each of the following situations interfered with your school, work, job search, or family responsibilities: (READ RESPONSE OPTIONS AFTER FIRST 3 ITEMS AND THEN REPEAT AS NEEDED)

		Very often	Fairly often	Sometimes	Almost never	Never	REFUSED	DON'T KNOW
a.	Child care arrangements? Would you say very often, fairly often, sometimes, almost never, or never.	1	2	3	4	5	7	8
b.	Transportation? Would you say...	1	2	3	4	5	7	8
c.	Alcohol or drug use? Would you say...	1	2	3	4	5	7	8
d.	An illness or health condition?	1	2	3	4	5	7	8
	<b>[IF E3D=4, 5, 7, OR 8 SKIP TO E4. IF E3D=1, 2 OR 3 ASK E3e:]</b>	RESPONDENTS	CHILDREN	ANOTHER FAMILY MEMBERS			REFUSED	DON'T KNOW
e.	Was this illness or health condition yours, your child's, or another family member's?	1	2	3			7	8

**Perceived Stress**

E4. In the past month, how often have you felt:

		Ver y ofte n	Fairl y often	Sometime s	Almos t never	Neve r	REFUSE D	DON' T KNO W
a.	That you were unable to control the important things in life? Would you say very often, fairly often, sometimes, almost never, or never?	1	2	3	4	5	7	8
b.	Confident about your ability to handle your personal problems? Would you say...	1	2	3	4	5	7	8
c.	That things were going your way? Would you say...	1	2	3	4	5	7	8
d.	That difficulties were piling up so high that you could not overcome them?	1	2	3	4	5	7	8

**Physical Health**

E5. Would you say your health in general is excellent, very good, fair, or poor?

1. Excellent
2. Very good
3. Fair or
4. Poor
7. REFUSED
8. DON'T KNOW



**F. HOUSEHOLD COMPOSITION****Read the following text and ask F1a of everyone**

Now I'd like to talk to you about your family and current household.

F1. Besides you, who among the following live in your household at least half the time?

a. Your spouse?

1. YES
2. NO

[SKIP TO F1c]

7. REFUSED

8. DON'T KNOW

**Ask F1b if they do NOT live with a spouse (F1a=No, Refused OR Don't know).**

b. Your unmarried (romantic) partner?

1. YES
2. NO

7. REFUSED

8. DON'T KNOW

**Ask F1c-F1h of everyone.**

c. Your [IF F1A=YES: or your spouse's/IF F1B=YES: or your romantic partner's] biological, adopted, or step children aged 17 or younger?

1. YES
2. NO

7. REFUSED

8. DON'T KNOW

d. Your [IF F1A=YES: or your spouse's/IF F1B=YES: or your romantic partner's] other relatives aged 17 or younger such as younger siblings, nephews and nieces?

1. YES
2. NO

7. REFUSED

8. DON'T KNOW

e. Your [IF F1A=YES: or your spouse's/IF F1B=YES: or your romantic partner's] mother or father?

1. YES
2. NO

7. REFUSED

8. DON'T KNOW

- f. Your [IF F1A=1: or your spouse's/IF F1B=1: or your romantic partner's] adult children or other relatives aged 18 or older?
1. YES
  2. NO
  
  7. REFUSED
  8. DON'T KNOW
- g. Anyone else aged 17 or younger such as children of friends or housemates?
1. YES
  2. NO
  
  7. REFUSED
  8. DON'T KNOW
- h. Anyone else aged 18 or older such as friends or housemates?
1. YES
  2. NO
  
  7. REFUSED
  8. DON'T KNOW

**Ask F2 if they DO live with a spouse or an unmarried romantic partner (F1a or F1b=Yes).**

- F2. How long have you and your [IF F1a=YES: spouse been married/IF F1b=YES: romantic partner been living together]?
1. A year or less
  2. 2-3 years
  3. 4-6 years
  4. More than 6 years
  7. REFUSED
  8. DON'T KNOW

**Ask F2a if they DO live with a spouse or an unmarried romantic partner (F1a or F1b=Yes).**

F2a.[ASK ONLY IF F1a=YES or F1b=YES:] Many couples who live together may not always spend time together due to work schedules and other conflicts. Over the last three months, how often did you and [your [IF F1a=YES: spouse/IF F1B=YES: romantic partner] talk about things that happened during your day? Was it...

1. Every day or almost every day
2. A few times a week
3. A few times a month
4. 1 or 2 times in the past 3 months
5. Hardly ever or never
7. REFUSED
8. DON'T KNOW

**CAPI SKIP TO F3 IF F1a or F1b=1**

**Ask F2b if they did NOT answer that they are living with a spouse or an unmarried romantic partner (F1a AND F1b =No, Refused OR Don't know).**

F2C. [ASK ONLY IF F1a AND F1b=NO, REF, DK:] Have you been married or lived with a romantic partner at any time between [MYLI] and today?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

**Ask F3 if they DO live with a spouse or unmarried romantic partner, or if they live with a parent or romantic partner's parent, or if they live with their or their romantic partner's adult children or other relatives, or if they live with anyone else aged 18 or older (F1a, F1b, F1e, F1f, OR F1h=YES).**

**CAPI: ASK F3 ONLY IF F1a, F1b, F1e, F1f, OR F1h=YES; ELSE SKIP TO F4 IF F1c OR F1d OR F1g =YES; ELSE SKIP TO NOTE BEFORE F6.**

F3. How many adults, aged 18 or over live with you at least half the time?

\_\_\_ \_\_\_ (0-15) number of persons aged 18 or over

- 2. REFUSED
- 1 DON'T KNOW

**Ask F4 if they live with their or their spouse's children, or if they live with their or their spouse's other relatives aged 17 or younger, or if they live with anyone else aged 17 or younger (F1C OR F1D OR F1G =YES).**

**CAPI: ASK F4 ONLY IF F1c OR F1d OR F1g =YES; ELSE SKIP TO NOTE BEFORE F6.**

F4. How many persons aged 17 or younger live with you at least half the time? Include biological, adopted, foster, step, and any other children, as well as younger siblings.

