Attachment 14

2019 NSECE
Household Questionnaire Items - Overview and Comparison

August 2018

Contents

Overview of Proposed 2019 NSECE Questionnaire and Changes from 2012 NSECE Questionnaire

2019 Category	2019 Construct	Key changes from 2012 to 2019
Section A: Child Demographics	Number of children in household	• Additional item about non-custodial parent's financial contributions to child's basic needs.
	Roster of each child in household	
	Sex of each child in household	
	Dates of birth for each child in household	
	Country of birth for each child in household	
	Ethnicity of each child in household	
	Race of each child in household	
	Respondent's relationship to each child	
	Presence of each child's parent in the household	
	Emotional, developmental, or behavioral condition for each child that affects care	
	Confirmation of other parent of a specific child being mentioned previously	
	Location of parent(s) not in household	
	Work status of parent(s) not in household	
	Educational attainment of parent(s) not in household	
	Number of times nonresident parent(s) visited child in last 12 months	
	Nonresident parent contributes at least $500 to child	
	Confirmation of respondent providing information on both parents of each child.	
	Identification of additional nonresident parents	
Section B: Respondent and Household Adults Demographics	Number of people over 13 living in household	• Addition of item in non-parental households to identify guardian (including relative foster parent).
	Roster of person over 13 in household	
	Age of each person over 13 in household	
	Sex of each person over 13 in household	
	Respondent's relationship to each person over 13 in household	• Additional item regarding relationships in households with more than 2 parents.
	Any children living in household for each household member	
	Identification of each household member's children living in the household	
	Household member cares for children in household	
	Educational attainment of each household member over 13	
	Ethnicity of each household member over 13	

	Race of each household member over 13	
	Country of birth for each household member over 13	
	Year each household member first came to U.S.	
	Any guardian for child present in household	
	Type of guardian arrangement	
	Description of relationship between parents in the household	
	Language usually spoken in household	
	Any relative of children live nearby	
	Any nearby relative able to regularly care for children at no cost	
	Any nearby relative able to regularly care for children if paid	
Section C: Child Care: Types and Hours	Individuals and organizations that cared for each child last week	• Additional item on estimated enrollment size of individual provider.
	Additional information about specific child with no providers	• Additional item gathering payment status for individual care.
	Nonparental care schedule for each child last week	• Collection of elementary school status at child-provider (rather than household-provider) level.
	Identification of additional non-parental care providers who regularly care for child but did not care for child last week	
	Types of providers for each child Identification of last week providers as individuals or organizations	• Collection of kindergarten status for 5 year olds in center-based care.
	Any providers' personal relationship to child	• Collection of Head Start/Public Pre-K status for children < 6 in center-based care.
	Respondent's relationship to ECE provider	
	Provider lives or provides care in household	
	Any payment to provider who lives or provides care in household	• Time in arrangement for regular care.
	Age of child when provider began caring for them	• Consistency check for school-age children not reporting any non-parental care.
	Linkage of specific providers mentioned to nearby providers	
	Location of provider	
	Provider is a school	
	Provider offers single type of activity	
	Provider offers care on a drop-in basis	
	Provider regularly cares for child (at least 5 hours each week)	
	Child enrolled in kindergarten through grade eight	
	Child enrolled in kindergarten	
	Hours of the regular school day	
	Child participates in Head Start or preK	
	Provider cares for child at child's home or	

	somewhere else	
	Method of transportation to provider	
	Who usually takes child to provider	
	Any language difficulty speaking with provider	
	Perception of specific types of care for randomly selected child: nurturing environment	
	Perception of specific types of care for randomly selected child: child prepared for school	
	Perception of specific types of care for randomly selected child: child taught to get along with others	
	Perception of specific types of care for randomly selected child: safe environment	
	Perception of specific types of care for randomly selected child: affordable care	
	Perception of specific types of care for randomly selected child: flexibility for parent	
Section D: Respondent and spouse employment schedules	Respondent/spouse/relevant HHM worked for pay last week	• Content of section remains the same, but 2019 questionnaire proposes to only ask adult calendar to parents of any children in the household, excluding resident adult caregivers as eligible respondents.
	Respondent/spouse/relevant HHM attended high school or college last week	
	Respondent/spouse/relevant HHM attended additional courses or training programs last week	
	Respondent/spouse/relevant HHM daily activity schedule during last week	• Additional items regarding usual commute duration and mode of transportation (once per adult).
	Reconciliation of adult and child calendar to identify gaps in child care	
	Location where relevant HHM works most hours each week	
	How relevant HHM gets to work	
	How long it takes relevant HHM to get to work	
	How far in advance is work schedule known for relevant HHM	
	Identification of whether there is a usual work schedule and if it applied last week for relevant HHM	
	Occupation and industry of relevant household member	
	Current wage of relevant household member	
	Relevant household member ever worked for pay	
	Last job held by relevant household member	
	When last job was held by relevant household member	
	Hours worked each week at last job by relevant household member	
	Wage received at last job for relevant household member	

	Number of days last month a parent worked from home for a child care related reason	
	Number of work days missed in the last 3 months	
	Number of work days missed because child care provider unavailable in the last 3 months	
	Number of work days missed because child was sick in the last 3 months	
	Any wages lost by respondent/spouse/HHM for missed work	
	Number of days late to work/left early in the last 3 months	
	Number of days late to work/left early for child care reasons in the last 3 months	
	Any wages lost by respondent/spouse/HHM for being late to work/leaving early	
	Number of days special child care arrangements made in the last 3 months because of unavailable provider	
	Number of days special child care arrangements made in the last 3 months because of any other reason	
	Respondent/spouse participates in flexible spending account at work	
Section J: Child Care Payment and Subsidy to Each Provider	Proxy for household income below 200 percent of federal poverty line, which allows to subset subsidy-related items to these households	• Key content of this section remains the same as 2012, but skip patterns are substantially modified so that more provider-child arrangements are eligible to answer items regarding subsidies, participation in Head Start/Pre-K, use of providers' sliding scale, and copayments.
	Any payment from parent for each child care arrangement	
	Child care provider paid for by someone/someplace else for each child care arrangement	
	Other organizations/individuals who pay provider for each child care arrangement	
	Whether payment is a copayment for each child care arrangement	
	Job loss or reduction in work hours of parent would cause child to lose child care arrangement	• Change to skip patterns will also allow respondents to report cost information on children who use ECE providers located in public schools (e.g. preschool located in a K-8 school).
	Local resource/referral agency helped find arrangement or arrange for payment	
	Child care arrangement is free	
	Child care arrangement is a Head Start/Pre-K program	
	Child care arrangement relies on sliding fee scale	
	Amount paid for each child care arrangement	
	Other individual/organization reimburses provider	• Reduction in number of items regarding non-
	Any payments/reimbursements/vouchers paid	

	directly to the household for child care arrangement	monetary compensation for care provided to focus on type of services exchanged and frequency.
	Amount of payments/reimbursements/vouchers paid directly to the household for child care arrangement	• Questions regarding subsidy receipt will only be asked to HH who will likely be below 200 FPL (a proxy is used to detect them)
	Amount of payments/reimbursements/vouchers paid directly to household for a specific child is the same amount received for each other child using provider	
	Non-monetary compensation for care provided: Identification of services exchanged with provider for child care and frequency	• To detect any payment from parent we ask this question directly, instead of asking if the provider charges anything to the parents.
	Confirmation that payment to provider includes payment for other children and amount paid	
Section F: Non-parental Child Care Search	Date when respondent last searched for child care for selected child	• 2012 content will remain the same, but we will revise random selection of child for whom last search for child care occurred to favor young children.
	Last search included child care search for another child at same time	
	Main reason respondent initiated search for child care	
	Type of child care used at time of last child care search	• Additional items regarding whether or not parent sought assistance paying for care.
	Perception of different ECE types of care: Nurturing environment; educational Preparedness; social interactions; safety; affordability; flexibility for parents	
	More than one provider considered during last child care search	
	Type of provider(s) considered	
	Method(s) used by respondent to search for providers	
	Type(s) of information respondent collected about providers during search	
	Types of provider considered	
	Rate charged for care from considered provider(s)	
	Travel time to considered provider(s)	
	Perception of how well considered providers' schedule would cover needed hours of care	
	Respondent's overall quality rating for considered provider(s)	
	Any child care centers or organizations for school age children considered	
	Respondent considered someone they had a	

	prior relationship with to care for child	
	Respondent considered home-based care from someone with no prior relationship to respondent	
	Result of child care search	
	Determination of which provider (if two listed) was chosen after search	
	Main reason for choosing child care provider	
	Types of help paying for care requested during provider search	
Section G: Household characteristics	Respondent/spouse/partner housing tenure	• Item regarding receipt of public assistance will specify TANF and SSI.
	Car ownership	
	Total household income last month	• Additional items about household receipt of EITC and Child Care subsidies in past 12 months. Two questions about subsidy receipt.
	Total household income last calendar year	
	Number of different earners included in last year's total income	
	Any sources of income beyond job earnings included in last year's total income	
	Amount of last year's household income from sources other than job earnings	• Additional items about household internet access.
	Any public assistance or welfare payments in last calendar year	
	Type of health insurance coverage for selected child	
	Number of respondent's other children under 13 with health insurance coverage	
	Level of food insecurity in household	
	Types of food assistance currently received	
	Received EITC on most recent tax return	
	Any household members receive child care subsidies	
	Number of months in the past year a household member child care subsidies	
	Reason for end to child care subsidies	
	Ability to borrow $500 from someone/someplace for 3 months	
	Any internet access in the home	
	Device used for internet access	
Section H: Parental Consent to Access Administrative Records	Confirmation respondent is able to authorize release of records for eligible children	• The NSECE team is evaluating the possibility of reducing the number of households from which this consent would be collected. Content of the section would remain the same, but potentially some households would
	If respondent is not able to provide authorization: Name and contact information of person able to authorize release of records for eligible children	
	Respondent grants permission to access administrative records for eligible children	
	Roster and date of birth for every child under 13 in the household for whom respondent gives	

	permission	skip items in this section.
	Full name of authorizing adult	
	Confirmation of household's address	

Item Level Comparison between 2012 NSECE and Proposed 2019 Questionnaire

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

CAPI Household Screener		S_INTRO.
		Hello, my name is [NAME] and I'm from NORC at the University of Chicago. We're conducting a study sponsored by the U.S. Department of Health and Human Services about the supply and demand for social and educational services in your community. May I speak to someone living in this household who is 18 years or older and is knowledgeable about the household?
		  1. Knowledgeable person 18 years or older available to talk
		  2. Knowledgeable person 18 years or older, but not available now
		  3. No one in the household is 18 years or older
		  4. DK/REF	

		S1. First, I'd like to know how many children under 13 years of age are living in your household? Number of children under 13:_____	S1_M. First, I'd like to know how many children under 6 years of age are living in your household? Number of children under 6:_____
		Item not included in 2012.	S1_1. How many children between 6 and 13 years old live in this household? Number of children between 6 and 13:_____

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

		Item not included in 2012.	S1_2.
			Do you personally regularly look after any children under age 13 who are not your own? IF NEEDED: By regularly I mean five hours a week or more.
			   1. YES
			   2. NO

		S1_3.
		Does any other adult 18 years or older living in this household regularly look after any children under age 13 who are not his or her own? IF NEEDED: By regularly I mean five hours a week or more.
		   1. YES
		   2. NO
			Household screener item S1_3 has not changed.

