

**1995 National Household Education Survey (NHES:95)
Questionnaires:**

Screener, Early Childhood Program Participation

October 1996

NHES:95 Basic Screener

S1. Hello, my name is (INTERVIEWER) and I'm calling for the U.S. Department of Education. We are conducting a voluntary and confidential study about the educational experiences of both adults and children. These first questions usually take about 5 minutes. Are you a member of this household and at least 18 years old?

YES 1 (GO TO S5)
NO 2 (GO TO S2)
BUSINESS 3 (GO TO S5)
GO TO RESULT GT
RETRY AUTODIALER RT

S2. May I please speak with a household member who is at least 18 years old?

AVAILABLE 1 (GO TO S1)
NOT AVAILABLE 2 (GO TO RESULT, CALLBACK APPT.)
THERE ARE NONE 3 (GO TO S3)
GO TO RESULT GT

S3. May I please speak with the male or female head of this household?

PERSON ON PHONE 1 (GO TO S5)
OTHER PERSON, AVAILABLE 2 (GO TO S4)
OTHER PERSON, NOT AVAILABLE 3 (GO TO RESULT, CALLBACK APPT.)
GO TO RESULT GT

S4. Hello, this is (INTERVIEWER) and I'm calling for the U.S. Department of Education. We are conducting a voluntary and confidential study about the educational experiences of both adults and children. This study will help the Department of Education plan educational programs in the U.S. These first questions usually take about 5 minutes. Are you a head of this household?

YES 1 (GO TO S5)
NO 2 (GO TO S3)

GO TO RESULT GT

S5. I would like to confirm that this number is for home use rather than only used for business. (Is this a home phone?)

HOME USE 1 (CONTINUE)
HOME AND BUSINESS USE 2 (CONTINUE)
BUSINESS USE ONLY 3 (GO TO THANK1)
GO TO RESULT GT

S6. Starting with yourself, please tell me just the first names and ages of all people who normally live in your household. What is your first name, please?

[HOUSEHOLD MEMBERS INCLUDE PEOPLE WHO THINK OF THIS HOUSEHOLD AS THEIR PRIMARY PLACE OF RESIDENCE. IT INCLUDES PERSONS WHO USUALLY STAY IN THE HOUSEHOLD BUT ARE TEMPORARILY AWAY ON BUSINESS, VACATION, IN A HOSPITAL, OR LIVING AT SCHOOL IN A DORMITORY, FRATERNITY, OR SORORITY.]

What is [your first name/the first name of the next person?]	How old [are you/is (he/she)]? 2	Is this person male or female?	SCREENER RESPONDENT
	AGE AGE1-AGE14	SEX SEX1-SEX14	

S6VERF1. [VERIFY THE NUMBER OF HOUSEHOLD MEMBERS LISTED ON THE MATRIX.]
Have we missed anyone else who usually lives here who is temporarily away from home or living in a dorm at school, or any babies or small children?

MATRIX CORRECT 1
 RETURN TO MATRIX 2
 GO TO RESULT 3

Ask S7-S10 for each person age 3-10 and age 16-19. If none, go to 2nd box after S10.

S7. Is (PERSON) attending (school/nursery school, kindergarten, or school)?

YES 1 (GO TO BOX)
 NO 2 (GO TO BOX)

Ask S8 for each person age 5-10. Else, if person is age 3 or 4 or age 16-19 and enrolled in school, go to S9. Else, if not enrolled in school, go to first box after S10.

S8. (READ FIRST TIME: Some parents decide to educate their children at home rather than sending them to school.) Is (CHILD) being schooled at home?

YES 1 (GO TO S10)
 NO 2 (GO TO BOX)

If person is enrolled in school, ask S9. Else go to 1st box after S10.

S9. What grade or year is (PERSON) attending?
 [PROBE FOR T OR P: Is that before or after kindergarten?]

