

2022 National Household Education Survey (NHES) Web Usability Testing

Attachment 4

OMB# 1850-0803 v.265

National Center for Education Statistics (NCES)

April 2020

This is the specification for testing portions of the PFI, ECPP, young children questions, child background questions, parent 1 and parent 2 subsections of NHES:2022.

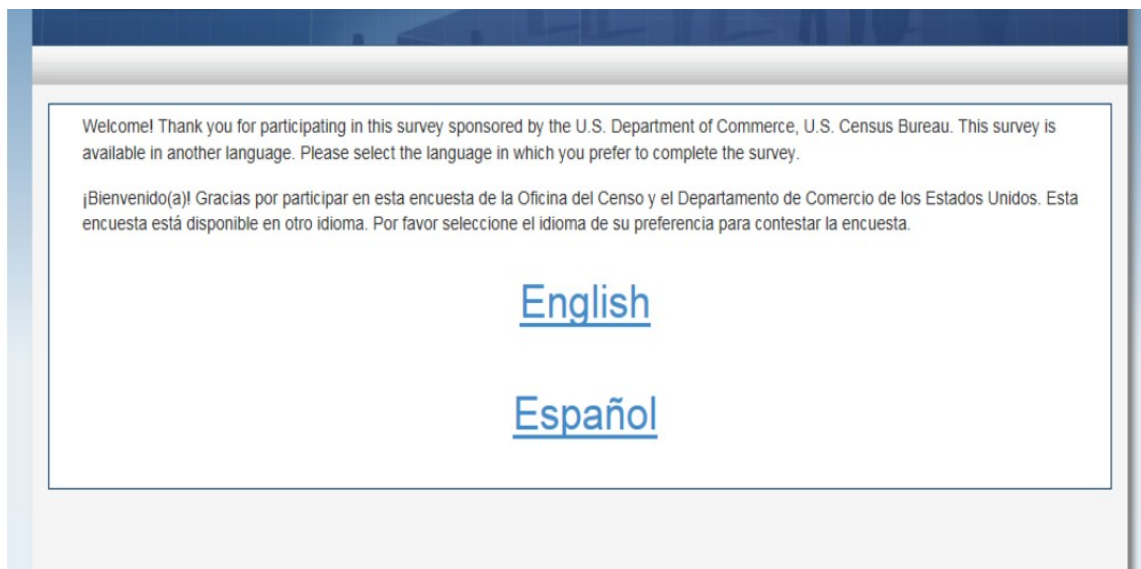
General rules

[] means write-in (not dropdown)

Within-screen branching will use an enable/disable design where the filter question is always enabled, and the subsequent questions are displayed on the screen in grayed out text until user selects an answer in the filter question that makes sense to then activate the grayed out text.

Question numbering – We did not go through and update all the question numbers. This would take us too much time to fix and at this point we don't feel it is necessary since the question numbers will not be programmed into the Qualtrics.

Landing page with Language Toggle



Revised text:

Welcome! Thank you for participating in this survey sponsored by the U.S. Department of Education.

This survey is available in English and Spanish. Please select the language in which you prefer to complete the survey.

¡Bienvenido(a)! Gracias por participar en esta encuesta del Departamento de Educación de los Estados Unidos. Esta encuesta está disponible en inglés y español. Por favor seleccione el idioma de su preferencia para contestar la encuesta.

[English](#)

Screener Portion

S1.

How many children or youth age 20 or YOUNGER live in this household?

[] children or youth

The screenshot shows the United States Census Bureau's National Household Education Survey interface. At the top left is the logo for the United States Census Bureau. To its right is the title "National Household Education Survey". On the top right, there is contact information: "Questions? Call 1-888-840-8353, 8:00 am to 8:00 pm ET (Daily), Email: NHES@census.gov". Below the header is a navigation bar with links for "English", "Español", and "FAQs", and a "Logout and Continue Later" link on the right. The main content area contains the question "How many children or youth age 20 or younger live in this household?" followed by a text input field with the placeholder "Number of children age 20 or younger". Below the input field are "Previous" and "Next" navigation buttons. At the bottom of the page, there is a footer with "OMB No.: 1850-0768, Approval Expires: 09/30/2021" on the left and "Accessibility | Security" on the right.

S2.

Start with the youngest child or youth who is age 20 or younger.

Please list the first names of all the children or youth who live in this household. Include small children, foster children, babies and those living in college housing (if they have no other permanent home). You may provide nicknames or initials if you prefer.

Enter one child or youth on each line. After you have listed all names, click “Next”.

_____ (s1_p1name)

_____ (s1_p2name)

_____ (s1_p3name)

_____ (s1_p4name)

_____ (s1_p5name)

Instruction: If more than one is entered on S1 S1_check>1

Next screen is needed only for qualitative in-person testing.

S3.

The test administrator will tell you which child to list here.

_____ *[this line here fills all future child names]*

S4.

What is [CHILD]'s sex?

Male

Female

Instruction: Child.Pronoun fill=she if Female was selected; =he if Male was selected; =he/she if left blank. Child.Pronoun2 fill=her if Female was selected; =him if Male was selected; =him/her if left blank.

S5.

What is [CHILD]'s current grade or grade equivalent?

1 = Preschool - ECPP

2 = Kindergarten -PFI

3 = First -PFI

4 = Second -PFI

5 = Third -PFI

6 = Fourth -PFI

7 = Fifth -PFI

8 = Sixth -PFI

9 = Seventh -PFI

10 = Eighth -PFI

11 = Ninth -PFI

12 = Tenth -PFI

13 = Eleventh -PFI

14 = Twelfth -PFI

15 = College, university or vocational school – PFI

16 = None of these -- ECPP

PFI homeschool section

We would like to ask some additional questions about [CHILD]’s education. [if S1_check>1:] We ask each family about only one of their children, and so will not ask detailed questions about your other children.

PFI.4.