		S1_4.
		Are children being looked after in someone's home or in a school or child-care center?
		   1. HOME
		   2. SCHOOL OR CENTER
		   3. BOTH
		   4. DK/REF
			Household screener item S1_4 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
		S1_5. Please tell me the names of individuals 18 years or older living in this household who regularly look after children under age 13 who are not their own. IF NEEDED: I am only interested in people looking after children in someone's home, not in a center or school. a. _____ b. _____ c. _____	Household screener item S1_5 has not changed.
		S1_6. May I verify that you live on (SAMPLE ADDRESS)? 1. YES 2. NO 3. KNOW/REFUSED	**S1_6_M.** May I verify that you live at (ADDRESS)? 1. YES 2. NO 3. DON'T KNOW/REFUSED
		S1_7. May I know your street address? _____ ___	Household screener item S1_7 has not changed.
		S2a. Is the parent/guardian of the youngest child in the household at least 18 years of age? 1. YES 2. NO 3. PARENT/GUARDIAN DOES NOT LIVE IN HOUSEHOLD 4. DK/REF	Household screener item S2a has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
		S2. May I speak to the parent/guardian of the youngest child in the household? 1. ALREADY SPEAKING WITH PARENT/GUARDIAN 2. PARENT/GUARDIAN AVAILABLE 3. PARENT/GUARDIAN LIVES IN HOUSEHOLD, NOT AVAILABLE AT THIS TIME 4. PARENT/GUARDIAN NOT AVAILABLE DURING SURVEY PERIOD 5. PARENT/GUARDIAN DOES NOT LIVE IN HOUSEHOLD 6. DON'T KNOW 7. REFUSED	Household screener item S2 has not changed.
		S3. Is there anyone available at this time who is 18 years or older and knows how the youngest child spends his or her day? 1. YES 2. NO, NOT AVAILABLE 3. DON'T KNOW/REF	Household screener item S3 has not changed.
		S4. May I speak with him/her please? 1. YES 2. NO 3. DON'T KNOW/REF	Household screener item S4 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
		S5. May I speak to [SELECTED FFNN PROVIDER]? 1. YES, ARE AVAILABLE 2. NO, ARE NOT AVAILABLE AT THIS TIME 3. NO, ARE NOT AVAILABLE DURING SURVEY PERIOD	Household screener item S5 has not changed.
Mail Household Screener		Q1. First, how many adults (18 years and older) live in this household? _____NUMBER OF ADULTS	Mail household screener item Q1 has not changed.
		Q2. How many children under the age of 6, including babies, live in this household? _____NUMBER OF CHILDREN	Mail household screener item Q2 has not changed.
		Q3. How many children between 6 and 13 years old live in this household? _____NUMBER OF CHILDREN	Mail household screener item Q3 has not changed.
		Q4. Is anyone in this household expecting to have a baby in the next three months? 1. YES 2. NO	Item not included in 2019.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
		Q5. Do you regularly look after any children under age 13 who are not your own for 5 hours a week or more? Please include children you may live with as well as children from other households. 1. YES 2. NO	Mail household screener item Q5 has not changed.
		Q6. Do you look after those children in someone's home or in a school or child-care center? 1. Home 2. School or center 3. Both	Mail household screener item Q6 has not changed.
		Q7. Not including yourself, how many other adults in the household, if any, regularly look after any children under age 13 who are not his or her own, for 5 hours a week or more? Again, please include looking after children in this household. _____Number of adults	Mail household screener item Q7 has not changed.
		Q8. Do they look after children in someone's home or in a school or child-care center? 1. Home 2. School or center 3. Both	Mail household screener item Q5 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
		Q9. Three months from now, how likely do you think it is that any adult in the household will be regularly looking after children under age 13 who are not their own? 1. Definitely will, 2. Probably will, 3. Might or might not, 4. Probably will not, or 5. Definitely will not	Item not included in 2019.
		Item not included in 2012.	Q8. Are there any adults age 18 or over in this household who require assistance with daily activities such as eating or walking? 1. Yes 2. No
		Item not included in 2012.	Q9. Does anyone in this household care for an adult who requires assistance with daily activities such as eating and walking? The care could be in this household or another. 1. Yes 2. No

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
		Q10. In general, how do you feel about the quality and cost of child care and early education available to families with children in your community? Do you feel.. 1. Very satisfied 2. Somewhat satisfied 3. Not satisfied at all 4. Or do you not have an opinion?	Mail household screener item Q10 has not changed.
		Q11. What is the best phone number to reach you if we have any questions about your survey? Name or Initial: _____ Phone: _ _ _ -_ _ _ -_ _ __	Mail household screener item Q11 has not changed.
Section A. Child Demographics	Number of children in household	**S1.** First, how many children under 13 live in your household? Number of children: _____ ☐ DK/REF	**S1_M.** First, how many children under 6 live in your household? Number of children under 6 years: _____ ☐ DK/REF

	Number of children in household	Item not included in 2012.	**S1_SA.**
			Next, how many children ages six to thirteen years live in your household?
			    Number of children 6 to 13 years old: _____
			    ☐ DK/REF

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

	Roster of each child in household	A1.
		
		[IF S1>1: For each child under 13, starting with the youngest,] Can you tell me the first names (or initials) of all of the children under 13 who usually live in this household?
		
		        Child #1: _____
		        Child #2: _____
		        Child #3: _____
		        Child #4: _____
		        Child #5: _____
		        Child #6: _____
		        Child #7: _____
		        Child #8: _____
		        Child #9: _____
		        Child #10: _____
			Household item A1 has not changed.

	Sex of each child in household	A1b.
		(ASK IF NECESSARY:). Is [CHILD NAME] a boy or a girl?
		    1. BOY
		    2. GIRL
		    3. DK/REF
			Household item A1b has not changed.

	Dates of birth for each child in household	A1c.
		In what month and year was [CHILD NAME] born?
		
		    MONTH: _____
		    ☐ DK/REF
		
		    YEAR: _____
			Household item A1c has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

	Country of birth for each child in household	A1c1.
		In what country was [CHILD NAME] born?
		    1. UNITED STATES
		    2. NOT IN U.S.
		    3. DK/REF
			Household item A1c1 has not changed.

	Country of birth for each child in household	A1c1_CNTRY [drop down list] In what country was [CHILD NAME] born? **NOTE:** Refer to instrument item A1c1_CNTRY for complete list of countries available to respondents.	Household item A1c1_CNTRY has not changed. **NOTE:** Refer to instrument item A1c1_CNTRY for complete list of countries available to respondents.

	Ethnicity of each child in household	A2d.
		Is [CHILD NAME] of Hispanic or Latino origin?
		    1. Yes
		    2. No
		    3. DK/REF
			Household item A2d has not changed.

	Race of each child in household	A2e.
		Is [CHILD NAME]…(SELECT ONE OR MORE)?
		    1. White
		    2. Black or African American
		    3. Asian
		    4. Native Hawaiian or other Pacific Islander
		    5. American Indian or Alaska Native
		    6. Other
			Household item A2e has not changed.

	Race of each child in household	A2e_OS. (PLEASE SPECIFY:) _____ ☐ DK/REF	Household item A2e_OS has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Respondent's relationship to each child	A2f. What is [CHILD NAME]'s relationship to you? 1. Son or daughter (biological or adopted) 2. Stepson or stepdaughter 3. Brother or sister 4. Grandchild 5. Foster child 6. Other relative (e.g., niece or nephew) 7. Other nonrelative 8. DK/REF	Household item A2f has not changed.
	Presence of each child's parent in the household	A2g. [IF A2f = 2, 3, 4, 5, 6, 7 OR 8] Does [CHILD NAME] have a parent in the household? [IF A2f =1 OR 2] Does [CHILD NAME] have another parent in the household? 1. Yes 2. No 3. If volunteered: mother deceased 4. If volunteered: father deceased 5. DK/REF	Household item A2g has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Emotional, developmental, or behavioral condition for each child that affects care	A2h. Does [CHILD NAME] have a physical, emotional, developmental, or behavioral condition that affects the way you provide care for [him/her]? 1. Yes 2. No 3. DK/REF	Household item A2h has not changed.
	Confirmation of other parent of a specific child being mentioned previously	A2G1. You mentioned that [CHILD NAME]'s parent does not live in the household. Have you already told me about that other parent? 1. Yes, child1 2. YES, CHILD2 3. YES, CHILD3 4. YES, CHILD4 5. YES, CHILD5 6. YES, CHILD6 7. YES, CHILD7 8. YES, CHILD8 9. YES, CHILD9 10. YES, CHILD10 11. No, parent not previously mentioned 12. DK/REF	Household item A2G1 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

	Location of parent(s) not in household	A2G2.
		You mentioned that [CHILD NAME]'s parent does not live in the household. Can you tell me the zip code or city and state where he/she lives?
		    1. ENTER ZIP CODE
		    2. ENTER CITY AND STATE
		    3. If volunteered: mother deceased
		    4. If volunteered: father deceased
		    5. DK/REF
			Household item A2G2 has not changed.

	Location of parent(s) not in household	A2G2_ZIP. ENTER PARENT'S ZIP CODE. ZIP CODE: _____	Household item A2G2_ZIP has not changed.
	Location of parent(s) not in household	A2G2_CS. ENTER PARENT'S CITY AND STATE. CITY: _____ -1 ☐ DK/REF STATE: _____	Household item A2G2_CS has not changed.

	Work status of parent(s) not in household	A2G7.
		Last week, was s/he working full-time, part-time, or something else?
		
		    1 Working full time
		    2 Working part time
		    3 Something else
		    4 DK/REF
			Household item A2G7 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Work status of parent(s) not in household	A2G7_SPEC. SPECIFY: _____ ☐ DK/REF	Household item A2G7_spec has not changed.
	Educational attainment of parent(s) not in household	A2G8. What is the highest grade or level of schooling he/she has completed? (READ IF NECESSARY) 1. 8th grade or less 2. 9th-12th grade no diploma 3. High school graduate or GED completed 4. Some college credit but no degree 5. Associate degree (AA, AS) 6. Bachelor's degree (BA, BS, AB) 7. Graduate or professional degree 8. DK/REF	Household item A2G8 has not changed.
	Number of times nonresident parent(s) visited child in last 12 months	A2G9. In the past 12 months, about how many times has he/she seen [CHILD NAME]? TIMES: _____ ☐ DK/REF	Household item A2G9 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Nonresident parent contributes at least $500 to child	Item not included in 2012.	A2G9a. In the past 12 months, has he/she contributed $500 or more for [CHILD NAME]'s basic needs, for example, food, clothing, or medical expenses? 1. Yes 2 No ☐ DK/REF
	Confirmation of respondent providing information on both parents of each child.	A2g10. Have you accounted for two parents for this child? 1. Yes 2. No	Household item A2g10 has not changed.
	Identification of additional nonresident parents	A2G10A. Does [CHILD NAME] have another parent who doesn't live in this household? 1. Yes 2. No 3. DK/REF	Household item A2G10A has not changed.
Section B: Respondent and Household Adults Demographics	Number of people over 13 living in household	B1a1. These next questions are about your family and the other people who live in your household and who are 13 years old or older. Including yourself, how many people 13 years old or older live in your household? NUMBER OF PEOPLE: _____ ☐ DK/REF	Household item B1a1 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Roster of person over 13 in household	B1A. [IF FIRST HHM:] Now please tell me the first names (or initials) of individuals over the age of 13 who usually live here. We will start with you. Can you please state your first name or initials? [IF SECOND OR HIGHER HHM:] (Please tell me the name (or initials) of the next individual over the age of 13 who usually lives here.) NAME: _____ ☐ DK/REF	Household item B1A has not changed.
	Age of each person over 13 in household	B1b. [IF FIRST HHM:] How old are you? [IF SECOND OR HIGHER HHM:] How old is [HHM NAME]? IF NEEDED: Your best guess is fine. AGE: _____ ☐ DK/REF	Household item B1b has not changed.
	Sex of each person over 13 in household	B1c. **IF NOT OBVIOUS**: [IF FIRST HHM:] Are you male or female? [IF SECOND OR HIGHER HHM:] Is [HHM NAME] male or female? 1. Male 2. Female 3. DK/REF	Household item B1c has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Respondent's relationship to each person over 13 in household	B1d. What is your relationship to [HHM NAME]? 1. Spouse (i.e., legally married) 2. Partner (i.e., not legally married) 3. Parent or Parent-in-law 4. Child or child-in-law 5. Sibling or sibling-in-law 6. Other relative 7. Non-relative 8. DK/REF	Household item B1d has not changed.
	Any children living in household for each household member	B1e. **IF NOT OBVIOUS**, **ASK**: Does [HHM NAME] have any children under the age of 13 in this household? IF NEEDED: Please include biological and adopted children. 1. Yes 2. No 3. DK/REF	Household item B1e has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Identification of each household member's children living in the household	B1e_1. Who are [HHM NAME]'s children in this household? [SELECT ALL THAT APPLY] 1. Child1 2. Child2 3. Child3 4. Child4 5. Child5 6. Child6 7. Child7 8. Child8 9. Child9	Household item B1e_1 has not changed.
	Household member cares for children in household	B1f. Does [HHM NAME] ever look after the young children in the household? IF NEEDED: How about for more than 5 hours at a time? 1. Yes 2. No 3. DK/REF	Household item B1f has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Educational attainment of each household member over 13	B1j. What is the highest grade or level of schooling that [you have/[HHM NAME] has] ever completed? (READ IF NECESSARY) 1. 8th grade or less 2. 9th-12th grade no diploma 3. High school graduate or GED completed 4. Some college credit but no degree 5. Associate degree (AA, AS) 6. Bachelor's degree (BA, BS, AB) 7. Graduate or professional degree 8. DK/REF	Household item B1j has not changed.
	Ethnicity of each household member over 13	B1m. Are you of Hispanic or Latino origin? Is [HHM NAME] of Hispanic or Latino origin? 1. Yes 2. No 3. DK/REF	B1m_M. What is your ethnicity? Is [HHM NAME] of Hispanic or Latino origin? 1. Hispanic or Latino 2. Not Hispanic or Latino 3. DK/REF