NURSERY/PRESCHOOL/PREKINDERGARTEN/HEAD START	N	(GO TO BOX AFTER S10)
TRANSITIONAL KINDERGARTEN (BEFORE K)	T	(GO TO BOX AFTER S10)
KINDERGARTEN	K	(GO TO BOX AFTER S10)
PREFIRST GRADE (AFTER K)	P	(GO TO BOX AFTER S10)
FIRST GRADE	1	(GO TO BOX AFTER S10)
SECOND GRADE	2	(GO TO BOX AFTER S10)
THIRD GRADE	3	(GO TO BOX AFTER S10)
FOURTH GRADE	4	(GO TO BOX AFTER S10)
FIFTH GRADE	5	(GO TO BOX AFTER S10)
SIXTH GRADE	6	(GO TO BOX AFTER S10)
SEVENTH GRADE	7	(GO TO BOX AFTER S10)
EIGHTH GRADE	8	(GO TO BOX AFTER S10)
NINTH GRADE/FRESHMAN IN HIGH SCHOOL	9	(GO TO BOX AFTER S10)
TENTH GRADE/SOPHOMORE IN HIGH SCHOOL	10	(GO TO BOX AFTER S10)
ELEVENTH GRADE/JUNIOR IN HIGH SCHOOL	11	(GO TO BOX AFTER S10)
TWELFTH GRADE/SENIOR IN HIGH SCHOOL	12	(GO TO BOX AFTER S10)
UNGRADED ELEMENTARY/SECONDARY	U	(GO TO S10)
SPECIAL EDUCATION	S	(GO TO S10)
VOCATIONAL/TECHNICAL AFTER HIGH SCHOOL	15	(GO TO BOX AFTER S10)
COLLEGE (UNDERGRADUATE)	16	(GO TO BOX AFTER S10)
GRADUATE, PROFESSIONAL SCHOOL	17	(GO TO BOX AFTER S10)

[IF T: In this interview, we will be referring to that as "kindergarten."
 IF P: In this interview, we will be referring to that as "prefirst grade."]

S10. What grade would (PERSON) be in if (he/she) were (attending school/attending a school with regular grades)?
 [PROBE FOR T OR P: Is that before or after kindergarten?]

NURSERY/PRESCHOOL/PREKINDERGARTEN/HEAD START	N
TRANSITIONAL KINDERGARTEN (BEFORE K)	T
KINDERGARTEN	K
PREFIRST GRADE (AFTER K)	P
FIRST GRADE	1
SECOND GRADE	2
THIRD GRADE	3
FOURTH GRADE	4
FIFTH GRADE	5
SIXTH GRADE	6
SEVENTH GRADE	7
EIGHTH GRADE	8
NINTH GRADE/FRESHMAN IN HIGH SCHOOL	9
TENTH GRADE/SOPHOMORE IN HIGH SCHOOL	10
ELEVENTH GRADE/JUNIOR IN HIGH SCHOOL	11
TWELFTH GRADE/SENIOR IN HIGH SCHOOL	12
UNGRADED/NO EQUIVALENT	U
VOCATIONAL/TECHNICAL AFTER HIGH SCHOOL	15
COLLEGE (UNDERGRADUATE)	16
GRADUATE, PROFESSIONAL SCHOOL	17

[IF T: In this interview, we will be referring to that as "kindergarten."
 IF P: In this interview, we will be referring to that as "prefirst grade."]

*Ask S7-S10 for next person age 3-10 or 16-19.
After last person, go to next box.*

*For splice sample, go to the sampling point.
Else, ask S11 and S12 for each person age 16 and older
who is not currently enrolled in grade 12 or below,
ungraded elementary or secondary, or special education.*

S11. Now I have a few questions about [you/you and the other adult(s) in your household].
[Do you/Does (ADULT)] have a high school diploma or its equivalent, such as a GED?

YES 1
NO 2

S12. During the past 12 months [did you/did (ADULT)] take classes, programs, courses, workshops,
or seminars of any kind for any reason?

YES 1
NO 2

After last adult, go to next box.

*Sampling Point:
Select children and adults for extended interviews.
If any children are selected, go to next box.
If adults only are selected, go to box after S14.
If no one is selected, go to THANK2.*

*Ask S13 and S14 for each sampled child.
If there is only 1 household member 12 years old or
older, autocode S13 to this adult.*

S13. We would like to ask some questions about (CHILD'S) (care and) education. [IF SCREENER
RESPONDENT IS OBVIOUSLY CHILD'S MOTHER, INSTEAD OF READING QUESTION, VERIFY RELATIONSHIP
AND ENTER HER PERSON NUMBER.] Who is the parent or guardian in this household who knows
the most about (CHILD'S) (care and) education?
[DISPLAY HOUSEHOLD MEMBERS 12 AND OLDER.]

PERSON NUMBER □□

S14. What is [your/(CAREGIVER'S) relationship to (CHILD)?