Some parents decide to educate their children at home rather than send them to a public or private school located in a physical building.

Is [CHILD] being schooled at home INSTEAD of at school for at least SOME classes or subjects?

Yes

No – go to C1

PFI.5.

Which of the following statements best describes your homeschooling arrangement for [CHILD]?

1=This child is homeschooled for ALL classes or subject areas, which may include co-ops, virtual/cyber/online courses, and home instruction provided by a private tutor or teacher

2= This child is homeschooled for SOME classes or subject areas and is also enrolled in a public or private school

3= This child is NOT homeschooled. This child is enrolled in a public or private school for all classes or subject areas– go to C1

PFI.6.

Is any of [CHILD]’s instruction provided by a local homeschooling group or co-op?

Yes

No

PFI.7.

Who is the person that MAINLY provides [CHILD]’s HOME instruction?

1= Mother

2= Father

3= Grandparent

4= Brother/sister

5 = Teacher of online, virtual, or cyber school

6 = Another person -Who is that? []

PFI.8.

Is any of [CHILD]'s HOME instruction provided by a private tutor or teacher?

Yes

No

PFI.9.

Is [CHILD] enrolled in any online, virtual, or cyber courses? Do not include courses that use the Internet only for selected assignments.

1= Yes, all the child's courses are online, virtual, or cyber

2= Yes, about half or more than half of the child's courses are online, virtual, or cyber

3= Yes, less than half of the child's courses are online, virtual, or cyber

4= No, none of this child's courses are online, virtual, or cyber – go to PFI.16

PFI.15.

In the last week that [CHILD] was homeschooled, about how many hours did [CHILD.PRONOUN] spend in online, virtual, or cyber classes?

1= Fewer than 10 hours in that week

2=10 to24 hours in that week

3=More than 24 hours in that week

PFI.16.

Which of the following statements best describes the teaching style used to homeschool [CHILD]?

Select ONE only.

1= We strictly follow a formal curriculum

2= We mostly follow a formal curriculum, but also use informal learning (i.e., child-led learning, "teaching moments")

3= We mostly use informal learning, but sometimes use a formal curriculum

4= We always use informal learning, and never follow a formal curriculum

PFI.17.

Since September, has [CHILD] participated in activities with other children outside your family who are homeschooled?

Yes

No

PFI.18.

In this question, we are interested in the ONLINE, VIRTUAL, OR CYBER RESOURCES that are used in your home when a parent is providing instruction (for example, streaming instructional videos, downloaded course materials).

Since September, have you used materials from...

Please select one response for EACH item below.

- a. A public library (1= Yes, 2=No)
- b. A catalog, publisher, store, private school, or individual that specializes in providing educational materials to homeschooling families? (1= Yes, 2=No)

Is the catalog, publisher, private school, or individual affiliated with a particular religion or religious organization? (1= Yes, 2=No)

(Enable/disable with PFI.18b and the subquestion)

- c. Your local public school or school district (1= Yes, 2=No)
- d. Free websites (such as YouTube or Wikipedia)? (1= Yes, 2=No)
- e. Organized online, virtual, or cyber educational resources (such as Khan Academy or edX)? (1= Yes, 2=No)
- f. Other source (Yes/No) –Specify: []

PFI.19.

In this question, we are interested in the physical resources that you use. Where do you get the PHYSICAL curriculum and materials you use to homeschool [CHILD] (for example, worksheets, textbooks, fiction/nonfiction books, DVDs, or videos)?

Since September, have you used materials from...

Please select one response for EACH item below.

- a. A public library? (1= Yes, 2=No)
- b. A catalog, publisher, store, private school, or individual that specializes in providing educational materials to homeschooling families? (1= Yes, 2=No)

Is the catalog, publisher, private school, or individual affiliated with a particular religion or religious organization?, (1= Yes, 2=No), numeric, radio

(Enable/disable with PFI.19b and the subquestion)

- c. Your local public school or school district?, (1= Yes, 2=No), numeric, radio
- d. A homeschooling convention?, (1= Yes, 2=No), numeric, radio
- e. A used curriculum swap or exchange event? , (1= Yes, 2=No), numeric, radio
- f. Other homeschool families?, ((1= Yes, 2=No), numeric, radio
- g. Other source –Specify:, (1= Yes, 2=No), numeric, radio

PFI.20.

In the past year, have you or another family member taken any courses, either online or in-person, to help you prepare [CHILD]’s home instruction?

- 1= Yes, both online and in-person
- 2= Yes, online only
- 3= Yes, in-person only
- 4= No, none of them

(Q.PFI.21a and PFI.21b will be on the same page.)

PFI.21a.

Including the current grade and thinking of all the grades for which the [CHILD] was homeschooled, for how many grades has [CHILD.PRONOUN] been homeschooled?

[] grades homeschooled

PFI.21b.

Select every grade that [CHILD] was homeschooled, including the current grade equivalent.

- Homeschooled in kindergarten (including transitional K and Pre-first grade)
- Homeschooled in 1st grade
- Homeschooled in 2nd grade
- Homeschooled in 3rd grade
- Homeschooled in 4th grade
- Homeschooled in 5th grade
- Homeschooled in 6th grade
- Homeschooled in 7th grade
- Homeschooled in 8th grade
- Homeschooled in 9th grade – *freshman*
- Homeschooled in 10th grade – *sophomore*
- Homeschooled in 11th grade – *junior*
- Homeschooled in 12th grade – *senior*

PFI.22.

There are many different reasons that parents choose to homeschool their children. Did your family choose to homeschool [CHILD] because:

Please select one response for EACH item below.