\_\_\_ \_\_\_ (0-15) number of persons aged 17 or younger

- 2. REFUSED [SKIP TO F6]
- 1 DON'T KNOW [SKIP TO F6]

**Ask F5 if they live with at least 1 person aged 17 or younger (F4>=1).**

F5. For how many of these children are you [IF F1A=YES: or your spouse/IF F1B=YES: or your romantic partner] the primary caregiver? By primary caregiver, I mean you [IF F1A=YES: or

your spouse/IF F1B=YES: or your romantic partner] are the adult who assumes the most responsibility in caring for the health and well-being of the child?

\_\_\_ \_\_\_ (0-15) number of children

-2 REFUSED

-1 DON'T KNOW

**Ask F6-F7 if they are female OR if they are male and they DO live with a spouse or romantic partner.**

**CAPI: IF GENDER= MALE AND (F1A AND F1B=NO, REF, OR DK) SKIP TO F7a**

F6. [GENDER= FEMALE: Are you currently pregnant?]

[GENDER=MALE AND IF F1A=1: Is your spouse/ GENDER=MALE AND IF F1B=1: Is your romantic partner] currently pregnant?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

F7. [GENDER= FEMALE:] Have you had a baby since [MONTH AND YEAR OF RANDOM ASSIGNMENT]?

[GENDER= MALE:] Since [MONTH AND YEAR OF RANDOM ASSIGNMENT], have you fathered a baby]?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

**Ask F8 if they are female AND they have had a child since the last interview OR if they are male AND they have fathered a child since the last interview (F7=Yes).**

**CAPI: IF F7=YES ASK F8; ELSE SKIP TO G1**

F8. IF GENDER=FEMALE: Since [MONTH AND YEAR OF RANDOM ASSIGNMENT] how many children have you had??

IF GENDER=MALE: Since [MONTH AND YEAR OF RANDOM ASSIGNMENT] how many children have you fathered?

\_\_\_ \_\_\_ (0-9) number of children

-2 REFUSED

[SKIP TO G1]

-1 DON'T KNOW

[SKIP TO G1]

**Ask F9 if [they are female AND have had OR if they are male AND they have fathered at least 1 child since random assignment] AND F8>=1.**

F9. [IF F8=1:Does this child/IF F6&gt;1: How many of these children] live with you at least half the time?

\_\_\_ \_\_\_ (0-9) number of children

-2 REFUSED

-1 DON'T KNOW



**G. ECONOMIC WELL-BEING*****Income and Receipt of Public Assistance***

**Read the following text and ask G1 of everyone.**

Now, I am going to ask you some questions about your household income in [**PRIOR MONTH**]. Since we have already discussed job earnings, I will only ask about other sources of income. Again, I want to assure you that none of your answers will be discussed with anyone.

G1. Did you or other members of the household have income or benefits from any of the following sources in [**PRIOR MONTH**]?

	YES	NO	REFUSED	DON'T KNOW
a. Temporary Assistance for Needy Families or TANF (“tan-eff”) or (State-specific name)	1	2	7	8
b. Supplemental Nutrition Assistance Program also known as SNAP (“snap”) or Food Stamps	1	2	7	8
c. Women, Infants and Children Program also known as WIC (“wick”)	1	2	7	8
d. Unemployment insurance or Worker’s compensation	1	2	7	8
e. Medicaid	1	2	7	8
f. Subsidized child care	1	2	7	8
g. Section 8 or public housing	1	2	7	8
h. Low Income Home Energy Assistance Program also known as LIHEAP (“lie-heap”)	1	2	7	8
i. Free or reduced lunch program	1	2	7	8
j. Child support--please include formal, informal, and in-kind sources	1	2	7	8
k. Family and friends who did not live with you at least half of the time last month	1	2	7	8
l. Another source of income. Please specify (_____)	1	2	7	8

**Ask G2 if they have received benefits from TANF (G1a=Yes).**

G2. IF G1a=YES: How much did you and other members of your household receive from TANF last month?

\$ \_\_\_\_\_ (\$0-9,999)

-2 REFUSED

-1 DON'T KNOW





**Ask G3 if they have received benefits from SNAP (G1b=Yes).**

G3. IF G1b=YES: How much did you and other members of your household receive from Supplemental Nutrition Assistance Program also known as SNAP (“snap”) or Food Stamps last month?

\$ \_\_\_\_\_ (\$0-9,999)

-2 REFUSED

-1 DON'T KNOW

**Ask G4 if they have received income from family or friends that did not live with them (G1k=Yes).**

G4. IF G1k=YES: How much did you and other members of your household receive from family or friends that do not live with you last month?

\$ \_\_\_\_\_ (\$0-9,999)

-2 REFUSED

-1 DON'T KNOW

**Ask G5 if they have received income from any other sources (G1l=Yes).**

G5. IF G1l=YES: How much did you and other members of your household receive from other sources last month?

\$ \_\_\_\_\_ (\$0-9,999)

-2 REFUSED

-1 DON'T KNOW

**Ask G6 if they have received benefits from child support (G1j=Yes)**

G6. IF G1j=YES: How much did you and other members of your household receive from child support, either formal, informal or in-kind, last month?

\$ \_\_\_\_\_ (\$0-9,999)

-2 REFUSED

-1 DON'T KNOW

G6a. Are your child support payments from the non-custodial parent up to date?

1. YES

2. NO

7. REFUSED

8. DON'T KNOW

**Ask G6b of everyone**

- G6b. Are you responsible for providing child support payments for one or more children?
1. YES
  2. NO [SKIP TO G7]
  7. REFUSED [SKIP TO G7]
  8. DON'T KNOW [SKIP TO G7]
- G6c. Are you up to date with any all child support payments you are responsible for providing?
1. YES
  2. NO
  7. REFUSED
  8. DON'T KNOW

**Ask G7-G8 of everyone.**

G7. Thinking of all of the income you received last month, what was your total **personal income** in [PRIOR MONTH]? Please include your job earnings, benefits, and any other types of income except for tax refunds in your answer. (IF NEEDED: Please do not include any refunds of federal, state, or local income taxes you paid in past years.)

\$ \_\_\_\_\_ (\$0-9,999) [SKIP TO G8]  
 -2 REFUSED  
 -1 DON'T KNOW

G7a. Would you say your total **personal income** in [PRIOR MONTH] was...