MOTHER (BIRTH/ADOPTIVE/STEP/FOSTER) 1
FATHER (BIRTH/ADOPTIVE/STEP/FOSTER) 2
BROTHER/SISTER 3
GRANDPARENT 4
OTHER RELATIVE 5
NONRELATIVE 6

Ask S15 for sampled adults other than the Screener respondent who are enrolled in college, graduate school, or vocational/technical school after high school and are age 16 to 19, or are age 20 to 25. For other sampled adults, go to S17.

S15. Is (ADULT) living there, in student housing, or somewhere else?

- HERE 1 (GO TO S17)
- STUDENT HOUSING [This includes all housing owned, sponsored, or leased by the school such as a dormitory or fraternity or sorority house.] 2 (GO TO S16)
- OTHER PRIVATE HOME OR APARTMENT 3 (INELIGIBLE)
- INSTITUTION OR GROUP QUARTERS [THIS INCLUDES A JAIL OR DETENTION CENTER, MEDICAL FACILITY, REHABILITATION CENTER, MENTAL HEALTH FACILITY, MILITARY BARRACKS, OR GROUP FOSTER CARE.] 4 (INELIGIBLE)

S16. Would you please give me (his/her) last name and telephone number so that we can call (him/her) to talk about (his/her) educational experiences?

LAST NAME _____
 PHONE _____

S17. [Are you/Is (ADULT)] currently serving on active duty in the U.S. Armed Forces? [DO NOT INCLUDE RESERVES OR NATIONAL GUARD.]

- YES 1 (INELIGIBLE)
- NO 2 (GO TO BOX)

Go to HHSELECT screen to select interview

THANK1. Thank you, but we are only interviewing in private residences.

THANK2. Thank you, but no one in your household has been selected for this study.

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NHES:95 Early Childhood Program Participation Interview

INTRO. [READ DISPLAY IF RESPONDENT WAS NOT SCREENER RESPONDENT:]
 [Hello, this is (INTERVIEWER). I'm calling on behalf of the U.S. Department of Education. We are conducting a voluntary and confidential study about the educational experiences of young children.]
 I'd like to talk with you now about (CHILD). These questions usually take about (10 to 15/10) minutes.

A1. [Before we begin, I'd like to confirm (his/her) age.] In what month and year was (CHILD) born?

<i>CDOBMM</i> <i>CDOBY</i>	MONTH ()	YEAR ()
1	JANUARY	7 JULY
2	FEBRUARY	8 AUGUST
3	MARCH	9 SEPTEMBER
4	APRIL	10 OCTOBER
5	MAY	11 NOVEMBER
6	JUNE	12 DECEMBER

Calculate AGE94 = child's age on December 31, 1994.
Calculate current age for display in A2.

A2. That would mean that (CHILD) [is (AGE)/turns (AGE) this month]. Is that right?

* YES 1 (GO TO A3)
 NO 2 (RETURN TO A1)

If AGE94 => 11, go to CLOSE1. Else, ask A3.

A3. Is (CHILD)...

<i>CRACE</i>	White, 1
<i>CRACEOS/R</i>	Black, 2
	American Indian or Alaska Native, 3
	Asian or Pacific Islander, or 4
	Another race? 91
	What is that? _____

NOTE: Response categories shown in mixed cases (upper and lower) are read to the respondent by the interviewer. Those shown in all upper case are not read. Those shown in italics were added during data cleaning (i.e., additional codes were created from among the "specify" responses).

NOTE: In general, variables designated by /R appear on the restricted file only. However, some variables with this designation contained no responses and therefore were not included on the restricted file. Please consult the Proprietary Data File User's Guide for a specification of which variables were excluded from the file.

NOTE: Questions designated by * do not appear on any data file. They were used for administrative, verification, or coding purposes only.

A4. Is (he/she) of Hispanic origin?

CHISPANI YES 1
NO 2

If AGE94 => 2, ask A5. Else, go to RELINTRO.

A5. What language does (CHILD) speak most at home?

CHLDLANG ENGLISH 1
CHLDLAOS/R SPANISH 2
ANOTHER LANGUAGE 91
SPECIFY _____
CHILD DOESN'T SPEAK 3

RELINTRO. [NOT READ IF ONLY ONE ADULT IN THE HOUSEHOLD.]
Now I'd like to ask how the people in your household are related to (CHILD).