- a. You are concerned about the school environment, such as safety, drugs, or negative peer pressure? (1= Yes, 2= No)
- b. You are dissatisfied with the academic instruction at other schools? (1= Yes, 2= No)
- c. You prefer to teach this child at home so that you can provide religious instruction? (1= Yes, 2= No)
- d. You prefer to teach this child at home so that you can provide moral instruction? (1= Yes, 2= No)

- e. This child has a physical or mental health problem that has lasted six months or more? (1= Yes, 2= No)
- f. This child has a temporary illness that prevents [CHILD.PRONOUN2] from going to school? (1= Yes, 2= No)
- g. This child has other special needs that you feel the school can't or won't meet? (1= Yes, 2= No)
- h. You are interested in a nontraditional approach to children's education? (1= Yes, 2= No)
- i. You want to emphasize family life together? (1= Yes, 2= No)
- j. You have another reason for homeschooling your child? Specify: (1= Yes, 2= No)

PFI.24.

In the last week that [CHILD] was homeschooled, what subject areas were taught during [his/her/his or her] home instruction?

We have provided spaces for you to tell us about up to 10 subject areas. You may have fewer subject areas to tell us about. Please enter only one subject area in each box.

(Enable/disable with PFI.25 & PFI.26)

PFI.25.

Does your family participate in the activities or meetings of a LOCAL homeschooling association, co-op, or other local homeschool group?

Yes

No – go to PFI.27

PFI.26.

Since September, how many times has your family gone to meetings or participated in the activities of a local homeschooling association, co-op, or other local homeschool group?

[] times

PFI.27.

Is your family or someone in your household a member of a NATIONAL homeschooling organization?

Yes

No

PFI.28.

Is [CHILD] in a military family that frequently relocates?

Yes

No

PFI.42 About how many hours does [CHILD] attend a school each WEEK?

1=0 hours. Child's school is not located in a physical building

2=1 to10 hours per week

3=11 to24 hours per week

4= More than 24 hours per week

[Go to Child background questions.](#)

ECPP section

We would like to ask some additional questions about [CHILD]’s care and education. [if S1_check<1:We ask each family about only one of their children, and so will not ask detailed questions about your other children.]

Alternate E1. Does [CHILD] receive care or early education from anyone besides [his/her] parents or guardians on a REGULAR BASIS?

Yes – go to E2

No (only the parent(s) or guardian(s) provide child care or early education) – go to Young Children Questions

E2 in grid format

E2.

Who provides care or early education for [CHILD] on a REGULAR BASIS?

A relative such as grandparent, brother, sister, or other relative

Yes

No

A person NOT related to this child such as neighbor, home child care provider, nanny, or au pair.

Yes

No

A teacher or staff person in a day care center, child care center, preschool, or prekindergarten (not in a private home)

Yes

No

Branching here The order of the branching instructions is in a linear order so that the R can select a more than one type of care situation and get to each of the sections.

If Rel=Yes: go to E3

If Nonrel=Yes & Daycare=Yes: go to 2E3.0

*If Nonrel=Yes (and Rel=no and daycare=no): go to 2E3 set **FILLNONREL= this non-relative***

If Daycare=Yes (and Rel=no and Nonrel=no): go to 3E3

Production instrument suggestion: If Rel=No or missing and Nonrel=No or missing and Daycare=No or missing then go to All young children questions

1st ECPP section – relative care

E3.

These next questions are about the care that [CHILD] receives from the relative who provides the most care.

Does this relative provide care regularly at least once a week?

Yes – go to E3a

No – *Skip instructions: if they selected another type of care, they go to the next section in the ECPP. If Nonrel=Yes & Daycare=Yes from E2: go to 2E3.0; else If Nonrel=Yes & Daycare=No from E2: go to 2E3 set **FILLNONREL= this non-relative**; else If Nonrel=No & Daycare=Yes from E2: go to 3E3; else If Nonrel=No & Daycare=No from E2 then go to Young Children Questions*

E3a.

How is that relative related to [CHILD]?

1= Grandmother/Grandfather

2= Aunt/Uncle

3= Brother/Sister

4= Another relative

E3b.

How old is the relative who provides the most care to [CHILD]?

years old

E4.

About how many DAYS each WEEK does [CHILD] receive care from this relative?

days each week

E5.

About how many HOURS each WEEK does [CHILD] receive care from this relative?

hours each week

E6.

How old was [CHILD] in years and months when THIS PARTICULAR regular care arrangement with this relative began?

years

months

E11.

Will this relative care for [CHILD] when [CHILD.PRONOUN] is...

Please select one response for EACH item below.

a. sick but does not have a fever? (1=Yes, 2=No)

b. sick and has a fever? (1=Yes, 2= No)

No swimlane grid at E11.

Branching on one page E7-E10 (together on one page) with all four questions and E8, E9, and E10 are greyed out until E7 is answered Yes, then the next three questions are enabled. When E9 is answered E10 fills with the correct fill as per upunit.

E7.

Is there any charge or fee for the care [CHILD] receives from this relative, paid either by you or some other person or agency?

Yes – go to E8

No – *nothing enables and participant can go to next page go to E12*

E8.

Do any of the following people, programs, or organizations help pay for this relative to care for [CHILD]?

Please select one response for EACH item below.

- a. A relative of [this child] outside your household who provides money SPECIFICALLY for that care, not including general child support (1=Yes, 2=No)
- b. Your state welfare or family assistance program (this may be called Temporary Assistance for Needy Families (TANF) or something else) (1=Yes, 2=No)
- c. Another social service, welfare, child care, or other kind of agency (1=Yes, 2=No)
- d. An employer, not including a tax-free spending account for child care (1=Yes, 2=No)
- e. Someone else, (1=Yes, 2=No)

E9.

What is the easiest way for you to tell us the amount your household pays this relative to care for [CHILD]?

Do not include any money that you may receive from others to help pay for care.

= Hourly

= Daily

= Weekly

=Every 2 weeks

= Monthly

= Yearly

= Other – Specify:

Fill cpunit with what is selected

E10.