1. None (\$0)
2. \$500 or less
3. \$501-\$1,000
4. \$1,001-\$1,500
5. \$1,501-\$2,000
6. \$2,001-\$2,500
7. \$2,501 or more
97. REFUSED
98. DON'T KNOW

G8. Think of all of the income received by you and the people living in your household last month. What was your total income for everyone living together in your household in [PRIOR MONTH]?

Please consider anyone who lived in your household for at least half of [PRIOR MONTH] when you answer this question, including yourself. (IF NEEDED: Please do not include any refunds of federal, state or local income taxes paid in past years.)

\$ \_\_\_\_\_ (\$0-9,999) [SKIP TO G9]  
 -2 REFUSED [SKIP TO G9]  
 -1 DON'T KNOW

**Ask G8a if they don't know how much their total income was in the last month (G8=Don't know).**

G8a. Which of the following categories best describes your total household income? Please consider income received by anyone who lived in your household for at least half of [PRIOR MONTH] when you answer this question, including yourself. Would you say your total household income in [PRIOR MONTH] was:

1. None (\$0)
2. \$500 or less
3. \$501 to \$1,000
4. \$1,001 to \$1,500
5. \$1,501 to \$2,000
6. \$2,001 to \$2,500
7. \$2,501 or more
97. REFUSED
98. DON'T KNOW

**Ask G9 of everyone.**

G9. Did you or will you claim the Earned Income Tax Credit for [PRIOR YEAR]?

INTERVIEWER IF RESPONDENT ASKS WHAT THIS IS READ: The federal government has a special rule that allows working people who make less than about \$49,000 a year to take advantage of something called the Earned Income Tax Credit, or EITC. They can claim the Earned Income Tax Credit by filling out a special form called Schedule EITC when they fill out their income taxes, or they can fill out a special form with their employer.

2. YES
2. NO
7. REFUSED
8. DON'T KNOW

**Assets****START TIME:** \_\_\_\_\_**Read the following text and ask G10-G11 of everyone.**

The next few questions are about any assets you may have.

G10. I'm going to read you a list of different types of assets people have, aside from a home or automobile. For each item I read, please tell me if this type of asset applies to you [IF F1a=YES or your spouse/IF F1b=YES: or your partner]?

	YES	NO	REFUSED	DON'T KNOW
a. [Do you/ IF F1A=1: or your spouse/ IF F1B=1: or your romantic partner] have a checking account?	1	2	7	8
b. [Do you/ IF F1A=1: or your spouse/ IF F1B=1: or your romantic partner] have a regular savings account, money market account, or a certificate of deposit.]	1	2	7	8
c. Do you/IF F1A=1: or your spouse/IF F1B=1: or your romantic partner] have a life insurance policy?	1	2	7	8
d. Do you IF F1A=1: or your spouse/IF F1B=1: or your romantic partner] contribute a portion of your income to a retirement plan or 401k plan?	1	2	7	8

**Student Loan-Respondent Debt**

The next few questions are about any student loan debt you may have incurred.

G11. About how much have you personally borrowed overall to go to school since [MONTH AND YEAR OF RANDOM ASSIGNMENT]?

\$ \_\_\_\_\_ (\$0-50,000 )

[SKIP TO G12]

-2 REFUSED

[SKIP TO G12]

-1 DON'T KNOW

**Ask G11a if they don't know how much personal student loan debt they have (G11=Don't know).**

G11a. Would you say that the total amount of money you had to borrow was :?

1. Under \$1,000
2. Between \$1,001 and \$4,999
3. Between \$5,000 and \$14,999
4. Between \$15,000 and \$24,999
5. \$25,000 or more
97. REFUSED
98. DON'T KNOW

[SKIP TO G15]

**Ask G12-G14 if they did NOT refuse to answer an amount of personal student loan debt (G11 OR G11a ≠ REFUSED)?**

G12. Do you currently have:

1. Only federal student loans (e.g., Stafford, PLUS, Perkins)
2. Only private student loans
3. Both federal and private student loans
7. REFUSED
8. DON'T KNOW

G13. Did you complete the most recent educational program for which you borrowed money?

1. YES
2. NO
3. STILL ENROLLED IN THE PROGRAM
7. REFUSED
8. DON'T KNOW

G14. How many times have you been late with a student loan payment in the past 12 months? (If you have more than one student loan, please consider them all.)

1. NEVER, PAYMENTS ARE NOT DUE ON MY LOANS AT THIS TIME
2. NEVER, I HAVE BEEN REPAYING ON TIME EACH MONTH
3. ONCE
4. MORE THAN ONCE
7. REFUSED
8. DON'T KNOW

**Student Loan-Family Debt****Read the following text and ask G15 of everyone.**

Now I'd like to ask about any school loans your parents or other family members have taken out to help support you going to school.

G15. About how much have your parents or other family members borrowed overall to support you going to school since [MONTH AND YEAR OF RANDOM ASSIGNMENT]?

\$ \_\_\_\_\_ [SKIP TO G16]

-2. REFUSED [SKIP TO G16]

-1. DON'T KNOW

**Ask G15a if they don't know how much family student loan debt they have.**

G15a. Would you say that the total amount of money your parents or other family members borrowed was under \$1,000; between \$1,000 and \$4,999; between \$5,000 and \$14,999; between \$15,000 and \$24,999; or \$25,000 or more?

1. UNDER \$1,000
2. BETWEEN \$1,000 AND \$4,999
3. BETWEEN \$5,000 AND \$14,999
4. BETWEEN 15,000 AND \$24,999
5. \$25,000 OR MORE
97. REFUSED
98. DON'T KNOW

**Other Debt****Ask G16-G19c of everyone.**

G16. Think about all of the other debt you have, excluding the school loans we just talked about. Which of the following categories best describes the amount you [IF F1A=1: and your spouse/ IF F1B=1: and your romantic partner] currently owe IN TOTAL for those things. Please do not include any amount YOU owe for school loans or for your home mortgage. Would you say your total other debt was...