If the respondent is the child's mother/father, copy RESPRELN into RELATION and ask A7/A8, then ask A6 for every other household member. If respondent is not the child's mother/father, copy RESPRELN into RELATION and ask A6 for every other household member. Else, for Screener R, copy RESPRELN into RELATION.

A6. [FOR EACH HOUSEHOLD MEMBER EXCEPT RESPONDENT:]
How is (PERSON) related to (CHILD)?
[VERIFY IF KNOWN]

RELATN1-RELATN13 MOTHER (BIRTH/ADOPTIVE/STEP/FOSTER) 1 (GO TO A7)
FATHER (BIRTH/ADOPTIVE/STEP/FOSTER) 2 (GO TO A8)
BROTHERS AND SISTERS INCLUDING STEP,
ADOPTED, AND FOSTER 3 (GO TO 1ST BOX BEFORE A9)
GRANDPARENT 4 (GO TO 1ST BOX BEFORE A9)
OTHER RELATIVE 5 (GO TO 1ST BOX BEFORE A9)
NONRELATIVE 6 (GO TO 1ST BOX BEFORE A9)

A7. [Are you/Is (PERSON)] (CHILD'S)...

MOMTYPE Birth mother, 1
Adoptive mother, 2
Stepmother, or 3
Foster mother? 4

A8. [Are you/Is (PERSON)] (CHILD'S)...

DADTYPE

Birth father,	1
Adoptive father,	2
Stepfather, or	3
Foster father?	4

Set HHMOM:
 1 = mother in household. 2 = no mom and no dad, female R.
 3 = else.
Set HHDAD:
 1 = father in household. 2 = no mom and no dad, male R. 3
 = else.

Current School Status

If ECPP respondent was also the screener respondent, copy responses from the screener to A9, A10, A11, and A12 and follow the instructions below. Else, go to next box.

*If A11 or A12 = 4 or 5, go to CLOSE1.
 If A10 = 1 (home school), go to A13.
 If AGE94 =< 2, go to 1st box after A19.
 If AGE94 = 3 to 4 and A9 = 1 (enrolled), go to A19.
 If AGE94 = 3 to 4 and A9 = 2 (not enrolled), go to 1st box after A19.
 If AGE94 => 5 and A9 = 1 (enrolled) and A10 = 2, (not in home school), go to A14.
 If AGE94 = 5 to 6 and A9 = 2 (not enrolled) and A10 = 2, (not in home school), go to A14.
 Else, if AGE94 => 7 and A9 = 2 (not enrolled) and A10 = 2, (not in home school), go to CLOSE1.*

If AGE94 => 3, ask A9. Else, go to 1st box after A19.

A9. Now I'd like to talk with you about (CHILD'S) school experiences. Is (CHILD) attending (school/nursery school, kindergarten, or school)?

ENROLL

YES	1	(GO TO BOX)
NO	2	(GO TO BOX)

*If AGE94 => 5, ask A10.
 If AGE94 = 3 to 4 and A9=1 (enrolled), go to A11.
 Else, if AGE94 = 3 to 4 and A9 = 2 (not enrolled) go to 1st box after A19.*

A10. Some parents decide to educate their children at home rather than sending them to school. Is (CHILD) being schooled at home?

HOMESCHL YES 1 (GO TO BOX)
 NO 2 (GO TO BOX)

If A10 = 1 (home school), go to A12.
 If A9 = 1 (enrolled) and A10 = 2, (not in home school) ask
 A11.
 If AGE94 = 5 to 6 and A9 = 2 (not enrolled) and
 A10 = 2, (not in home school), go to A14.
 Else, if AGE94 => 7 and A9 = 2 (not enrolled) and A10
 = 2, (not in home school), go to CLOSE1.

A11. What grade or year is (CHILD) attending?
 [PROBE FOR T OR P: Is that before or after kindergarten?]

GRADE

NURSERY/PRESCHOOL/PREKINDERGARTEN/HEAD START	. N	(GO TO BOX AFTER A12)
TRANSITIONAL KINDERGARTEN (BEFORE K)	. T	(GO TO BOX AFTER A12)
KINDERGARTEN	. K	(GO TO BOX AFTER A12)
PREFIRST GRADE (AFTER K)	. P	(GO TO BOX AFTER A12)
FIRST GRADE	. 1	(GO TO BOX AFTER A12)
SECOND GRADE	. 2	(GO TO BOX AFTER A12)
THIRD GRADE	. 3	(GO TO BOX AFTER A12)
FOURTH GRADE	. 4	(GO TO CLOSE1)
FIFTH GRADE OR HIGHER	. 5	(GO TO CLOSE1)
UNGRADED	. U	(GO TO A12)
SPECIAL EDUCATION	. S	(GO TO A12)

[IF T: In this interview we will be referring to that as "kindergarten."
 IF P: In this interview, we will be referring to that as "prefirst grade."]

