



**American Indian and
Alaska Native**

family and child experiences survey

AI/AN FACES 2019
Experiences in Head Start

American Indian and Alaska Native Head Start Family and Child Experiences Survey 2019 (AI/AN FACES 2019)

Parent Survey

Fall 2019 - Spring 2020

Welcome to the American Indian and Alaska Native Head Start Family and Child Experiences Survey (AI/AN FACES 2019) parent survey. Please refer to the instructions you received to find your login ID and password. To begin the survey, enter your login ID and password in the fields below, and then click NEXT. If you do not have your login ID and password, please call [NAME] at 1-xxx-xxx-xxxx. You can also email us at aianfaces@mathematica-mpr.com.

Login ID: _____

Password: _____

Paperwork Reduction Act Statement: This collection of information is voluntary. 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 valid OMB control number for this information collection is 0970-0151 which expires xx/xx/xxxx. The time required to complete this collection of information is estimated to average 30 minutes, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the collection of information. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: Mathematica Policy Research, 1100 1st Street, NE, 12th Floor, Washington, DC 20002, Attention: Lizabeth Malone.

SCREENER

INTRO1= CONTINUE

Intro2.

SURVEY INFORMATION

Mathematica Policy Research is conducting the American Indian and Alaska Native Head Start Family and Child Experiences Survey (AI/AN FACES) for the Administration for Children and Families (ACF). ACF is part of the U.S. Department of Health and Human Services.

We are inviting you to complete a survey about you and your child, because he or she is in a Head Start program that is taking part in AI/AN FACES. This study aims to learn more about families in Head Start and the services Head Start provides. By completing this survey, you will help Head Start serve all children and their families. The survey will take about 30 minutes to complete.

Your answers to this survey will be kept private to the extent permitted by law. No one from your child's Head Start program will see your answers. Using the login ID and password ensures that your answers will only be seen by the study team. The next page will tell you how to complete the survey.

Please click the button below to continue or close this webpage to exit.

Intro3.

How to Complete the Survey

Thank you for taking the time to complete this survey.

- There are no right or wrong answers.
- To answer a question, click the box to choose your response.
- To continue to the next webpage, click the “**Next**” button.
- To go back to the previous webpage, click the “**Back**” button. Please note that this command is only available in certain sections.
- If you need to stop before you have finished, close out of the webpage. The data you provide prior to logging out will be securely stored and available when you return to complete the survey.
- Please answer questions in the order they appear regardless of the question number. **Questions will not always be numbered sequentially**, and some may be skipped because they do not apply to you.
- For security purposes, you will be timed out of the survey if you are idle for longer than **30 minutes**.
- When you decide to continue the survey, you will need to log in again using your login ID and password.

Please click on the button below to begin the survey or close this webpage to exit.

SCREENER

PREVIOUS INTERVIEW BOX

IF FALL 2019 CONTINUE AT SC1

IF SPRING 2020 AND NO PREVIOUS INTERVIEW: CONTINUE AT SC1

IF SPRING 2020 AND PREVIOUS INTERVIEW: CONTINUE AT SC0.

SPRING 2020 AND PREVIOUS INTERVIEW COMPLETED

FILL RESPONDENT'S NAME FROM LAST SURVEY

SC0. In the fall we completed an interview with [PRE-FILL WITH NAME OF LAST RESPONDENT]. Is that you?

☐ Yes

.....1

☐ No

.....0

NO RESPONSE.....M

SOFT CHECK: IF SC0=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

ALL

FILL CHILD'S NAME FROM PRELOAD

IF SC0 = 1, FILL **still**

IF SC0 = 1, FILL **todavía**

SC1. The person most responsible for [CHILD]'s care should complete this survey. Are you [still] that person?

☐ Yes.....1 GO TO SC1a

☐ No.....0 GO TO GetNameIntro

NO RESPONSE.....M GO TO GetNameIntro

SOFT CHECK: IF SC1=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

SC1 = 1
FILL CHILD'S NAME FROM PRELOAD

SC1a. Do you live in the same household as [CHILD]?

- ☐ Yes.....1 GO TO SKIP BOX SC0d
☐ No.....0 GO TO GetNameIntro
 NO RESPONSE.....M GO TO GetNameIntro

SOFT CHECK: IF SC1a=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

SC1 OR SC1A = 0 OR M
FILL CHILD'S NAME FROM PRELOAD
IF SC1a = 0 OR M, FILL Among the people that live with [CHILD], please ELSE, FILL Please

GetNameIntro. [Among the people that live with [CHILD], please/Please] enter the name, address, and phone number of the person most responsible for [CHILD]'s care.

First Name:
 Middle Initial:
 Last Name:
 Street Address 1:
 Street Address 2:
 City:
 State:
 Zip:
 () TELEPHONE

NO RESPONSE.....M GO TO END

SOFT CHECK: IF GetNameIntro=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

PROGRAMMER NOTE
IF SC1=0, M OR SC1a = 0, M TERMINATE SURVEY AFTER
GETNAMEINTRO.

SKIP BOX SC0d
IF CHILD IS HEAD START (BASED ON PRELOAD), GO TO SC2b_2.
ELSE, GO TO SC2c_2.

CHILD IS HEAD START (BASED ON PRELOAD)
FILL CHILD'S NAME FROM PRELOAD

SC2b_2. According to our records [CHILD] is still attending Head Start. Is that correct?

- ☐ Yes.....1 GO TO INT2
- ☐ No.....0
- NO RESPONSE.....M

SOFT CHECK: IF SC2b_2=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

SMS DESIGNATION FOR CHILD = UNKNOWN OR SC2B_2 = 0 OR M

FILL CHILD'S NAME FROM PRELOAD

SC2c_2. What grade or year of school is [CHILD] attending? (Click [here](#) for more information about the grades or years below.)

- ☐ Head Start.....1 GO TO INT2
- ☐ Kindergarten.....2 END
- ☐ Transitional Kindergarten (Before Kindergarten).....3 END
- ☐ Pre-first Grade (After Kindergarten).....4 END
- ☐ First Grade.....5 END
- ☐ Un-graded or Home Schooled.....6 SC2C_2new
- ☐ Special Education.....7 END
- ☐ Nursery/Preschool/Prekindergarten.....8 END
- ☐ Something else (SPECIFY).....99
- Specify
- ☐ Not enrolled in school.....11 END
- NO RESPONSE.....M END

[PROGRAMMER: CREATE A HELP SCREEN (TO POP UP IN A SEPARATE WINDOW) WITH THE FOLLOWING DEFINITIONS:]

Nursery/preschool/pre-kindergarten: Programs that offer classes prior to kindergarten, primarily serving 3 and 4 year-old children. These may be offered by public and private organizations.

Transitional (or readiness) kindergarten: Extra year of school for kindergarten-age eligible children who are judged not ready for kindergarten.

Kindergarten: Traditional year of school primarily for 5-year-olds prior to first grade.

Pre-first (transitional first) grade (after k): Extra year of school for children who have attended kindergarten but have been judged not ready for first grade.

Un-graded: A classroom containing kindergarten-aged students (possibly in combination with other ages), not formally identified as a "kindergarten" class.

SOFT CHECK: IF SC2c_2=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

SC2C_2 = 99

SC2c_2Specify. Please enter the grade your child is in.

GRADE

(RANGE NUMBER RANGE)

NO RESPONSE.....M

SOFT CHECK: IF SC2c_2Specify=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

SC2C_2=6

FILL CHILD'S NAME FROM PRELOAD

IF CHILD'S PRELOADED SEX = M, FILL **he**;
IF CHILD'S PRELOADED SEX = F, FILL **she**;
IF NO PREVIOUS INTERVIEW, FILL **he or she**

SC2C_2new. What grade would [CHILD] be in if [he/she/he or she] were attending a school with regular grades?

- ☐ Head Start.....1 GO TO INT2
- ☐ Nursery/Preschool/Prekindergarten
.....
8
.....
SC2c_2Exit
- ☐ Kindergarten.....2 SC2c_2Exit
- ☐ Transitional Kindergarten (Before Kindergarten).....3 SC2c_2Exit
- ☐ Pre-first Grade (After Kindergarten).....4 SC2c_2Exit
- ☐ First Grade.....5 SC2c_2Exit
- ☐ Special Education.....7 SC2c_2Exit
- NO RESPONSE.....M END

SOFT CHECK: IF SC2c_2New=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

(SC2C_2 = 2-9 OR M) OR (SC2C_2NEW = 2-9 OR M)

SC2c_2Exit : Right now we are only looking at children attending Head Start. We do not have any more questions for you now, but thank you for your time.

SC2B_2=1 OR SC2C_2=1 OR SC2C_2NEW=1
IF PREVIOUS INTERVIEW WITH THIS RESPONDENT, FILL As you may remember, the ELSE, FILL The
IF CHILD'S PRELOADED SEX = M, FILL him ; IF CHILD'S PRELOADED SEX = F, FILL her ; IF NO PREVIOUS INTERVIEW, FILL him or her

INT2. Thank you for completing this survey. [As you may remember, the/The] purpose of this study is to learn more about families in the Head Start Program. [(IF SPRING 2020 AND NO PREVIOUS INTERVIEW) When we spoke to parents from [CHILD]'s Head Start program last fall we were unable to interview you.]

We also want to learn more about the program [CHILD] attends. This will help us understand Head Start from a parent's point of view, including some information about your child's home environment. Information from this study will be used to help Head Start better serve all children and their families.

In this survey we'll want to learn more about the activities you do with your child, including the language you speak with [him/her] regularly. We will use the term Native to refer to American Indian or Alaska Native culture or language.

Your answers to the survey questions are private to the extent permitted by law. Neither your name nor [CHILD]'s name will be attached to any of the information you give us. All of the study results will be reported for groups of parents; no results will be analyzed or reported for individuals. If you are uncomfortable answering any questions, you may skip them and move on to the next question.

Your participation is completely voluntary. If you choose not to complete this survey, it will not affect you or your child's participation in the Head Start Program or any of the services that you or your child receives. Your answers are very important, so please be as accurate as possible. Occasionally, you may be asked a question that does not apply to you or that you may not want to answer. If that happens, you can move on to the next question.

IF FALL 2019: GO TO MODE-1 IF SPRING 2020: GO TO C2

SPRING 2020
FILL CHILD'S NAME FROM PRELOAD.
FILL PROGRAM/CENTER NAME FROM PRELOAD.
FILL PROGRAM/CENTER CITY AND STATE FROM PRELOAD.
IF CHILD'S PRELOADED SEX = M, FILL he ; IF CHILD'S PRELOADED SEX = F, FILL she ; IF NO PREVIOUS INTERVIEW, FILL he or she

C2. Is [CHILD] still enrolled in [PROGRAM/CENTER NAME] in [CITY AND STATE] or has [he/she/he or she] stopped going to that program?

- ☐ Yes, [CHILD] is still going to same program.....1 GO TO MODE-1
- ☐ No, [CHILD] stopped going to that Head Start program.....0 GO TO C9B

HARD CHECK: IF C2=NO RESPONSE; You must answer this question to continue with the rest of the survey.

C2 = 2
FILL CHILD'S NAME FROM PRELOAD.
FILL PROGRAM/CENTER NAME FROM PRELOAD.

C9b. When did [CHILD] stop going to [PROGRAM]?

/ /
 MONTH DAY YEAR

SOFT CHECK: IF C9b=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

BOX C17

TERMINATE THE INTERVIEW (GO TO C17_exit) IF C2=2

C2 = 2
FILL CHILD'S NAME FROM PRELOAD;

C17_exit. This spring we are only looking at children attending the Head Start program [CHILD] attended as of [MONTH AND YEAR OF LAST INTERVIEW]. I do not have any more questions for you now, but thank you for your time.

NO RESPONSE.....M

ALL

MODE-1. After completing this online survey you will receive a gift card to thank you for your help. This survey will take about 30 minutes.

ALL

SC3_intro. We would like to make sure we have your name recorded correctly.

BOX SC3a

IF PRELOADED NAME NE EMPTY, GO TO SC3. PRELOAD RESPONDENT FIRST NAME, MIDDLE NAME/INITIAL, LAST NAME FROM DATABASE.
ELSE, IF PRELOADED NAME = EMPTY, GO TO SC3a.

PRELOADED NAME NE EMPTY

FILL RESPONDENT FIRST NAME, MIDDLE NAME/INITIAL, LAST NAME FROM PRELOAD

SC3. Is the correct spelling of your name below?

[DISPLAY PRELOADED FIRST NAME, MIDDLE NAME/INITIAL, LAST NAME]

- ☐ Yes, my name is spelled correctly.....1 GO TO SC7
- ☐ This is my name, but it is misspelled.....2
- ☐ No, this is not my name.....3
- NO RESPONSE.....M

SOFT CHECK: IF SC3=NO RESPONSE; **Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.**

SC3 = 2, 3, M OR PRELOADED NAME = EMPTY

SC3a. Please enter the correct spelling of your name.

First Name:

Middle Initial:

Last Name:

NO RESPONSE.....M

HARD CHECK: IF SC3a=NO RESPONSE; **You must answer this question to continue with the rest of the survey.**

SC3 = 3, M

SC3b. What is your telephone number?

PROGRAMMER: INSERT PHONE MASK

- ☐ Do not have a telephone number.....1
NO RESPONSE.....M

SC3 = 3, M

SC3c. What is your email address?

EMAIL

(STRING 50)

- ☐ Do not have email.....0
NO RESPONSE.....M

FALL 2019 OR NO PREVIOUS INTERVIEW OR BIRTH DATE IS MISSING

SC7. What is your birth date?

MM/DD/YYYY

(RANGE DATE RANGE)

NO RESPONSE.....M

SOFT CHECK: IF SC7=NO RESPONSE; **Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.**

PREVIOUS INTERVIEW WITH THIS RESPONDENT AND BIRTH DATE NE M

FILL RESPONDENT'S DOB FROM PREVIOUS INTERVIEW

SC7a. Now, we would like to confirm your birth date. Is your birth date [MM/DD/YYYY]?

- ☐ Yes
.....
1
- ☐ No
.....
2

SC7A = 2

SC7b. What is your birth date? Please enter it below.

|_|_|/|_|_|/|_|_|_|_|
MONTH DAY YEAR

(RANGE 1923-1998)

FALL 2019 OR NO PREVIOUS INTERVIEW

FILL CHILD'S NAME FROM SAMPLE FILE

SC8. Now, we would like to make sure we have the correct spelling of your child's name. Is the information below correct?

First Name: [FILL]

Middle Name/Initial: [FILL]

Last Name: [FILL]

☐ Yes.....1 GO TO SC9

☐ No.....0

NO RESPONSE.....M

SOFT CHECK: IF SC8=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

SC8 = 2

SC8a. What is the correct spelling of your child's name? Please enter it below.

First Name:

Middle Initial:

Last Name:

NO RESPONSE.....M

FALL 2019 OR NO PREVIOUS INTERVIEW OR SC9 NOT COLLECTED IN PREVIOUS ROUND

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

SC9. What is your relationship to [CHILD]? (Click [here](#) for definitions of response options.)

- ☐ Biological mother..... 11
- ☐ Biological father..... 12
- ☐ Adoptive mother..... 13
- ☐ Adoptive father..... 14
- ☐ Stepmother..... 15
- ☐ Stepfather..... 16
- ☐ Grandmother..... 17
- ☐ Grandfather..... 18
- ☐ Great grandmother..... 19
- ☐ Great grandfather..... 20
- ☐ Sister/stepsister..... 21
- ☐ Brother/stepbrother..... 22
- ☐ Other relative or in-law (female)..... 23
- ☐ Other relative or in-law (male)..... 24
- ☐ Foster parent (female)..... 25
- ☐ Foster parent (male)..... 26
- ☐ Other non-relative (female)..... 27
- ☐ Other non-relative (male)..... 28
- ☐ Parent's partner (female)..... 29
- ☐ Parent's partner (male)..... 30
- ☐ NO RESPONSE..... M

[PROGRAMMER: MAKE TEXT AVAILABLE ON HELP SCREEN THAT OPENS IN SEPARATE WINDOW:]

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

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

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

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

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

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

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

Foster Parent (Male): The male with whom the child is placed temporarily, usually through a

social service agency and/or a court.

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

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

SOFT CHECK: IF SC9=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

SC9 = 23, 24, 27, OR 28

SC9_1. How are you related to [CHILD]?

(CLICK [HERE](#) FOR DEFINITIONS OF RESPONSE OPTIONS.)

Select one only

- ☐ Girlfriend or female partner of [CHILD]'s parent/guardian.....1
- ☐ Boyfriend or male partner of [CHILD]'s parent/guardian.....2
- ☐ Female guardian.....3
- ☐ Male guardian.....4
- ☐ Daughter/Son of [CHILD]'s parent's partner.....5
- ☐ Other relative of [CHILD]'s parent's partner.....6
- ☐ NO RESPONSE.....M

[PROGRAMMER: HELP SCREEN SHOULD OPEN IN A SECOND WINDOW.]