1. \$0
2. \$1 to \$2,500
3. \$2,501 to \$5,000
4. \$5,001 to \$7,500
5. \$7,501 to \$10,000
6. \$10,001 to \$25,000
7. \$25,001 to \$50,000
8. Over \$50,000
97. REFUSED
98. DON'T KNOW

### *Expenses*

Now I'd like to ask some questions about your expenses.

G17. Was there any time in the past 12 months when:

	YES	NO	REFUSED	DON'T KNOW
a. You did not pay the full amount of the rent or mortgage because you could not afford it?	1	2	7	8
b. You were not able to pay the full amount of the gas, oil, or electricity bills?	1	2	7	8
c. The gas or electric company turned off service, or the oil company could not deliver oil?	1	2	7	8
d. The telephone company disconnected service because payments were not made?	1	2	7	8
e. You or someone else in your household needed to see a doctor or go to the hospital but did not go because you could not afford it?	1	2	7	8
f. You or someone else in your household needed to see a dentist but did not go because you could not afford it?	1	2	7	8
g. You or someone else in your household could not fill or postponed filling a prescription for drugs when they were needed because you could not afford it?	1	2	7	8

### *Food Insecurity*

G18. Getting enough food can be a problem for some people. Which of these statements best describes the food eaten in your household in the past six months? Would you say there is:

1. Enough of the kinds of food you want

2. Enough but not always the kinds of food you want
3. Sometimes not enough to eat
4. Often not enough to eat
7. REFUSED
8. DON'T KNOW



**Financial Resilience**

G19. Think again over the past 12 months. Generally, at the end of the month do you end up with: more than enough money left over, some money left over, just enough to make ends meet, or not enough to make ends meet? (DO NOT READ RESPONSES)

1. MORE THAN ENOUGH MONEY LEFT OVER
2. SOME MONEY LEFT OVER
3. JUST ENOUGH TO MAKE ENDS MEET
4. NOT ENOUGH TO MAKE ENDS MEET
7. REFUSED
8. DON'T KNOW

G20. Suppose that you have an emergency expense that costs \$400. **Based on your current financial situation**, how would you pay for this expense? If you would use more than one method to cover this expense, please answer yes to all that apply.

	YES	NO	REF	DK
a. Put it on my credit card and pay it off in full at the next statement	1	2	7	8
b. Put it on my credit card and pay it off over time	1	2	7	8
c. With the money currently in my checking/savings account or with cash	1	2	7	8
d. Using money from a bank loan or line of credit	1	2	7	8
e. By borrowing from a friend or family member	1	2	7	8
f. Using a payday loan, deposit advance, or overdraft	1	2	7	8
g. By selling something	1	2	7	8
h. I wouldn't be able to pay for the expense right now	1	2	7	8
i. Other (Please specify_____)	1	2	7	8

G21. **Based on your current financial situation**, what is the largest emergency expense that you could pay right now using cash or money in your checking/savings account?

1. Under \$100
2. \$100 to \$199
3. \$200 to \$299
4. \$300 to \$399
5. Over \$400
7. REFUSED
8. DON'T KNOW

**Health Insurance**

**Ask G22-G26 of everyone. Wording based on whether or not they are self-employed.**

G22. [IF B2 or B16≠6 (SELF-EMPLOYED)] Do you **take** health insurance through [EMPLOYER]?  
[IF B2 OR B16=6 (SELF-EMPLOYED)] Do you have health insurance through your business?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

G23. [IF B2 or B16≠6 (SELF-EMPLOYED)] Do you **have** health insurance through some non-job related source such as Medicaid? [IF B2 OR B16=6 (SELF-EMPLOYED)] Do you have health insurance through a source other than your business such as Medicaid or private health insurance?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

**Housing Status and Neighborhood Satisfaction****Read the following text and ask G24-G26 of everyone.**

Now I'd like to ask you some questions about your current housing situation.

G24. Thinking about the place where you are currently living, do you:

1. Rent your home or apartment
2. Own your own home or apartment
3. Live with family or friends and pay part of the rent or mortgage
4. Live with family or friends and do not pay rent
5. Live in a group shelter or
6. Live in some other housing arrangement (SPECIFY: \_\_\_\_\_)
7. REFUSED
8. DON'T KNOW

G25. Please think about the last six months. Were there any times when you were living with a friend or relative because you could not find or afford a place of your own?

1. YES
2. NO..... [SKIP TO G26]
7. REFUSED..... [SKIP TO G26]
8. DON'T KNOW..... [SKIP TO G26]

**Ask G25a if they could not afford their own place in that last 6 months (G25=Yes).**

G25a. Altogether, how much time in the past six months, would you say you spent living with a friend or relative because you could not find or afford a place of your own? You can tell me this answer in days, weeks, or months, whichever is easiest for you. [INTERVIEWER/CAPI: RECORD NUMBER OF DAYS, WEEKS, or MONTHS. IF 0, RECORD THAT AS WELL].

- NUMBER OF DAYS \_\_\_\_\_
- NUMBER OF WEEKS \_\_\_\_\_
- NUMBER OF MONTHS \_\_\_\_\_
- REFUSED..... \_2
- DON'T KNOW..... \_1

**Ask G24 of everyone.**

G26. Which of the following statements best describes how satisfied you are with your neighborhood?

Would you say you are...

1. Very satisfied
2. Somewhat satisfied
3. In the middle
4. Somewhat dissatisfied

- 5. Very dissatisfied
- 7. REFUSED
- 8. DON'T KNOW

**H. PARENT REPORTS: CHILD MODULE**

**Read the following text and ask CS1 if there is a focal child in this respondent's file.**

CAPI: IF SAMPLE FILE INCLUDES A FOCAL CHILD, CONTINUE; IF RESPONDENT SAMPLE FILE DOES NOT INCLUDE A FOCAL CHILD, SKIP TO SECTION I, CONTACT INFORMATION.

**Child Introduction/Screener**

In the next set of questions, I am interested in collecting more information on your family, particularly your children. These questions will cover topics such as your family activities and your relationship to your child's school. Everything you tell me is completely private. [IF RARE=RESULT=T: This information will be extremely valuable in understanding how programs like [LOCAL PROGRAM NAME] affect family life.]

Although I am interested in all of the children that you [IF F1a=1: and your spouse / F1b=1: and your romantic partner] are the primary caregiver for, the study can only collect data on one. The computer selected the child I should ask about.