How much does YOUR HOUSEHOLD pay for care from this relative [CPUNIT], NOT COUNTING any money that may be received from others to help pay for care? Enter '0' if your household does not typically pay for this care.

[]

(E12 and E13 should be on the same page with enable/disable branching).

E12.

Does [CHILD] have any other care arrangements with a relative on a REGULAR BASIS?

Yes – go to E13

No – follow branching instructions beneath E13

E13. How many total hours each WEEK does [CHILD] spend in THOSE other care arrangements with relatives?

[] hours each week

Branching here This is branching information that tells us which question to navigate to after the relative section. It is not for Centurion and it is based on the care arrangements selected at the beginning of this section (Question E2).

If Nonrel=Yes & Daycare=Yes from E2: go to 2E3

*If Nonrel=Yes (and daycare=no) from E2: go to 2E3 set **FILLNONREL= this non-relative***

If Daycare=Yes (and Nonrel=no) from E2: go to 3E3

2nd ECPP section – non-relative care

2E3a.

These next questions ask about the care that [CHILD] receives from someone who is NOT related to [CHILD.PRONOUN2], EITHER IN YOUR HOME OR SOMEONE ELSE’S HOME. This includes home child care providers or neighbors, but NOT day care centers or preschools..

Does this non-relative provide care regularly at least once a week?

Yes – go to 2E3b

No – *if Daycare=Yes from E2 go to 3E3, else go to young children questions*

2E3b.

Does this non-relative who cares for [CHILD] live in your household?

Yes

No

2E3c.

Is [CHILD] cared for by this non-relative in your own home or another home?

Own home

Other home

Both

2E4.

About how many DAYS each WEEK does [CHILD] receive care from this non-relative?

[] days each week

2E5.

About how many HOURS each WEEK does [CHILD] receive care from this non-relative?

[] hours each week

2E6.

How old was [CHILD] in years and months when THIS PARTICULAR regular care arrangement with this non-relative began?

years

months

2E7.

Is [CHILD's] non-relative care provider age 18 or older?

Yes

No

2E8.

What language does this non-relative speak most when caring for [CHILD]?

English

Spanish

English and Spanish equally

A language other than English or Spanish

English and another language equally

2E11.

Will this non-relative care for [CHILD] when [CHILD.PRONOUN] is...

Please select one response for EACH item below.

a. sick but does not have a fever? (1=Yes, 2=No)

b. sick and has a fever? (1=Yes, 2= No)

2E12.

How many other children does this non-relative care for while caring for [CHILD]?

None

1 to 2

3 to 5

6 or more

2E13.

Would you recommend this non-relative care provider to another parent?

Yes

No

Branching on one page 2E14-2E10 (together on one page) with all four questions and 2E15, 2E9, and 2E10 are greyed out until 2E14 is answered Yes, then the next three questions are enabled. When 2E9 is answered E10 fills with the correct fill as per the cpunit.

2E14.

Is there any charge or fee for the care [CHILD] receives from this non-relative, paid either by you or some other person or agency?

Yes – go to 2E15

No – *nothing enables and participant can go to 2E16*

2E15.

Do any of the following people, programs, or organizations help pay for this non-relative to care for [CHILD]?

Please select one response for EACH item below.

- a. A relative of [this child] outside your household who provides money SPECIFICALLY for that care, not including general child support (1=Yes, 2=No)
- b. Your state welfare or family assistance program (this may be called Temporary Assistance for Needy Families [TANF] or something else) (1=Yes, 2=No)
- c. Another social service, welfare, child care, or other kind of agency (1=Yes, 2=No)
- d. An employer, not including a tax-free spending account for child care (1=Yes, 2=No)
- e. Someone else, (1=Yes, 2=No)

2E9.

What is the easiest way for you to tell us the amount your household pays this non-relative to care for [CHILD]?

Do not include any money that you may receive from others to help pay for care.

= Hourly

= Daily

= Weekly

=Every 2 weeks

= Monthly

= Yearly

= Other – Specify:

Fill cpunit with what is selected

2E10.

How much does YOUR HOUSEHOLD pay for care from this non-relative [CPUNIT], NOT COUNTING any money that may be received from others to help pay for care? Enter '0' if your household does not typically pay for this care.

[]

2E16.

Does [CHILD] have any other home-based care arrangements on a REGULAR BASIS with someone who is not a relative? Do not include arrangements at day care centers or preschools.

Yes

No

Branching here This is branching information that tells us which question to navigate to after the nonrelative section. It is not for Centurion and it is based on the care arrangements selected at the beginning of this section (Question E2).

If Daycare=Yes from E2: go to 3E3

If Daycare=No or missing from E2: then go to Young Children Questions

3rd ECPP section – day care, etc.

3E3.

We are interested in learning more about day care centers and early childhood programs that [CHILD] attends. The next questions ask about the PROGRAM where [CHILD] spends the most time. Is [CHILD]’s current PROGRAM a day care program, a childcare center, a preschool program, or a prekindergarten program?

- = Day care
- = Childcare center
- = Preschool
- = Prekindergarten

Fill Program with day care, childcare center, preschool or prekindergarten depending on what was selected in subsequent questions.

3E3b.

Does [CHILD] attend the [PROGRAM] regularly at least once a week?

- Yes – go to 3E4
- No – go to Young children questions

3E4.

Where is this [PROGRAM] located?

- = In a church, synagogue, or other place of worship
- = In a public elementary or secondary school
- = In a private elementary or secondary school
- = At a college or university
- = At a community center
- = At a public library
- = In its own building, office space, or storefront
- = Some other place - Specify:

3E5.

How many DAYS each WEEK does [CHILD] go to this [PROGRAM]?

- [] days each week

3E6.

How many HOURS each WEEK does [CHILD] go to this [PROGRAM]?

- [] hours each week

3E7.

How old was [CHILD] in years and months when [CHILD.PRONOUN] started going to THIS PARTICULAR [PROGRAM]?