A12. What grade would (CHILD) be in if (he/she) were [attending school/attending a school with regular grades]?
 [PROBE FOR T OR P: Is that before or after kindergarten?]

GRADEEQ

NURSERY/PRESCHOOL/PREKINDERGARTEN/HEAD START	. N	(GO TO BOX)
TRANSITIONAL KINDERGARTEN (BEFORE K)	. T	(GO TO BOX)
KINDERGARTEN	. K	(GO TO BOX)
PREFIRST GRADE (AFTER K)	. P	(GO TO BOX)
FIRST GRADE	. 1	(GO TO BOX)
SECOND GRADE	. 2	(GO TO BOX)
THIRD GRADE	. 3	(GO TO BOX)
FOURTH GRADE	. 4	(GO TO CLOSE1)
FIFTH GRADE OR HIGHER	. 5	(GO TO CLOSE1)
UNGRADED, NO EQUIVALENT	. U	(GO TO BOX)

[IF T: In this interview we will be referring to that as "kindergarten."
 IF P: In this interview, we will be referring to that as "prefirst grade."]

*If AGE94 = 3 to 4 and A9 = 1 (enrolled), go to A19.
If A10 = 1 (home school), ask A13.
Else, go to A14.*

A13. (I have a few more questions about (CHILD'S) schooling.) Has (CHILD) ever attended a public or private school other than home school?

EVRSCHL

YES 1 (GO TO BOX AFTER A14)
NO 2 (GO TO 1ST BOX AFTER A18)

A14. (I have a few more questions about (CHILD'S) schooling. I mentioned earlier that some parents decide to educate their children at home rather than sending them to school.) Since turning 5 years old, has (CHILD) ever been schooled at home instead of attending a public or private school?

EVRRHOME

YES 1 (GO TO BOX)
NO 2 (GO TO 1ST BOX AFTER A18)

If A13 = 1 (ever attended a school) or A14 = 1 (ever home schooled), ask A15. Else, go to 1st box after A18.

A15. (Now I would like to talk with you about each of the grades (CHILD) has ever attended. For each grade, I would like to know whether (he/she) went to a school or was home schooled for the whole grade, or whether (he/she) spent part of the grade in school and part being home schooled. Let's start with kindergarten.)

HOMEK

For kindergarten, (did/has) (CHILD) only (go/gone) to a school, (was/has) (he/she) only (been) home schooled, or (did/has) (he/she) [do both/spent part of kindergarten in school and part being home schooled]?

ONLY SCHOOL 1
ONLY HOME SCHOOL 2
BOTH 3
DID NOT ATTEND KINDERGARTEN 4

If A11 or A12 = 1, 2, or 3 (grade/equivalent is first, second, or third), ask A16. Else, go to 1st box after A18.

A16. For first grade, (did/has) (CHILD) only (go/gone) to a school, (was/has) (he/she) only (been) home schooled, or (did/has) (he/she) (do/done) both?

HOME1

ONLY SCHOOL 1
ONLY HOME SCHOOL 2
BOTH 3
DID NOT ATTEND FIRST GRADE 4

If A11 or A12 = 2 or 3 (grade/equivalent is second or third), ask A17. Else, go to 1st box after A18.

A17. For second grade, (did/has) (CHILD) only (go/gone) to a school, (was/has) (he/she) only (been) home schooled, or (did/has) (he/she) (do/done) both?

HOME2

- ONLY SCHOOL 1
- ONLY HOME SCHOOL 2
- BOTH 3
- DID NOT ATTEND SECOND GRADE 4

If A11 or A12 = 3 (grade/equivalent is third), ask A18. Else, go to 1st box after A18.

A18. For third grade, has (CHILD) only gone to a school, has (he/she) only been home schooled, or has (he/she) done both?

HOME3

- ONLY SCHOOL 1
- ONLY HOME SCHOOL 2
- BOTH 3

If AGE94 = 5 to 6 and A9 = 2 (not enrolled) and A10 = 2 (not in home school), go to 1st box after A19. Else, go to next box.

If A10 = 1 (home school), go to first box after A19. Else, ask A19.