**Ask CS1 if there is both a name AND a DOB for the child in the file.**

**CAPI: ASK CS1 IF [FC\_NAME AND FC\_DOB ARE IN SAMPLE FILE]:**

CS1. I would like to ask about [CHILD], who was born on [CHILD DOB].

1. CONTINUE [SKIP TO H1]
2. VOL: NO CHILD MATCHING THAT CRITERIA [SKIP TO SECTION I]

**Ask CS2-CS2a if there is a DOB but NO name for the child in the file.**

**CAPI: ASK CS2 IF [FC\_NAME] IS MISSING:**

CS2. I would like to ask about your child who was born on [CHILD DOB].

1. CONTINUE [CONTINUE]
2. VOL: NO CHILD MATCHING THAT CRITERIA [SKIP TO SECTION I]

CS2a. What is that child's name?

IF NEEDED: We can use an initial if you don't want to name the child. I just need to have something to call him or her as I ask questions.

\_\_\_\_\_ [RECORD NAME].

7. REFUSED [SKIP TO H1 and INSERT [your child] ASCHILD]
8. DON'T KNOW [SKIP TO H1 and INSERT [your child] ASCHILD]

**Ask CS3-Cs3a if there is a name but NO DOB for the child in the file.****ASK CS3 IF [FC\_DOB] IS MISSING:**

CS3. I would like to ask about [CHILD].

1. CONTINUE
2. VOL: NO CHILD MATCHING THAT CRITERIA [SKIP TO SECTION I]

CS3a. Could you please tell me when [CHILD] was born?

- \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_(DOB MUST BE < RAD) [SKIP TO H1]
7. REFUSED
  8. DON'T KNOW

CS3b. Could you please tell me how old [CHILD] is?

- \_\_\_\_\_AGE
7. REFUSED
  8. DON'T KNOW

**Ask H1 of everyone who has identified a child in the child screener.**

H1. Over the last 12 months, has [CHILD], born on [CHILD DOB] lived with you at least half the time?

[IF CS3a=7 OR 8: Over the last 12 months has [CHILD] lived with you at least half the time?]

1. YES [SKIP TO H2]
2. NO
3. VOL: NO CHILD MATCHING THAT NAME OR DATE OF BIRTH [SKIP TO SECTION I]
7. REFUSED [SKIP TO SECTION I]
8. DON'T KNOW [SKIP TO SECTION I]

**Ask H1a if the child has NOT lived with them in the past year (H1=No).**

H1a. Where does [CHILD] live at least half the time?

1. With other parent
2. With another family member
3. In foster care
4. In their own apartment
5. In a dorm or apartment with roommate
6. In the military
7. With [CHILDs] spouse/romantic partner
8. Somewhere else
7. REFUSED [SKIP TO SECTION I]
8. DON'T KNOW

**CAPI: IF [CHILD] AGE>18 SKIP TO H3D**

**Ask H2 if the child has lived with them in the past year and is 18 or younger. (Today's Date less Date of birth) or CS3b<=18)**

**Child Education Status**

H2. Is [CHILD] currently enrolled in school?

1. YES
2. NO [SKIP TO H3a]
3. VOL: CHILD IS ON SUMMER VACATION
4. VOL: CHILD IS TOO YOUNG TO GO KINDERGARTEN [SKIP TO H8]
7. REFUSED [SKIP TO SECTION I]
8. DON'T KNOW

**Ask H3 if the child has lived with them in the past year AND is currently enrolled in school or on summer vacation (H2=Yes or On summer vacation or Don't Know).**

H3. [IF INTERVIEW TAKES PLACE DURING THE SCHOOL YEAR:] What grade is [CHILD] currently in?

[IF R VOLUNTEERS CHILD IS ON SUMMER VACATION] What grade was [CHILD] in the last school year?

1. PRE-KINDERGARTEN [SKIP TO INTRO BEFORE H4]
2. KINDERGARTEN [SKIP TO INTRO BEFORE H4]
3. 1ST GRADE [SKIP TO INTRO BEFORE H4]
4. 2ND GRADE [SKIP TO INTRO BEFORE H4]
5. 3RD GRADE [SKIP TO INTRO BEFORE H4]
6. 4TH GRADE [SKIP TO INTRO BEFORE H4]
7. 5TH GRADE [SKIP TO INTRO BEFORE H4]
8. 6TH GRADE [SKIP TO INTRO BEFORE H4]
9. 7TH GRADE [SKIP TO INTRO BEFORE H4]
10. 8TH GRADE [SKIP TO INTRO BEFORE H4]
11. 9TH GRADE [SKIP TO INTRO BEFORE H4]
12. 10TH GRADE [SKIP TO INTRO BEFORE H4]
13. 11TH GRADE [SKIP TO INTRO BEFORE H4]
14. 12TH GRADE [SKIP TO INTRO BEFORE H3d]
15. NOT APPLICABLE, CHILD NOT IN SCHOOL [CONTINUE]
16. NOT APPLICABLE, CHILD IN UNGRADED SCHOOL [SKIP TO H3d]
17. 2-YEAR COLLEGE [SKIP TO INTRO BEFORE H3d]
18. 4-YEAR COLLEGE [SKIP TO INTRO BEFORE H3d]
19. VOCATIONAL/TRADE SCHOOL [SKIP TO INTRO BEFORE H3d]
97. REFUSED [SKIP TO SECTION I]
98. DON'T KNOW [SKIP TO INTRO BEFORE H4]





**Ask H3a if the child is NOT currently enrolled in school or on summer vacation (H2=No or H3=CHILD NOT IN SCHOOL).**

- H3a. [IF H2=2 OR H3=15] What grade was [CHILD] last enrolled in?
1. PRE-KINDERGARTEN
  2. KINDERGARTEN
  3. 1ST GRADE
  4. 2ND GRADE
  5. 3RD GRADE
  6. 4TH GRADE
  7. 5TH GRADE
  8. 6TH GRADE
  9. 7TH GRADE
  10. 8TH GRADE
  11. 9TH GRADE
  12. 10TH GRADE
  13. 11TH GRADE
  14. 12TH GRADE
  15. 2-YEAR COLLEGE
  16. 4-YEAR COLLEGE
  17. VOCATIONAL/TRADE SCHOOL [SKIP TO INTRO BEFORE H3d]
  18. VOL: CHILD IS TOO YOUNG TO GO KINDERGARTEN [SKIP TO H8]
  97. REFUSED [SKIP TO SECTION I]
  98. DON'T KNOW

**Ask H3b if the child is NOT currently enrolled in school or on summer vacation AND is old enough to go to kindergarten (H2=No or H3a=Child is too young to go to kindergarten).**

H3b. When was [CHILD] last enrolled in school? Please tell me the month and year.