[] years

[] months

3E8.

What language does [CHILD]'s main care provider or teacher at this [PROGRAM] speak most when caring for [CHILD.PRONOUN2]?

= English

= Spanish

= English and Spanish equally

= A language other than English or Spanish

= English and another language equally

3E9.

Has this [PROGRAM] provided any of the following services to [CHILD]?

Please select one response for EACH item below.

Yes No Don't know

- a. Hearing or vision testing
- b. Physical examinations
- c. Dental examinations
- d. Developmental screenings for speech and language, social, emotional, or motor development
- e. Medication administration
- f. Sick child care when [CHILD] is sick but does not have a fever
- g. Sick child care when [CHILD] is sick and has a fever

Branching on one page 3E12-3E11 (together on one page) with all four questions and 2E15, 2E9, and 2E10 are greyed out until 2E14 is answered Yes, then the next three questions are enabled. When 2E9 is answered 2E10 filld with the correct fill as per the cpunit.

3E12.

Is there any charge or fee for this [PROGRAM], paid either by you or some other person or agency?

Yes – go to 3E13

No – *nothing enables and participant can go to next page go to 3E8.5*

3E13.

Do any of the following people, programs, or organizations help pay for [CHILD] to go to this [PROGRAM]?

Please select one response for EACH item below.

- a. A relative of this child outside your household who provides money SPECIFICALLY for that care, not including general child support, (1=Yes, 2=No), numeric, radio
- b. Your state welfare or family assistance program (this may be called Temporary Assistance for Needy Families [TANF] or something else), (1=Yes, 2=No), numeric, radio
- c. Another social service, welfare, child care, or other kind of agency, (1=Yes, 2=No), numeric, radio
- d. An employer, not including a tax-free spending account for child care, (1=Yes, 2=No), numeric, radio
- e. Someone else, (1=Yes, 2=No), numeric, radio

3E10.

What is the easiest way for you to tell us the amount your household pays for [CHILD] to go to this [PROGRAM]?

Do not include any money that you may receive from others to help pay for care.

1= Hourly

2= Daily

3= Weekly

4= Every 2 weeks

5=Monthly

6= Yearly

7 = Other – Specify

Fill cpunit with what is selected

3E11.

How much does YOUR HOUSEHOLD pay for [CHILD] to go to this [program] [CPUNIT], NOT COUNTING any money that you may receive from others to help pay for care?

Enter '0' if your household does not pay for this program.

[],write-in

3E8.5

Have you ever been asked to remove [CHILD] from this [program] for the day due to one or more behavior issues, such as biting, being aggressive, not following directions, being overly active, being impulsive, or having little or no self-control?

- € Yes
- € No

All young children questions

65. How much difficulty did you have finding the type of child care or early childhood program you wanted for [CHILD]?

- No difficulty → GO TO question 84
- A little difficulty
- Some difficulty
- A lot of difficulty
- Did not find the type of child care program I wanted

66. What was the MAIN reason for the difficulty finding child care or early childhood programs?

- Cost
- Location
- Quality
- Lack of open slots for new children
- Child has a special need, and we could not find appropriate care
- Other, specify:

84. Has a health, education, or early intervention professional told you that [CHILD] has any of the following conditions?

Yes No

- a. A speech or language impairment.....
- b. Autism or autism spectrum disorder.....
- c. Attention Deficit Hyperactivity Disorder, ADHD or ADD.....

85. Has a health, education, or early intervention professional told you that [CHILD] is at risk for a developmental delay?

- Yes
- No

86. Have you or another parent expressed concerns to a health, education, or early intervention professional about [CHILD]'s development (for example, speech and language, social emotional, or motor skill development)?

- Yes
- No → GO TO directions after question 87

87. Overall, how satisfied are you with responses from health, education, or early intervention professionals about your concerns about [CHILD]'s development?

- Very satisfied
- Somewhat satisfied
- Somewhat dissatisfied
- Very dissatisfied

[If a yes to 84, 85, or 86, continue. Otherwise, go to child's background.]

89. Is [CHILD] receiving services for [CHILD.PRONOUN] condition (for example, speech therapy or physical therapy)?

- Yes
- No → GO TO question 92

90. Are CHILD's services through an Individualized Family Service Plan (IFSP) or Individualized Education Program (IEP)?

- Yes
- No → GO TO question 92

91. Thinking about [CHILD]'s IFSP or IEP, since September, how satisfied or dissatisfied have you been with the service provider's or school's communication with your family?

- Very satisfied
- Somewhat satisfied
- Somewhat dissatisfied
- Very dissatisfied

92. How often does [CHILD]'s condition interfere with his or her ability to do the following things?

Often Sometimes Seldom Never

- a. Learn.....
- b. Play with other children.....
- c. Go on outings.....
- d. Make friends.....

93. Is [CHILD] currently enrolled in early childhood special education?

- Yes
- No

[continue with child's background questions that will be tested and add general health item to end of child's background questions.]

Child background questions

(Enable/disable with C1 & C2)

C1.

Does [CHILD] sometimes live at another address (for example, because of a joint custody arrangement)?

Do not include vacation properties.

Yes – go to C2

No – go to C3

C2.

Does [CHILD]...

1= spend the most time at this address?

2= spend the most time at another address?

3= spend equal time at both addresses?

C3. *Only displayed to households going down PFI path

Does [CHILD] have Internet access on a cell phone?

Yes

No

C4.

In general, how would you describe [CHILD]'s health?

Excellent

Very good

Good

Fair

Poor

Go to Parent 1 section

Parent 1

The next questions are about [CHILD]’s parent(s) and guardian(s)].

P1.

How are you related to [CHILD]?

Mother (birth, adoptive, step, or foster)

Father (birth, adoptive, step, or foster)

Grandmother

Grandfather

Parent's girlfriend/boyfriend/partner

Aunt

Uncle

Brother

Sister

Other relationship - specify:

If mother or father, parents girlfriend/boyfriend/partner, other relationship is selected go to P6

All other responses go to P2

P6.