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Race of each household member over 13	B1n. Which of the following are you… Which of the following is [HHM NAME]… (SELECT ONE OR MORE) 1. White 2. Black or African American 3. Asian 4. Native Hawaiian or other Pacific Islander 5. American Indian or Alaska Native 6. IF VOLUNTEERED: OTHER 7. DK/REF	B1n_M. What is your race… Which of the following is [HHM NAME]… (SELECT ONE OR MORE) 5 American Indian or Alaska Native 3 Asian 2 Black or African American 4 Native Hawaiian or Other Pacific Islander 1 White 6　IF VOLUNTEERED: OTHER 7 DK/REF
	Country of birth for each household member over 13	B1o. [IF FIRST HHM:] In which country were you born? [IF SECOND OR HIGHER HHM:] In which country was [HHM NAME] born? 1. United States 2. Not in U.S. 3. DK/REF	Household item B1o has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Country of birth for each household member over 13	B1o_CNTRY [IF FIRST HHM:] In which country were you born? [IF SECOND OR HIGHER HHM:] In which country was [HHM NAME] born? **NOTE:** Refer to instrument item B1o_CNTRY for complete list of countries available to respondents.	Household item B1o_CNTRY has not changed.
	Year each household member first came to U.S.	B1o_1. [IF FIRST HHM:] In what year did you first come to USA? [IF SECOND OR HIGHER HHM:] In what year did [he/she] first come to USA? YEAR: _____ ☐ DK/REF	Household item B1o_1 has not changed.

	Any guardian for child present in household	Item not included in 2012.	B1_CUST.
			I do not have a parent recorded for [CHILD] in this household. Who is a guardian for [CHILD]?
			    < list of B adults>
			    1. No guardian
			    2. Guardian or parent outside of household only

	Type of guardian arrangement	Item not included in 2012.	B1_CUST_a.
			Is that a formal relationship such as foster care or legal guardianship, or an informal arrangement?
			    1. Foster
			    2. Legal, not foster
			    3. Informal

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Description of relationship between parents in the household	Item not included in 2012.	B1_STRUCT. I see that there are [x] number of parents of young children in this household. Could you describe the family, marriage or other relationships between the [x] parents? INTERVIEWER: FOR EXAMPLE, 1 PARENT MAY BE THE DAUGHTER OF ANOTHER PARENT, OR TWO SISTERS AND THEIR HUSBANDS MAY BE LIVING IN THE SAME HOUSEHOLD. VERBATIM: _____ _____
	Language usually spoken in household	B2. Now I have some additional questions about your household and other family. These questions are about the whole household and not just individual people. What language is usually spoken in this household? (CHECK ALL THAT APPLY) **NOTE:** Refer to instrument item B2 for complete list of languages available to respondents.	Household item B2 has not changed.

	Language usually spoken in household	B2_SPEC.
		    SPECIFY LANGUAGE
		
		       _____
			Household item B2_SPEC has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

	Any relative of children live nearby	B3.
		[Does your child/Do your children] have any relatives who live within 45 minutes of your child's home? Please include relatives on your side of the family as well as relatives of the child's other parent.
		IF NEEDED: Please report all relatives, even if they could not or would not provide care for a child.
		  1. Yes
		  2. No
		  3. DK/REF
			B3_M.
			[Does your child/Do your children] have any relatives who live within 45 minutes of your child's home? Please include relatives on your side of the family as well as relatives of the child's other parent.
			IF NEEDED: Please report all relatives, even if they could not or would not provide care for a child.
			  1. Yes
			  2. No
			  3. DK/REF
			  4. IF VOLUNTEERED: YES, BUT CHILD HAS NO RELATIONSHIP WITH THEM

	Any nearby relative able to regularly care for children at no cost	B3b.
		Would any of these relatives be able to care for your child/children on a regular basis with no payment or only payment that covers transportation costs?
		
		  1. Yes
		  2. No
		  3. DK/REF
			Household item B3b has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Any nearby relative able to regularly care for children if paid	B3c. Would any of these relatives be able to care for your child if you were to pay them? 1. Yes 2. No 3. DK/REF	Household item B3c has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
Section C: Child Care: Types and Hours	Individuals and organizations that cared for each child last week	C1. [Let's start with [CHILD 1 NAME]./Now let's talk about [CHILD X NAME].] Please tell me all of the people or organizations that cared for [him/her] last week. Do not include any parent of a child under 13 in this household or his or her spouse. [IF CHILD AGE 5 YEARS OR MORE]: If your child attended regular school for any grade from kindergarten through eighth grade, please tell me the name of that school. If [CHILD NAME] also attended a before or after-school program, either at the school or somewhere else, please mention that program separately. Please also include any other activities, such as playdates or babysitters. 1. [HHM 1] 2. [HHM 2] 3. [HHM 3] 4. [HHM 4] 5. [HHM 5] 6. [HHM 6] 7. [HHM 7] 8. [HHM 8] 9. [HHM 9] 10. [HHM 10] 11. [HHM 11] 12. [HHM 12] 13. [HHM 13] 14. [HHM 14] 15. [HHM 15]	Household item C1 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Individuals and organizations that cared for each child last week	C1A1. ENTER PROVIDER NAME. _____ ☐ DK/REF	Household item C1A1 has not changed.

	Individuals and organizations that cared for each child last week	C1A_MORE.
		Is there another provider for [CHILD]?
		    1. Yes
		    2. No
		    3. DK/REF
			Household item C1A_MORE has not changed.

	Additional information about specific child with no providers	Item not included in 2012.	IF CHILD IS AGE 8 YEARS OR OLDER AND NO PROVIDERS ARE INDICATED, ASK: C1A_SA_CHECK. I don't have any providers recorded for [CHILD]. Some children his or her age who do not have any providers are home-schooled or have an illness or disability that limits their activities. Is there anything you'd like to share about how [CHILD] spends his or her time? VERBATIM: _____ _____

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

	Nonparental care schedule for each child last week	C2.
		IF NEEDED: Please tell me about last week, even if it was an unusual week. I'll ask you other questions about usual schedule later on.
		
		Thinking about **last [DAY]** (that is, [FILL DATE]), who cared for [CHILD NAME]? Do not include any parent of a child under 13 in this household or his or her spouse.
		
		1. Select Provider
		  2. {prov}
		  3. {prov}
		  4. {prov}
		  5. {prov}
		  6. {prov}
		  7. {prov}
		  8. {prov}
		  9. {prov}
		  10. {prov}
		  11. {prov}
		  12. {prov}
		  13. {prov}
		  14. {prov}
		  15. {prov}
		  16. {prov}
		  17. {prov}
		  18. {prov}
		  19. {prov}
		  20. {prov}
		  21. {prov}
		  22. Used parental care only
		Add new provider
			Household item C2 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Nonparental care schedule for each child last week	C2A1. What time last [DAY] did [PROVIDER] start to care for [CHILD NAME]? START TIME:	Household item C2A1 has not changed.
	Nonparental care schedule for each child last week	C2D. When did the care with [PROVIDER] end last [DAY]? END TIME:	Household item C2D has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Nonparental care schedule for each child last week	C2D2. Thinking about [CHILD NAME]'s schedule for last week, was any day's schedule last week the same as last [Monday/Tuesday/Wednesday/Thursday/Friday/Saturday/Sunday]? SELECT ALL THAT APPLY. 1. Monday 2. Tuesday 3. Wednesday 4. Thursday 5. Friday 6. Saturday 7. Sunday 8. NO IDENTICAL DAYS NOTE: FILL [DAY] SCHEDULE IN THE GRID BELOW. <table><tr><td>PROVIDER:</td><td>START TIME:</td><td>END TIME:</td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr></table>	Household item C2D2 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Nonparental care schedule for each child last week	C2A2. [IF NEEDED: Sometimes a child's schedule on a specific day is different from his/her regular schedule for that day of the week.] Was [CHILD NAME]'s schedule last [DAY SELECTED IN C2D2] identical to [ORIGINAL DAY] that week, or were there some differences in when or where s/he spent time those two days? 1. identical 2. some differences	Household item C2A2 has not changed.
	Identification of additional non-parental care providers who regularly care for child but did not care for child last week	C3. Does anyone else regularly care for [CHILD NAME], even if they didn't happen to care for [him/her] last week? By regularly I mean at least five hours each week. 1. YES 2. NO 3. DK/REF	Household item C3 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Identification of additional non-parental care providers who regularly care for child but did not care for child last week	C4. Who usually provides care for [CHILD NAME] but didn't do so last week? NAME: _____ ☐ DK/REF	Household item C4 has not changed.

	Identification of additional non-parental care providers who regularly care for child but did not care for child last week	C4a.
		Does that care usually take place at your home or somewhere else?
		    1. R's home
		    2. Somewhere else
		    3. DK/REF
			Household item C4a has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Identification of additional non-parental care providers who regularly care for child but did not care for child last week	C4b. How many hours per week does [C4 PROVIDER] usually care for [CHILD NAME]? NAME: _____ ☐ DK/REF	Household item C4b has not changed.