\_\_\_\_ / \_\_\_\_  
MM    YYYY

6. VOL: NEVER ENROLLED [SKIP TO NOTE AFTER H3d]
7. REFUSED [SKIP TO SECTION I]
8. DON'T KNOW [SKIP TO NOTE AFTER H3d]

**Ask H3c if the child is NOT currently enrolled in school or on summer vacation AND is old enough to go to kindergarten AND they gave a date for when the child was last enrolled in school (H3b has a non-missing date).**

H3c. [ASK IF H3b<>6,7,8 (DOES NOT EQUAL NEVER ENROLLED, REFUSED, OR DON'T KNOW):] What was the main reason [CHILD] left school at that time? (DO NOT READ LIST)

INTERVIEWER NOTE: IF R GIVES MULTIPLE REASONS, ASK FOR THE MAIN REASON

1. EXPELLED/SUSPENDED
2. POOR GRADES
3. GOT MARRIED/PREGNANT/BECAME A PARENT
4. SCHOOL WAS DANGEROUS
5. DIDN'T GET ALONG WITH OTHER STUDENTS
6. ENTERED MILITARY
7. BECAME EMPLOYED
8. FINANCIAL DIFFICULTIES—COULDN'T AFFORD TO GO
9. CHILD CARE OR OTHER HOME RESPONSIBILITIES
10. DRUGS OR ALCOHOL/OTHER HEALTH PROBLEM
11. OTHER (SPECIFY: \_\_\_\_\_)
97. REFUSED
98. DON'T KNOW

**Ask H3d if H3 indicates that the child is in 12<sup>th</sup> grade, 2-year or 4-year college, vocational school, or ungraded school OR if the child is not currently enrolled in school OR if the child is aged 17 or over.**

H3d. [[ASK IF H3=14, 16, 17, 18, 19 ] OR [IF H2=2 OR H3=15]OR [IF CHILDAGE>=17]]  
Did [CHILD] graduate from high school or receive a GED?

1. YES, GRADUATED HIGH SCHOOL
2. YES, RECEIVED GED
3. NO
7. REFUSED
8. DON'T KNOW

[SKIP TO SECTION I]

**CAPI:**

IF CHILD AGE>=18 SKIP TO H25

IF H3B DATE IS >ONE YEAR FROM INTERVIEW DATE, OR H3B=6, 7, OR 8, THEN SKIP TO SECTION I, CONTACT INFORMATION

IF H3B DATE IS < ONE YEAR FROM INTERVIEW DATE AND H3=17, 18, 19 THEN SKIP TO H8

IF H3B DATE IS < ONE YEAR FROM INTERVIEW DATE AND H3=1-14, 16, OR 98 THEN  
CONTINUE

**Child Supervision*****Children in Pre-Kindergarten through Twelfth Grade***

**Read the following text and ask H4 if the child is younger than 18 AND if the child HAS been in school in the past year AND if the child is NOT in a 2-year or 4-year college or vocational school.**

First I'd like to ask you some questions about the people who care for [CHILD]. Different children need different amounts of supervision. For these questions, please think about a typical week in the last year.

H4. Are you or another adult in the family usually present at home before [CHILD] leaves for school?

- |               |              |
|---------------|--------------|
| 1. YES        |              |
| 2. NO         | [SKIP TO H5] |
| 7. REFUSED    | [SKIP TO H5] |
| 8. DON'T KNOW | [SKIP TO H5] |

**Ask H4a if there is usually an adult at home before the child leaves for school (H4=Yes).**

H4a. Who is usually present? (READ LIST AND MARK ALL THAT APPLY)

1. You,
2. Another adult, or
3. Both you and another adult?
7. REFUSED
8. DON'T KNOW

**Ask H5 if the child is younger than 18 OR if the child HAS been in school in the past year OR if the child is NOT in a 2-year or 4-year college or vocational school.**

H5. Are you or another adult in the family usually present at home after [CHILD] comes home from school?

- |               |              |
|---------------|--------------|
| 1. YES        |              |
| 2. NO         | [SKIP TO H6] |
| 7. REFUSED    | [SKIP TO H6] |
| 8. DON'T KNOW | [SKIP TO H6] |

**Ask H5a if there is usually an adult at home after the child comes home from school (H5=Yes).**

H5a. Who is usually present? (READ LIST AND MARK ALL THAT APPLY)

1. You,
2. Another adult, or
3. Both you and another adult?
7. REFUSED
8. DON'T KNOW

**Ask H6 if the child is younger than 18 OR if the child HAS been in school in the past year OR if the child is NOT in a 2-year or 4-year college or vocational school.**

H6. Are you or another adult in the family usually present after dinner during the week?

- |               |              |
|---------------|--------------|
| 1. YES        |              |
| 2. NO         | [SKIP TO H7] |
| 7. REFUSED    | [SKIP TO H7] |
| 8. DON'T KNOW | [SKIP TO H7] |

**Ask H6a if there is usually an adult at home after dinner during the week (H6=Yes).**

H6a. Who is usually present? (READ LIST AND MARK ALL THAT APPLY)

1. You,
2. Another adult, or
3. Both you and another adult?
7. REFUSED
8. DON'T KNOW

**Ask H7 if the child is younger than 18 OR if the child HAS been in school in the past year OR if the child is NOT in a 2-year or 4-year college or vocational school.**

H7. Are you or another adult in the family usually present with [CHILD] during the weekend?