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

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

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

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

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

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

SOFT CHECK: IF SC9_1=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW AND SC9 = 12, 16-30, M AND SC9A NOT ANSWERED IN PREVIOUS INTERVIEW

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

SC9a. What is the first name of [CHILD]'s biological mother?

FIRST NAME

(STRING 50)

NO RESPONSE.....M

SOFT CHECK: IF SC9a=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW AND SC9 = 11, 15-30, M AND SC9B NOT ANSWERED IN PREVIOUS INTERVIEW

FILL CHILD'S NAME FROM SC8A;
IF SC8A IS EMPTY, FILL FROM PRELOAD

SC9b. What is the first name of [CHILD]'s biological father?

FIRST NAME

(STRING 50)

NO RESPONSE.....M

SOFT CHECK: IF SC9b=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW AND SC9 = 17-30, M

FILL CHILD'S NAME FROM SC8A;
IF SC8A IS EMPTY, FILL FROM PRELOAD

SC10. Are you [CHILD]'s legal guardian?

☐ Yes.....1 GO TO VERSION BOX A

☐ No.....0

NO RESPONSE.....M

SOFT CHECK: IF SC10=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

SC10 = 0 OR M

FILL CHILD'S NAME FROM SC8A;
IF SC8A IS EMPTY, FILL FROM PRELOAD

SC11. Please enter the name, address, and phone number of [CHILD]'s legal guardian.

First Name:

Middle Initial:

Last Name:

Street Address 1:

Street Address 2:

City:

State:

Zip:

()

TELEPHONE

NO RESPONSE.....M

SOFT CHECK: IF SC11=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

A. ABOUT YOUR CHILD

PROGRAMMER VERSION BOX A

ASK A1-A11 THE FIRST TIME THE FAMILY IS INTERVIEWED (FALL 2019 OR NO PREVIOUS INTERVIEW). IF PREVIOUS INTERVIEW, CHECK MISSING FLAGS:

IF SEX IS MISSING, ASK A1, THEN GO TO B1.

IF BIRTH DATE IS MISSING OR CONFLICTS, ASK A2, THEN GO TO B1.

IF SEX IS MISSING AND BIRTH DATE IS MISSING OR CONFLICTS, ASK A1 AND A2, THEN GO TO B1.

FALL 2019 OR NO PREVIOUS INTERVIEW OR SEX = M

FILL CHILD'S NAME FROM SC8a;

IF SC8a IS EMPTY, FILL FROM PRELOAD

A1. Is [CHILD] a boy or a girl?

☐ Girl..... 1

☐ Boy..... 2

NO RESPONSE..... M

SOFT CHECK: IF A1=NO RESPONSE; **Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.**

FALL 2019 OR NO PREVIOUS INTERVIEW OR IF BIRTHDAY = MISSING

FILL CHILD'S NAME FROM SC8a;

IF SC8a IS EMPTY, FILL FROM PRELOAD

A2. What is [CHILD]'s birth date?

BIRTH DATE

MM/DD/YYYY

NO RESPONSE..... M

SOFT CHECK: IF A2=NO RESPONSE; **Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.**

FALL 2019 OR NO PREVIOUS INTERVIEW

FILL CHILD'S NAME FROM SC8a;

IF SC8a IS EMPTY, FILL FROM PRELOAD

A3. Is [CHILD] of Spanish, Hispanic, or Latino origin?

☐ Yes..... 1

☐ No..... 0

NO RESPONSE..... M

SOFT CHECK: IF A3=NO RESPONSE; **Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.**

FALL 2019 OR NO PREVIOUS INTERVIEW

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

A5. What is [CHILD]'s race? Select one or more.

Select one or more

- ☐ White..... 11
- ☐ Black or African American..... 12
- ☐ American Indian or Alaska Native..... 13
- ☐ Asian..... 27
- ☐ Native Hawaiian, or other Pacific Islander..... 26
- ☐ Another race (SPECIFY)..... 25

Please specify other race.

NO RESPONSE..... M

SOFT CHECK: IF A5=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

A8. Did [CHILD] participate in Early Head Start?

Early Head Start is a program designed to provide services to enhance development of children from birth to three years of age.

- ☐ Yes..... 1
- ☐ No..... 0

NO RESPONSE..... M

SOFT CHECK: IF A8=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

B. ABOUT HOUSEHOLD

FALL 2019 AND SPRING 2020

ALL

NOTE: BE SURE THAT THE RESPONDENT IS INCLUDED IN THE LIST OF HOUSEHOLD MEMBERS.

NOTE: CONFIRM LIST OF HOUSEHOLD MEMBERS AND THEIR RELATIONSHIPS TO [CHILD] WITH RESPONDENT.

NOTE: IF ANY CHANGE IS NEEDED TO THE HOUSEHOLD MEMBERS OR THEIR RELATIONSHIPS TO [CHILD], PRESS 0 TO ENTER THE HH ROSTER.

NOTE: CORRECT RELATIONSHIP CODES OR ADD OR DELETE HH MEMBERS ON THE NEXT SCREENS.

B3. Please list the first names of all the other people who normally live in your household. Please do not include anyone staying there temporarily who usually lives somewhere else.

B3.
FIRST NAME

a. _____

b. _____

c. _____

d. _____

e. _____

f. _____

g. _____

h. _____

i. _____

j. _____

k. _____

SOFT EDIT: IF NAME MATCHES RESPONDENT, CONFIRM WHO IS BEING DISCUSSED.

[SOFT B3] IF B3 NAME REPORTED MATCHES RESPONDENT'S NAME FROM SAMPLE: **This name is the same as yours. Please do not include yourself in the list.**

ALL
FILL NAME FROM B3
FILL CHILD'S NAME FROM SC8a; IF SC8a IS EMPTY, FILL FROM PRELOAD

{PROGRAMMER NOTE: IN HOUSEHOLD GRID, COLUMN NAME FOR B4 IS "AGE"}

B4. Please list the ages and relationships to [CHILD] of all the other people who normally live in your household. Please do not include anyone staying there temporarily who usually lives somewhere else.

If a child is less than one year old, please enter "0" for the age.

AGE

NO RESPONSE.....M

SOFT CHECK: IF B4=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

PROGRAMMER BOX B4a

IF B4 = CHILD, FILL CHILD'S NAME FROM SC8 (PRELOADED), CALCULATE AND FILL AGE FROM A2 IF FIRST TIME CHILD IS RECORDED IN HH GRID OR SHOW (PRELOADED)

IF B4 = RESPONDENT, CALCULATE AND FILL AGE FROM SC7 IF FIRST TIME RESPONDENT IS RECORDED IN HH GRID OR SHOW (PRELOADED)
IF RESPONDENT ALREADY IN GRID, FILL RELATIONSHIP FROM SC9

SEE BOX

B4 GT OR = 18

FILL NAME FROM B3

FILL CHILD'S NAME FROM SC8a;

IF SC8a IS EMPTY, FILL FROM PRELOAD

{PROGRAMMER NOTE: IN HOUSEHOLD GRID, COLUMN NAME FOR B5 IS "RELATIONSHIP"}

B5. What is [NAME]'s relationship to [CHILD]? (Click [here](#) for definitions of response options.)

Select one only

- ☐ Biological or adoptive mother.....1
- ☐ Biological or adoptive father.....2
- ☐ Stepmother.....3
- ☐ Stepfather.....4
- ☐ Grandmother.....5
- ☐ Grandfather.....6
- ☐ Great grandmother.....7
- ☐ Great grandfather.....8
- ☐ Sister/stepsister.....9
- ☐ Brother/stepbrother.....10
- ☐ Other relative or in-law (female).....11
- ☐ Other relative or in-law (male).....12
- ☐ Foster parent (female).....13
- ☐ Foster parent (male).....14
- ☐ Other non-relative (female).....15
- ☐ Other non-relative (male).....16
- ☐ Parent's partner (female).....17
- ☐ Parent's partner (male).....18
- ☐ NO RESPONSE.....M

PROGRAMMER: MAKE TEXT AVAILABLE ON HELP SCREEN THAT OPENS IN SEPARATE WINDOW:

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

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

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

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

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

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

Foster Parent (Female): The female with whom the child is placed temporarily, usually

through a social service agency and/or a court.

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

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

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

SOFT CHECK: IF B5=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

B5 = 1

FILL NAME FROM B3

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

B5a1. [Are you/Is [NAME]] [CHILD]'s ...

(CLICK [HERE](#) FOR DEFINITIONS OF BIOLOGICAL OR BIRTH MOTHER AND ADOPTIVE MOTHER.)

PROGRAMMER: HELP SCREEN SHOULD POP UP IN A SEPARATE WINDOW.

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

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

- ☐ Biological or birth mother or.....1
- ☐ Adoptive mother?.....2
- NO RESPONSE.....M

SOFT CHECK: IF B5a1=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

B5 = 2
FILL NAME FROM B3
FILL CHILD'S NAME FROM SC8a; IF SC8a IS EMPTY, FILL FROM PRELOAD

B5a2. [Are you/Is [NAME]] [CHILD]'s ...

(Click [here](#) for definitions of biological or birth father and adoptive father.)

PROGRAMMER: HELP SCREEN SHOULD POP UP IN A SEPARATE WINDOW.

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

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

- ☐ Biological or birth father or
.....
1
- ☐ Adoptive father?
.....
2
- NO RESPONSE.....M

SOFT CHECK: IF B5a2=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

B5 = 15 or 16
FILL EACH NAME FROM B3
FILL CHILD'S NAME FROM SC8a; IF SC8a IS EMPTY, FILL FROM PRELOAD

B5a3. How is [NAME FROM B3] related to [CHILD]?

(Click [here](#) for more information about the relationships listed below.)

PROGRAMMER: HELP SCREEN SHOULD OPEN IN A SECOND WINDOW.

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

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

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

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

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

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

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

Select one only

- ☐ Girlfriend or female partner of [CHILD]'s parent/guardian
.....
1
- ☐ Boyfriend or male partner of [CHILD]'s parent/guardian
.....
2
- ☐ Female guardian
.....
3
- ☐ Male guardian
.....
4
- ☐ Daughter/Son of [CHILD]'s parent's partner
.....
5
- ☐ Other relative of [CHILD]'s parent's partner
.....
6
- NO RESPONSE.....M

PROGRAMMER BOX B8

ONLY ASK RELATIONSHIP (B5) IF B4 IS 18 OR OLDER. DO NOT ASK
RESPONDENT TO SPECIFY RELATIONSHIPS FOR CHILDREN UNDER 18

B3. FIRST NAME	B4. AGE	B4b. PARTNER/SPOUSE STATUS	B5. RELATIONSHIP
a. _____			
b. _____			
c. _____			
d. _____			
e. _____			
f. _____			
g. _____			
h. _____			
i. _____			
j. _____			
k. _____			

SEE BOX

MoreHH. Is there anyone else in your household? Have we missed anyone who usually lives here who is temporarily away from home for work or military duty or living in a dorm at school, or any babies or small children?

- ☐ Yes.....1 GO TO B3
- ☐ No
-0
- NO RESPONSE.....M

PROGRAMMER NOTE: IF THE RESPONDENT REPORTS THERE IS SOMEONE ELSE IN THE HOUSEHOLD (MoreHH=YES/1), OPEN ITEM B3 AT THE NEXT AVAILABLE ROW TO RECORD INFORMATION ABOUT HOUSEHOLD MEMBER.

[PROGRAMMER NOTE: NEED TO COMPARE NAMES IN B3a-k TO PRELOADED NAME IF SC3=1, TO NAME REPORTED IN SC3a IF SC3=2, AND IN BOTH CASES TO ANY ALTERNATIVE NAME REPORTED IN SC6. NameCheck SHOULD BE ASKED IF B3a-k IS NOT EQUAL TO ANY OF THESE RESPONSES.]

HOUSEHOLD MEMBERS OTHER THAN RESPONDENT AND FOCAL CHILD ARE LISTED

B8a. Do you have a spouse or partner who lives in this household?

- ☐ Yes..... 1
- ☐ No..... 0
- NO RESPONSE..... M

B4a = 1

B8b Who in the household is your spouse or partner?

NOTE: ENTER NUMBER NEXT TO NAME OF PERSON WHO IS [RESPONDENT]'S SPOUSE/PARTNER.

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

IF FALL 2019 OR NO PREVIOUS INTERVIEW AND
IF PRE-LOADED RELATIONSHIP TO CHILD IS ONE OF THESE: BIO/ADOPTIVE MOTHER,
BIO/ADOPTIVE FATHER, STEP-MOTHER/FATHER OR IF SC9=11, 12, 13, 14, 15, 16 AND B5A-K
CONTAINS ANY OTHER HH MEMBER WITH RELATIONSHIP 01, 02, 03, 04

FILL FATHER/MOTHER/YOUR SIGNIFICANT OTHER NAME WITH NAME OF OTHER PARENT IN
HOUSEHOLD FROM B3

B9. Are you and [FATHER/MOTHER/YOUR SIGNIFICANT OTHER NAME]...

Select one only

- ☐ married,
.....
1
.....
- ☐ in a registered domestic partnership or civil union,
.....
5
.....
- ☐ divorced
.....
2
.....
- ☐ separated,
.....
3
.....
- ☐ not married, or
.....
4
.....
- ☐ living with a partner in a committed relationship?
.....
6
.....
- NO RESPONSE..... M

SOFT CHECK: IF B9=NO RESPONSE; **Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.**

B9 = 2, 3, 4, M

FILL FATHER/MOTHER/YOUR SIGNIFICANT OTHER NAME WITH NAME OF OTHER PARENT IN HOUSEHOLD FROM B3

B10. Which of the following statements best describes your current relationship with [(FATHER/MOTHER/YOUR SIGNIFICANT OTHER) NAME]? Would you say...

Select one only

- ☐ we are romantically involved on a steady basis,
.....
1
- ☐ we are involved in an on-again and off-again relationship,
.....
2
- ☐ we are just friends, or
.....
3
- ☐ we are not in any kind of relationship?
.....
4
- NO RESPONSE.....M

SOFT CHECK: IF B10=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

D. ACTIVITIES WITH YOUR CHILD

ALL

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

- D1. The next questions are about you and [CHILD] at home.
- How many times have you or someone in your family read to [CHILD] in the past week?
- Note: By family, we mean the people living together in your household.
- Would you say...
- ☐ not at all,
.....
1
 - ☐ once or twice,
.....
2
 - ☐ three or more times, but not every day, or
.....
3
 - ☐ every day?
.....
4
 - NO RESPONSE.....M

SOFT CHECK: IF D1=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

ALL
FILL CHILD'S NAME FROM SC8a; IF SC8a IS EMPTY, FILL FROM PRELOAD
IF PRELOADED SEX = FEMALE OR A1 = 1, FILL her IF PRELOADED SEX = MALE OR A1 = 2, FILL him ELSE, FILL him or her

D3. In the past week, have you or someone in your family done the following things with [CHILD]?

The following activities can be done in your Native language or in English. By Native language we mean an American Indian or Alaska Native language.

	<i>Select one per row</i>	
	Yes	No
a. Told [him/her/him or her] a story?	1 ☐	0 ☐
b. Taught [him/her/him or her] letters, words, or numbers?	1 ☐	0 ☐
c. Taught [him/her/him or her] songs or music, including traditional or ceremonial songs?	1 ☐	0 ☐
d. Worked on arts and crafts (such as painting or jewelry making) with [him/her/him or her]?	1 ☐	0 ☐
e. Played with toys or games indoors?	1 ☐	0 ☐
f. Danced, played a game, sport, or exercised together?	1 ☐	0 ☐
g. Took [him/her/him or her] along while doing errands like going to the post office, store, Tribal Center or office, doctor, or to check on elderly family members?	1 ☐	0 ☐
h. Involved [him/her/him or her] in household chores like cooking, cleaning or picking up after him/herself, setting the table, caring for animals such as pets or livestock, or helping with planting or chopping wood?	1 ☐	0 ☐
i. Talked about what happened in Head Start?	1 ☐	0 ☐
j. Talked about TV programs or videos?	1 ☐	0 ☐
k. Played counting games like singing songs with numbers or reading books with numbers with [him/her/him or her]?	1 ☐	0 ☐
l. Played a board game or a card game with [him/her/him or her]?	1 ☐	0 ☐
m. Played with blocks with [him/her/him or her]?	1 ☐	0 ☐
n. Counted different things with [him/her/him or her], like twigs, stones, grapes, or stars?	1 ☐	0 ☐

SOFT CHECK: IF ANY D3a-n=NO RESPONSE; You may have missed a question or two on this page. Please review your answers below and provide the missing responses.
To continue to the next question, click the continue button and then "Next" to proceed to the next question.

D3A = 1 TOLD STORIES IN PAST WEEK

FILL CHILD'S NAME FROM SC8A;
IF SC8A IS EMPTY, FILL FROM PRELOAD

**D3a1. How many times have you or someone in your family told stories to [CHILD] in the past week?
Would you say...**

- ☐ once or twice,
.....
2
- ☐ three or more times, but not every day, or
.....
3
- ☐ every day?
.....
4
- NO RESPONSE.....M

PROGRAMMER VERSION BOX D1

IF FALL 2019 OR NO PREVIOUS INTERVIEW WITH THIS RESPONDENT CONTINUE,
ELSE GO TO SECTION E.