	Identification of additional non-parental care providers who regularly care for child but did not care for child last week	C4c.
		Was (CHILD)'s schedule last Monday the same as another child's Monday schedule?
		   1. Yes
		   2. No
			Household item C4c has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Identification of additional non-parental care providers who regularly care for child but did not care for child last week	C4C1. Which child had the same [DAY] schedule? 1. Child 1 2. Child 2 3. Child 3 4. Child 4 5. Child 5 6. Child 6 7. Child 7 8. Child 8 9. Child 8 10. Child 10	Household item C4C1 has not changed.
	Identification of additional non-parental care providers who regularly care for child but did not care for child last week	C4C2. [IF NEEDED: Sometimes a (CHILD)'s schedule on a specific day is different from his/her regular schedule for that day of the week.] Was [CHILD NAME]'s schedule last [DAY] identical to [CHILD SELECTED IN C4C1]'s schedule, or were there some differences in when or where s/he spent time last [DAY]? 1. IDENTICAL 2. SOME DIFFERENCES	Household item C4C2 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Types of providers for each child Identification of last week providers as individuals or organizations	C5A. [**IF NOT OBVIOUS, ASK:**] Is (PROVIDER) an individual or an organization? 1. Individual 2. Individual with family day care 3. Organization 4. DK/REF	Household item C5A has not changed.
	Any providers' personal relationship to child	C5C. Did you have a personal relationship with (PROVIDER) before s/he began caring for your child/children? 1. YES 2. NO 3. DK/REF	Household item C5C has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Respondent's relationship to ECE provider	C5CA. What is your relationship to (PROVIDER)? 1. R is provider's former spouse/partner 2. R is provider's child/son/daughter-in-law 3. R is provider's brother or sister or brother or sister-in-law 4. R is provider's other relative 5. R is provider's friend 6. R is provider's neighbor 7. DK/REF	C5CA_M. What is your relationship to (PROVIDER)? 1. R IS PROVIDER'S FORMER SPOUSE/PARTNER (GO TO C5D) 2. R IS PROVIDER'S CHILD/SON/DAUGHTER-IN-LAW (GO TO C5CB) 3. R IS PROVIDER'S BROTHER OR SISTER OR BROTHER OR SISTER-IN-LAW (GO TO C5D) 4. R IS PROVIDER'S OTHER RELATIVE (GO TO C5CB) 5. R IS PROVIDER'S FRIEND (GO TO C5D) 6. R IS PROVIDER'S NEIGHBOR (GO TO C5D) 7. R HAD ANOTHER NON-RELATIVE RELATIONSHIP WITH PROVIDER 8. DK/REF (GO TO C5D)
	Respondent's relationship to ECE provider	C5CB. (IF C5CA = 2) So (PROVIDER) Is the CHILD's grandparent? / (IF C5CA = 4) Is this [CHILD]'s grandparent? 1. Yes 2. No 3. DK/REF	Household item C5CB has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

	Provider lives or provides care in household	C5D.
		(IF NOT OBVIOUS:) Does this individual live in this household or provide care in this household?
		    1. YES, LIVES HERE
		    2. YES, PROVIDES CARE HERE BUT DOES NOT LIVE HERE
		    3. NO, NEITHER LIVES HERE NOR PROVIDES CARE HERE
		    4. DK/REF
			Household item C5D has not changed.

	Any payment to provider who lives or provides care in household	Item not included in 2012.	C5E. Do you usually pay this person for looking after your child(ren)?
			    1. Yes
			    2 No
			    3 DK/REF

	Age of child when provider began caring for them	Item not included in 2012.	C5F. How old was [CHILD] when [PROVIDER] started regularly looking after him or her? ____ Months ___ Years
	Linkage of specific providers mentioned to nearby providers	C6. (IF NOT OBVIOUS:) What is the full name of [PROVIDER NAME]? INTERVIEWER INSTRUCTION: RE-ENTER FULL NAME OF PROVIDER IF OBVIOUS. _____	Household item C6 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Linkage of specific providers mentioned to nearby providers	C7. I have a list of most child care providers in the area, and I'll see if this program is on my list. In that case, I won't have to ask you quite as many questions about their care. SELECT STATE PROVIDER LOCATED IN	Household item C7 has not changed.
	Linkage of specific providers mentioned to nearby providers	C7_2. IN WHAT CITY IS [PROVIDER NAME] LOCATED? CITY:	Household item C7_2 has not changed.
	Linkage of specific providers mentioned to nearby providers	C7_3. PLEASE SELECT PROVIDER. IF PROVIDER NOT LISTED, SELECT "NOT ON LIST".	Household item C7_3 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

	Location of provider	C8.
		[IF C5A=2 OR 3]IF ORGANIZATION: I'm not finding the listing.] Could you tell me the street address where (s/he lives/they are)?
		
		IF NEEDED: Your answers to this and all other questions will be private and released only in statistical form.
		
		IF NEEDED: Could I know just the zip code and the intersection nearest provider? You can just tell me two cross-streets and the zip code, or the city and state and cross streets.
		
		IF NEEDED: We know that the location of child care is very important to parents and children. We only want the location of the provider in order to understand the distances between providers, the child's home, and other important locations.
		    1. ENTER ADDRESS
		    2. ENTER ZIP AND CROSS STREETS
		    3. ENTER CITY/STATE AND CROSS STREET
		    4. DK/REF
			C8_M.
			[IF C5A=2 OR 3]IF ORGANIZATION: I'm not finding the listing.] Could you tell me the street address where (s/he lives/they are)?
			
			IF NEEDED: Your answers to this and all other questions will be privatel and released only in statistical form.
			
			IF NEEDED: Could I know just the zip code and the intersection nearest provider? You can just tell me two cross-streets and the zip code, or the city and state and cross streets.
			
			IF NEEDED: We know that the location of child care is very important to parents and children. We only want the location of the provider in order to understand the distances between providers, the child's home, and other important locations.
			    1. ENTER ADDRESS
			    2. ENTER ZIP AND CROSS STREETS
			    3. ENTER CITY/STATE AND CROSS STREET
			
			DK/REF

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Location of provider	C8_ADDR2. ENTER ADDRESS INFORMATION: ADDRESS _____ ☐ DK/REF CITY _____ ☐ DK/REF STATE _____ ☐ DK/REF ZIP _____ ☐ DK/REF	Household item C8_ADDR2 has not changed.
	Location of provider	C8_CROSS. CROSS-STREETS ZIP _____ ☐ DK/REF STREET 1 _____ ☐ DK/REF STREET 2 _____ ☐ DK/REF	Household item C8_CROSS has not changed.
	Location of provider	C8_CROSS2. CROSS-STREETS CITY _____ ☐ DK/REF STATE _____ ☐ DK/REF STREET 1 _____ ☐ DK/REF STREET 2 _____ ☐ DK/REF	Household item C8_CROSS2 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

	Provider is a school	C8A.
		(INTERVIEWER: CODE OR ASK IF NECESSARY:) Is [PROVIDER NAME] a regular school such as a K to 6 or K to 8 elementary school or grades 6-8 middle school?
		    1. Yes
		    2. No
		    3. DK/REF
			Item not included in 2019.

	Provider offers single type of activity	C8_3.
		Some organizations provide a single type of activity for children, that many children may participate in for only a couple of hours each week. These could include tutoring programs, sports, or music or dance lessons.
		
		Would you say that [PROVIDER] offers a single type of activity or more than one type of activity?
		
		    1 Single
		    2 More than one
		    3 DK/REF
			Household item C8_3 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Provider offers care on a drop-in basis	C8_4. Some organizations offer drop-in care that parents can use on an unscheduled basis and without signing up in advance. Gyms, shopping malls, community centers and churches are some places that can offer drop-in care. Does [CHILD] attend [PROVIDER] on a drop-in basis? 1 YES 2 NO 3 DK/REF	Household item C8_4 has not changed.
	Provider regularly cares for child (at least 5 hours each week)	C9. Does [PROVIDER] care for (CHILD) regularly? By regularly, we mean at least five hours each week. 1. YES 2. NO 3. DK/REF	Household item C9 has not changed.
	Child enrolled in kindergarten through grade eight	Item not included in 2012.	C8B. (IF [PROVIDER] IS AN ELEMENTARY SCHOOL IN SAMPLE FRAME AND CHILD IS AGE 60 MONTHS OR OLDER, ASK c8B. ELSE SKIP TO INSTRUCTION ABOVE C1a2_INTRO) Is [CHILD] enrolled in regular elementary or middle school, grades kindergarten through eight, at [PROVIDER]? 1. YES 2. NO 3. DK/REF

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

	Child enrolled in kindergarten	Item not included in 2012.	C8C. (IF CHILD IS 54 MONTHS TO 71 MONTHS, ASK) Is [CHILD] enrolled in kindergarten (IF CALIFORNIA: or transitional kindergarten) at [PROVIDER]?
			    1 Yes (KINDERGARTEN OR CALIFORNIA TRANSITIONAL KINDERGARTEN)
			    2 No (INCLUDES Pre-Kindergarten)

	Hours of the regular school day	C8_1. Last week, what were the hours of the regular school day at [PROVIDER]? **IF HOURS VARIED BY DAY, RECORD LONGEST DAY LAST WEEK.**
		
		     START TIME: _____
		     ☐ DK/REF
		     END TIME: _____
		     ☐ DK/REF
			Household item C8_1 has not changed.

	Child participates in Head Start or preK	Item not included in 2012.	C8_2. Does [CHILD] participate in a Head Start or Public Pre-Kindergarten program at [PROVIDER]?
			    1. YES
			    2 NO

	Provider cares for child at child's home or somewhere else	C1a2.
		Please tell me whether this care usually takes place in your home or somewhere else.
		
		    1 R'S HOME
		    2 SOMEWHERE ELSE
		    3 DK/REF
			Household item C1a2 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Method of transportation to provider	C1B. How did your child/children usually get to [PROVIDER] last week? **(CODE ONE PER CHILD, DO NOT PROBE FOR ADDITIONAL.)** 1. Walking or bicycle 2. Car 3. Public transportation 4. School bus 5. Other 6. DK/REF	Household item C1B has not changed.
	Who usually takes child to provider	C1C. Who usually took your child/children there? <list PROVIDERS AND PARENTS> ☐ DK/REF	Household item C1C has not changed.
	Any language difficulty speaking with provider	C11. Do you have any difficulties talking with (PROVIDER/your caregiver at PROVIDER) because both of you aren't comfortable speaking the same language? 1 YES 2 NO 3 DK/REF	Household item C11 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Perception of specific types of care for randomly selected child: nurturing environment	**C14_1.** Now how would you rate it on having a nurturing environment for children of the same age as (SELECTED CHILD IN C14_SELECT)? Would you say: excellent, good, fair, poor? 1. Excellent 2. Good 3. Fair 4. Poor 5. No opinion 6. DK/REF	Household item C14_1 has not changed.
	Perception of specific types of care for randomly selected child: child prepared for school	**C14_2.** How would you rate (center care/relative or friend care/family day care/parental care) on helping children be ready to learn in school for children of the same age as (SELECTED CHILD IN C14_SELECT)? Would you say excellent, good, fair, poor? 1. Excellent 2. Good 3. Fair 4. Poor 5. No opinion 6. DK/REF	Household item C14_2 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Perception of specific types of care for randomly selected child: child taught to get along with others	C14_3. How about (center care/relative or friend care/family day care/parental care) for teaching children how to get along with other children? (Would you say it is excellent, good, fair, poor very good, somewhat good, or not very good for children of the same age as (SELECTED CHILD IN C14_SELECT)?) 1. Excellent 2. Good 3. Fair 4. Poor 5. No opinion 6. DK/REF	Household item C14_3 has not changed.
	Perception of specific types of care for randomly selected child: safe environment	C14_4. How about safety in center care/relative or friend care/family day care/parental care (for children of the same age as (SELECTED CHILD IN C14_SELECT))? (Would you say it is excellent, good, fair, poor for children of the same age as (SELECTED CHILD IN C14_SELECT)?) 1. Excellent 2. Good 3. Fair 4. Poor 5. No opinion 6. DK/REF	Household item C14_4 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Perception of specific types of care for randomly selected child: affordable care	C14_5. How about affordability of center care/relative or friend care/family care/parental care ()? (Would you say this type of care is excellent, good, fair, poor in terms of parents being able to afford it?) 1. Excellent 2. Good 3. Fair 4. Poor 5. No opinion 6. DK/REF	Household item C14_5 has not changed.
	Perception of specific types of care for randomly selected child: flexibility for parent	C14_6. How about flexibility for parents who use center care/relative or friend care/family care/parental care? (Would you say this type of care is excellent, good, fair, poor for parents' flexibility?) 1. Excellent 2. Good 3. Fair 4. Poor 5. No opinion 6. DK/REF	Household item C14_6 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

Section D: Respondent and Spouse Employment Schedules	Respondent/spouse/ relevant HHM worked for pay last week	D1A.
		I'm going to ask you about (your/HHMEM's) current work situation. Last week, did (you/s/he) do any work for pay? IF NEEDED: Please include freelance work, work in the military, work for a family-owned business even if (you/s/he) did not get paid, and work on (your/his/her) own business or farm.
		  1. YES
		  2. NO
		  3. DK/REF
			Household item D1A has not changed.