- |               |              |
|---------------|--------------|
| 1. YES        |              |
| 2. NO         | [SKIP TO H8] |
| 7. REFUSED    | [SKIP TO H8] |
| 8. DON'T KNOW | [SKIP TO H8] |

**Ask H7a if there is usually an adult with the child during the weekend (H7=Yes).**

H7a. Who is usually present? (READ LIST AND MARK ALL THAT APPLY)

1. You,
2. Another adult, or
3. Both you and another adult?
7. REFUSED
8. DON'T KNOW

**Ask H8a-H8b if the child is younger than 18.****Family Routines (Preschool to High School)**

H8. Next I'd like to ask you some questions about family routines.

- a. In a typical full 7-day week, including the weekend, how many times do you get to eat breakfast with [CHILD]?

\_\_\_\_\_times/week (0-7)

97. REFUSED

98. DON'T KNOW

- b. In a typical full 7-day week, including the weekend, how many times do you get to eat dinner with [CHILD]?

\_\_\_\_\_times/week(0-7)

97. REFUSED

98. DON'T KNOW

**CAPI: IF H3 / H3a =CHILD IN 5TH GRADE OR BELOW, SKIP TO H11**

***Children in Sixth through Twelfth Grade*****Education-Related Goals And Support**

**Read the following text and ask H11-H15 if the child is in sixth through 12<sup>th</sup> grade AND the child has been in school in the past year.**

Next are questions about your hopes and aspirations for [CHILD].

H9. Knowing [CHILD] as you do, how far do you think he or she will actually go in school? Do you think he or she will:

1. Complete some high school
  2. Finish high school
  3. Complete some technical school after high school
  4. Finish technical school after high school
  5. Complete some college
  6. Finish college, or
  7. Earn an advanced degree after college like an MA, MD, PhD, or law degree
97. REFUSED  
98. DON'T KNOW

H10. How far does [CHILD] say he or she would like to go in school? Would [CHILD] like to:

1. Complete some high school
2. Finish high school
3. Complete some technical school after high school
4. Finish technical school after high school

5. Complete some college
6. Finish college, or
7. Earn an advanced degree after college like an MA, MD, PhD, or law degree
96. CHILD DOESN'T SAY
97. REFUSED
98. DON'T KNOW

**Read the following text and ask H11-H13 if the child is 18 or under AND the child has been in school in the past year.**

Now I'd like to talk about [CHILD]'s activities with family members. For these questions, please think about a typical week in the last year.

***Children in Kindergarten through Twelfth Grade***

H11. In a typical week, how often do you talk to [CHILD] about his or her homework assignments or what he or she is learning in school?

1. Never
2. Once or twice a week
3. 3 to 4 times a week
4. 5 or more times a week
7. REFUSED
8. DON'T KNOW

H12. In a typical week, how often do you or someone in your family help [CHILD] with homework?

1. Never
2. Once or twice a week
3. 3 or 4 times a week
4. 5 or more times a week
7. REFUSED
8. DON'T KNOW

H13. In a typical week, how often do you or someone in your family discuss [CHILD]'s grades with him or her? Would you say:

1. Never
2. Once or twice a week
3. 3 or 4 times a week
4. 5 or more times a week
7. REFUSED

8. DON'T KNOW



**Read the following if the child is 18 or under AND the child has been in school in the past year.**

### **Child Outcomes**

My last set of questions are about how [CHILD] is doing in school.

**Ask H14-H15 if the child is 18 or under AND the child has been in school in the past year AND the child is kindergarten through fifth grade.**

IF H3 OR H3a=6th THROUGH 12th GRADE, ASSOCIATES DEGREE, BACHELORS DEGREE, VOCATIONAL TECHNICAL, SKIP TO H16.

### ***Children in Kindergarten through Fifth Grade***

[IF H2=3 “CHILD IS ON SUMMER VACATION” OR H3=15 READ:] When answering these questions, please think of how [CHILD] was doing in school last year.

H14. Based on school and teacher reports, how well would you say [CHILD] is doing in reading: Would you say:

1. Not well at all
2. Below average
3. About average
4. Well
5. Very well
7. REFUSED
8. DON'T KNOW

H15. Based on school and teacher reports, how well would you say [CHILD] is doing in math:

1. Not well at all
2. Below average
3. About average
4. Well
5. Very well
7. REFUSED
8. DON'T KNOW

**Ask H16-21 if the child is 18 or under AND the child has been in school in the past year.**

### ***All ages***

H16. Has [CHILD] repeated any grades in school?

1. YES
2. NO

7. REFUSED
8. DON'T KNOW

H17. How many days in the last month was [CHILD] absent from school for any reason? [CAPI: IF H2=3 "ON SUMMER VACATION" OR H3=15] In the last month that [CHILD] was enrolled in school, how many days was [CHILD] absent from school for any reason? INTERVIEWER IF VOLUNTEERED: CHILD WAS NOT ABSENT, CODE "ZERO DAYS"].

1. 5 or more days
2. 3 or 4 days
3. 1 or 2 days
4. Zero days
7. REFUSED
8. DON'T KNOW

H18. How many days in the last month was your child late for school? [CAPI: IF H2=3 "ON SUMMER VACATION" OR H3=15] In the last month that [CHILD] was enrolled in school, how many days was [CHILD] late for school? [IF VOLUNTEERED: CHILD WAS NEVER LATE, CODE "ZERO DAYS"].

1. 5 or more days
2. 3 or 4 days
3. 1 or 2 days
4. Zero days
7. REFUSED
8. DON'T KNOW

H19. Since the beginning of this school year, how many times have any of [CHILD]'s teachers or his or her school contacted you or any adult in your household about any behavior problems he or she is having in school? [CAPI: IF H2=3 "ON SUMMER VACATION" OR H3=15] In the school year [CHILD] was last in school, how many times did any of [CHILD]'s teachers or [his or her] school contact you or any adult in your household about any behavior problems [he or she] was having in school?

1. Never
2. Once or twice
3. Three or more times
7. REFUSED
8. DON'T KNOW

H20. Since the beginning of this school year, how many times have any of [CHILD]'s teachers or his or her school contacted you or any adult in your household about any problems he or she is having with school work? [CAPI: IF H2=3 "ON SUMMER VACATION" OR H3=15] In the school year [CHILD] was last in school, how many times did any of [CHILD]'s teachers or his or her school contact you or any adult in your household about any behavior problems he or she was having with school work?