Are you [CHILD]’s...

1= Biological parent

2= Adoptive parent

3= Stepparent

4= Foster parent

6= Other guardian

If mother is selected then Parent 1 fill is CHILD’s mother; P1.Pronoun fill is she and go to F1

Else If father is selected then Parent 1 fill is CHILD’s father; P1.Pronoun fill is he and go to F1

If parents girlfriend/boyfriend/partner, or other relationship go to F0

P2.

Do you consider yourself one of [CHILD]'s parents or guardians?

Yes – Go to F0

No – Go to P3

If Grandmother is selected from P1 then Parent 1 fill is CHILD's grandmother; P1.Pronoun fill is she and go to F1

Else If Grandfather is selected from P1 then Parent 1 fill is CHILD's grandfather; P1.Pronoun fill is he and go to F1

Else If Brother is selected from P1 then Parent 1 fill is CHILD's brother; P1.Pronoun fill is he and go to F1

Else If Sister is selected from P1 then Parent 1 fill is CHILD's sister; P1.Pronoun fill is she and go to F1

Else If Aunt is selected from P1 then Parent 1 fill is CHILD's aunt; P1.Pronoun fill is she and go to F1

Else If Uncle is selected from P1 then Parent 1 fill is CHILD's uncle; P1.Pronoun fill is he and go to F1

Else If boyfriend/girlfriend/partner or other relationship is selected then Parent 1 fill is CHILD's parent or guardian and go to F0

P3.

Who is one of [CHILD]'s parents or guardians living in this household? We will ask about any other parent or guardian later.

Mother (birth, adoptive, step, or foster)

Father (birth, adoptive, step, or foster)

Grandmother

Grandfather

Parent's girlfriend/boyfriend/partner

Aunt

Uncle

Brother

Sister

Other relationship - specify:

If mother is selected then Parent 1 fill is CHILD's mother; P1.Pronoun fill is she and go to P7

Else If father is selected then Parent 1 fill is CHILD's father; P1.Pronoun fill is he and go to P7

Else If Grandmother is selected then Parent 1 fill is CHILD's grandmother; P1.Pronoun fill is she and go to #F1

Else If Grandfather is selected then Parent 1 fill is CHILD's grandfather; P1.Pronoun fill is he and go to #F1

Else If Brother is selected then Parent 1 fill is CHILD's brother; P1.Pronoun fill is he and go to #F1

Else If Sister is selected then Parent 1 fill is CHILD's sister; P1.Pronoun fill is she and go to #F1

Else If Aunt is selected then Parent 1 fill is CHILD's aunt; P1.Pronoun fill is she and go to #F1

Else If Uncle is selected then Parent 1 fill is CHILD's uncle; P1.Pronoun fill is he and go to #F1

Else If boyfriend/girlfriend/partner or other relationship is selected then Parent 1 fill is CHILD's parent or guardian and go to #F0

P7.

Is [PARENT 1 FILL] a ...

1= Biological parent?

2= Adoptive parent?

3= Stepparent?

4= Foster parent?

6= Other guardian?

Go to #F1

Parent 1 section: when parent/guardian is respondent :

F0.

Are you male or female?

Male

Female

Go to F1.

F1.

What is your current marital status?

1= Now Married

2= Widowed

3= Divorced

4= Separated

5= Never married

If now married (#1) go to F4

If #2-#5 and P1 is NOT boyfriend/girlfriend/partner then go to F2.

If #2-#5 and P1 is boyfriend/girlfriend/partner/ then go to F4

F2.

Are you currently living with a boyfriend/girlfriend or partner in this household?

Yes

No

Go to F4.

F4.

What was the FIRST language you learned to speak?

= English

= Spanish

= English and Spanish equally

= A language other than English or Spanish

= English and another language equally

F5.

What language do you speak most at home NOW?

= English

= Spanish

= English and Spanish equally

= A language other than English or Spanish

= English and another language equally

F9.

Where were you born?

1=One of the 50 United States or the District of Columbia

2=One of the U.S. territories (*Puerto Rico, Guam, American Samoa, U.S. Virgin Islands, or Mariana Islands*)

3=Another country

If 2 or 3 then go to F10; otherwise go to F11

F10.

How old were you when you first moved to the 50 United States or the District of Columbia?

If younger than 1, enter '0'.

years old

(F11 and F12 should be on the same page)

F11.

Are you of Hispanic, Latino, or Spanish origin?

1 = No, not of Hispanic, Latino, or Spanish origin

2 = Yes, Mexican, Mexican American, Chicano

3 = Yes, Puerto Rican

4 = Yes, Cuban

5 = Yes, another Hispanic, Latino, or Spanish origin; or more than one Hispanic, Latino, or Spanish origin

F12.

What is your race? You may select one or more races.

1=American Indian or Alaska Native

2=Asian

3=Black or African American

4=Native Hawaiian or other Pacific Islander

5=White

F13.

What is the highest grade or level of school that you completed?

1= 8th grade or less

2= High school, but no diploma

3= High school diploma or equivalent (GED)

4= Vocational diploma after high school

5= Some college, but no degree

6= Associate's degree (AA, AS)

7= Bachelor's degree (BA, BS)

8= Some graduate or professional education, but no degree

9= Master's degree (MA, MS)

10= Doctorate degree (PhD, EdD)

11= Professional degree beyond Bachelor's degree (MD, DDS, JD, LLB)

F14.

Are you currently attending or enrolled in a school, college, university, or adult learning center, or receiving vocational education or job training?

Yes

No

F15.

Which of the following best describes your employment status?

- 1= Employed for pay or income
- 2= Self-employed
- 3= Unemployed or out of work
- 4= Full-time student
- 5= Stay at home parent
- 6= Retired
- 7= Disabled or unable to work

If 1,2 go to F16

If 3 go to F17

If 4,5,6,7 – go to F18

F16.