FALL 2019 OR NO PREVIOUS INTERVIEW

FILL CHILD'S NAME FROM SC8A;
IF SC8A IS EMPTY, FILL FROM PRELOAD

**D5. About how many children's books does [CHILD] have in your home now, including library books?
Please only include books that are for children. (Your best estimate is fine.)**

NUMBER
(RANGE 0-300)

NO RESPONSE.....M

**SOFT CHECK: IF D5=NO RESPONSE; Please provide an answer to this question and continue. To
continue to the next question without providing a response, click the continue button.**

FALL 2019 OR NO PREVIOUS INTERVIEW

FILL CHILD'S NAME FROM SC8A;
IF SC8A IS EMPTY, FILL FROM PRELOAD

D5b. In the past 12 months, has [CHILD] done the following with someone in your community (outside of your family)?

	Select one per row		
	Yes	No	Not appropriate for this age
a. Listened to Elders tell stories?	1 ☐	0 ☐	2 ☐
b. Participated in traditional ways, including carving, harvesting, collecting, hunting, and fishing?	1 ☐	0 ☐	2 ☐
c. Danced, sang, or drummed at a pow-wow or other community cultural activity?	1 ☐	0 ☐	2 ☐
d. Worked on traditional arts and crafts, such as beading, blanket weaving, or making jewelry, a basket, a painting, or pow-wow regalia?	1 ☐	0 ☐	2 ☐
e. Participated in traditional ceremonies?	1 ☐	0 ☐	2 ☐
f. Played American Indian or Alaska Native games?	1 ☐	0 ☐	2 ☐
g. Other cultural activities? (SPECIFY)			

SOFT CHECK: IF ANY D5b_a-g=NO RESPONSE; You may have missed a question or two on this page. Please review your answers below and provide the missing responses.
To continue to the next question, click the continue button and then "Next" to proceed to the next question.

FALL 2019 OR NO PREVIOUS INTERVIEW

D6a. Is English spoken in your home?

☐ Yes

.....
1
.....

☐ No.....0

NO RESPONSE.....M

SOFT CHECK: IF D6a=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW

D7. Is any language other than English spoken in your home? This includes a American Indian or Alaska Native language that may be spoken in your home.

☐ Yes

.....
1
.....

☐ No.....0 GO TO D10a

NO RESPONSE.....M GO TO D10a

SOFT CHECK: IF D7=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW

D8. What other languages are spoken in your home?

Select all that apply

☐ Your Native language (SPECIFY)

.....
33
.....

Specify

☐ Other Native language(s) (SPECIFY)

.....
34
.....

Specify

☐ French

.....
11
.....

☐ Spanish

.....
12
.....

☐ Another language (SPECIFY)

.....
21
.....

Specify

NO RESPONSE.....M

SOFT CHECK: IF D8=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

D7 = 1

D10. What language do you usually speak to [CHILD] at home?

Select one only

☐ English

.....
25

- ☐ Your Native language
.....
33
- ☐ Other Native language(s)
.....
34
- ☐ French
.....
11
- ☐ Spanish
.....
12
- ☐ Another language (SPECIFY)
.....
21
- Specify
- NO RESPONSE.....M

SOFT CHECK: IF D10=NO RESPONSE; **Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.**

FALL 2019 OR NO PREVIOUS INTERVIEW

IF MORE THAN 1 CHILD IN HOUSEHOLD, FILL **children; children were**
IF JUST FOCAL CHILD IN HOUSEHOLD, FILL **child; child was**

D10a. Please indicate how often you did each of the things below in the past month. By Native language we mean an American Indian or Alaska Native language.

SELECT ONE PER ROW

	VERY OFTEN	OFTEN	SOME- TIMES	RARELY	NEVER
a. I spoke our Native language with my [child/children].	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
b. I made sure my [child/children] heard our Native language spoken by others.	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
c. I encouraged my [child/children] to learn our Native language (for example, take classes in school).	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
d. I used our Native language in prayers or songs with my [child/children].	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
e. I used our Native language in everyday life with my [child/children].	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
f. I spoke our Native language with other adults when my [child was/children were] around.	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐

SOFT CHECK: IF ANY D10a_a-f=NO RESPONSE; You may have missed a question or two on this page. Please review your answers below and provide the missing responses.
To continue to the next question, click the continue button and then "Next" to proceed to the next question.

FALL 2019 OR NO PREVIOUS INTERVIEW

IF MORE THAN 1 CHILD IN HOUSEHOLD, FILL **children learn**
IF JUST FOCAL CHILD IN HOUSEHOLD, FILL **child learns**

D10a1. How important is it for you that your [child learns/children learn] your Native language?

Select one only

- ☐ Very important
.....
1
- ☐ Somewhat important
.....
2
- ☐ Not at all important
.....
3
- NO RESPONSE
.....
M

FALL 2019 OR NO PREVIOUS INTERVIEW

D10b. What languages are spoken at your child's Head Start center?

Select all that apply

☐ English

.....
25

☐ Your Native language

.....
33

☐ Other Native language(s)

.....
34

☐ French

.....
11

☐ Spanish

.....
12

☐ Another language (SPECIFY)

.....
21

Specify

NO RESPONSE.....M

D7 = 1 AND D10 = 11-21, 30, 31, 32, M

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

IF PRELOADED SEX = FEMALE OR A1 = 1, FILL **her**
IF PRELOADED SEX = MALE OR A1 = 2, FILL **him**
ELSE, FILL **him or her**

FILL RESPONSE SELECTED AT D8

D19. How often is there someone in [CHILD]'s Head Start classroom available to talk to [him/her/him or her] in [FILL FROM D8]? Would you say it is...

Select one only

☐ always,

.....
1

☐ sometimes, or

.....
2

☐ never?

.....
3

NO RESPONSE.....M

E. CHILD'S ACTIVITIES

SPRING 2020 ONLY

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

The next questions are about some of [CHILD]'s activities.

- E4.** We are interested in how much time [CHILD] spends doing activities. About how much time does [CHILD] spend doing each of the activities below on a typical weekday? Would you say more than 2 hours, 1 to 2 hours, less than one hour, or [he/she/he or she] never spends time on that on a typical weekday?

Select one per row

	More than two hours	One to two hours	Less than one hour	Never
a. Watching programs on TV	1 ☐	2 ☐	3 ☐	0 ☐
b. Watching a video or DVD on the TV or computer/laptop/iPad/tablet	1 ☐	2 ☐	3 ☐	0 ☐
e. Playing video games like X-Box, PlayStation, Wii or GameBoy	1 ☐	2 ☐	3 ☐	0 ☐
g. Using a computer/laptop, Smartphone, iPad, or other tablet for playing games	1 ☐	2 ☐	3 ☐	0 ☐
h. Using a computer/laptop, Smartphone, iPad, or other tablet for something other than videos or games	1 ☐	2 ☐	3 ☐	0 ☐

H. HOUSEHOLD ROUTINES

FALL 2019 OR NO PREVIOUS INTERVIEW

H1. The next questions are about routines in your household.

In a typical week, about how many days does at least some of the family eat the evening meal together with [CHILD]?

If it changes each week, please think about a typical week.

NUMBER

(RANGE 0-7)

NO RESPONSE.....M

SOFT CHECK: IF H1=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW

FILL CHILD'S NAME FROM SC8a;

IF SC8a IS EMPTY, FILL FROM PRELOAD

H8. When is [CHILD]'s regular bedtime?

We are interested in what time [he/she/he or she] usually goes to bed, not what time [he/she/he or she] actually falls asleep.

If your child's bedtime is after midnight, please enter 11:59PM.

HH:MM ○ AM ○ PM

(HR RANGE1 -12) (MIN RANGE 0-59)

○ [CHILD] does not have a usual bedtime.....98 GO TO H10

NO RESPONSE.....M

SOFT CHECK: IF H8=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

SOFT CHECK: IF H8=98 AND TIME ALSO ENTERED; You entered a time and also selected that your child does not have a usual bedtime. Please either enter a time or select that your child does not have a usual bedtime to continue.

H8 NE 98

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

H9. How many times in the last week, Monday through Friday, was [CHILD] put to bed at that time?

NUMBER

(RANGE 0-5)

NO RESPONSE.....M

SOFT CHECK: IF H9=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

IF PRELOADED SEX = FEMALE OR A1 = 1, FILL **she**
IF PRELOADED SEX = MALE OR A1 = 2, FILL **he**
ELSE, FILL **he or she**

H10. About what time does [CHILD] usually wake up on a weekday?

We are interested in what time [he/she/he or she] wakes up on an average weekday,

HH:MM ○ AM ○ PM

(HR RANGE1-12) (MIN RANGE 0-59)

○ [CHILD] does not wake up at a usual time.....98

NO RESPONSE.....M

SOFT CHECK: IF H10=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

SOFT CHECK: IF H10=98 AND TIME ALSO ENTERED; You entered a time and also selected that your child does not wake up at a usual. Please either enter a time or select that your child does not wake up at a usual time to continue.

J. ABOUT CHILD'S MOTHER

PROGRAMMER VERSION BOX J2

IF BIOLOGICAL OR ADOPTIVE MOTHER IN HOUSEHOLD {B5a-k = 1},
AND RESPONDENT IS BIOLOGICAL OR ADOPTIVE MOTHER (SC9 = 11
OR 13) AND FALL 2019, OR NO PREVIOUS INTERVIEW, GO TO BOX
J9, ELSE GO TO BOX J16a

IF BIOLOGICAL OR ADOPTIVE MOTHER IN HOUSEHOLD {B5a-k = 1},
AND RESPONDENT IS NOT BIOLOGICAL OR ADOPTIVE MOTHER
(SC9 = 12, 14...30) AND FALL 2019, OR NO PREVIOUS INTERVIEW, GO
TO J8, ELSE GO TO BOX J16a

FALL 2019 OR NO PREVIOUS INTERVIEW: IF [CHILD]'s MOTHER NOT
IN HOUSEHOLD AND {B5a_k =2_18,M}, ASK J1

SPRING 2020: IF MOTHER LEFT HOUSEHOLD SINCE LAST
INTERVIEW OR CHILD IN DIFFERENT HOUSEHOLD, ASK J1

IF BIOLOGICAL OR ADOPTIVE MOTHER IS NOT IN HOUSEHOLD, AND
WAS NOT IN HOUSEHOLD AT PREVIOUS INTERVIEW, GO TO
VERSION BOX J3

IF ANY PREVIOUS INTERVIEW AND CONDITIONS ABOVE ARE
NOT MET, GO TO BOX J14a.

The next questions are about (you/[CHILD]'s mother).

SEE BOX; B5a – k NE 1
FILL CHILD'S NAME FROM SC8a; IF SC8a IS EMPTY, FILL FROM PRELOAD IF B5a-k = 2-18, M
IF PRELOADED SEX = FEMALE OR A1 = 1, FILL her; Her; she; She IF PRELOADED SEX = MALE OR A1 = 2, FILL his; him; Him; he; He ELSE, FILL his or her; him or her; His or her; his or her

J1. There are many reasons for children not living with their parents. Please select why [CHILD] is not living with [her/his/his or her] mother.

Select all that apply

- ☐ [Her/His/His or her] mother is deceased
.....
11
- ☐ [Her/His/His or her] mother did not have enough money to raise [her/him/him or her]
.....
12
- ☐ [Her/His/His or her] mother got too sick to take care of [her/him/him or her]
.....
13
- ☐ [Her/His/His or her] mother had a drinking problem and could not take care of [her/him/him or her]
.....
14
- ☐ [Her/His/His or her] mother had a drug problem and could not take care of [her/him/him or her]
.....
15
- ☐ [Her/His/His or her] mother is in a residential treatment program for substance abuse and could not bring [her/him/him or her]
.....
24
- ☐ [Her/His/His or her] mother had a mental or emotional problem and could not take care of [her/him/him or her].
.....
16
- ☐ [Her/His/His or her] mother was in trouble with the law or had to go to jail
.....
17
- ☐ [She/He/He or she] was neglected or abused while living with [her/his/his or her] mother.
.....
18
- ☐ Someone at the child welfare office said [she/he/he or she] could not live with (his/her) mother any more.

-
19
- ☐ [Her/His/His or her] family is homeless.
.....
25
- ☐ [Her/His/His or her] parents are divorced/separated
.....
22
- ☐ Mother and [CHILD] are currently living together
.....
26
- ☐ Something else (SPECIFY)
.....
21
- Specify
- NO RESPONSE.....M

SOFT CHECK: IF J1=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

B5a-k = 2-18, M AND J1 = 12-25, M

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

J7a. Is there anyone else who is like a mother to [CHILD]?

- ☐ Yes.....1
- ☐ No.....0 GO TO BOX J3
- NO RESPONSE.....M GO TO BOX J3

B5a-k = 2-18, M AND J1 = 12-25, M

J7a = 1

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

J7b. Who is this person? Is she . . .

Select one only

- ☐ you,
.....
1
.....
- ☐ your spouse or partner,
.....
2
.....
- ☐ a relative of [CHILD],
.....
3
.....
- ☐ a friend of the family,
.....
4
.....
- ☐ or someone else (SPECIFY)?
.....
5
.....

Specify (STRING (NUM))

NO RESPONSE.....M

VERSION BOX J3
IF FIRST INTERVIEW, GO TO J8
IF ANY PREVIOUS INTERVIEW AND J1 ≠ 11, SKIP TO J15,
ELSE GO TO BOX J16a

IF SC9 OR RESPONDENT FLAG =12, 14...30
IF J1=11, FILL We are sorry to learn about [CHILD]'s mother passing.
IF J1=11, FILL her; IF J1 NE 11, FILL [CHILD]'s mother
FILL CHILD'S NAME FROM SC8a; IF SC8a IS EMPTY, FILL FROM PRELOAD
IF J1=11, FILL was; IF J1 NE 11, FILL is

J8. [We are sorry to learn about [CHILD]'s mother passing.] The next few questions are about [her/[CHILD]'s mother].

What (is/was) her birth date?

MM/DD/YYYY

(RANGE 1923-1998)

NO RESPONSE.....M

SOFT CHECK: IF J8=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW
IF SC9=11, FILL Are you IF J1=11, FILL Was she IF SC9 NE 11 AND J1 NE 11, FILL Is she

J10. [Are you/Is she/Was she] of Spanish, Hispanic, or Latino origin?

☐ Yes.....1

☐ No.....0 GO TO J12

NO RESPONSE.....M GO TO J12

SOFT CHECK: IF J10=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW
IF J1=11, FILL was ELSE, FILL is
IF SC9=11, FILL your ELSE, FILL her

J12. What [is/was] [your/her] race? Select one or more.

Select one or more

- ☐ White..... 11
- ☐ Black or African American..... 12
- ☐ American Indian or Alaska Native..... 13
- ☐ Asian..... 27
- ☐ Native Hawaiian, or other Pacific Islander..... 26
- ☐ Another race (SPECIFY)..... 25

Specify

NO RESPONSE..... M

SOFT CHECK: IF J12=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

PROGRAMMER SKIP BOX J13a
IF RESPONDENT IS BIRTH OR ADOPTIVE MOTHER [SC9 = 11, 13],
CONTINUE.
IF NOT BIRTH MOTHER AND BIRTH MOTHER IS ALIVE, [SC9 = 11, 13,
15 - 30, M AND J1 = 12-25, M] CONTINUE.
IF SOMEONE ELSE AND BIRTH MOTHER IS DECEASED, [J1 = 11],
GO TO SECTION L.

PROGRAMMER SKIP BOX J14a
IF SC9 NE 11 (NOT BIOLOGICAL MOTHER) AND SC9 NE 12 (NOT
BIOLOGICAL FATHER) AND J1 NE 11 (MOTHER NOT DECEASED),
CONTINUE.
OTHERWISE, GO TO BOX J16A

SEE BOX
FALL 2019 OR NO PREVIOUS INTERVIEW AND
(IF SC9 OR RESPONDENT FLAG = 13-30, M) (R IS NOT BIO PARENT)

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

J15. The next questions are about [CHILD]'s biological parents.

Are they...

Select one only

- ☐ married,.....1 GO TO J17
- ☐ in a registered domestic partnership or civil union,.....5 GO TO J17
- ☐ divorced,
.....
2
- ☐ separated,
.....
3
- ☐ not married, or
.....
4
- ☐ living with a partner in a committed relationship?
.....
6
- NO RESPONSE.....M

SOFT CHECK: IF J15=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

J15 = 2, 3, 4, M

J16. Which of the following statements best describes their current relationship?

Select one only

- ☐ They are romantically involved on a steady basis,
.....
1
- ☐ They are involved in an on-again and off-again relationship,
.....
2
- ☐ They are just friends, or
.....
3
- ☐ They are not in any kind of relationship
.....
4
- NO RESPONSE.....M

SOFT CHECK: IF J16=NO RESPONSE; Please provide an answer to this question and continue. To

continue to the next question without providing a response, click the continue button.

PROGRAMMER SKIP BOX J16a

IF THE RESPONDENT IS [CHILD]'s MOTHER {SC9 = 11,13}, FILL 'you'.