A19. What grade or year of school, if any, was (CHILD) attending one year ago, that is, in (MONTH) (YEAR)?

[PROBE FOR T OR P: Is that before or after kindergarten?]

[DISPLAY UP TO CURRENT GRADE ONLY]

LASTGRAD

- NOT ENROLLED LAST YEAR 0
- NURSERY/PRESCHOOL/PREKINDERGARTEN/HEAD START . N
- TRANSITIONAL KINDERGARTEN (BEFORE K) T
- KINDERGARTEN K
- PREFIRST GRADE (AFTER K) P
- FIRST GRADE 1
- SECOND GRADE 2
- THIRD GRADE 3
- UNGRADED U

Set ECPATH:

I = AGE94 = 0 to 2 (Infants/Toddlers)

N = AGE94 => 3 and [(A11/A12 (grade/equivalent) = N) OR (A9 = 2 (not enrolled) and A10 NE 1 (not in home school)))] (Preschoolers)
AGE94 = 3, 4, or 5, and A12 (grade equivalent)= U, and A10 NE 1 (not in home school) (Preschoolers)
AGE94 => 5 and A10 = 1 and A11/A12 = N (Preschoolers)

K = A11/A12 (grade/equivalent) = T, K, P, and A10 NE 1 (not in home school) (Kindergartners)

S = A11/A12 (grade/equivalent) = 1, 2, 3, and A10 NE 1 (not in home school) (Primary)
AGE94 => 6, and A12 (grade equivalent)= U, and A10 NE 1 (not in home school) (Primary)

H = AGE94 => 5 and A10 = 1 (home school) and A11/A12 (grade/equivalent) NE N (Home schoolers)

*If ECPATH = I, N, or H, go to ECINTRO.
 Else, if ECPATH = K or S, go to KINTRO.*

Kindergarten History and Experience

KINTRO. Now I'd like to talk with you about (CHILD's) kindergarten experiences.

If A11 or A12 (grade or equivalent) = T or K, go to B2 and autocode B1 = 1. If A19 (grade last year) = T or K, go to B2 and autocode B1 = 1. If ECPATH = S and A15=4 (did not attend kindergarten), autocode B1 = 2 and go to PINTRO. Else, if A11 or A12 (grade or equivalent)=P or ECPATH = S, ask B1.

B1. Did (CHILD) attend kindergarten before (prefirst grade/first grade)?

ATNDKIND YES 1
 NO 2

*If ECPATH = S and (A15 = 2 or B1 = 2) (child was in home school for kindergarten or did not attend kindergarten), go to PINTRO.
 If A11/A12 (grade/equivalent) = P and B1 = 2, (did not attend kindergarten), go to B3. Else, ask B2.*

B2. Most school districts have guidelines about when a child can start school based upon his or her birth date. Did you enroll (CHILD) in kindergarten when (he/she) was old enough based on (his/her) birth date, or did you wait until (he/she) was older?

KPWAIT WHEN OLD ENOUGH 1
 WAITED 2
 ENTERED EARLY 3

B3. How old was (CHILD) in years and months when (he/she) first started (kindergarten/prefirst grade)?

KPAGEYR
KPAGEMO YEARS () MONTHS ()

*If ECPATH = K and A19 ne T, K, P (did not attend kindergarten last year), go to B6.
 If ECPATH = K and A19 = T, K, P (did attend kindergarten last year), go to B5. Else, if ECPATH = S, ask B4.*

B4. Did (CHILD) attend one or two years of kindergarten?

KPYRS ONE 1 (GO TO B6)
 TWO 2 (GO TO B5)
 THREE OR MORE 3 (GO TO B5)

B5. When (CHILD) first started (kindergarten/prefirst grade), were you planning that (he/she) would attend (kindergarten for more than one year/both kindergarten and prefirst grade/prefirst grade for more than one year)?

KPPLAN YES 1
 NO 2

B6. (Does/Did) (CHILD) attend a public or private (kindergarten/prefirst grade)?
 [IF CHILD ATTENDED MORE THAN ONE KINDERGARTEN, ASK ABOUT THE MOST RECENT ONE.]

KPPUBL PUBLIC 1 (GO TO B7)
 PRIVATE 2 (GO TO B8)

B7. (Is/Was) it (his/her) regularly assigned school or a school that you chose?
 [IF CHILD ATTENDED MORE THAN ONE KINDERGARTEN, ASK ABOUT THE MOST RECENT ONE.]