About how many hours PER WEEK do you USUALLY work for pay or income, counting all jobs?

hours per week

Skip to F18

F17.

Have you been ACTIVELY looking for work IN THE PAST 4 WEEKS?

Yes

No

F18.

IN THE PAST 12 MONTHS, how many months (if any) have you worked for pay or income?

month(s)

F19.

Do you have Internet access on a cell phone?

Yes

No

F20.

How old are you?

years old

F21.

Besides you, is there a second parent or guardian for [CHILD] living in this household?

Yes

No

If yes, go to 2P3

If no, go to end.

Parent 1 section: when respondent is **NOT** the parent or guardian:
#F0.

Is [PARENT 1 FILL] male or female?

- Male
- Female

If male then P1.Pronoun fill is he; If female then P1.Pronoun fill is she; if missing then P1.Pronoun fill is he/she Go to #F1.

#F1.

What is [PARENT 1 FILL]'s current marital status?

- 1= Now Married
- 2= Widowed
- 3= Divorced
- 4= Separated
- 5= Never married

If now married (#1) go to #F4

If #2-#5 and P3 is NOT boyfriend/girlfriend/partner then go to #F2.

If #2-#5 and P3 is boyfriend/girlfriend/partner then go to #F4

#F2.

Is [PARENT 1 FILL] currently living with a boyfriend/girlfriend or partner in this household?

- Yes
- No

#F4.

What was the FIRST language [PARENT 1 FILL] learned to speak?

- = English
- = Spanish
- = English and Spanish equally
- = A language other than English or Spanish
- = English and another language equally

#F5.

What language does [PARENT 1 FILL] speak most at home NOW?

= English

= Spanish

= English and Spanish equally

= A language other than English or Spanish

= English and another language equally

#F9.

Where was [PARENT 1 FILL] born?

1=One of the 50 United States or the District of Columbia

2=One of the U.S. territories (*Puerto Rico, Guam, American Samoa, U.S. Virgin Islands, or Mariana Islands*)

3=Another country

If 2 or 3 then Show #F10;

#F10.

How old was [PARENT 1 FILL] when [P1.PRONOUN FILL] first moved to the 50 United States or the District of Columbia?

If younger than 1, enter '0'.

years old

(#F11 and #F12 should be on the same page)

#F11.

Are [PARENT 1 FILL] of Hispanic, Latino, or Spanish origin?

- 1 = No, not of Hispanic, Latino, or Spanish origin
- 2 = Yes, Mexican, Mexican American, Chicano
- 3 = Yes, Puerto Rican
- 4 = Yes, Cuban
- 5 = Yes, another Hispanic, Latino, or Spanish origin; or more than one Hispanic, Latino, or Spanish origin

#F12.

What is [PARENT 1 FILL]'s race? You may select one or more races.

- 1=American Indian or Alaska Native,
- 2=Asian,
- 3=Black or African American,
- 4=Native Hawaiian or other Pacific Islander
- 5=White

#F13.

What is the highest grade or level of school that [PARENT 1 FILL] completed?

- 1= 8th grade or less
- 2= High school, but no diploma
- 3= High school diploma or equivalent (GED)
- 4= Vocational diploma after high school
- 5= Some college, but no degree
- 6= Associate's degree (AA, AS)
- 7= Bachelor's degree (BA, BS)
- 8= Some graduate or professional education, but no degree
- 9= Master's degree (MA, MS)
- 10= Doctorate degree (PhD, EdD)
- 11= Professional degree beyond Bachelor's degree (MD, DDS, JD, LLB)

#F14.

Is [PARENT 1 FILL] currently attending or enrolled in a school, college, university, or adult learning center, or receiving vocational education or job training?

Yes

No

#F15.

Which of the following best describes [PARENT 1 FILL]'s employment status?

- 1= Employed for pay or income
- 2= Self-employed
- 3= Unemployed or out of work
- 4= Full-time student
- 5= Stay at home parent
- 6= Retired
- 7= Disabled or unable to work

If 1,2 go to #F16

If 3 go to #F17

If 4,5,6,7 – go to #F18

#F16.

About how many hours PER WEEK does [PARENT 1 FILL] USUALLY work for pay or income, counting all jobs?

hours per week

Skip to F18

#F17.

Has [PARENT 1 FILL] been ACTIVELY looking for work IN THE PAST 4 WEEKS?

Yes

No

#F18.

IN THE PAST 12 MONTHS, how many months (if any) has [PARENT 1 FILL] worked for pay or income?

month(s)

#F19.

Does [PARENT 1 FILL] have Internet access on a cell phone?

Yes

No

#F20.

How old is [PARENT 1 FILL]?

years old

#F21.

Besides [PARENT 1 FILL], is there a second parent or guardian for CHILD living in this household?

Yes

No

If yes, go to 2P3

If no, go to end.

Parent 2 section:

2P3. Is the second parent or guardian [CHILD]'s...