IF SOMEONE ELSE {SC9 = 12, 14-30} AND MOTHER IS LIVING IN
HOUSEHOLD {B5a-k = 1}, FILL [CHILD]'s mother.

IF MOTHER IS NOT LIVING IN HOUSEHOLD {B5a-k = 2-18,M}, GO TO
VERSION BOX J33

FALL 2019 OR NO PREVIOUS INTERVIEW AND B5a-k = 1
IF SC9=11 OR 13, FILL you ELSE, FILL [CHILD]'s mother
IF SC9=11 OR 13, FILL I am ELSE, FILL [CHILD]'s mother is
FILL CHILD'S NAME FROM SC8a; IF SC8a IS EMPTY, FILL FROM PRELOAD

J17. During the past week, did [you/[CHILD]'s mother] work at a job for pay or income, including self employment (that is, the past 7 days)?

Select one only

- ☐ Yes.....1 GO TO J21
- ☐ No, [I am/[CHILD]'s mother is] retired.....2 GO TO J24
- ☐ No, [I am/[CHILD]'s mother is] disabled and unable to work.....3 GO TO J24
- ☐ No (for reason other than retirement or disability)
.....
0
- NO RESPONSE.....M GO TO J24

SOFT CHECK: IF J17=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

B5a-k = 1 AND J17=0
IF SC9=11 OR 13, FILL Were you ELSE, FILL Was she

J18. [Were you/Was she] on leave or vacation from a job for the past week (that is, the past 7 days)?

- ☐ Yes
.....
1
- ☐ No
.....
0
- NO RESPONSE.....M

SOFT CHECK: IF J18=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

B5a-k = 1 AND J17=0
IF SC9=11 OR 13, FILL Have you ELSE, FILL Has she

J19. [Have you/Has she] actively been looking for work in the past four weeks?

- ☐ Yes

.....
1
☐ No
.....
0
NO RESPONSE.....M

SOFT CHECK: IF J19=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

B5a-k = 1 AND J17=0
IF SC9=11 OR 13, FILL you ELSE, FILL [CHILD]'s mother
FILL CHILD'S NAME FROM SC8a; IF SC8a IS EMPTY, FILL FROM PRELOAD
IF NO PREVIOUS INTERVIEW, FILL in the last 12 months ELSE, FILL since [MONTH AND YEAR OF LAST INTERVIEW]

J20. Did [you/[CHILD]'s mother] work at a job for pay or income, including self-employment, [in the last 12 months/since [MONTH AND YEAR OF LAST INTERVIEW]]?

☐ Yes

1

☐ No.....0 GO TO J24

NO RESPONSE.....M GO TO J24

SOFT CHECK: IF J20=NO RESPONSE; **Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.**

B5a-k = 1 AND (J17=1 OR J20=1)
IF SC9=11 OR 13 AND J17=1, FILL do you IF SC9=11 OR 13 AND J17 NE 1, FILL did you IF SC9 NE 11 OR 13 AND J17=1, FILL does she IF SC9 NE 11 OR 13 AND J17 NE 1, FILL did she
IF SC9=11 OR 13 AND J17=1, FILL do you IF SC9=11 OR 13 AND J17 NE 1, FILL did you IF SC9 NE 11 OR 13 AND J17=1, FILL does she IF SC9 NE 11 OR 13 AND J17 NE 1, FILL did she

J21. About how many total hours per week [do you/did you/does she/did she] usually work for pay or income, counting all jobs? If hours vary, please enter the average hours per week.

(Your best estimate is fine.)

HOURS

NO RESPONSE.....M

SOFT CHECK: IF J21=NO RESPONSE; **Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.**

FALL 2019 OR NO PREVIOUS INTERVIEW AND
B5a-k = 1

IF SC9=11 OR 13, FILL **you**
ELSE, FILL **she**

J24. What is the highest grade or year of school that [you/she] completed?

Select one only

- ☐ 8th grade or lower
.....
1
- ☐ 9th to 11th grade
.....
2
- ☐ 12th grade but no diploma
.....
3
- ☐ High school diploma or equivalent
.....
4
- ☐ Vocational/technical program after high school but no vocational/technical diploma
.....
5
- ☐ Vocational/technical diploma after high school
.....
6
- ☐ Some college but no degree
.....
7
- ☐ Associate's degree
.....
8
- ☐ Bachelor's degree
.....
9
- ☐ Graduate or professional school but no degree
.....
10
- ☐ Master's degree (MA, MS)
.....
11
- ☐ Doctorate degree (Ph.D, EdD)
.....
12
- ☐ Professional degree after bachelor's degree (medicine/MD; dentistry/DDS; law/JD/LLB; etc.)
.....
13
- NO RESPONSE..... M

SOFT CHECK: IF J24=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW AND
B5a-k = 1

IF SC9=11 OR 13, FILL **Are you**
ELSE, FILL **Is she**

J26. [Are you/Is she] now attending or enrolled in any courses, classes, or workshops for work-related reasons or personal interest? Some examples include college or university degree or certificate programs, computer courses, job training courses, basic reading or math classes, family literacy classes or GED preparation classes?

☐ Yes

.....
1
.....

☐ No

.....
0
.....

NO RESPONSE.....M

SOFT CHECK: IF J26=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

B5a-k = 1 AND J26 = 1

IF SC9=11 OR 13, FILL **Are you**
ELSE, FILL **Is she**

J27. (Are you/Is she) currently taking courses full-time or part-time?

Select one only

☐ Full-time

.....
1
.....

☐ Part-time

.....
2
.....

☐ Not currently taking

.....
0
.....

NO RESPONSE.....M

SOFT CHECK: IF J27=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

B5a-k = 1 AND J26 = 0, M

IF SC9=11 OR 13, FILL **Are you**
ELSE, FILL **Is she**

J28. (Are you/Is she) currently participating in a job-training or on-the-job-training program?

☐ Yes

.....
1
.....

☐ No

.....
0
.....

NO RESPONSE.....M

SOFT CHECK: IF J28=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

ALL SPRING 2020

B5a-k = 1

IF SC9=11 OR 13, FILL **Have you**
ELSE, FILL **Has she**

IF NO PREVIOUS INTERVIEW, FILL in the last 12 months
ELSE, FILL since [MONTH AND YEAR OF LAST INTERVIEW]

J29. [Have you/Has she] received a certificate, diploma, or degree [in the last 12 months/since
[MONTH AND YEAR OF LAST INTERVIEW]?

☐ Yes

.....
1
.....

☐ No

.....
0
.....

NO RESPONSE.....M

ALL SPRING 2020

B5a-k = 1 AND J29 = 1

IF SC9=11 OR 13, FILL **did you**
ELSE, FILL **did she**

J30. What kind of certificate, diploma, or degree [did you/did she] receive?

Select one only

- ☐ Trade license or certificate
.....
1
- ☐ GED certificate or equivalent
.....
2
- ☐ High School diploma
.....
3
- ☐ Associate's degree
.....
4
- ☐ Child Development Associate (CDA)
.....
5
- ☐ Bachelor's degree
.....
6
- ☐ Graduate degree
.....
7
- ☐ Credential for Family Service Worker
.....
9
- ☐ Other (SPECIFY)
.....
8

Specify

NO RESPONSE.....M

J33 BOX

IF FALL 2019 OR NO PREVIOUS INTERVIEW AND
IF CHILD'S BIOLOGICAL MOTHER DOES NOT LIVE IN THE HOUSEHOLD AND MOTHER
NOT DECEASED (J DNE 11), GO TO J33.
ELSE GO TO SECTION K.

FALL 2019 OR NO PREVIOUS INTERVIEW AND
B5a-k NE 1

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

IF PRELOADED SEX = FEMALE OR A1 = 1, FILL **her**
IF PRELOADED SEX = MALE OR A1 = 2, FILL **him**
ELSE, FILL **him or her**

J33. The next questions are about how far away [CHILD]'s mother lives and the amount of contact she has with [him/her/him or her].

How many minutes away does [CHILD]'s mother live from [him/her/him or her]?

Select one only

☐ 10 minutes or less

.....
1
.....

☐ 11 to 30 minutes

.....
2
.....

☐ 31 to 59 minutes

.....
3
.....

☐ 1 to 2 hours

.....
4
.....

☐ More than 2 hours

.....
5
.....

NO RESPONSE.....M

SOFT CHECK: IF J33=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW AND
B5A-K NE 1

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

J35. How long has it been since she last saw [CHILD]?

If she saw [CHILD] today, enter 1 Day.

Enter number:

NUM

(RANGE 0-100)

- Days
1
- Weeks
4
- Months
2
- Years
3
- Mother has never seen [CHILD].....0
- NO RESPONSE.....M

J35 BOX

IF FALL 2019 OR NO PREVIOUS INTERVIEW AND
IF LENGTH OF TIME SINCE BIOLOGICAL MOTHER SAW CHILD IS LESS THAN OR EQUAL
TO 3 MONTHS/90 DAYS/12 WEEKS, GO TO J36.
ELSE IF LENGTH OF TIME SINCE BIOLOGICAL MOTHER SAW CHILD IS GREATER THAN 3
MONTHS/90 DAYS/12 WEEKS, GO TO J36 BOX.
ELSE IF J35 = M, GO TO J39.

FALL 2019 OR NO PREVIOUS INTERVIEW AND
IF J35 ≤ 3 MONTHS

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

IF PRELOADED SEX = FEMALE OR A1 = 1, FILL **her**
IF PRELOADED SEX = MALE OR A1 = 2, FILL **him**
ELSE, FILL **him or her**

TIME FRAME MONTH: Current date minus 3 months/90 days

J36. In the last 3 months, that is since [TIME FRAME MONTH], on how many days has [CHILD]'s mother seen [him/her]?

Your best guess is fine.

NUMBER OF DAYS

(RANGE 0-100)

NO RESPONSE.....M

SOFT CHECK: IF J36=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

J36 BOX

IF FALL 2019 OR NO PREVIOUS INTERVIEW AND
IF LENGTH OF TIME SINCE BIOLOGICAL MOTHER SAW CHILD IS GREATER THAN ONE
MONTH/30 DAYS/4 WEEKS OR ANY NUMBER OF YEARS ENTERED, GO TO J37. ELSE, GO TO
J39.

FALL 2019 OR NO PREVIOUS INTERVIEW AND
IF J35 > 1 MONTH/30 DAYS/4 WEEKS OR ANY NUMBER OF YEARS ENTERED

FILL CHILD'S NAME FROM SC8A;
IF SC8A IS EMPTY, FILL FROM PRELOAD

FILL **MORE RECENTLY** IF J35 DNE 0.

J37. Why hasn't she seen [CHILD] [more recently]? Is it because...

Select one only

- ☐ You do not want her to see [CHILD],.....1 GO TO J43
- ☐ She does not want to see [CHILD], or.....2 GO TO J43
- ☐ She has been unable to see [CHILD]?.....3
- NO RESPONSE.....M

SOFT CHECK: IF J37=NO RESPONSE; **Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.**

J37 = 3

FILL CHILD'S NAME FROM SC8A;
IF SC8A IS EMPTY, FILL FROM PRELOAD

J38. Why has she been unable to see [CHILD]? Is it because....

Select one only

- ☐ She lives too far away,
.....
1
.....
- ☐ She is sick or disabled,
.....
2
.....
- ☐ She is in the military,
.....
3
.....
- ☐ She is in jail or prison, or
.....
4
.....
- ☐ Some other reason? (SPECIFY)
.....
99
.....

Specify (STRING 50)

NO RESPONSE.....M

SOFT CHECK: IF J38=NO RESPONSE; **Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.**

FALL 2019 OR NO PREVIOUS INTERVIEW AND
IF J35 = M

FILL CHILD'S NAME FROM SC8A;
IF SC8A IS EMPTY, FILL FROM PRELOAD

J39. In the last 3 months, how often have you been in touch with [CHILD]'s mother, either by phone, letter, or other means? Is it...

Select one only

☐ Every day or almost every day,

1

☐ Several times a week,

2

☐ About once a week,

3

☐ Two or three times a month,

4

☐ About once a month, or

5

☐ Less often?

6

NO RESPONSE.....M

SOFT CHECK: IF J39=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW AND
IF B5A-K NE 1

FILL CHILD'S NAME FROM SC8A;
IF SC8A IS EMPTY, FILL FROM PRELOAD

J43. Mothers who do not live with their children sometimes help out with them in other ways. Please indicate whether [CHILD]'s mother has done these things often, sometimes, or never. How often has she done any of the following for [CHILD]?

PROGRAMMER: DISPLAY AS GRID AND CODE ONE PER ROW

Select one per row

Often	Sometimes	Never
-------	-----------	-------

a. Bought clothes, toys, or presents for [CHILD]?

1 ☐

2 ☐

3 ☐

	Often	Sometimes	Never
b. Paid for [CHILD]'s medical insurance, doctor bills, or medicines?	1 ☐	2 ☐	3 ☐
c. Helped pay for [CHILD]'s child care expenses?	1 ☐	2 ☐	3 ☐
d. Given you extra money to help out, not including child support?	1 ☐	2 ☐	3 ☐

SOFT CHECK: IF ANY J43 a-d=NO RESPONSE; You may have missed a question or two on this page. Please review your answers below and provide the missing responses.

To continue to the next question, click the continue button and then "Next" to proceed to the next question.

FALL 2019 OR NO PREVIOUS INTERVIEW AND
IF B5A-K NE 1

FILL CHILD'S NAME FROM SC8A;
IF SC8A IS EMPTY, FILL FROM PRELOAD

J44. Thinking about child support, do you have a legal agreement, an informal agreement, or no arrangement at all with [CHILD]'s mother?

Select one only

- ☐ Legal.....1
☐ Informal.....2
☐ No arrangement.....3
NO RESPONSE.....M

SOFT CHECK: IF J44=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW AND
IF B5A-K NE 1

J45. Do you receive child support from the mother on a regular basis?

- ☐ Yes
.....
1
.....
☐ No
.....
0
.....
NO RESPONSE.....M

FALL 2019 OR NO PREVIOUS INTERVIEW AND
IF B5A-K NE 1

J46. Do you receive financial support from the mother's family?

- ☐ Yes
.....
1
.....
☐ No
.....
0
.....
NO RESPONSE.....M

SOFT CHECK: IF J46=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

K. ABOUT CHILD'S FATHER

PROGRAMMER VERSION BOX K1

IF BIOLOGICAL OR ADOPTIVE FATHER IN HOUSEHOLD (B5a-k = 2),
AND RESPONDENT IS BIOLOGICAL OR ADOPTIVE FATHER (SC9 = 12
OR 14) AND FALL 2019 OR NO PREVIOUS INTERVIEW, GO TO BOX K9,
ELSE GO TO BOX K16a

IF BIOLOGICAL OR ADOPTIVE FATHER IN HOUSEHOLD (B5a-k = 2),
AND RESPONDENT IS NOT BIOLOGICAL OR ADOPTIVE FATHER (SC9
= 11, 13, 15...30)) AND FALL 2019 OR NO PREVIOUS INTERVIEW, GO
TO K8, ELSE GO TO BOX K16A

FALL 2019 OR NO PREVIOUS INTERVIEW: IF [CHILD]'s BIRTH OR
ADOPTIVE FATHER NOT IN HOUSEHOLD {B5A-K = 1,3-18,M}, ASK K1.

SPRING 2020: IF FATHER LEFT HOUSEHOLD SINCE LAST INTERVIEW
OR CHILD LEFT HOUSEHOLD, ASK K1

SPRING 2020: IF BIOLOGICAL OR ADOPTIVE FATHER NOT IN
HOUSEHOLD AND WAS NOT IN HOUSEHOLD AT PREVIOUS
INTERVIEW, GO TO VERSION BOX K2

SPRING 2020: IF BIOLOGICAL OR ADOPTIVE FATHER NOT IN
HOUSEHOLD AND WAS IN HOUSEHOLD AT PREVIOUS INTERVIEW
GO TO K1

IF ANY PREVIOUS INTERVIEW AND 'NEEDFATHERDOB=1', GO TO K8

IF ANY PREVIOUS INTERVIEW AND CONDITIONS ABOVE ARE NOT
MET, GO TO BOX K16a.

The next questions are about [CHILD]'s father.

SEE BOX

FALL 2019 OR NO PREVIOUS INTERVIEW AND

B5a – k = 1, 3 – 18, M

FILL CHILD'S NAME FROM SC8a;

IF SC8a IS EMPTY, FILL FROM PRELOAD

IF PRELOADED SEX = FEMALE OR A1 = 1, FILL **her; Her; she; She**

IF PRELOADED SEX = MALE OR A1 = 2, FILL **his; him; His; he; He**

ELSE, FILL **his or her; him or her; His or her; He or she; he or she**

K1. There are many reasons for children not living with their fathers. Please enter why [CHILD] is not living with [her/his/his or her] father.