1. Never
2. Once or twice
3. Three or more times
7. REFUSED
8. DON'T KNOW

H21. In the current school year, has [CHILD] been suspended or expelled from school? [CAPI: IF H2=3 "ON SUMMER VACATION" OR H3=15:] In the school year [CHILD] was last in school, was your child suspended or expelled from school?

1. YES
2. NO
7. REFUSED
8. DON'T KNOW

**IF H3 OR H3a=5TH GRADE OR BELOW, SKIP TO SECTION I**

*Children in Sixth through Twelfth Grade, Associates Degree, Bachelor's Degree, Vocational*

**Ask H22 if the child is 18 or under AND the child has been in school in the past year AND the child is in 6<sup>th</sup> grade or above.**

H22. Overall, what grades did [CHILD] receive in the last full year of school completed?

- |   |               |
|---|---------------|
| 1. Mostly A's   | [SKIP TO H25] |
| 2. Mostly A's and B's   | [SKIP TO H25] |
| 3. Mostly B's   | [SKIP TO H25] |
| 4. B's and C's  | [SKIP TO H25] |
| 5. Mostly C's   | [SKIP TO H25] |
| 6. C's and D's  | [SKIP TO H25] |
| 7. Mostly D's   | [SKIP TO H25] |
| 8. Mostly below D   | [SKIP TO H25] |
| 9. VOL: NOT APPLICABLE, SCHOOL DOES NOT GIVE OUT LETTER GRADES [CONTINUE] |               |
| 97. REFUSED   | [SKIP TO H25] |
| 98. DON'T KNOW  | [SKIP TO H25] |

**Ask H22a if the child is 18 or under AND the child has been in school in the past year AND the child is 6<sup>th</sup> grade or above AND they are in an ungraded school (H22=9).**

**[IF DOES NOT HAVE GRADES (H22= 9)]**

H22a. Is [CHILD]...

1. One of the best students in his/her class
2. Above the middle in his/her class
3. In the middle of his/her class
4. Below the middle of his/her class
5. Near the bottom of the class
6. Does not attend school at all
7. REFUSED
8. DON'T KNOW

**Ask H23a-H25c if the child is 18 or under AND the child has been in school in the past year AND the child is 9<sup>th</sup> grade or above.**

**IF H3 OR H3a= 8TH GRADE OR BELOW, SKIP TO SECTION I**

H23. Has [CHILD] taken any of the following tests as part of college preparation:

- a. Advanced Placement, also known as AP ("A-P"), tests as part of an AP course?
  1. YES
  2. NO
  7. REFUSED
  8. DON'T KNOW
- b. PSAT ("P-S-A-T") test?
  1. YES
  2. NO
  7. REFUSED
  8. DON'T KNOW
- c. SAT ("S-A-T") or ACT ("A-C-T") test?
  1. YES
  2. NO
  7. REFUSED
  8. DON'T KNOW

**Ask H24 if the child is age 14-17**

H24. Last month, did [CHILD] do any work for pay?

- YES.....  1
- NO .....  2
- REFUSED.....  7
- DON'T KNOW.....  8

**Transition to Adulthood**

**Read the following text and ask H25-H25d if the child is 18 or older.**

IF CHILD AGE=18+ CONTINUE:

The next set of questions are about [CHILD] and his/her experiences now that he/she is a young adult including things like starting their own household, college or vocational training and employment..

H25.Has [CHILD] enrolled in any college or vocational training course after high school?

- YES.....  1
- NO .....  2
- REFUSED.....  7
- DON'T KNOW.....  8

H26.Has [CHILD] ever been married or lived with a romantic partner?

- YES.....  1
- NO .....  2
- REFUSED.....  7
- DON'T KNOW.....  8

H27.Does [CHILD] have any biological children of his/her own?

- YES.....  1
- NO .....  2
- REFUSED.....  7
- DON'T KNOW.....  8

H28.Is [CHILD] the primary caregiver for any other children (such as a romantic partner's children or siblings)?

- YES.....  1
- NO .....  2
- REFUSED.....  7
- DON'T KNOW.....  8

H29. Last month, did[CHILD] do any work for pay?

- YES.....  1
- NO .....  2 [SKIP TO I1]
- REFUSED.....  7 [SKIP TO I1]
- DON'T KNOW.....  8 [SKIP TO I1]

**Ask H29e if the child is 18 or older AND they have worked for pay in the last month (H29=Yes).**

H29a. During the last month, how many hours did [CHILD] usually work each week?

\_\_\_\_\_ HOURS

- REFUSED.....  2
- DON'T KNOW.....  1

**I. CONTACT INFORMATION**

**Read the following text and ask I1-I3 of everyone.**

Before we complete this portion of the interview, I would also like to make sure I have your contact information recorded correctly. You may get a call from my supervisor asking you to confirm that you participated in this interview. [IF INTERVIEW COMPLETED BY PHONE: This is where we will send your token of appreciation.]

I1. I have your name recorded as [FIRST MI LAST]. Is this still correct or have you changed your name?

1. YES, STILL CORRECT [SKIP TO I2]
2. NO, NAME CHANGED

- a. What is your first name now?
- b. What is your middle initial now?
- c. What is your last name now?

I2. I have your address recorded as [STREET, APT, CITY, STATE, ZIP]. Is this still correct or have you moved?

1. YES, STILL CORRECT [SKIP TO I3]
2. NO, MOVED

- a. What is your new street address or PO box number? \_\_\_\_\_
- b. Is there a complex or building name? \_\_\_\_\_
- c. Is there an apartment number? \_\_\_\_\_
- d. In what city? \_\_\_\_\_
- e. In what state? \_\_\_\_\_
- f. What is the zip code? \_\_\_\_\_

I3. I have your primary phone number recorded as [xxx-xxx-xxxx]. Is this still correct or do you have a new primary phone number?

1. YES, STILL CORRECT [SKIP TO CLOSING]
2. NO, CHANGED

a. What is the new number, starting with the area code?

\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

b. Is that a home, cell, work, or other number?

1. Home
2. Cell
3. Work
4. Other
- 5.

***CLOSING: Thank you very much for your time today.***