	Respondent/spouse/ relevant HHM attended high school or college last week	D1B.
		Last week, (did you/was s/he) attend classes in a high school, college or university?
		  1. YES, ATTENDED
		  2. NO, NOT ATTENDED
		  3. DK/REF
			Household item D1B has not changed.

	Respondent/spouse/ relevant HHM attended additional courses or training programs last week	D1C.
		Other than high school, college, or university, did (you/s/he) attend any courses or training programs last week designed to help people find a job, improve their job skills, or learn a new job?
		  1. YES, IN TRAINING
		  2. NO, NOT IN TRAINING
		  3. DK/REF
			Household item D1C has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

	Respondent/spouse/ relevant HHM daily activity schedule during last week	D1D.
		Thinking about last [DAY], [FILL DATE], did you go to work/school/training?
		1. Select Activity
		    2. Work
		    3. School
		    4. Training
		    5. NO WORK/SCH/TRNG ACTIVITY
		DK/REF
			Household item D1D has not changed.

	Respondent/spouse/ relevant HHM daily activity schedule during last week	D1D_1. What time did you begin [work/school/training] on **last [DAY]**? (Please include time you spent commuting to and from [work/school/training] in your response.) TIME STARTED:	Household item D1D_1 has not changed.
	Respondent/spouse/ relevant HHM daily activity schedule during last week	D1D_2. What time did you end [work/school/training] on **last [DAY]**? TIME ENDED:	Household item D1D_2 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Respondent/spouse/ relevant HHM daily activity schedule during last week	D1D_C2. What day(s) last week is (are) the same as [your/his/her] [DAY OF WEEK] schedule last week for work, school or training? 1. Monday 2. Tuesday 3. Wednesday 4. Thursday 5. Friday 6. Saturday 7. Sunday 8. No identical days	Household item D1D_C2 has not changed.
	Reconciliation of adult and child calendar to identify gaps in child care	CHK3. It seemed that (CHILD) was not in any care and you (and your spouse/partner) were at work/school/training from [INSERT SPELL OF TIME]. Was (CHILD) with you (and/or your spouse/partner) at work/school/training, or did he/she care for himself/herself during that period of time? 1. Child with r/r spouse/partner at work/school/training 2. Child with r/spouse/partner and r/spouse not at work/school/training 3. Child cared for him/herself 4. Child with sibling less than 18 5. OTHER ARRANGEMENT	Household item CHK3 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Reconciliation of adult and child calendar to identify gaps in child care	CHK3_SPECIFY. ENTER ANY ADDITIONAL INFORMATION ABOUT CHILD CARE GAP: _____	Household item CHK3_SPECIFY has not changed.
	Respondent/spouse/ relevant HHM daily activity schedule during last week	D1D_C3. Sometimes people's schedule on a specific day is different from their regular schedule for that day of the week. Thinking about last [DAY SELECTED IN D1D_C2] , was your/his/her schedule last [DAY SELECTED IN D1D_C2] identical to last [DAY D1D_C2 ASKED ABOUT] that week, or were there some differences in when you/he/she arrived at or left work, school, or training on those two days? 1. Identical 2. Some differences	Household item D1D_C3 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Location where relevant household member works most hours each week	D2_1. Where is the place that (you/he/she) work(s) the most hours each week? Please tell me the address or nearest major intersection. 1. Work from home 2. No set workplace 3. Enter address 4. Enter cross-streets 5. DK/REF	Household item D2_1 has not changed.
	Location where relevant household member works most hours each week	D2_ADDR. ENTER ADDRESS INFORMATION: ADDRESS _____ ☐ DK/REF CITY _____ ☐ DK/REF STATE _____ ☐ DK/REF ZIP _____ ☐ DK/REF	Household item D2_ADDR has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Location where relevant HHM works most hours each week	D2_CROSS. CROSS-STREETS STREET 1 _____ ☐ DK/REF STREET 2 _____ ☐ DK/REF CITY _____ ☐ DK/REF	Household item D2_CROSS has not changed.
	How relevant HHM gets to work	Item not included in 2012.	D2_TRANS. How (do you/ does he/she) usually get to work? 　1 car 　2 public transportation 　3 bicycle 　4 taxi or carpool 　5 walking 　6 VARIES/ OTHER METHOD
	How long it takes relevant HHM to get to work	Item not included in 2012.	D2_COMMUTE. On average, how long does it take (you/him/her) to make the trip to or from work? IF NECESSARY: Your best guess is fine. _____ minutes for one-way commute

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

	How far in advance is work schedule known for relevant HHM	D2_2.
		How far in advance (do you/he/she) usually know what days and hours you/he/she will need to work?
		   1. one week or less
		   2. between 1 and 2 weeks
		   3. between 3 and 4 weeks
		   4. 4 weeks or more
		   5. DK/REF
			Household item D2_2 has not changed.

	Identification of whether there is a usual work schedule and if it applied last week for relevant HHM	D2_3.
		Did (you/she/he) work (your/his/her) usual schedule last week, is there no usual schedule, or was last week's schedule not the usual one?
		   1. Usual schedule
		   2. No usual schedule
		   3. Last week unusual
		   4. DK/REF
			Household item D2_3 has not changed.

	Occupation and industry of relevant household member	D2. What kind of work (do you/does he/she) do? RECORD JOB OR OCCUPATION NAME IN TABLE BELOW. IF NECESSARY, What is (your/his/her) title or the name of (your/his/her) job? PROBE: What are the usual activities on that job? _____ ☐ DK/REF	Household item D2has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Occupation and industry of relevant household member	D2A. What kind of business is that? RECORD FIRM NAME OR INDUSTRY DESCRIPTION IN TABLE BELOW. IF NECESSARY, What does the company make or do? PERSON X _____ ☐ DK/REF	Household item D2A has not changed.

	Current wage of relevant household member	D3D.
		About how much are you paid at that job?
		[FILL D2 JOB NAME]
		
		RECORD WAGE:
		
		_____
		
		☐ DK/REF
		
		Is that per...?
		
		RECORD UNIT:
		   1. Per hour
		   2. Per day
		   3. Per week
		   4. Bi-weekly
		   5. Per month
		   6. Per year
		   7. OTHER
		   8. DK/REF
			Household item D3D has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Relevant household member ever worked for pay	D4. [Have you/has he/she] ever worked for pay? 1. Yes 2. No 3. DK/REF	Household item D4 has not changed.
	Last job held by relevant household member	D5A. What was the last job that (you/he/she) had? What was the job title or what were the main duties of the job? _____	Household item D5A has not changed.
	When last job was held by relevant household member	D5B. When did you/he/she last work at that job? **ENTER 33/33 IF R STILL WORKS THERE**. MONTH: _____ YEAR: _____	Household item D5B has not changed.
	Hours worked each week at last job by relevant household member	D5C. About how many hours [did/do] (you/he/she) usually work at that job each week [when (you/he/she) stopped working there]? Would you say it was less than 15, between 15 and 30, or more than 30 hours per week? 1. LESS THAN 15 2. 15 TO 30 3. MORE THAN 30 4. DK/REF	Household item D5C has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

	Wage received at last job for relevant household member	D5D.
		About how much (were you/was he/she/are you) paid at that job? Your best estimate is fine.
		
		AMOUNT: _____
		
		PER UNIT OF TIME
		    1. Per hour
		    2. Per day
		    3. Per week
		    4. Bi-weekly
		    5. Per month
		    6. Per year
		    7. OTHER
		    8. DK/REF
			Household item D5D has not changed.

	Number of days last month a parent worked from home for a child care related reason	D9A. How many days in the past month did [one of] you work from home for a child-care related reason, such as wanting to stay nearby for a sick child, you didn't have a child-care arrangement in place, or your child-care provider was sick? DAYS:_____ ☐ DK/REF	Household item D9A has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Number of work days missed in the last 3 months	D10. During the past 3 months, how many days of work have [one of] you missed for any reason? Don't include scheduled holidays or vacation days. DAYS:_____ (IF 0, SKIP TO D11) ☐ DK/REF	Household item D10 has not changed.
	Number of work days missed because child care provider unavailable in the last 3 months	D10A. How many of these days did [one of] you miss because your provider was sick or on vacation? DAYS:_____ ☐ DK/REF	Household item D10A has not changed.
	Number of work days missed because child was sick in the last 3 months	D10B. How many days did [one of] you miss because a child was sick and had to stay home? DAYS:_____ ☐ DK/REF	Household item D10B has not changed.
	Any wages lost by respondent/spouse/HHM for missed work	D10C. Did that person lose any pay because of missed work? 1 YES 2 NO	Household item D10C has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

	Number of days late to work/left early in the last 3 months	D11.
		During the past 3 months, how many days did [one of] you get to work late or have to leave early for any reason?
		
		        DAYS:_____ (IF 0, SKIP TO D12)
		        ☐ DK/REF
			Household item D11 has not changed.

	Number of days late to work/left early for child care reasons in the last 3 months	D11A.
		How many of these days did [one of] you get to work late or leave early because of child care responsibilities?
		
		        DAYS:_____ (IF 0, SKIP TO D12)
		        ☐ DK/REF
			Household item D11A has not changed.

	Any wages lost by respondent/spouse/HHM for being late to work/leaving early	D11B.
		Did that person lose any pay because of getting to work late or leaving early?
		