KPCHOICE ASSIGNED 1 (GO TO B10)
 CHOSEN 2 (GO TO B10)
 ASSIGNED SCHOOL IS SCHOOL OF CHOICE 3 (GO TO B10)

B8. (Is/Was) the school church-related or not church-related?
[IF CHILD ATTENDED MORE THAN ONE KINDERGARTEN, ASK ABOUT THE MOST RECENT ONE.]

KPRELGN

CHURCH-RELATED 1 (GO TO B9)
NOT CHURCH-RELATED 2 (GO TO B10)

B9. (Is/Was) it a Catholic school?
[IF CHILD ATTENDED MORE THAN ONE KINDERGARTEN, ASK ABOUT THE MOST RECENT ONE.]

KPRELTYP

YES 1
NO 2

B10. (Does/Did) (CHILD) (currently) go to the (kindergarten/prefirst grade) program for a full-day, in the morning only, (or) in the afternoon only (, or in the morning for part of the year and in the afternoon for part of the year)?

[IF CHILD ATTENDED MORE THAN ONE KINDERGARTEN, ASK ABOUT THE MOST RECENT ONE.]

KPSCHED

FULL-DAY 1
MORNING ONLY 2
AFTERNOON ONLY 3
[ECPATH = S] MORNING ONLY PART YEAR,
AFTERNOON ONLY PART YEAR 4

*If ECPATH = S, go to PINTRO.
Else, if ECPATH = K, ask B11.*

B11. How many days each week does (CHILD) attend (kindergarten/prefirst grade)?

KPDAYS

DAYS

B12. How many hours each week does (CHILD) attend (kindergarten/prefirst grade)?

KPHRS

HOURS

B13. Does that time (CHILD) spends in (kindergarten/prefirst grade) include a (kindergarten/prefirst grade) program only or does it also include before or after school child care?

KPONLY

KINDERGARTEN/PREFIRST GRADE ONLY 1 (GO TO BOX AFTER B14)
KINDERGARTEN/PREFIRST GRADE PLUS CARE 2 (GO TO B14)

B14. How many of the (HOURS) hours each week are spent in the (kindergarten/prefirst grade) program itself?

KPKINHRS

HOURS

If ECPATH = K, go to ECINTRO. Else, go to PINTRO.

PRIMARY SCHOOL HISTORY AND EXPERIENCE

PINTRO. Now let's talk about (CHILD'S) enrollment in elementary school.

If B3 = -1, (child did not attend kindergarten or prefirst grade), ask C1. Else, go to C2.

C1. How old was (CHILD) in years and months when (he/she) first started first grade?

PAGEYR YEARS () MONTHS ()
PAGEMO

C2. Does (CHILD) go to a public or private school?

PPUBL PUBLIC 1 (GO TO C3)
 PRIVATE 2 (GO TO C4)

C3. Is that (his/her) regularly assigned school or a school that you chose?

PCHOICE ASSIGNED 1 (GO TO C6)
 CHOSEN 2 (GO TO C6)
 ASSIGNED SCHOOL IS SCHOOL OF CHOICE 3 (GO TO C6)

C4. Is the school church-related or not church-related?

PRELGN CHURCH-RELATED 1 (GO TO C5)
 NOT CHURCH-RELATED 2 (GO TO C6)

C5. Is it a Catholic school?

PRELTYP YES 1
 NO 2

C6. Does (CHILD) go to a school with a regular September-to-June school schedule?
 [INCLUDES LATE AUGUST-TO-MAY ALSO.]

PSCHED YES 1 (GO TO C7)
 NO 2 (GO TO C6OV)

C6OV. Does (he/she) go to a school with a year-round schedule or some other type of schedule?

PSCHEDYR YEAR-ROUND 1
PSCHEDOS/R OTHER 91
 SPECIFY _____

C7. How many hours each week does (CHILD) attend (GRADE) grade?
 [IF > 35, PROBE FOR SCHOOL DAY HOURS, NOT ADDITIONAL CARE/ACTIVITIES.]

PHRS HOURS □□

C8. Compared to other children in (his/her) class, how would you say (CHILD) is doing in (his/her) schoolwork this year? Would you say (CHILD) is...

PWORK

- Near the top of the class, 1
- Above the middle of the class, 2
- Around the middle, 3
- Below the middle, or 4
- Near the bottom of the class? 5

C9. Has (CHILD'S) teacher or school contacted you [or (CHILD'S) (OTHER PARENT/GUARDIAN)] about any behavior problems (he/she) is having in school this year?