Select all that apply

☐ [Her/His/His or her] father is deceased

.....
11

☐ [Her/His/His or her] father did not have enough money to raise [her/him/him or her]

.....
12

☐ [Her/His/His or her] father got too sick to take care of [her/him/him or her]

.....
13

☐ [Her/His/His or her] father had a drinking problem and could not take care of [her/him/him or her]

.....
14

☐ [Her/His/His or her] father had a drug problem and could not take care of [her/him/him or her]

.....
15

☐ [Her/His/His or her] father is in a residential treatment program for substance abuse and could not bring [her/him/him or her]

.....
24

☐ [Her/His/His or her] father had a mental or emotional problem and could not take care of [her/him/him or her]

.....
16

☐ [Her/His/His or her] father was in trouble with the law or had to go to jail

.....
17

☐ [He/She/He or she] was neglected or abused while living with [her/his/his or her] father

.....
18

☐ Someone at the child welfare office said [he/she/he or she] could not live with [his/her/his or her] father any more.

-
19
- ☐ [Her/His/His or her] family is homeless.
.....
25
- ☐ [Her/His/His or her] parents are divorced/separated
.....
22
- ☐ Father left/did not want child
.....
23
- ☐ Father and [CHILD] currently live together
.....
26
- ☐ Something else (SPECIFY)
.....
21
- Specify
- NO RESPONSE.....M

SOFT CHECK: IF K1=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

PROGRAMMER SKIP BOX K2a
ASK K7A THROUGH K7B IF FATHER NOT IN HH, ELSE GO TO
VERSION BOX K2
IF 'NeedFatherDOB'=1, GO TO K8

SEE BOX K2a AND
B5a-k = 1, 3 – 18, M AND K1 = 12-25, M

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

K7a. Is there anyone else who is like a father to [CHILD]?

☐ Yes

.....
1

☐ No

.....
0

NO RESPONSE.....M

SOFT CHECK: IF K7a=NO RESPONSE; **Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.**

SEE BOX K2a AND
B5a-k = 1, 3 – 18, M AND K1 = 12-25, M AND K7a=1

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

K7b. Who is this person? Is he...

Select one only

☐ [IF SC9 = 12, 14, 16, 18, 20, 22, 24, 26, 28, 30 (R IS MALE)] you,

.....
1

☐ your spouse or partner,

.....
2

☐ a relative of [CHILD],

.....
3

☐ a friend of the family,

.....
4

☐ or someone else (SPECIFY)?

.....
5

Specify:

NO RESPONSE.....M

SOFT CHECK: IF K7b=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

PROGRAMMER VERSION BOX K2

IF ANY PREVIOUS INTERVIEW AND 'NEEDFATHERDOB=1', GO TO K8
IF ANY PREVIOUS INTERVIEW, SKIP TO BOX K16a, ELSE CONTINUE

SEE BOX K2

SC9 OR RESPONDENT FLAG = 11, 13, 15-30, M

IF K1=11, FILL **We are sorry to learn about [CHILD]'s father passing. The next few questions are about him**

ELSE, FILL **The next questions are about [CHILD]'s father**

FILL CHILD'S NAME FROM SC8a;

IF SC8a IS EMPTY, FILL FROM PRELOAD

IF K1=11, FILL **was**

ELSE, FILL **is**

K8. [We are sorry to learn about [CHILD]'s father passing. The next few questions are about him/The next questions are about [CHILD]'s father].

What [is/ was] his birth date?

MM/DD/YYYY

NO RESPONSE.....M

SOFT CHECK: IF K8=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

PROGRAMMER SKIP BOX K9

IF PREVIOUS INTERVIEW, GO TO BOX K16A

IF THE RESPONDENT [CHILD]'s BIOLOGICAL OR ADOPTIVE FATHER [SC9 = 12,14], FILL "you".

IF SOMEONE ELSE [SC9 = 11, 13, 15-30, M], FILL "[CHILD]'s FATHER".

FALL 2019 OR NO PREVIOUS INTERVIEW

IF SC9 = 12 or 14, FILL **Are you**

ELSE, FILL **Is he/Was he**

K10. [Are you/Is he/Was he] of Spanish, Hispanic, or Latino origin?

☐ Yes.....1

☐ No.....0 GO TO K12

NO RESPONSE.....M GO TO K12

SOFT CHECK: IF K10=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW
IF K1=11, FILL was ELSE, FILL is
IF SC9=12 or 14, FILL your ELSE, FILL his

K12. What [is/was] [your/his] race? Select one or more.

Select one or more

- ☐ White..... 11
- ☐ Black or African American..... 12
- ☐ American Indian or Alaska Native..... 13
- ☐ Asian..... 27
- ☐ Native Hawaiian, or other Pacific Islander..... 26
- ☐ Another race (SPECIFY)..... 25

Specify

NO RESPONSE..... M

SOFT CHECK: IF K12=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

PROGRAMMER SKIP BOX K13a
IF RESPONDENT IS BIRTH OR ADOPTIVE FATHER [SC9 = 12, 14],
CONTINUE.
IF NOT BIRTH FATHER AND BIRTH FATHER IS ALIVE, [SC9 = 11, 13,
15 - 30, M AND K1 = 12-25, M] CONTINUE.
IF SOMEONE ELSE AND BIRTH FATHER IS DECEASED, [K1 = 11],
GO TO SECTION L.

PROGRAMMER SKIP BOX =K16a
IF FATHER IS NOT LIVING IN HOUSEHOLD [B5a-k =1, 3-18, M], GO TO
VERSION BOX K33.

SEE BOX FALL 2019 OR NO PREVIOUS INTERVIEW AND B5A-K=2
IF SC9 = 12 OR 14, FILL you; I am ELSE, FILL [CHILD]'s father; [CHILD]'s father is
FILL CHILD'S NAME FROM SC8a; IF SC8a IS EMPTY, FILL FROM PRELOAD

K17. During the past week, did [you/[CHILD]'s father] work at a job for pay or income, including self employment (that is, the past 7 days)?

Select one only

- ☐ Yes.....1 GO TO K21
- ☐ No, [I am/[CHILD]'s father is] retired.....2 GO TO K24
- ☐ No, [I am/[CHILD]'s father is] disabled and unable to work.....3 GO TO K24
- ☐ No (for reason other than retirement or disability).....0
- NO RESPONSE.....M GO TO K24

SOFT CHECK: IF K17=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW AND B5a-k = 2 AND K17=0
IF SC9 = 12 OR 14, FILL Were you ELSE, FILL Was he

K18. [Were you/Was he] on leave or vacation from a job for the past week (that is, the past 7 days)?

- ☐ Yes
.....
1
- ☐ No
.....
0
- NO RESPONSE.....M

SOFT CHECK: IF K18=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW AND
B5a-k = 2 AND K17=0

IF SC9 = 12 OR 14, FILL **Have you**
ELSE, FILL **Has he**

K19. [Have you/Has he] actively been looking for work in the past four weeks?

☐ Yes

.....
1

☐ No

.....
0

NO RESPONSE.....M

SOFT CHECK: IF K19=NO RESPONSE; **Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.**

FALL 2019 OR NO PREVIOUS INTERVIEW AND
B5a-k = 2 AND K17=0

IF SC9 = 12 OR 14, FILL **you**
ELSE, FILL [CHILD]'s father

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

IF NO PREVIOUS INTERVIEW, FILL **in the last 12 months**
ELSE, FILL **since [MONTH AND YEAR OF LAST INTERVIEW]**

K20. Did [you/[CHILD]'s father] work at a job for pay or income, including self-employment, [in the last 12 months/since [MONTH AND YEAR OF LAST INTERVIEW]]?

☐ Yes

.....
1

☐ No.....0

GO TO VERSION BOX K3

NO RESPONSE.....M

GO TO VERSION BOX K3

SOFT CHECK: IF K20=NO RESPONSE; **Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.**

FALL 2019 OR NO PREVIOUS INTERVIEW AND
B5a-k = 2 AND (K17=1 OR K20=1)

IF SC9 = 12 OR 14 AND K17 = 1, FILL **do you**
IF SC9 = 12 OR 14 AND K17 NE 1, FILL **did you**
IF SC9 NE 12 OR 14 AND K17=1, FILL **does he**
IF SC9 NE 12 OR 14 AND K17 NE 1, FILL **did he**

K21. About how many total hours per week [do you/did you/does he/did he] usually work for pay or income, counting all jobs? If hours vary, please enter the average hours per week. (Your best estimate is fine.)

HOURS

NO RESPONSE.....M

SOFT CHECK: IF K21=NO RESPONSE; **Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.**

FALL 2019 OR NO PREVIOUS INTERVIEW AND
B5a-k = 2

IF SC9 = 12 OR 14, FILL **you**
ELSE, FILL **he**

K24. What is the highest grade or year of school that [you/he] completed?

Select one only

☐ 8th grade or lower

.....
1

☐ 9th to 11th grade

.....
2

☐ 12th grade but no diploma

.....
3

☐ High school diploma/equivalent

.....
4

☐ Vocational/technical program after high school but no vocational/technical diploma

.....
5

☐ Vocational/technical diploma after high school

.....
6

☐ Some college but no degree

.....
7

☐ Associate's degree

-
8
- ☐ Bachelor's degree
.....
9
- ☐ Graduate or professional school but no degree
.....
10
- ☐ Master's degree (MA, MS)
.....
11
- ☐ Doctorate degree (Ph.D, EdD)
.....
12
- ☐ Professional degree after bachelor's degree (medicine/MD; dentistry/DDS;
law/JD/LLB; etc.)
.....
13
- NO RESPONSE.....M

SOFT CHECK: IF K24=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW AND

B5a-k = 2

IF SC9=12 or 14, FILL **Are you**

ELSE, FILL **Is he**

K26. [Are you/Is he] now attending or enrolled in any courses, classes, or workshops for work-related reasons or personal interest? Some examples include college or university degree or certificate programs, computer courses, job training courses, basic reading or math classes, family literacy classes or GED preparation classes?

☐ Yes

.....
1

☐ No

.....
0

NO RESPONSE.....M

SOFT CHECK: IF K26=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

B5a-k = 2 AND K26 = 1

IF SC9=12 or 14, FILL **Are you**

ELSE, FILL **Is he**

K27. [Are you/Is he] currently taking courses full-time or part-time?

Select one only

☐ Full-time

.....
1

☐ Part-time

.....
2

☐ Not currently taking

.....
0

NO RESPONSE.....M

SOFT CHECK: IF K27=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

B5a-k = 2 AND K26 = 0, M

IF SC9=12 or 14, FILL **Are you**

ELSE, FILL **Is he**

K28. [Are you/Is he] currently participating in a job-training or on-the-job-training program?

☐ Yes

.....
1

☐ No

.....
0

NO RESPONSE.....M

SOFT CHECK: IF K28=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.
--

ALL SPRING 2020
B5a-k = 2
IF SC9 = 12 OR 14, FILL Have you ELSE, FILL Has he
IF NO PREVIOUS INTERVIEW, FILL in the last 12 months ELSE, FILL since [MONTH AND YEAR OF LAST INTERVIEW]

K29. [Have you/Has he] received a certificate, diploma, or degree [in the last 12 months/since [MONTH OF LAST INTERVIEW]]?

- ☐ Yes
.....
1
- ☐ No
.....
0
- NO RESPONSE.....M

ALL SPRING 2020
B5a-k = 2 AND K29 = 1
IF SC9 = 12 OR 14, FILL did you ELSE, FILL did he

K30. What kind of certificate, diploma, or degree [did you/did he] receive?

Select one only

- ☐ Trade license or certificate
.....
1
- ☐ GED certificate or equivalent
.....
2
- ☐ High School diploma
.....
3
- ☐ Associate's degree
.....
4
- ☐ Child Development Associate (CDA)
.....
5
- ☐ Bachelor's degree
.....
6
- ☐ Graduate degree
.....
7

☐ Credential for Family Service Worker

.....
9

☐ Other (SPECIFY)

.....
8

Specify

NO RESPONSE.....M

K33 BOX

IF FALL 2019 OR NO PREVIOUS INTERVIEW AND
IF CHILD'S BIOLOGICAL FATHER DOES NOT LIVE IN THE HOUSEHOLD AND FATHER NOT
DECEASED (K1 DNE 11), GO TO K33.
ELSE GO TO SECTION L.

FALL 2019 OR NO PREVIOUS INTERVIEW AND
B5a-k NE 2

FILL CHILD'S NAME FROM SC8a;

IF SC8a IS EMPTY, FILL FROM PRELOAD

IF PRELOADED SEX = FEMALE OR A1 = 1, FILL **her**

IF PRELOADED SEX = MALE OR A1 = 2, FILL **him**

ELSE, FILL **him or her**

K33. The next questions are about how far away [CHILD]'s father lives and the amount of contact he has with [him/her/him or her].

How many minutes away does [CHILD]'s father live from [him/her/him or her]?

Select one only

☐ 10 minutes or less

.....
1
.....

☐ 11 to 30 minutes

.....
2
.....

☐ 31 to 59 minutes

.....
3
.....

☐ 1 to 2 hours

.....
4
.....

☐ More than 2 hours

.....
5
.....

NO RESPONSE.....M

SOFT CHECK: IF K33=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW AND
B5A-K NE 2

FILL CHILD'S NAME FROM SC8a;

IF SC8a IS EMPTY, FILL FROM PRELOAD

K35. How long has it been since he last saw [CHILD]?

If he saw [CHILD] today, enter 1 Day.

Enter number:

NUM

(RANGE 0-100)

- ☐ Days

.....

1
- ☐ Months

.....

2
- ☐ Years

.....

3
- ☐ Father has never seen [CHILD].

.....

4
- NO RESPONSE.....

M

K35 BOX

IF FALL 2019 OR NO PREVIOUS INTERVIEW AND
IF LENGTH OF TIME SINCE BIOLOGICAL FATHER SAW CHILD IS LESS THAN OR EQUAL TO 3
MONTHS/90 DAY/12 WEEKS, GO TO K36.

ELSE IF LENGTH OF TIME SINCE BIOLOGICAL FATHER SAW CHILD IS
GREATER THAN 3 MONTHS/90 DAYS/12 WEEKS, GO TO K36 BOX.

ELSE IF K35 = M, GO TO K39.

IF FALL 2019 OR NO PREVIOUS INTERVIEW AND
IF K35 $\leq$ 3 MONTHS

FILL CHILD'S NAME FROM SC8A;
IF SC8A IS EMPTY, FILL FROM PRELOAD

TIME FRAME MONTH: CURRENT DATE MINUS 3 MONTHS/90 DAYS

**K36. In the last 3 months, that is since [TIME FRAME MONTH], on how many days has [CHILD]'s father
seen [him/her]?**

Your best guess is fine.

NUMBER OF DAYS

(RANGE 0-100)

NO RESPONSE.....M

**SOFT CHECK: IF K36=NO RESPONSE; Please provide an answer to this question and continue. To
continue to the next question without providing a response, click the continue button.**

K36 BOX

FALL 2019 OR NO PREVIOUS INTERVIEW AND
IF LENGTH OF TIME SINCE BIOLOGICAL FATHER SAW CHILD IS GREATER THAN ONE MONTH/30
DAYS/4 WEEKS OR ANY NUMBER OF YEARS ENTERED, GO TO K37.

ELSE, GO TO K39.

FALL 2019 OR NO PREVIOUS INTERVIEW AND
IF K35 > 1 MONTH/30 DAYS/4 WEEKS OR ANY NUMBER OF YEARS ENTERED

FILL CHILD'S NAME FROM SC8A;
IF SC8A IS EMPTY, FILL FROM PRELOAD

FILL MORE RECENTLY IF K35 DNE 0.

K37. Why hasn't he seen [CHILD] [more recently]? Is it because...

Select one only

- ☐ You do not want him to see [CHILD],.....1 GO TO K43
- ☐ He does not want to see [CHILD], or.....2 GO TO K43
- ☐ He has been unable to see [CHILD]?.....3
- NO RESPONSE.....M

SOFT CHECK: IF K37=NO RESPONSE; **Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.**

K37 = 3

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

K38. Why has he been unable to see [CHILD]? Is it because....

Select one only

- ☐ He lives too far away,
.....
1
.....
- ☐ He is sick or disabled,
.....
2
.....
- ☐ He is in the military,
.....
3
.....
- ☐ He is in jail or prison, or
.....
4
.....
- ☐ Some other reason? (SPECIFY)
.....
99
.....

Specify (STRING 50)

NO RESPONSE.....M

SOFT CHECK: IF K38=NO RESPONSE; **Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.**

ALL 2019 OR NO PREVIOUS INTERVIEW AND
IF K35 = M

FILL CHILD'S NAME FROM SC8A;
IF SC8A IS EMPTY, FILL FROM PRELOAD

K39. In the last 3 months, how often have you been in touch with [CHILD]'s father, either by phone, letter, or other means? Is it...

Select one only

- ☐ Every day or almost every day,
.....
1
.....
- ☐ Several times a week,
.....
2
.....
- ☐ About once a week,
.....
3
.....
- ☐ Two or three times a month,
.....
4
.....
- ☐ About once a month, or
.....
5
.....
- ☐ Less often?
.....
6
.....
- NO RESPONSE.....M

SOFT CHECK: IF K39=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW AND
B5A-K NE 2

FILL CHILD'S NAME FROM SC8A;
IF SC8A IS EMPTY, FILL FROM PRELOAD

K43. Fathers who do not live with their children sometimes help out with them in other ways. Please indicate whether [CHILD]'s father has done these things often, sometimes, or never. How often has he done any of the following for [CHILD]?