Mother (birth, adoptive, step, or foster)

Father (birth, adoptive, step, or foster)

Grandmother

Grandfather

Parent's girlfriend/boyfriend/partner

Aunt

Uncle

Brother

Sister

Other relationship - specify:

If mother is selected then if Parent 1 fill is CHILD's mother then Parent 2 fill is CHILD's other mother; otherwise, Parent 2 fill is CHILD's mother; P2.Pronoun fill is she and go to P8

Else If father is selected then if Parent 1 fill is CHILD's father then Parent 2 fill is CHILD's other father; otherwise, Parent 2 fill is CHILD's father; P2.Pronoun fill is he and go to P8

Else If Grandmother is selected then if Parent 1 fill is CHILD's grandmother then Parent 2 fill is CHILD's other grandmother; otherwise, Parent 2 fill is CHILD's grandmother; P2.Pronoun fill is she and go to 2F1

Else If Grandfather is selected then if Parent 1 fill is CHILD's grandfather then Parent 2 fill is CHILD's other grandfather; otherwise, Parent 2 fill is CHILD's grandfather; P2.Pronoun fill is he and go to 2F1

Else If Aunt is selected then if Parent 1 fill is CHILD's aunt then Parent 2 fill is CHILD's other aunt; otherwise, Parent 2 fill is CHILD's aunt; P2.Pronoun fill is she and go to 2F1

Else If Uncle is selected then if Parent 1 fill is CHILD's uncle then Parent 2 fill is CHILD's other uncle; otherwise Parent 2 fill is CHILD's uncle; P2.Pronoun fill is he and go to 2F1

Else If Brother is selected then if Parent 1 fill is CHILD's brother then Parent 2 fill is CHILD's other brother; otherwise Parent 2 fill is CHILD's brother; P2.Pronoun fill is he and go to 2F1

Else If Sister is selected then if Parent 1 fill is CHILD's sister then Parent 2 fill is CHILD's other sister; otherwise Parent 2 fill is CHILD's sister; P2.Pronoun fill is she and go to 2F1

Else If boyfriend/girlfriend/partner or other relative is selected then if Parent 1 fill is CHILD's parent or guardian then Parent 2 fill is CHILD's other parent or guardian; otherwise Parent 2 fill is CHILD's parent or guardian and go to 2F0

2F0.

Is [PARENT 2 FILL] male or female?

Male

Female

If male then P2.Pronoun fill is he; If female then P2.Pronoun fill is she; if missing then P2.Pronoun fill is he/she Go to 2F1.

P8.

Is [PARENT 2 FILL] a ...

1= Biological parent

2= Adoptive parent

3= Stepparent

4= Foster parent

6= Other guardian

2F1.

What is [PARENT 2 FILL]'s current marital status?

1= Now Married

2= Widowed

3= Divorced

4= Separated

5= Never married

If now married (#1) go to 2F4

If #2-#5 and 2P3 is NOT boyfriend/girlfriend/partner then go to 2F2.

If #2-#5 and 2P3 is boyfriend/girlfriend/partner then go to 2F4

2F2.

Is [PARENT 2 FILL] currently living with a boyfriend/girlfriend or partner in this household?

Yes

No

Go to 2F4

2F4.

What was the FIRST language [PARENT 2 FILL] learned to speak?

= English

= Spanish

= English and Spanish equally

= A language other than English or Spanish

= English and another language equally

2F5.

What language does [PARENT 2 FILL] speak most at home NOW?

= English

= Spanish

= English and Spanish equally

= A language other than English or Spanish

= English and another language equally

2F9.

Where was [PARENT 2 FILL] born?

1=One of the 50 United States or the District of Columbia

2=One of the U.S. territories (*Puerto Rico, Guam, American Samoa, U.S. Virgin Islands, or Mariana Islands*)

3=Another country

If 2 or 3 then go to 2F10; otherwise go to 2F11

2F10.

How old was [PARENT 2 FILL] when [P2.PRONOUN FILL] first moved to the 50 United States or the District of Columbia?

If younger than 1, enter '0'.

[] years old

(2F11 and 2F12 should be on the same page)

2F11.

Is [PARENT 2 FILL] of Hispanic, Latino, or Spanish origin?

1 = No, not of Hispanic, Latino, or Spanish origin

2 = Yes, Mexican, Mexican American, Chicano

3 = Yes, Puerto Rican

4 = Yes, Cuban

5 = Yes, another Hispanic, Latino, or Spanish origin; or more than one Hispanic, Latino, or Spanish origin

2F12.

What is [PARENT 2 FILL]'s race? You may select one or more races.

1=American Indian or Alaska Native,

2=Asian,

3=Black or African American,

4=Native Hawaiian or other Pacific Islander

5=White

2F13.

What is the highest grade or level of school that [PARENT 2 FILL] completed?

- 1= 8th grade or less
- 2= High school, but no diploma
- 3= High school diploma or equivalent (GED)
- 4= Vocational diploma after high school
- 5= Some college, but no degree
- 6= Associate's degree (AA, AS)
- 7= Bachelor's degree (BA, BS)
- 8= Some graduate or professional education, but no degree
- 9= Master's degree (MA, MS)
- 10= Doctorate degree (PhD, EdD)
- 11= Professional degree beyond Bachelor's degree (MD, DDS, JD, LLB)

2F14.

Is [PARENT 2 FILL] currently attending or enrolled in a school, college, university, or adult learning center, or receiving vocational education or job training?

Yes

No

2F15.

Which of the following best describes [PARENT 2 FILL]'s employment status?

- 1= Employed for pay or income
- 2= Self-employed
- 3= Unemployed or out of work
- 4= Full-time student
- 5= Stay at home parent
- 6= Retired
- 7= Disabled or unable to work

If 1,2 go to 2F16

If 3 go to 2F17

If 4,5,6,7 – go to 2F18

2F16.

About how many hours PER WEEK does [PARENT 2 FILL] USUALLY work for pay or income, counting all jobs?

hours per week

2F17.

Has [PARENT 2 FILL] been ACTIVELY looking for work IN THE PAST 4 WEEKS?

Yes

No

2F18.

IN THE PAST 12 MONTHS, how many months (if any) has [PARENT 2 FILL] worked for pay or income?

month(s)

2F19.

Does [PARENT 2 FILL] have Internet access on a cell phone?

Yes

No

2F20.

How old is [PARENT 2 FILL]?

years old

END

PFI.31.

Does your household have Internet access AT HOME on a computer or tablet?

Yes

No

SUBMIT BUTTON

New Screen:

Thank you for completing this survey. You may now close the browser.

New screen:

**We thank you for your time spent taking this survey. Your response has been recorded.
(this is default Qualtrics language)**