		        1 YES
		        2 NO
			Household item D11B has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Number of days special child care arrangements made in the last 3 months because of unavailable provider	D12. Approximately how many days in the last 3 months did [one of] you have to make special arrangements for (CHILD)'s care because a provider was sick or unavailable? Don't count days that were holidays anyway. DAYS:_____ ☐ DK/REF	Household item D12 has not changed.
	Number of days special child care arrangements made in the last 3 months because of any other reason	D13. Approximately how many days in the last 3 months did [one of] you have to make special arrangements for (CHILD)'s care for some other reason (for example, a child was sick, transportation broke down, or any other reason)? Don't count days that were holidays anyway. DAYS:_____ ☐ DK/REF	Household item D13 has not changed.
	Respondent/spouse participates in flexible spending account at work	D15. Do you or your spouse participate in a cafeteria-style flexible spending account at work so that you can pay for child care expenses out of pre-tax income? 1 Yes 2 No 3 DK/REF	Household item D15 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
Section E: Child Care Payment and Subsidy to Each Provider	Proxy for household income below 200 percent of federal poverty line, which allows to subset subsidy-related items to these households	Item not included in 2012.	**E0_subelig.** In order to understand whether or not child care is affordable to American families, we need to know your household's income. Was your total household income in 2018, before taxes and other deductions, below [$26,000 if (S1 + B1a1) = 2, $39,000 if (S1 + B1a1) = 3, $52,000 if (S1 + B1a1) = 4, $65,000 if (S1 + B1a1) = 5, $78,000 if (S1 + B1a1) = 6, $91,000 if (S1 + B1a1) = 7]? 1. Yes 2. No 3. DK/REF
	Any payment from parent for each child care arrangement	E1. Now I have some more questions about the regular child care arrangements you use. (Starting with the youngest child,) Does (PROVIDER FILLED IN FROM C1A) charge you anything directly for the care of (CHILD)? Please include charges even if you are later reimbursed. 1. YES 2. NO 3. DK/REF	**E1_M.** Now I have some more questions about the regular child care arrangements you use. (Starting with the youngest child,) Do you pay (PROVIDER FILLED IN FROM C1A) anything directly for the care of (CHILD)? Please include payments even if you are later reimbursed. 1. Yes 2. No 3. DK/REF

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

	Child care provider paid for by someone/someplace else for each child care arrangement	E2.
		Is the [PROVIDER] paid by someone or someplace else for the care of (CHILD)? Do not include payments, reimbursements or vouchers that go directly to you.
		
		    1. YES
		    2. NO
		    3. DK/REF
			Household item E2 has not changed.

	Other organizations/individuals who pay provider for each child care arrangement	E3.
		Who pays them? MARK ALL THAT APPLY
		
		    -1. DK/REF
		    1. Welfare or office of employment services
		    2. Agency for child development
		    3. Local or community program
		    4. Community or religious group
		    5. Family or friend
		    6. Employer
		    7. OTHER
			Household item E3 has not changed.

	Child care arrangement is a Head Start/Pre-K program	E5A.
		Two programs that might not charge parents for taking care of their young children are Head Start and [LOCAL NAME FOR PRE-K]. Do you happen to know if [PROVIDER] is one of these types of programs?
		
		    1. Yes
		    2. No
		    3. DK/REF
			Household item E5A has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Child care arrangement is free	E5. So this care is provided free by [PROVIDER]? 1. Yes 2. No 3. DK/REF	Household item E5 has not changed.
	Child care arrangement relies on sliding fee scale	E6. Now think about the money you pay for [PROVIDER]. Sometimes the amount of money that a parent is charged for a child care arrangement or program depends on how much the family earns. This is sometimes called a sliding fee scale. Is the amount you are charged by [PROVIDER] determined by how much money you earn? 1.YES 2.NO 3.DK/REF	**E6_M.** Now think about the money you pay for [PROVIDER]. Sometimes the amount of money that a parent is charged for a child care arrangement or program depends on how much the family earns. This is sometimes called a sliding fee scale. Is the amount you pay to [PROVIDER] determined by how much money you earn?? 1. Yes 2. No 3. DK/REF
	Amount paid for each child care arrangement	E7. How much do you pay this [PROVIDER]? $_____ ☐ DK/REF (SKIP TO E7B)	Household item E7 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Amount paid for each child care arrangement	E7A. Is that per hour, per day, per week, bi-weekly, monthly, or something else? 1. PER HOUR 2. PER DAY 3. PER WEEK 4. EVERY OTHER WEEK 5. PER MONTH 6. SOMETHING ELSE (SPECIFY:_____) 7. DK/REF	Household item E7A has not changed.
	Whether payment is a copayment for each child care arrangement	E4. In addition to the payments made by (this source/these sources), do you have a co-payment? In other words, do you need to pay [PROVIDER] yourself with money out of your own pocket? 1.YES 2. NO 3. DK/REF	**E4_M.** Is this amount you pay provider [PROVIDER] a co-payment? 1. Yes 2. No 3. DK/REF
	Amount paid for each child care arrangement	E4A. How much do you pay yourself? _____ -1 ☐ DK/REF (SKIP TO E2A)	Item not included in 2019.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Amount paid for each child care arrangement	E4B. Is that per hour, per day, per week, bi-weekly, monthly, or something else? 1. Per hour 2. Per day 3. Per week 4. Every other week 5. Per month 6. Something else (SPECIFY:_____) 7. DK/REF	Item not included in 2019.
	Confirmation that payment to provider includes payment for other children and amount paid	E4C. (IF R HAS MORE THAN ONE CHILD WHO USES PROVIDER) Is that amount for (CHILD) only, or does it cover more than one child? 1. Child only (ASK E4C1) 2. OTHER Children (SKIP TO E4C_OTHCHLDRN.) 3. DK/REF (SKIP TO E2A)	Item not included in 2019.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Confirmation that payment to provider includes payment for other children and amount paid	E4C_OTHCHLDRN Which children? 1. Child 1 2. Child 2 3. Child 3 4. Child 4 5. Child 5 6. Child 6 7. Child 7 8. Child 8 9. Child 9 10. Child 10 11. DK/REF	Item not included in 2019.
	Confirmation that payment to provider includes payment for other children and amount paid	E4C1. (IF R HAS MORE THAN ONE CHILD WHO USES PROVIDER) Do you pay the same amount for each other child cared for by [PROVIDER] ? 1. YES 2. NO 3. DK/REF	Item not included in 2019.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

	Confirmation that payment to provider includes payment for other children and amount paid	E7B.
		(IF R HAS MORE THAN ONE CHILD WHO USES PROVIDER)
		Is that amount for (CHILD) only, or for more than one child?
		
		    1. Child only
		    2. OTHER children
		    3. DK/REF
			Household item E7B has not changed.

	Confirmation that payment to provider includes payment for other children and amount paid	E7B_OTHCHLDRN
		Which children?
		
		  1. Child 1
		  2. Child 2
		  3. Child 3
		  4. Child 4
		  5. Child 5
		  6. Child 6
		  7. Child 7
		  8. Child 8
		  9. Child 9
		  10. Child 10
		
		  11. DK/REF
			Household item E7B_OTHCHLDRN has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Confirmation that payment to provider includes payment for other children and amount paid	E7B1. Do you pay the same amount for each other child cared for by [PROVIDER] ? 1. YES 2. NO 3. DK/REF	Household item E7B1 has not changed.
	Other individual/ organization reimburses provider	E8. Is [PROVIDER] *also* paid or reimbursed directly by any person or program? IF NEEDED: Do not include payments, reimbursements or vouchers that went directly to you. 1.YES 2. NO 3. DK/REF	Household item E8 has not changed.
	Other individual/ organization reimburses provider	E8A. Who pays them? MARK ALL THAT APPLY -1. DK/REF 1. Welfare or office of employment services 2. Agency for child development 3. Local or community program 4. Community or religious group 5. Family or friend 6. Employer 7. DK/REF	**E8A_M.** Who pays them? MARK ALL THAT APPLY 1. Welfare or office of employment services 2. Agency for child development 3. Local or community program 4. Community or religious group 5. Family or friend 6. Employer 7. Other

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

	Job loss or reduction in work hours of parent would cause child to lose child care arrangement	E2A.
		Would you lose your child's spot at this provider if you lost your job or had your hours cut back?
		    1. YES
		    2. NO
		    3. DK/REF
			Household item E2A has not changed.

	Local resource/referral agency helped find arrangement or arrange for payment	E2B.
		Did you work with a local resource and referral agency to find this provider or arrange for payment?
		
		    1. YES
		    2. NO
		    3. DK/REF
			Household item E2B has not changed.

	Amount of payments/ reimbursements/vouchers paid directly to the household for child care arrangement	E9.
		Do you receive payments, reimbursements or vouchers that are paid directly to you to cover some portion of the payments you make to [PROVIDER] for (CHILD)'s care?
		
		    1. YES
		    2. No
		    3. DK/REF
			Household item E9 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Amount of payments/ reimbursements/vouchers paid directly to the household for child care arrangement	E9A. How much do you receive in payments, reimbursements or vouchers that are paid directly to you for [PROVIDER]? $_____ ☐ DK/REF	Household item E9A has not changed.
	Amount of payments/ reimbursements/vouchers paid directly to the household for child care arrangement	E9B. Is that per hour, per day, per week, bi-weekly, monthly, or something else? 1. Per hour 2. Per day 3. Per week 4. Every other week 5. Per Month 6. Something else (SPECIFY:_____) 7. DK/REF	Household item E9B has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

	Confirmation that payment to provider includes payment for other children and amount paid	E9C.
		 Is that amount for (CHILD) only, or for more than one child?
		
		    1. Child only
		    2. Other children
		    3. DK/REF
			Household item E9C has not changed.

	Confirmation that payment to provider includes payment for other children and amount paid	E9C_OTHCHLDRN.
		Which children?
		
		    1. Child 1
		    2. Child 2
		    3. Child 3
		    4. Child 4
		    5. Child 5
		    6. Child 6
		    7. Child 7
		    8. Child 8
		    9. Child 9
		    10. Child 10
		    11. DK/REF
			Household item E9C_OTHCHLDRN has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Amount of payments/ reimburse ments/vou chers paid directly to household for a specific child is the same amount received for each other child using provider	Item not included in 2012.	**E9_NEW.** (IF R HAS MORE THAN ONE CHILD WHO USES PROVIDER) Is that amount received for each other child cared for by [PROVIDER] ? 1. Yes 2. No 3. DK/REF
	Non-monetary compensa tion for care provided: Identificati on of services exchanged with provider for child care and frequency	E10. Do you (also) give [PROVIDER] anything other than money in exchange for caring for [CHILD]? For example, do you provide groceries or transportation, or do work such as caring for children or small repair jobs in exchange for the care that {} receives? 1 YES 2 NO 3 DK/REF	Household item E10 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Non-monetary compensation for care provided: Identification of services exchanged with provider for child care and frequency	E10A. What do you give [PROVIDER] in exchange for caring for your (child/children)? 1.Groceries 2.Transportation 3. Services such as child-care or small repair jobs 4. Housing or Housing Expenses 5. OTHER (SPECIFY: _____) 6. DK/REF	Item not included in 2019.

	Non-monetary compensation for care provided: Identification of services exchanged with provider for child care and frequency	E10B.
		What does it cost you to provide these things each time you give them?
		
		     $_____
		    ☐ DK/REF
			Item not included in 2019.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Non-monetary compensation for care provided: Identification of services exchanged with provider for child care and frequency	E10B1. How often do you give these things? _____ ☐ DK/REF	Household item E10B1 has not changed.
	Non-monetary compensation for care provided: Identification of services exchanged with provider for child care and frequency	E10B2. How much time do you spend providing these things each time you give them? HOURS: _____ ☐ DK/REF	Item not included in 2019.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

	Amount paid for each child care arrangement	E12.
		You said that the [amount per unit] you pay to [PROVIDER] includes your payments for [CHILD] as well, is that correct?
		