PROGRAMMER: DISPLAY AS GRID AND CODE ONE PER ROW

Select one per row

	Often	Sometimes	Never
a. Bought clothes, toys, or presents for [CHILD]?	1 ☐	2 ☐	3 ☐
b. Paid for [CHILD]'s medical insurance, doctor bills, or medicines?	1 ☐	2 ☐	3 ☐
c. Helped pay for [CHILD]'s child care expenses?	1 ☐	2 ☐	3 ☐
d. Given you extra money to help out, not including child support?	1 ☐	2 ☐	3 ☐

SOFT CHECK: IF K43=NO RESPONSE; You may have missed a question or two on this page. Please review your answers below and provide the missing responses.

To continue to the next question, click the continue button and then "Next" to proceed to the next question.

FALL 2019 OR NO PREVIOUS INTERVIEW AND
B5A-K NE 2

FILL CHILD'S NAME FROM SC8A;
IF SC8A IS EMPTY, FILL FROM PRELOAD

K44. Thinking about child support, do you have a legal agreement, an informal agreement, or no arrangement at all with [CHILD]'s father?

Select one only

☐ Legal

1

☐ Informal

2

☐ No arrangement

3

NO RESPONSE.....M

SOFT CHECK: IF K44=NO RESPONSE; **Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.**

FALL 2019 OR NO PREVIOUS INTERVIEW AND
B5A-K NE 2

K45. Do you receive child support from the father on a regular basis?

☐ Yes

1

☐ No

0

NO RESPONSE.....M

SOFT CHECK: IF K45=NO RESPONSE; **Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.**

FALL 2019 OR NO PREVIOUS INTERVIEW AND
B5A-K NE 2

K46. Do you receive financial support from the father's family?

☐ Yes

1

☐ No

.....

0

NO RESPONSE.....M

SOFT CHECK: IF K46=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

L. ABOUT RESPONDENT

PROGRAMMER VERSION BOX L

IF RESPONDENT IS [CHILD]'S BIOLOGICAL OR ADOPTIVE MOTHER
OR FATHER {SC9 = 11-14}, GO TO SECTION M.

IF FALL 2019 OR NO PRIOR INTERVIEW WITH THIS RESPONDENT
AND RESPONDENT IS NOT BIOLOGICAL OR ADOPTIVE MOTHER OR
FATHER {SC9=15-30, M} CONTINUE, ELSE GO TO L17.

FALL 2019 OR NO PREVIOUS INTERVIEW

L10. Are you of Spanish, Hispanic, or Latino origin?

- ☐ Yes.....1
- ☐ No.....0 GO TO L12
- NO RESPONSE.....M GO TO L12

SOFT CHECK: IF L10=NO RESPONSE; **Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.**

FALL 2019 OR NO PREVIOUS INTERVIEW

L12. What is your race? Select one or more.

Select one or more

- ☐ White.....11 GO TO L17
- ☐ Black or African American.....12 GO TO L17
- ☐ American Indian or Alaska Native.....13
- ☐ Asian.....26 GO TO L17
- ☐ Native Hawaiian, or other Pacific Islander.....26 GO TO L17
- ☐ Another race (SPECIFY).....25 GO TO L17

Specify

NO RESPONSE.....M

SOFT CHECK: IF L12=NO RESPONSE; **Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.**

FALL 2019 OR NO PREVIOUS INTERVIEW AND
SC9 = 15-30, M

L17. During the past week, did you work at a job for pay or income, including self-employment (that is, the past 7 days)?

Select one only

- ☐ Yes.....1 GO TO L21
- ☐ No, I am retired.....2 GO TO L24
- ☐ No, I am disabled and unable to work.....3 GO TO L24
- ☐ No (for reason other than retirement or disability).....0
- NO RESPONSE.....M GO TO L24

SOFT CHECK: IF L17=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

L17 = 0

L18. Were you on leave or vacation from a job for the past week?

- ☐ Yes
.....
1
- ☐ No
.....
0
- NO RESPONSE.....M

SOFT CHECK: IF L18=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

L17 = 0

L19. Have you actively been looking for work in the past four weeks?

- ☐ Yes
.....
1
- ☐ No
.....
0
- NO RESPONSE.....M

SOFT CHECK: IF L19=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

L17 = 0

IF NO PREVIOUS INTERVIEW , FILL in the last 12 months
ELSE, FILL since [MONTH AND YEAR OF LAST INTERVIEW]

L20. Did you work at a job for pay or income, including self employment, [in the last 12 months/since [MONTH AND YEAR OF LAST INTERVIEW]]?

- ☐ Yes..... 1
☐ No..... 0 GO TO L24
NO RESPONSE..... M GO TO L24

SOFT CHECK: IF L20=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

L17 = 1 OR L20 = 1

IF L17=1, FILL do you
ELSE, FILL did you

L21. About how many total hours per week [do you/did you] usually work for pay or income, counting all jobs? If hours vary, please enter the average hours per week. (Your best estimate is fine.)

HOURS

NO RESPONSE..... M

SOFT CHECK: IF L21=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

L24. What is the highest grade or year of school that you completed?

Select one only

- ☐ 8th grade or lower
.....
1
- ☐ 9th to 11th grade
.....
2
- ☐ 12th grade but no diploma
.....
3
- ☐ High school diploma/equivalent
.....
4
- ☐ Vocational/technical program after high school but no vocational/technical diploma
.....
5
- ☐ Vocational/technical diploma after high school
.....
6
- ☐ Some college but no degree
.....
7
- ☐ Associate's degree
.....
8
- ☐ Bachelor's degree
.....
9
- ☐ Graduate or professional school but no degree
.....
10
- ☐ Master's degree (MA, MS)
.....
11
- ☐ Doctorate degree (Ph.D, EdD)
.....
12
- ☐ Professional degree after bachelor's degree (medicine/MD; dentistry/DDS; law/JD/LLB; etc.)
.....
13
- NO RESPONSE.....M

SOFT CHECK: IF L24=NO RESPONSE; Please provide an answer to this question and continue. To

continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW
IF SC9 OR RESPONDENT FLAG = 15-30, M

L26. Are you now attending or enrolled in any courses, classes, or workshops for work-related reasons or personal interest? Some examples include college or university degree or certificate programs, computer courses, job training courses, basic reading or math classes, family literacy classes or GED preparation classes?

☐ Yes

.....
1
.....

☐ No.....0 GO TO L28

NO RESPONSE.....M GO TO L28

SOFT CHECK: IF L26=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

L26 = 1

L27. Are you currently taking courses full-time or part-time?

Select one only

☐ Full-time

.....
1
.....

☐ Part-time

.....
2
.....

☐ Not currently taking

.....
3
.....

NO RESPONSE.....M

SOFT CHECK: IF L27=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW AND
SC9 = 15-30, M

L28. Are you currently participating in a job-training or on-the-job-training program?

☐ Yes

.....
1
.....

☐ No

.....
0
.....

NO RESPONSE.....M

SOFT CHECK: IF L28=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

ALL SPRING 2020

SC9 = 15-30, M

IF NO PREVIOUS INTERVIEW , FILL in the last 12 months
ELSE, FILL since [MONTH AND YEAR OF LAST INTERVIEW]

L29. Have you received a certificate, diploma, or degree [in the last 12 months/since [MONTH AND YEAR OF LAST INTERVIEW]]?

☐ Yes

.....
1
.....

☐ No

.....
0

NO RESPONSE.....M

SOFT CHECK: IF ANY M1a-h=NO RESPONSE; You may have missed a question or two on this page. Please review your answers below and provide the missing responses.

To continue to the next question, click the continue button and then "Next" to proceed to the next question.

ALL SPRING 2020

L29 = 1

L30. **What kind of certificate, diploma, or degree did you receive?**

Select one only

- ☐ Trade license or certificate
.....
1
- ☐ GED certificate or equivalent
.....
2
- ☐ High School diploma
.....
3
- ☐ Associate's degree
.....
4
- ☐ Child Development Associate (CDA)
.....
5
- ☐ Bachelor's degree
.....
6
- ☐ Graduate degree
.....
7
- ☐ Credential for Family Service Worker
.....
9
- ☐ Other (SPECIFY)
.....
8

Specify

NO RESPONSE.....M

M. INCOME AND HOUSING

ALL

M1. In the past six months, did you or anyone in your household receive any income or support from the following sources...

Select one per row

	Yes	No
a. [FILL WITH STATE WELFARE NAME] or welfare?	1 ☐	2 ☐
b. Unemployment insurance?	1 ☐	2 ☐
c. Food Stamps or SNAP benefits?	1 ☐	2 ☐
d. WIC - Special Supplemental Food Program for Women, Infants, and Children?	1 ☐	2 ☐
e. Child support?	1 ☐	2 ☐
f. SSI or Social Security Retirement, Disability, or Survivor's benefits?	1 ☐	2 ☐
g. Payments for providing foster care, guardianship subsidies, or adoption assistance?	1 ☐	2 ☐
h. Energy assistance?	1 ☐	2 ☐
i. Food assistance from a Native or tribal community source, such as commodities, tribal community food bank or the Food Distribution Program Indian Reservation (FDPIR)?	1 ☐	2 ☐

SOFT CHECK: IF ANY M1a-i=NO RESPONSE; You may have missed a question or two on this page. Please review your answers below and provide the missing responses.

To continue to the next question, click the continue button and then "Next" to proceed to the next question.

BOX M1a STATE WELFARE AGENCIES			
Alabama	FA (Family Assistance Program)	Nebraska	Employment First
Alaska	ATAP (Alaska Temporary Assistance Program)	Nevada	TANF
Arizona	EMPOWER (Employing and Moving People Off Welfare and Encouraging Responsibility)	New Hampshire	FAP (Family Assistance Program), financial aid for work exempt families NHEP (New Hampshire Employment Program), financial aid for work-mandated families
Arkansas	TEA (Transitional Employment Assistance)	New Jersey	WFNJ (Work First New Jersey)
California	CALWORKS (California Work Opportunity and Responsibility for Kids)	New Mexico	NM Works
Colorado	Colorado Works	New York	FA (Family Assistance Program), SNA (Safety Net Assistance)
Connecticut	JOBS FIRST	North Carolina	Work First
Delaware	ABC (A Better Chance)	North Dakota	TEEM (Training, Employment, Education Management)
District of Columbia	TANF	Ohio	OWF (Ohio Works First)
Florida	Welfare Transition Program	Oklahoma	TANF
Georgia	TANF	Oregon	JOBS (Job Opportunities and Basic Skills)
Hawaii	TANF	Pennsylvania	Pennsylvania TANF
Idaho	Temporary Assistance For Families in Idaho	Rhode Island	FIP (Family Independence Program)
Illinois	TANF	South Carolina	Family Independence
Indiana	TANF, cash assistance, IMPACT (Indiana Manpower Placement and Comprehensive Training, TANF work program)	South Dakota	TANF
Iowa	FIP (Family Investment Program)	Tennessee	Families First
Kansas	Kansas Works	Texas	Texas Works (Department of Human Services), cash assistance Choices (Texas Workforce Commission, TANF work program)
Kentucky	K-TAP (Kentucky Transitional Assistance Program)	Utah	FEP (Family Employment Program)
Louisiana	FITAP (Family Independence Temporary Assistance Program) cash assistance STEP (Strategies to Empower People)	Vermont	ANFC (Aid to Families with Needy Children), cash assistance Reach Up, TANF work program
Massachusetts	TAFDC (Transitional Aid to Families with Dependent Children), cash assistance ESP (Employment Services Program), TANF work program	Virginia	VIEW (Virginia Initiative for Employment, Not Welfare)
Michigan	FIP (Family Independence Program)	Washington	WorkFirst
Minnesota	MFIP (Minnesota Family Investment Program)	West Virginia	West Virginia Works
Mississippi	TANF	Wisconsin	W-2 (Wisconsin Works)
Missouri	Beyond Welfare	Wyoming	POWER (Personal Opportunities With

Montana	FAIM (Families Achieving Independence in Montana)	Employment Responsibility)
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FALL 2019 OR NO PREVIOUS INTERVIEW

M3_amt. In the last 12 months, what was the total income of all members of your household from all sources before taxes and other deductions? Please include your own income and the income of everyone living with you. Please include money from jobs and public assistance programs, as well as any other sources, such as rental income, interest, dividends, and tribal subsidies or per capita distributions.

\$X,XXX

NO RESPONSE.....M GO TO M4

SOFT CHECK: IF M_amt IS OUT OF RANGE; You entered [M3_amt]. Please update or confirm your response and continue.

HARD CHECK: IF CONDITION (e.g. LT 5); Insert Hard check statement/question

SOFT CHECK: IF M3_amt=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

M3 NE M

M3_per. Is that income per hour, per day, per week, every two weeks, for a month, or for a year?

Select one only

- ☐ Per hour.....1 GO TO M9
- ☐ Per day.....2 GO TO M9
- ☐ Per week.....3 GO TO M9
- ☐ Every two weeks.....4 GO TO M9
- ☐ Month.....5 GO TO M9
- ☐ Year.....6 GO TO M9
- ☐ Other (SPECIFY).....7 GO TO M9

Specify

NO RESPONSE.....M

SOFT CHECK: IF M3_per=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

M3_AMT= M

M4. Was it...

- ☐ \$25,000 or less, or.....1
- ☐ more than \$25,000?.....2 GO TO M6
- NO RESPONSE.....M GO TO M9

SOFT CHECK: IF M4=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

M4=1

M5. Was it...

Select one only

- ☐ \$5,000 or less,.....1 GO TO M9
- ☐ \$5,001 to \$10,000,.....2 GO TO M9
- ☐ \$10,001 to \$15,000,.....3 GO TO M9
- ☐ \$15,001 to \$20,000, or.....4 GO TO M9
- ☐ \$20,001 to \$25,000?.....5 GO TO M9
- NO RESPONSE.....M

SOFT CHECK: IF M5=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

M4=2

M6. Was it...

Select one only

- ☐ \$25,001 to \$30,000,.....6 GO TO M9
- ☐ \$30,001 to \$35,000,.....7 GO TO M9
- ☐ \$35,001 to \$40,000,.....8 GO TO M9
- ☐ \$40,001 to \$50,000,.....9 GO TO M9
- ☐ \$50,001 to \$75,000, or.....10 GO TO M9
- ☐ more than \$75,000?.....11 GO TO M9
- NO RESPONSE.....M

SOFT CHECK: IF M6=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW

M9. Do you currently own your home or apartment, pay rent, or live in public or subsidized housing?

Select one only

- ☐ Own or buying home or apartment

1

- ☐ Rent (without public assistance)

2

- ☐ Public or subsidized housing

3

- ☐ Live with someone else (whether you pay rent or not)

5

- ☐ Some other arrangement (SPECIFY)

99

Specify (STRING (NUM))

NO RESPONSE.....M

FALL 2019 OR NO PREVIOUS INTERVIEW

M9a. How often are these statements true about your housing?
Our housing is...

SELECT ONE PER ROW

	NEVER TRUE	SOMETIMES TRUE	OFTEN TRUE	ALWAYS TRUE
a. Just the right size	1 ☐	2 ☐	3 ☐	4 ☐
b. Crowded	1 ☐	2 ☐	3 ☐	4 ☐
c. Needs major repairs	1 ☐	2 ☐	3 ☐	4 ☐
d. Old and aged	1 ☐	2 ☐	3 ☐	4 ☐
e. Kept in good condition	1 ☐	2 ☐	3 ☐	4 ☐

SOFT CHECK: IF ANY M9a_a-e=NO RESPONSE; You may have missed a question or two on this page. Please review your answers below and provide the missing responses.

To continue to the next question, click the continue button and then "Next" to proceed to the next question.

FALL 2019 OR NO PREVIOUS INTERVIEW

M9c. How many separate rooms are in this house? Separate rooms are defined by built-in archways or walls that extend out at least 6 inches and go from floor to ceiling.

Number of rooms

I live in a traditional Native dwelling (for example, Hogan, Long House, or adobe house) 99

NO RESPONSE..... M

SOFT CHECK: IF M9c=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW
IF MORE THAN ONE ADULT IN HOUSEHOLD (B4a-k GT 17), FILL your household ELSE, FILL you
IF MORE THAN ONE ADULT IN HOUSEHOLD (B4a-k GT 17), FILL we; We ELSE, FILL I

M10. People do different things when they are running out of money for food to make their food or food money go further. For each statement below, tell me if it was often true, sometimes true, or never true for [you/your household]. In the last 12 months...

	SELECT ONE PER ROW		
	OFTEN TRUE	SOMETIMES TRUE	NEVER TRUE
a. The food that [I/we] bought just didn't last, and [I/we] didn't have money to get more	1 ☐	2 ☐	3 ☐
b. [I/We] couldn't afford to eat balanced meals	1 ☐	2 ☐	3 ☐

SOFT CHECK: IF ANY M10a-b=NO RESPONSE; You may have missed a question or two on this page. Please review your answers below and provide the missing responses.

To continue to the next question, click the continue button and then "Next" to proceed to the next question.

FALL 2019 OR NO PREVIOUS INTERVIEW
IF MORE THAN ONE ADULT IN HOUSEHOLD (B4a-k GT 17), FILL you or other adults in your household ELSE, FILL you

M11. In the last 12 months, did [you/you or other adults in your household] ever cut the size of your meals or skip meals because there wasn't enough money for food?

- ☐ Yes
.....
1
- ☐ No
.....
0 GO TO M13
NO RESPONSE.....M GO TO M13

SOFT CHECK: IF M11=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

M11=1

M12. How often did this happen? Would you say...

Select one only

☐ almost every month,

.....
1

☐ some months, but not every month, or

.....
2

☐ in only 1 or 2 months?

.....
3

NO RESPONSE.....M

SOFT CHECK: IF M12=NO RESPONSE; **Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.**

FALL 2019 OR NO PREVIOUS INTERVIEW

M13. In the last 12 months, did you ever eat less than you felt you should because there wasn't enough money to buy food?

☐ Yes

.....
1

☐ No

.....
0

NO RESPONSE.....M

SOFT CHECK: IF M13=NO RESPONSE; **Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.**

FALL 2019 OR NO PREVIOUS INTERVIEW

M14. In the last 12 months, were you ever hungry but didn't eat because you couldn't afford enough food?

☐ Yes

.....
1

☐ No

.....
0

NO RESPONSE.....M

SOFT CHECK: IF M14=NO RESPONSE; **Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.**

FALL 2019 OR NO PREVIOUS INTERVIEW

M15. Please think about how you feel about your family's economic situation. For each statement, indicate how much you agree or disagree.

	SELECT ONE PER ROW				
	STRONGLY AGREE	AGREE	NEUTRAL	DISAGREE	STRONGLY DISAGREE
a. My family has enough money to afford the kind of home we need.	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
b. We have enough money to afford the kind of clothing we need.	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
c. We have enough money to afford the kind of food we need.	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
d. We have enough money to afford the kind of medical care we need.	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐

SOFT CHECK: IF ANY M15a-d=NO RESPONSE; You may have missed a question or two on this page. Please review your answers below and provide the missing responses.

To continue to the next question, click the continue button and then "Next" to proceed to the next question.

FALL 2019 OR NO PREVIOUS INTERVIEW

M16. Think back over the past 12 months. How much difficulty did you have with paying your bills each month? Would you say you had. . .

Select one only

- ☐ a great deal of difficulty,
.....
1
- ☐ quite a bit of difficulty,
.....
2
- ☐ some difficulty,
.....
3
- ☐ a little difficulty or,
.....
4
- ☐ no difficulty at all?
.....
5
- NO RESPONSE..... M

SOFT CHECK: IF M16=NO RESPONSE; Please provide an answer to this question and continue. To

continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW

M17. Think again over the past 12 months. Generally, at the end of each month do you end up with...

Select one only

- ☐ not enough to make ends meet,
.....
1
- ☐ almost enough to make ends meet,
.....
2
- ☐ just enough to make ends meet,
.....
3
- ☐ some money left over, or
.....
4
- ☐ more than enough money left over?
.....
5
- NO RESPONSE.....M

SOFT CHECK: IF M17=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

Some families have a hard time paying for all of the things they need. The questions below are about some of the basic things families need. Please choose the answer that best matches your experience of being able to afford things in the past 12 months.

FALL 2019 OR NO PREVIOUS INTERVIEW

M18. In the past 12 months, has there been a time when you and your family {INSERT g}*

g. **Had the water to your home turned off because payments were not made?**
.....

YES	NO	DON'T KNOW	REFUSED
1	0	d	r

SOFT CHECK: IF M18g=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW

M19. In the past 12 months my family had trouble getting where we needed to go because...
{INSERT a-c}

	Almost every month	Some months, but not every month	Only 1 or 2 months	Never	Not applicable	DON'T KNOW	REFUSED
a. We didn't have access to a reliable vehicle.....	1	2	3	0	4	d	r
b. We couldn't afford gas.....	1	2	3	0	4	d	r
c. We couldn't afford to take the bus or other public transportation.....	1	2	3	0	4	d	r

SOFT CHECK: IF ANY M19a-c=NO RESPONSE; You may have missed a question or two on this page. Please review your answers below and provide the missing responses.

To continue to the next question, click the continue button and then "Next" to proceed to the next question.

FALL 2019 OR NO PREVIOUS INTERVIEW

M20. In the past 12 months... {INSERT a-b}

	Almost every month	Some months, but not every month	Only 1 or 2 months	Never	DON'T KNOW	REFUSED
a. I or someone else in my family couldn't afford to go to the doctor, dentist or other healthcare provider when we needed to.....	1	2	3	0	d	r
b. My family couldn't afford to pay for medications, glasses, or other medical supplies that we needed....	1	2	3	0	d	R

SOFT CHECK: IF ANY M20a-b=NO RESPONSE; You may have missed a question or two on this page. Please review your answers below and provide the missing responses.

To continue to the next question, click the continue button and then "Next" to proceed to the next question.

FALL 2019 OR NO PREVIOUS INTERVIEW

M21. **In the past 12 months, my family did not have telephone or cell phone service because we couldn't afford to pay for it.**

- ☐ Almost every month
.....
1
- ☐ Some months, but not every month
.....
2
- ☐ Only 1 or 2 months
.....
3
- ☐ Never
.....
0
- ☐ Internet is not available where we live
.....
4
- NO RESPONSE.....M

SOFT CHECK: IF M21=NO RESPONSE; **Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.**

FALL 2019 OR NO PREVIOUS INTERVIEW

M22. **In the past 12 months, my family has had electricity or other utilities (for example, gas or oil) shut off because we couldn't afford to pay the bill.**

- ☐ Almost every month
.....
1
- ☐ Some months, but not every month
.....
2
- ☐ Only 1 or 2 months
.....
3
- ☐ Never
.....
0
- NO RESPONSE.....M

SOFT CHECK: IF M22=NO RESPONSE; **Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.**

FALL 2019 OR NO PREVIOUS INTERVIEW

M23. My family has had to move in the past 12 months because we couldn't afford where we were living.

☐ Yes, once

.....
1

☐ Yes, twice

.....
2

☐ Yes, more than twice

.....
3

☐ No

.....
0

.....
NO RESPONSE.....M

SOFT CHECK: IF M23=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

N. CHILD CARE

ALL SPRING 2020

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

FILL PROGRAM NAME FROM PRELOAD

N1. The next questions are about all child care [CHILD] now receives on a regular basis in the morning before Head Start and in the afternoon after Head Start.

Is [CHILD] now attending a day care center, nursery school, preschool, or pre-kindergarten program on a regular basis before or after Head Start? Do not include Head Start programs, even if in the same building as [PROGRAM].

☐ Yes

.....
1

☐ No

.....
0

.....
NO RESPONSE.....M

ALL SPRING 2020

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

IF SC9 OR RESPONDENT FLAG = 11-16, FILL **you**
ELSE, FILL **a parent**

N6. Is [CHILD] now receiving care from a relative other than [you/a parent] on a regular basis, in the morning before or in the afternoon after Head Start? For example, please include care from grandparents, brothers or sisters, or any other relative.

Do not include care by the child's father, even if he does not live with the child.

☐ Yes

.....
1

☐ No

.....
0

.....
NO RESPONSE.....M

ALL SPRING 2020

FILL CHILD'S NAME FROM SC8A;
IF SC8A IS EMPTY, FILL FROM PRELOAD

N13. Is [CHILD] now receiving care on a regular basis from anyone else in a private home in the morning before Head Start or in the afternoon after Head Start?

☐ Yes

.....
1

☐ No

.....
0

.....

NO RESPONSE.....M

PROGRAMMER SKIP BOX N20a

IF N1, N6, OR N13 = 1, CONTINUE, ELSE GO TO SECTION P

N1 = 1 OR N6=1 OR N13 = 1
FILL CHILD'S NAME FROM SC8A; IF SC8A IS EMPTY, FILL FROM PRELOAD
IF PRELOADED SEX = FEMALE OR A1 = 1, FILL she IF PRELOADED SEX = MALE OR A1 = 2, FILL he ELSE, FILL he or she

N20. Thinking of all the child care you use for [CHILD] before or after Head Start, how many days a week is [he/she/he or she] in child care before or after Head Start, on average?

DAYS

(RANGE 0-7)

NO RESPONSE.....M

N1 = 1 OR N6 = 1 OR N13 = 1
FILL CHILD'S NAME FROM SC8A; IF SC8A IS EMPTY, FILL FROM PRELOAD

N21. And, all together, how many hours a week is [CHILD] typically in care before or after Head Start?

HOURS

(RANGE 1-90)

NO RESPONSE.....M

P. CHILD HEALTH

ALL FALL 2019 AND SPRING 2020, EXCEPT WHERE NOTED

FILL CHILD'S NAME FROM SC8A;
IF SC8A IS EMPTY, FILL FROM PRELOAD

P1. The next questions are about [CHILD]'s health and health related issues.

Overall, would you say [CHILD]'s health is...

- ☐ excellent,
.....
1
.....
- ☐ very good,
.....
2
.....
- ☐ good,.
.....
3
.....
- ☐ fair, or
.....
4
.....
- ☐ poor?
.....
5
.....
- NO RESPONSE.....M

SOFT CHECK: IF P1=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW

FILL CHILD'S NAME FROM SC5a;
IF SC5a IS EMPTY, FILL FROM PRELOAD

IF PRELOADED SEX = FEMALE OR A1 = 1, FILL **she; her**
IF PRELOADED SEX = MALE OR A1 = 2, FILL **he; his**
ELSE, FILL **he or she; his or her**

P4a. Where does [CHILD] usually go if [she/he/he or she] is sick or you have concerns about [his/her/his or her] health?

Select one only

- ☐ A private doctor, private clinic, or HMO
.....
1

- ☐ An outpatient clinic run by a hospital
.....
2
 - ☐ The emergency room at a hospital
.....
3
 - ☐ Public health department or community health center
.....
4
 - ☐ A migrant health clinic
.....
5
 - ☐ The Indian Health Service/Tribal Health Clinic or Hospital
.....
6
 - ☐ Urgent care
.....
8
 - ☐ Someplace else (SPECIFY)
.....
99
- Specify

NO RESPONSE.....M

SOFT CHECK: P4a=NO RESPONSE; **Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.**

FALL 2019 OR NO PREVIOUS INTERVIEW

FILL CHILD'S NAME FROM SC5A;
IF SC5A IS EMPTY, FILL FROM PRELOAD

P5. Where does [CHILD] go for routine medical care, like well-child care or regular check-ups?

Select one only

- ☐ Doesn't get preventive care/There is no regular place.....0 GO TO P5a
- ☐ A private doctor, private clinic, or HMO
.....
1
- ☐ An outpatient clinic run by a hospital
.....
2
- ☐ The emergency room at a hospital
.....
3
- ☐ Public health department or community health center
.....
4
- ☐ A migrant health clinic
.....
5

- ☐ The Indian Health Service/Tribal Health Clinic or Hospital
.....
6
- ☐ Urgent care
.....
8
- ☐ Someplace else (SPECIFY)
.....
99

Specify

NO RESPONSE.....M GO TO P5a

SOFT CHECK: IF P5=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW AND
P5=0 OR M

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

P5a. Does [CHILD] have a regular health care provider?

- ☐ Yes
.....
1
- ☐ No
.....
0

NO RESPONSE.....M

SOFT CHECK: IF P5a=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

FALL 2019 OR NO PREVIOUS INTERVIEW

FILL CHILD'S NAME FROM SC8a; IF SC8a IS EMPTY, FILL FROM PRELOAD

P7. When was the last time [CHILD] saw a doctor for a regular checkup? Was it . . .

Select one only

- ☐ 6 months ago or less,
.....
1
- ☐ more than 6 months ago, but not more than 1 year ago,
.....
2
- ☐ more than 1 year ago, but not more than 2 years ago,
.....
3
- ☐ more than 2 years ago, or
.....
4
- ☐ never?
.....
5
- NO RESPONSE.....M

SOFT CHECK: IF P7=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

IF FALL INTERVIEW

FILL CHILD'S NAME FROM SC8a; IF SC8a IS EMPTY, FILL FROM PRELOAD

FALL INTERVIEW DATE – Fill with date of Fall 2019 interview

P7a. Since [FALL INTERVIEW DATE], has [CHILD] seen a doctor for a regular checkup?

- ☐ Yes
.....
1
- ☐ No
.....
0
- NO RESPONSE.....M

P7 = 3, 4, 5

FILL CHILD'S NAME FROM SC8A;
IF SC8A IS EMPTY, FILL FROM PRELOAD

P7_1. What were the reasons that [CHILD] has not seen the doctor for a regular checkup recently?

Select all that apply

- ☐ Could not afford the cost
.....
1
- ☐ Did not want to spend the money
.....
2
- ☐ Insurance did not cover
.....
3
- ☐ Doctor's office is too far away
.....
4
- ☐ Doctor's office is not open at convenient times
.....
5
- ☐ Another doctor recommended not doing it
.....
6
- ☐ Afraid of or do not like doctors
.....
7
- ☐ Unable to take time off from work
.....
8
- ☐ Too busy
.....
9
- ☐ I did not think anything serious was wrong
.....
10
- ☐ Other reason (SPECIFY)
.....
11

Specify

NO RESPONSE

.....
M
.....

FALL 2019 OR NO PREVIOUS INTERVIEW

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

P8a. Is there a particular dentist or dental clinic that you take [CHILD] for dental care or advice?

- ☐ Yes.....1
☐ No.....0
 NO RESPONSE.....M

FALL 2019 OR NO PREVIOUS INTERVIEW
FILL CHILD'S NAME FROM SC8A; IF SC8A IS EMPTY, FILL FROM PRELOAD

P8. When was the last time [CHILD] saw a dentist for a regular checkup? Was it . . .

Select one only

- ☐ 6 months ago or less,

 1
☐ more than 6 months ago, but not more than 1 year ago,

 2
☐ more than 1 year ago, but not more than 2 years ago,

 3
☐ more than 2 years ago, or

 4
☐ never?

 5
 NO RESPONSE.....M

IF FALL INTERVIEW

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

P8_0. Since [FALL INTERVIEW DATE], has [CHILD] seen a dentist for a regular checkup?

☐ Yes

.....
1

☐ No

.....
0

NO RESPONSE.....M

P8 = 2, 3, 4, 5

FILL CHILD'S NAME FROM SC8A;
IF SC8A IS EMPTY, FILL FROM PRELOAD

P8_1. What were the reasons that [CHILD] has not seen the dentist recently?

Select all that apply.

☐ Could not afford the cost

.....
1

☐ Did not want to spend the money

.....
2

☐ Insurance did not cover

.....
3

☐ Dental office is too far away

.....
4

☐ Dental office is not open at convenient times

.....
5

☐ Another dentist recommended not doing it

.....
6

☐ Afraid of or do not like dentists

.....
7

☐ Unable to take time off from work

.....
8

☐ Too busy

.....
9

☐ I did not think anything serious was wrong

.....
10
☐ [CHILD] is not due for [his/her] next appointment yet
.....
12
☐ Next appointment is scheduled but has not yet occurred
.....
13
☐ Dentist is overbooked/hard to schedule
.....
14
☐ Transportation issues
.....
15
☐ [CHILD] is too young
.....
16
☐ Other reason (SPECIFY)
.....
11
Specify
NO RESPONSE
.....
M
.....

ALL SPRING 2020

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

P42. Has anyone ever suggested that you get [CHILD] evaluated for a possible special condition or need?

- ☐ Yes.....1
☐ No.....0
NO RESPONSE.....M

P42=1

P42a. What special condition or need?

Select all that apply

- ☐ Behavior problem
.....
1
- ☐ Emotional problem
.....
2
- ☐ Attention problem
.....
3
- ☐ Developmental delay
.....
4
- ☐ Problem with use of arms or legs
.....
5
- ☐ Speech problem
.....
7
- ☐ Hearing problem
.....
8
- ☐ Vision problem
.....
9
- ☐ Something else (SPECIFY)
.....
10

Specify

NO RESPONSE.....M

P42=1

P42b1. Did you get [CHILD] evaluated for a possible special condition or need?

☐ Yes

.....
1

☐ No

.....
0

.....
NO RESPONSE.....M

P42b1=1

P42b2. Did you obtain a diagnosis?

☐ Yes

.....
1

☐ No

.....
0

.....
NO RESPONSE.....M

P42b3. What was the diagnosis for [CHILD]'s special condition or need?*Select all that apply*☐ Behavior problem.....
1☐ Emotional problem.....
2☐ Attention problem.....
3☐ Developmental delay.....
4☐ Problem with use of arms or legs.....
5☐ Speech problem.....
7☐ Hearing problem.....
8☐ Vision problem.....
9☐ Something else (SPECIFY).....
10

Specify

NO RESPONSE.....M

Q. FAMILY HEALTH

ALL SPRING 2020

The next set of questions are about the health of people in your household.