		    1 YES
		    2 NO
		    3 DK/REF
			Household item E12 has not changed.

	Amount paid for each child care arrangement	E12A. How much do you pay this [PROVIDER]? $_____ ☐ DK/REF	Household item E12A has not changed.
	Amount paid for each child care arrangement	E12AA. Is that per hour, per day, per week, bi-weekly, monthly, or something else? 1. Per hour 2. Per day 3. Per week 4. Every other week 5. Per month 6. Something else (specify:_____) 7. DK/REF	Household item E12AA has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Confirmation that payment to provider includes payment for other children and amount paid	E12AB. (IF R HAS MORE THAN ONE CHILD WHO USES PROVIDER) Is that amount for (CHILD) only, or for more than one child? 1. Child only 2. Other children 3. DK/REF	Household item E12AB has not changed.
	Confirmation that payment to provider includes payment for other children and amount paid	E12AB_OTHCHLDRN. Which children? 1. Child 1 2. Child 2 3. Child 3 4. Child 4 5. Child 5 6. Child 6 7. Child 7 8. Child 8 9. Child 9 10. Child 10 11. DK/REF	Household item E12AB_OTHCHLDRN has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Confirmation that payment to provider includes payment for other children and amount paid	E12_1. You said that the [AMOUNT] per [UNIT] you pay to [PROVIDER] is the same as your payments for [CHILD NAME]. Is that correct? 1. Yes 2. No 3. DK/REF	Household item E12_1 has not changed.
Section F: Non-Parental Child Care Search	Date when respondent last searched for child care for selected child	F2. Please think about the last time you searched for care for [SELECTED CHILD NAME]. What year and month was that? MONTH: _____ -1 ☐ DK/REF YEAR: _____ -1 ☐ DK/REF	Household item F2 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Last search included child care search for another child at same time	F2A. Were you also searching for care for another child at the same time? CODE ALL THAT APPLY 1. NO OTHER CHILD 2. Child1 3. Child2 4. Child3 5. Child4 6. Child5 7. Child6 8. Child7 9. Child8 10. Child9 11. Child10 12. DK/REF	Household item F2A has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Main reason respondent initiated search for child care	F3. What is the main reason that you were looking for child care at that time? 1. SO THAT I COULD WORK/CHANGE IN WORK SCHEDULE 2. TO PROVIDE MY CHILD EDUCATIONAL OR SOCIAL ENRICHMENT 3. TO GIVE ME SOME RELIEF 4. TO FILL IN GAPS LEFT BY MY MAIN PROVIDER OR BEFORE/AFTER SCHOOL 5. WASN'T SATISFIED WITH CARE 6. WANTED TO REDUCE CHILD CARE EXPENSES 7. PROVIDER STOPPED PROVIDING CARE 8. CHILD NO LONGER ELIGIBLE FOR PREVIOUS CARE (E.G., AGED OUT OR SUMMER BREAK) 9. OTHER 10. DK/REF	Household item F3 has not changed.

	Main reason respondent initiated search for child care	F3_OS.
		    SPECIFY
		
		    _____
		    -1 ☐ DK/REF
			Household item F3_OS has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Type of child care used at time of last child care search	F4. At the time of that last search, what type of child care were you mostly using for [SELECTED CHILD NAME]? 1 Parental care only 2 Home-based provider I had prior personal relationship with 3 Home-based provider I didn't have prior personal relationship with 4 Center-based care 5 OTHER 6 DK/REF	Household item F4 has not changed.

	Type of child care used at time of last child care search	F4_OS.
		    SPECIFY
		        _____
		      -1 ☐ DK/REF
			Household item F4_OS has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Perception of different ECE types of care: Nurturing environment; educational Preparedness; social interactions; safety; affordability; flexibility for parents	Characteristics of care may be more or less important for different children depending on the age or personality of the child. C14A. Thinking about [SELECTED CHILD NAME], how important was a loving environment for him/her? Would you say very important, somewhat important, or not very important?	Household item C14A has not changed.
	Perception of different ECE types of care: Nurturing environment; educational Preparedness; social interactions; safety; affordability; flexibility for parents	Characteristics of care may be more or less important for different children depending on the age or personality of the child. C14A_2. How about helping children being ready to learn in school? (Would you say it was very important, somewhat important, or not very important for [SELECTED CHILD NAME])?	Household item C14A_2 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Perception of different ECE types of care: Nurturing environment; educational Preparedness; social interactions; safety; affordability; flexibility for parents	Characteristics of care may be more or less important for different children depending on the age or personality of the child. C14A_3. How about learning how to get along with other children? (Would you say it was very important, somewhat important, or not very important for [SELECTED CHILD NAME])?	Household item C14A_3 has not changed.
	Perception of different ECE types of care: Nurturing environment; educational Preparedness; social interactions; safety; affordability; flexibility for parents	Characteristics of care may be more or less important for different children depending on the age or personality of the child. C14A_5. How about affordability? (Would you say it was very important, somewhat important, or not very important)?	Household item C14A_5 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Perception of different ECE types of care: Nurturing environment; educational Preparedness; social interactions; safety; affordability; flexibility for parents	C14A_GRID. Characteristics of care may be more or less important for different children depending on the age or personality of the child. C14A_6. How about flexibility for you? (Would you say it was very important, somewhat important, or not very important)?	Household item C14A_6 has not changed.

	More than one provider considered during last child care search	F5.
		Thinking about your last child care search for [SELECTED CHILD NAME] in [YEAR from F2], did you consider more than one provider as part of your search or did you consider only one provider? Please include providers you asked about, read about, or talked to, even if you didn't consider them seriously in your decision.
		   1. More than one provider considered
		   2. Only one provider considered
		   3. DK/REF
			Household item F5 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Type of provider(s) considered	F6A. (IF NOT ALREADY STATED:) What type of provider is this? 1. Home-based provider I had prior personal relationship with 2. Home-based provider I didn't have prior personal relationship with 3. Center-based care 4. OTHER 5. DK/REF	Household item F5 has not changed.
	Method(s) used by respondent to search for providers	F6B. How did you know about this provider? _____ ☐ DK/REF	Household item F6B has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Method(s) used by respondent to search for providers	F7. How did you look for providers in your last search? **CODE FIRST TWO MENTIONS.** 1. Asked friends and family with children 2. Asked potential contacts who are providers 3. Community service, resource and referral lists 4. Posted an ad/responded to an ad 5. Yellow pages/newspapers/bulletin boards 6. Welfare or social services 7. Healthcare provider 8. Other 9. DK/REF	Household item F7 has not changed.
	Method(s) used by respondent to search for providers	F7_OS. SPECIFY _____ -1 ☐ DK/REF	Household item F7_OS has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Type(s) of information respondent collected about providers during search	F8B. What was the specific information you tried to learn about providers? _____ ☐ DK/REF	Household item F8B has not changed.
	Types of provider considered	F9C. What type of provider was the [first/second] provider you considered? 1 Home-based provider I had prior personal relationship with 2 Home-based provider I didn't have prior personal relationship with 3 Center-based care 4 OTHER 5 DK/REF	Household item F9C has not changed.

	Types of provider considered	F9C_OS.
		        SPECIFY:
		
		        _____
		        ☐ DK/REF
			Household item F9C_OS has not changed.

	Rate charged for care from considered provider(s)	F9E. How much would it have cost you to have that provider care for [SELECTED CHILD NAME]? _____ ☐ DK/REF	Household item F9E has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

	Rate charged for care from considered provider(s)	F9F.
		
		Is that per…
		    1. Hour
		    2. Day
		    3. Week
		    4. Month
		    5. OTHER
		    6. DK/REF
			Household item F9F has not changed.

	Rate charged for care from considered provider(s)	F9F_OS.
		    SPECIFY:
		    _____
		    -1 ☐ DK/REF
			Household item F9F_OS has not changed.

	Travel time to considered provider(s)	F9J. How many minutes would it take in travel time for you or some one else to take [SELECTED CHILD NAME] to that provider? _____ ☐ DK/REF	Household item F9J has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Perception of how well considered providers' schedule would cover needed hours of care	F9L. How well would the provider's schedule have covered the hours of care you needed? 1. Would have covered hours of care I needed 2. Would have covered most of hours I needed 3. Would not have covered most of hours I needed 4. Would not have covered hours at all 5. DK/REF	Household item F9L has not changed.
	Respondent's overall quality rating for considered provider(s)	F9M. How would you rate the overall quality of that provider? 1. Best I can imagine 2. Better than I had expected to find for my child 3. Good for my child 4. Good enough for my child, but not as good as I'd wish for 5. Only good enough for the short-term 6. Not good enough for my child 7. DK/REF	Household item F9M has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

	Any child care centers or organizations for school age children considered	F10.
		Did you consider any [child-care] centers or organizations for [school-age] children as part of your search?
		  1. Yes
		  2. No
		  3. DK/REF
			Household item F10 has not changed.

	Respondent considered someone they had a prior relationship with to care for child	F11.
		Did you consider asking someone you know to care for your child, for example a family member, friend or neighbor?
		  1. Yes
		  2. No
		  3. DK/REF
			Household item F11 has not changed.

	Respondent considered home-based care from someone with no prior relationship to respondent	F12.
		Did you consider someone who provides care at home but whom you didn't know before as part of your search?
		  1. Yes
		  2. No
		  3. DK/REF
			Household item F12 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

	Result of child care search	F13.
		What was the result of this search for child care?
		   1 Found care
		   2 Stayed with existing provider
		   3 Decided not to use care other than parents
		   4 Gave up search for another reason
		   5 OTHER
		   6 DK/REF
			Household item F13 has not changed.

	Result of child care search	F13_OS. SPECIFY: _____ ☐ DK/REF	Household item F13_OS has not changed.

	Determination of which provider (if two listed) was chosen after search	F13A.
		Did you choose the first or second provider you told me about?
		   1. First [FILL FIRST PROVIDER TYPE FROM F9C]
		   2. Second [FILL SECOND PROVIDER TYPE FROM F9C]
		   3. DK/REF
			Household item F13A has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Main reason for choosing child care provider	F14. What was the main reason you made that decision? 1 Had no other choices 2 Cost 3 Schedule 4 Location 5 Quality of care 6 Best feeling 7 Provider had space available 8 OTHER 9 DK/REF	Household item F14 has not changed.
	Main reason for choosing child care provider	F14_OS. SPECIFY: _____ ☐ DK/REF	Household item F14_OS has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Types of help paying for care requested during provider search	Item not included in 2012.	F15. During your search, did you ask any providers or other organizations about getting help paying for care, for example: a. child care subsidies 1. Yes 2. No b. scholarships 1. Yes 2. No c. sliding fee scales or discounts 1. Yes 2. No d. payment plans 1. Yes 2. No e. fees for part-time enrollment 1. Yes 2. No
Section G: Household Characteristics	Respondent/spouse/partner housing tenure	G1. Do [you/you or your spouse/you or your partner] own this home, do you rent, or something else? 1. Own 2. Rent 3. Other, neither own nor rent 4. DK/REF	Household item G1 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Respondent/spouse/ partner housing tenure	G1A. What is your situation? 1. Live with parent(s) 2. Live with spouse's/partner's parent(s) 3. Housing is part of job compensation; live-in servant; housekeeper; gardener; farm laborer 4. Housing is a gift paid for by an HU resident other than R or spouse/partner 5. Housing is a gift paid for by a friend or relative outside of the HU 6. Housing paid for by a government agency/welfare/charitable institution 7. Sold home, not moved out of it yet 8. Living in house which R will inherit; estate in progress 9. Living in temporary quarters (garage, shed) while home is under construction 10. Live here without formal arrangements; staying temporarily; squatting 11. Other 12. DK/REF	Household item G1A has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

	Car ownership	G2.
		(IF NOT OBVIOUS) Do you have a car?
		    13. Yes
		    14. No
		    15. DK/REF
			Household item G2 has not changed.

	Total household income last month	G3.
		Approximately what was your total household income *last month*?
		IF NEEDED: Please include the income of anyone who contributes to household expenses and child care costs. Also include any child support you may receive if that contributes to household expenses or child care costs. Include income from pensions or from government programs like food stamps or unemployment insurance.
		    TOTAL INCOME: $_____ -1 ☐
		    DK/REF
			Household item G3 has not changed.