Q5. First are questions about smoking.

In the last 30 days, did you smoke tobacco such as cigarettes or cigars?

Please do NOT include ceremonial smoking.

☐ Yes

.....
1

☐ No

.....
0

.....
NO RESPONSE.....M

Q5=1

Q6. How many cigarettes or packs of cigarettes do you smoke on an average day?

Enter "1" if you smoke less than one cigarette a day.

|_|_| NUMBER PER |_| CODE

☐ CIGARETTES

.....
1

☐ PACKS

.....
2

.....
NO RESPONSE.....M

Q5=1

Q7a. Do you or other household members smoke anywhere inside the home?

☐ Yes.....1

☐ No.....0

.....
NO RESPONSE.....M

- Q9.** The next questions are about how frequently you drink alcoholic beverages. By a “drink” we mean either a bottle of beer, a wine cooler, a glass of wine, a shot of liquor, or a mixed drink. Remember, your answers will be kept private to the extent permitted by law. No one from Head Start will see or hear your answers.

During the last 30 days, how often, if ever, did you drink alcoholic beverages, including beer, wine or liquor? Would you say...

- ☐ Less than once a week,
.....
1
- ☐ 1 or 2 days per week,
.....
2
- ☐ 3 or 4 days per week,
.....
3
- ☐ 5 or 6 days per week,
.....
4
- ☐ every day, or
.....
5
- ☐ never?
.....
0
- NO RESPONSE.....M

Q9=1,2,3,4,5

- Q10.** On the days that you drank alcoholic beverages (including beer, wine, and liquor) in the last 30 days, how many drinks did you usually have?

(Click [here](#) for an explanation on how to count the number of drinks.)

PROGRAMMER: INCLUDE FOLLOWING TEXT IN POP UP WINDOW:

HELP SCREEN:

ALCOHOL EQUIVALENTS:

Beer:

1 12 oz. or 16 oz. bottle = 1 drink
1 40 oz. bottle = 3 drinks
1 case of beer = 24 drinks

Wine:

1 4 oz. glass of wine = 1 drink
1 bottle of wine = 5 drinks
1 liter of wine = 6 drinks

Hard Liquor:

1 highball = 1 drink
1 shot glass = 1 drink
1/2 pint of liquor = 6 drinks
1 pint of liquor = 12 drinks
1 fifth of liquor = 20 drinks
1 quart of liquor = 24 drinks

1 wine cooler	= 1 drink
---------------	-----------

--

NUMBER

NO RESPONSE.....M

Q9 = 1, 2, 3, 4, or 5

If R = Female, display **four; 4**

Else, display **five; 5**

Q10a. In the last 30 days, how many times did you drink [four/five] or more alcoholic drinks at one sitting?

Enter "0" if you did not have [4/5] or more drinks at one sitting in the last month.

|_|_| NUMBER

NO RESPONSE.....M

ALL SPRING 2020

If Q9 = 0, display **anyone**

ELSE display **anyone else**

Q11. Is there [anyone/anyone else] in your household who drinks alcohol?

☐ Yes

.....
1

☐ No

.....
0

NO RESPONSE.....M

SPRING 2020

Q22. During the PAST YEAR, have you or anyone in your household received help or treatment for alcohol use?

☐ Yes

.....
1

☐ No

.....
0

NO RESPONSE.....M

SPRING 2020

Q23. During the PAST YEAR, have you or anyone in your household received help or treatment for other substance abuse problems?

☐ Yes

.....
1

☐ No

.....
0

NO RESPONSE.....M

SPRING 2020

Q24. During the PAST YEAR, have you *or anyone in your household* received mental health help or treatment other than for alcohol or substance use problems?

☐ Yes

.....
1

☐ No

.....
0

NO RESPONSE.....M

R. HOME AND NEIGHBORHOOD CHARACTERISTICS

ALL SPRING 2020

The next questions are about situations that can be difficult for families. The questions ask about things that may have happened to you or others in your household over the past year. Please remember, all of your answers will be kept private to the extent permitted by law. No one from Head Start will see or hear your answers.

ALL SPRING 2020

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

R4. In the past year, has [CHILD] ever been a witness to a violent crime? Please do not include domestic violence.

(Click [here](#) for a definition of violent crimes.)

HELP SCREEN:

According to the Uniform Crime Reporting (UCR) Program's definition, **violent crimes** involve force or threat of force, to include: murder and non-negligent manslaughter, forcible rape, robbery, and aggravated assault.

☐ Yes

.....
1

☐ No

.....
0

NO RESPONSE.....M

ALL SPRING 2020

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

R5. In the past year, has [CHILD] ever been a witness to domestic violence?

(Click [here](#) for a definition of domestic violence.)

HELP SCREEN:

Domestic violence is any type of physical, mental or emotional abuse that happens between people who are married, in a romantic relationship, who are former partners or who are related by family. Examples of domestic violence include being beaten up, murder, kidnapping, rape, sexual assault and robbery.

☐ Yes

.....
1

☐ No

.....
0

NO RESPONSE.....M

ALL SPRING 2020

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

R6. In the past year, has [CHILD] ever been the victim of a violent crime?

(Click [here](#) for a definition of violent crimes.)

HELP SCREEN:

According to the Uniform Crime Reporting (UCR) Program's definition, **violent crimes** involve force or threat of force, to include: murder and non-negligent manslaughter, forcible rape, robbery, and aggravated assault.

☐ Yes

.....
1

☐ No

.....
0

NO RESPONSE.....M

ALL SPRING 2020

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

R7. In the past year, has [CHILD] ever been the victim of domestic violence?

(Click [here](#) for a definition of domestic violence.)

HELP SCREEN:

Domestic violence is any type of physical, mental or emotional abuse that happens between people who are married, in a romantic relationship, who are former partners or who are related by family. Examples of domestic violence include being beaten up, murder, kidnapping, rape, sexual assault and robbery.

☐ Yes

.....
1

☐ No

.....
0

NO RESPONSE.....M

ALL SPRING 2020

FILL CHILD'S NAME FROM SC8a;
IF SC8a IS EMPTY, FILL FROM PRELOAD

IF SC9 OR RESPONDENT FLAG = 12, 14-30, FILL **or has [CHILD]'s mother**
IF SC9 OR RESPONDENT FLAG = 11, 13, 15-30, FILL **or has [CHILD]'s father**

R8. Since [CHILD] was born, have you, another household member, [or has [CHILD]'s mother] [or has [CHILD]'s father] been arrested or charged with any crime by the police?

☐ Yes

.....
1

☐ No

.....
0

NO RESPONSE.....M

R8=1

R10. Did anyone spend time in jail because of this?

☐ Yes

.....
1

☐ No

.....
0

NO RESPONSE.....M

ALL SPRING 2020

R14. The next questions are about your community, neighborhood, or area where you live.

		Strongly agree	Agree	Neutral	Disagree	Strongly disagree
a.	People around here are willing to help their neighbors	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
b.	The place where I live is too noisy or too polluted.	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
c.	Roads in my community are often difficult or impossible to drive on	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
d.	I have to go too far to get things done, like shopping, banking, buying gas, or going to school or work.	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐

ALL SPRING 2020

R15. The next questions are about problems you might see in the community, neighborhood, or area where you live.

	Not a problem	Somewhat of a problem	Big problem
a. Run-down houses or abandoned cars	1 ☐	2 ☐	3 ☐
b. Crime	1 ☐	2 ☐	3 ☐
c. Police not being available	1 ☐	2 ☐	3 ☐
d. Public drunkenness/people being high or stoned in public	1 ☐	2 ☐	3 ☐
e. Broken homes and family breakups.	1 ☐	2 ☐	3 ☐
f. Physical violence, abuse and neglect.	1 ☐	2 ☐	3 ☐
g. Alcohol and/or drug abuse.	1 ☐	2 ☐	3 ☐
h. Not enough good housing.	1 ☐	2 ☐	3 ☐
i. Not enough jobs in the community.	1 ☐	2 ☐	3 ☐

T. SOCIAL SUPPORT

{IF FALL 2019}

T1. Now I'm going to read some statements about other kinds of help you may get. Please tell me whether each statement is never true for you, sometimes true for you, or always true for you.

PROBE: Would you say it is never true for you, sometimes true for you, or always true for you?

	NEVER TRUE	SOMETIMES TRUE	ALWAYS TRUE	DON'T KNOW	REFUSED
a. If I need to do an errand, I can easily find someone to watch [CHILD]	1	2	3	d	r
g. If I need a place to stay, I can find someone to provide me and [CHILD] with a place to live	1	2	3	d	r
e. If I have an emergency and need cash, family or friends will loan it to me	1	2	3	d	r
f. If I have troubles or need advice, I have someone I can talk to	1	2	3	d	r
h. If I have problems buying food, I have someone who can help me get a meal or I can go to a relative's house to eat.....	1	2	3	d	r
i. If I need food for my family, I can rely on fishing, hunting, and/or gathering. ...	1	2	3	d	r

SOFT CHECK: IF ANY T1a-i=NO RESPONSE; You may have missed a question or two on this page. Please review your answers below and provide the missing responses.

To continue to the next question, click the continue button and then "Next" to proceed to the next question.

U. YOUR FEELINGS

ALL FALL 2019 AND SPRING 2020

U1. The next questions are about how you have felt about yourself and your life in the past week. There are no right or wrong answers.

Please select if you felt this way rarely or never, some or a little, occasionally or a moderate amount of time, or most or all of the time in the past week?

(Click [here](#) for a definition of “shake off the blues.”)

HELP SCREEN:

Not being able to “shake off the blues” refers to feeling sad, unhappy, miserable, or down in the dumps for short periods.

Select one per row

	Rarely or never	Some or a little	Occasionally or moderately	Most or all
a. Bothered by things that usually don't bother you	1 ☐	2 ☐	3 ☐	4 ☐
b. You did not feel like eating, your appetite was poor	1 ☐	2 ☐	3 ☐	4 ☐
c. You could not shake off the blues, even with help from your family and friends	1 ☐	2 ☐	3 ☐	4 ☐
d. You had trouble keeping your mind on what you were doing	1 ☐	2 ☐	3 ☐	4 ☐
e. Depressed	1 ☐	2 ☐	3 ☐	4 ☐
f. That everything you did was an effort	1 ☐	2 ☐	3 ☐	4 ☐
g. Fearful	1 ☐	2 ☐	3 ☐	4 ☐
h. Your sleep was restless	1 ☐	2 ☐	3 ☐	4 ☐
i. You talked less than usual	1 ☐	2 ☐	3 ☐	4 ☐
j. Lonely	1 ☐	2 ☐	3 ☐	4 ☐
k. Sad	1 ☐	2 ☐	3 ☐	4 ☐
l. You could not get “going”	1 ☐	2 ☐	3 ☐	4 ☐

SOFT CHECK: IF ANY U1a-l=NO RESPONSE; You may have missed a question or two on this page. Please review your answers below and provide the missing responses.

To continue to the next question, click the continue button and then "Next" to proceed to the next question.

V. Cultural Connections

ALL SPRING 2020

V1. For the next questions, think about your American Indian or Alaska Native group and indicate how much you agree or disagree with each sentence.

Select one per row.

	Strongly agree	Agree	Neutral	Disagree	Strongly disagree
a. Being a part of my tribe or cultural group is important to me.	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
b. I think a lot about how my life has been affected by me being an American Indian / Alaska Native.	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
c. I have a lot of pride in my tribe or cultural group.	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
d. I speak or am learning to speak my Native language.	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
e. I follow religious or spiritual beliefs that are based on traditional cultural beliefs.	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
f. I listen to, sing, or dance to traditional Native music.	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
g. I have a strong sense of belonging to my own tribe or cultural group.	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
h. I have often talked to other people to learn about my tribe or culture.	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
i. I feel good about my cultural and Native background.	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐

ALL SPRING 2020IF MORE THAN 1 CHILD IN HOUSEHOLD, FILL **children**IF JUST FOCAL CHILD IN HOUSEHOLD, FILL **child****V2. Please indicate how often you did each of the things below in the past month.***Select one per row.*

	Very often	Often	Sometimes	Rarely	Never
a. I told my [child/children] Native stories.	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
b. I took my [child/children] to Native cultural events, like powwows or ceremonies.	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
c. I made traditional Native cultural food for my [child/children].	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
d. I listened to Native cultural music with my [child/children].	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
e. I taught my [child/children] about Native cultural values and traditions.	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
f. I don't make a big deal about Native cultural ways with my [child/children].	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐

ALL SPRING 2020IF MORE THAN 1 CHILD IN HOUSEHOLD, FILL **children; children show**IF JUST FOCAL CHILD IN HOUSEHOLD, FILL **child; child shows****V3. Please indicate how often you did each of the things below in the past month.***Select one per row.*

	Very often	Often	Sometimes	Rarely	Never
a. I told my [child/children] about the importance of family in my Native culture.	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
b. I made sure my [child/children] spent time with family members, like grandmas, grandpas, aunts, uncles, and cousins.	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
c. I relied on family members (grandmas, grandpas, aunts, uncles) to help me parent my [child/children].	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
d. I like to take care of my [child/children] myself, without a lot of other family getting involved.	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
e. I made sure my [child shows/children show] respect for Native elders.	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐

ALL SPRING 2020

V4. How many of your relatives or in-laws live in your community?

- ☐ None
.....
1
- ☐ 1 or 2
.....
2
- ☐ 3-5
.....
3
- ☐ 6-9
.....
4
- ☐ 10 or more
.....
5
- No response
.....
M

ALL SPRING 2020

V5. How many friends do you have in your community?

- ☐ None
.....
1
- ☐ 1 or 2
.....
2
- ☐ 3-5
.....
3
- ☐ 6-9
.....
4
- ☐ 10 or more
.....
5
- NO RESPONSE.....M

W. PROGRAM SATISFACTION AND PRACTICES

VERSION BOX 2
IF SPRING 2020 INTERVIEW CONTINUE

Now I would like to ask you some questions about [CHILD]'s Head Start program.

NO SECTION W1 TO W4 AND W6 IN THIS VERSION

W5. The following questions ask you about your experiences with your child's Head Start program and its staff. For each statement that I read you, please tell me whether you strongly disagree, somewhat disagree, neither agree nor disagree, somewhat agree, or strongly agree.

PROBE: [IF NECESSARY, READ AFTER EACH STATEMENT]: Would you say you strongly disagree, somewhat disagree, neither agree nor disagree, somewhat agree, or strongly agree?

	STRONGLY DISAGREE	SOMEWHA T DISAGREE	NEITHER AGREE NOR DISAGREE	SOMEWHA T AGREE	STRONGL Y AGREE	DON'T KNOW	REFUSED
g. The program staff respect my family's cultural and/or religious beliefs.....	1	2	3	4	5	d	r
k. The program staff encourage me to learn about my culture and history.....	1	2	3	4	5	d	r
m. The program staff have materials for my child that positively reflect our cultural background..... ...	1	2	3	4	5	d	r

SOFT CHECK: IF ANY W5g-m=NO RESPONSE; You may have missed a question or two on this page. Please review your answers below and provide the missing responses.

To continue to the next question, click the continue button and then "Next" to proceed to the next question.

X. TRACKING INFORMATION

ALL

IF FALL 2019, FILL **Thank you for your help. The next questions will be about how to contact you in case we have any questions.**

IF C2=1, FILL **Thank you for your time. We will send you your thank-you gift card within the next 2 weeks. [IF FALL 2019, FILL We plan to interview you again in the spring and we need to know how to get in touch with you.]**

X1. [Thank you for your help. The next questions will be about how to contact you in case we have any questions.]

[Thank you for your time. We will send you your thank-you gift card within the next 2 weeks. [We plan to interview you again in the spring and we need to know how to get in touch with you.]]

The next questions will be about how to contact you or people who will know how to find you.

First, what is your telephone number?

☐ **Do not have a telephone number**.....1 GO TO X2

NO RESPONSE.....M GO TO X2

SOFT CHECK: IF X1=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

NUMBER PROVIDED AT X1

X1a. Whose name is that number listed under?

First Name:

GO TO X3a

Middle Initial:

Last Name:

SOFT CHECK: IF X1a=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

X1 = M

X2. Is there a number where you can be reached?

NO RESPONSE.....M GO TO X4

SOFT CHECK: IF X2=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

NUMBER PROVIDED AT X2

X3. Whose telephone is that?

First Name:

GO TO X3a

Middle Initial:

Last Name:

NO RESPONSE.....M GO TO X4

SOFT CHECK: IF X3=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

X3 NE M AND X2 NE M

X3a. Do you have another phone number like a cell phone number?

CELL PHONE

OTHER

☐ No cell phone or other phone number

.....
1

NO RESPONSE.....M

SOFT CHECK: IF X3a=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

ALL

X4. Please enter your full name and permanent address.

First Name:

Middle Initial:

Last Name:

Street Address 1:

Street Address 2:

City:

State:

Zip:

NO RESPONSE.....M

SOFT CHECK: IF X4=NO RESPONSE; Please provide an answer to this question and continue. To continue to the next question without providing a response, click the continue button.

END. This completes the interview. Thank you for your participation in AI/AN FACES.