	Total household income last month	G3A.
		Is that before or after taxes and other deductions?
		    1. Before taxes
		    2. After taxes
		    3. DK/REF
			Household item G3A has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Total household income last month	G3B. Let me assure you that your responses to this and all other questions in this survey will not be revealed to any agency except in summary form for all study participants combined. Which of the following categories do you think best describes your total household income after taxes from all sources last month. Just stop me when I get to the right category: - Less than $1200 $1200 to $1999 $2000 to $2999 $3000 to $4199 $4200 to $5499 $5500 or more - DK/REF	G3B_M. Let me assure you that your responses to this and all other questions in this survey will not be revealed to any agency except in summary form for all study participants combined. This information helps us better describe the affordability of different types of early care and education. Which of the following categories do you think best describes your total household income after taxes from all sources last month. Just stop me when I get to the right category: - Less than $1200 $1200 to $1999 $2000 to $2999 $3000 to $4199 $4200 to $5499 $5500 or more - DK/REF
	Total household income last calendar year	G4A. And how about all of last year, that is, 2011. What was the total amount of your household income that year? Total amount for the past 12 months: $_____ ☐ DK/REF	G4A_M. And how about all of last year, that is, 2018. What was the total amount of your household income that year? Total amount for the past 12 months: $_____ ☐ DK/REF

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

	Total household income last calendar year	G4A1.
		You may not be able to give us an exact figure for your household income but would it amount to $30,000 or more?
		
		In order to understand whether or not child care affordable to American families, we need to know your household's income. You may not be able to give us an exact figure, but was your household income last year through wages and salaries from all jobs....
		    1. Yes, $30,000 OR MORE
		    2. No, less than $30,000
		    3. DK/REF
			Household item G4A1 has not changed.

	Total household income last calendar year	G4A2.
		Would it amount to $50,000 or more?
		    1. YES
		    2. NO
		    3. DK/REF
			Household item G4A2 has not changed.

	Total household income last calendar year	G4A3.
		Would it amount to $75,000 or more?
		    1. YES
		    2. NO
		    3. DK/REF
			Household item G4A3 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Total household income last calendar year	G4A4. Would it amount to $40,000 or more? 1. YES 2. NO 3. DK/REF	Household item G4A4 has not changed.
	Total household income last calendar year	G4A5. Would it amount to $15,000 or more? 1. YES 2. NO 3. DK/REF	Household item G4A5 has not changed.
	Total household income last calendar year	G4A6. Would it amount to $20,000 or more? 1. YES 2. NO 3. DK/REF	Household item G4A6 has not changed.
	Total household income last calendar year	G4A7. Would it amount to $10,000 or more? 1. Yes 2. No 3. DK/REF	Household item G4A7 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Number of different earners included in last year's total income	G4B. How many different people's job earnings did you count in that 2011 household income? 　　NUMBER OF PEOPLE: _____ 　　☐ DK/REF	G4B. How many different people's job earnings did you count in that 2018 household income? 　　NUMBER OF PEOPLE: _____ 　　☐ DK/REF
	Any sources of income beyond job earnings included in last year's total income	G4c. Again, thinking about the 2011 household income that you reported, *was any of that from sources other than job earnings* -- for example, from child support, pensions, government assistance programs, or interest from a bank account? 　　1.　YES 　　2.　NO 　　3.　DK/REF	G4c_M. Again, thinking about the 2018 household income that you reported, *was any of that from sources other than job earnings* -- for example, from child support, pensions, government assistance programs, or interest from a bank account? 　　1.　YES 　　2.　NO 　　3.　DK/REF
	Amount of last year's household income from sources other than job earnings	G4d. How much of your 2011 total household income was from sources other than job earnings? 　　Amount from non-job sources: 　　_____ 　　☐ DK/REF	G4d_M. How much of your 2018 total household income was from sources other than job earnings? 　　Amount from non-job sources: 　　_____ 　　☐ DK/REF

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Amount of last year's household income from sources other than job earnings	G4e. You may not be able to give us an exact figure for, but were non-job household earnings in 2011 …. 1. Less than $2,500 2. $2,500 to less than $5,000 3. $5,000 to less than $7,500 4. $7,500 to less than $10,000 5. $10,000 to less than $12,500 6. $12,500 to less than $15,000 7. $15,000 to less than $20,000 8. $20,000 or more? 9. DK/REF	G4e_M. You may not be able to give us an exact figure for, but were non-job household earnings in 2018 …. 10. Less than $2,500 11. $2,500 to less than $5,000 12. $5,000 to less than $7,500 13. $7,500 to less than $10,000 14. $10,000 to less than $12,500 15. $12,500 to less than $15,000 16. $15,000 to less than $20,000 17. $20,000 or more? 18. DK/REF
	Any public assistance or welfare payments in last calendar year	G4B1. In the last calendar year did your household receive any public assistance or welfare payments? 1. Yes 2. No 3. DK/REF	G4B1_M. In the last calendar year did your household receive any payments from a welfare or public assistance program like the Supplemental Security Income or SSI program or from TANF or Temporary Assistance for Needy Families? 1. Yes 2. No 3. DK/REF

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Type of health insurance coverage for selected child	G10. What kind of health insurance or health care coverage does [SELECTED CHILD NAME] have? 1. Private Health Insurance Plan from your employer or workplace 2. Private Health Insurance Plan through your spouse or partner's workplace 3. Private Health Insurance Plan purchased directly 4. Private Health Insurance Plan through a state or local government or community program 5. Medicaid 6. Medicare 7. Military Health Care/VA or Champus/Tricare/Champ – VA 8. No coverage of any type 9. Other Specify	Household item G10 has not changed.
	Type of health insurance coverage for selected child	G10_OS. PLEASE SPECIFY. _____ ☐ DK/REF	Household item G10_OS has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

	Number of respondent's other children under 13 with health insurance coverage	G10A.
		Besides (YOUNGEST CHILD), how many of your other children under 13 have some sort of health insurance or health care coverage?
		    NUMBER OF CHILDREN: _____
		    ☐ DK/REF
			Household item G10A has not changed.

	Level of food insecurity in household	G11. Which of these statements best describes the food eaten in your household in the last 12 months: We always had enough to eat, sometimes we did not have enough to eat, or often, we did not have enough to eat? 1. Always enough to eat 2. Sometimes not enough to eat 3. Often not enough to eat 4. DK/REF	Household item G11 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Types of food assistance currently received	G12. Do you or your [child/children] receive food stamps, WIC or participate in a reduced or free school meals program? (CODE ALL THAT APPLY) IF NEEDED: By school meals I mean reduced or free lunch, breakfast program or after school meals program for children of low-income families. IF NEEDED: WIC is the Women, Infants and Children supplemental nutrition program. 	Household item G12 has not changed.

	1. YES	2. NO	3. DK/REF
Food stamps			
WIC only			
School meals program			

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Received EITC on most recent tax return	Item not included in 2012.	G12A. Did you receive an Earned Income Tax Credit (EITC) on your most recent income tax return? 1. Yes 2. No 3. DK/REF

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Any household members receive child care subsidies	Item not included in 2012.	G12B. In the past 12 months, did anyone in this household receive child care subsidies for children of working parents such as [PROGRAM NAME]? 1. Yes 2. No 3. DK/REF
	Number of months in the past year a household member child care subsidies	Item not included in 2012.	G12C. How many months in the past year did anyone in this household receive child care subsidies? _____
	Reason for end to child care subsidies	Item not included in 2012.	G12D. What was the main reason that child care subsidies ended? 1. PARENT LOST ELIGIBILITY 2. CHILD DID NOT NEED CARE ANYMORE 3. DID NOT LIKE CARE 4. SUBSIDY PROGRAM WAS TOO DIFFICULT TO PARTICIPATE IN 5. STILL RECEIVING SUBSIDIES

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Ability to borrow $500 from someone/someplace for 3 months	G13. If you needed to borrow $500 for three months, is there some person or place you could borrow it from? IF NEEDED: I'm just asking a hypothetical question. 1. Yes 2. No 3. DK/REF	Household item G13 has not changed.
	Any internet access in the home	Item not included in 2012.	G14. Do you have access to the Internet at home? 1. Yes 2. No 3. DK/REF
	Device used for internet access	Item not included in 2012.	G14a. Is your Internet access using 4. a. A cellphone or tablet 1. Yes 2. No 5. b. A desktop or laptop computer 1. Yes 2. No

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
Section H: Parental consent to access administrative records	Confirmation respondent is able to authorize release of records for eligible children	H1. I need to verify that I am speaking with someone who can authorize the release of state government program records for [NAME(S) OF ELIGIBLE CHILD(REN)]. Are you that person? 1. Yes 2. No 3. DK/REF	Household item H1 has not changed.
	If respondent is not able to provide authorization: Name and contact information of person able to authorize release of records for eligible children	H2. May I know who would be able to authorize such a release? ENTER PHONE NUMBER AS ###-###-#### NAME: _____ ☐ DK/REF PHONE: _____ ☐ DK/REF RELATIONSHIP TO CHILD: _____ ☐ DK/REF	Household item H2 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

	Respondent grants permission to access administrative records for eligible children	H5.
		We are asking your permission to search state or local government records for child-care subsidy, Supplemental Nutritional Assistance Program (Food Stamps), TANF, WIC, Medicaid, or other programs that provide assistance to families. We would give the state agency basic information that identifies [CHILD NAME], and request that information about [his/her] participation in government programs be sent to the U.S. Department of Health and Human Services or its contractors, for study purposes only. Do we have your permission to do so?
		
		   1. Yes
		   2. No
			Household item H5 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

	Respondent grants permission to access administrative records for eligible children	H3.
		(SUGGESTED SCRIPT) State or local government program records can provide additional information about the child care and financial assistance for care that a child and his/her family may be receiving. (IF NEEDED: For example, some pre-schools or after-school programs may be receiving government subsidies that parents are not aware of. These subsidies would be recorded in state program data on child care subsidies or such child care-related programs as Head Start or Universal Pre-Kindergarten.) NORC requests your permission to search child-care related government program records for information about your child or about the providers who serve your children. Even if your (child has/children have) not received subsidies or (has/have) never been in child care, it is still important for us to have your permission so that we can compare families like yours against those that do enroll in programs. We would not provide the state agency with any of the answers you've told me today, other than your name and the name(s) of your child/ren, and enough information to find them in state records.
		
		All information about your child and your child's care provider is held in strict confidence and used for study purposes only. Any names of children, as well as any names of childcare providers, will not be used in reporting the study results. We will never release any information that may identify you or your child. The information will be reported in statistical form to the U.S. Department of Health and Human Services as part of the results of this study.
		    1. Continue
		    2. Respondent still refuses (ONLY CHOOSE THIS
			Household item H3 has not changed.

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item
	Roster and date of birth for every child under 13 in the household for whom respondent gives permission	H6. Can you please tell me the full name and date of birth for each child under age 13 in your household? CHILD/REN'S FULL NAME(S) _(table below)_	Household item H6 has not changed.
	Full name of authorizing adult	H6_ADULT . As the authorizing adult, can you please tell me your full name? NAME: _____ ☐ DK/REF	Household item H6_ADULT has not changed.

Table within H6:

	FULL NAME:	DOB MONTH:	DOB DAY:	
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

Category	Construct	2012 Questionnaire Item	2019 Questionnaire Item

	Confirmation of household's address	H7_ADDR
		Our records have [ADDRESS1], [ADDRESS2], [CITY], [STATE], [ZIP]. Can I confirm that you are still living at that address?
		    1. Correct
		    2. Not correct
			Household item H7_ADDR has not changed.

	Confirmation of household's address	H7_ADDR2.
		What is your correct address then?
		    ADDRESS: _____
		    CITY: _____
		    STATE: _____
		    ZIP: _____
			Household item H7_ADDR2 has not changed.