PBEHAVE

- YES 1
- NO 2

C10. Has (his/her) teacher or school contacted you [or (CHILD'S) (OTHER PARENT/GUARDIAN)] about any problems (he/she) is having with schoolwork this year?

PSCHLWK

- YES 1
- NO 2

C11. Since starting first grade, has (CHILD) repeated any grades?

PREPEAT

- YES 1 (GO TO C12)
- NO 2 (GO TO ECINTRO)

C12. What grade or grades did (CHILD) repeat? [CODE ALL THAT APPLY]
[DISPLAY UP TO CURRENT GRADE ONLY.]

PREPEAT1

FIRST GRADE 1

PREPEAT2

SECOND GRADE 2

PREPEAT3

THIRD GRADE 3

Early Childhood Care & Programs

ECINTRO. I'd like to talk with you about all child care (CHILD) now receives on a regular basis from someone other than (you or) (his/her) parents (or guardians), and all (early childhood/before or after school) programs (CHILD) attends on a regular basis, whether or not there is a charge or fee. This does not include occasional babysitting or backup care providers.

Relative Care

D1. Is (CHILD) now receiving care from a relative on a regular basis (including care provided before or after school)? This may include grandparents, brothers and sisters, or any relatives other than (you or) (CHILD's) parents (or guardians).

RCNOW

YES 1 (GO TO D3)
 NO 2 (GO TO D2)

D2. Has (CHILD) ever received care from a relative on a regular basis?

RCEVER

YES 1 (GO TO D3)
 NO 2 (GO TO E1)

D3. How old was (CHILD) in years and months when (he/she) first received care from any relative on a regular basis?

RCAGEYR
 RCAGEMO

YEARS () MONTHS ()

If D1 = 2, go to E1. Else, ask D4.

D4. Do you currently have more than one regular care arrangement with relatives for (CHILD)?

* YES 1 (GO TO D4OV)
 NO 2 (GO TO BOX AFTER D4OV)

D4OV. How many different regular care arrangements do you have with relatives?

RCARRNEW

[CODE 1 NOT USED]
 TWO 2
 THREE 3
 FOUR 4

Ask D5 through D28OV for each relative who provides care for child.

NOTE: The variable RCARRNEW indicates the total number of relative arrangements reported, ranging from 1 to 4. This variable is a final count which took into consideration the answers to items D4, D4OV, D29, and after any corrections made at item H1.

D5. [Let's start with the relative who provides the most care./Now let's talk about the next relative who cares for (CHILD).]

RCTYPE1-RCYPE4 [Is the relative who cares for (CHILD) (his/her).../Is that (CHILD'S)....]

- Grandparent, 1 (GO TO D6)
- Aunt, 2 (GO TO D6)
- Uncle, 3 (GO TO D6)
- Brother, 4 (GO TO D5OV)
- Sister, or 5 (GO TO D5OV)
- Another relative? 6 (GO TO D6)
- NOW SAYS NO OTHER RELATIVE ARRANGEMENT
- [DISPLAY ONLY FOR 2ND OR HIGHER ARRANGEMENT] 9 (GO TO E1)

D5OV. How old is that brother or sister?

RCAGE1-RCAGE4 YEARS

D6. Is that care provided in your home or another home?

- RCPLACE1-RCPLACE4**
- OWN HOME 1 (GO TO D7)
 - OTHER HOME 2 (GO TO D8)
 - BOTH/VARIES 3 (GO TO D8)

D7. Does (CHILD'S) (RELATIVE) who provides this care live in your household?

- RCINHH1-RCINHH4**
- YES 1 (GO TO BOX AFTER D8)
 - NO 2 (GO TO BOX AFTER D8)

D8. How long does it take to go from (CHILD'S) home to (his/her) (RELATIVE'S) home? Would you say...

- RCTIME1-RCTIME4**
- Less than 10 minutes, 1
 - 10 to 20 minutes, 2
 - 20 to 30 minutes, or 3
 - More than 30 minutes? 4

If ECPATH = K or S, ask D9. Else go to D11.

D9. Does (CHILD) receive that care on school days, weekends, or both?

- RCWHEN1-RCWHEN4**
- SCHOOL DAYS 1 (GO TO D10)
 - WEEKENDS 2 (GO TO D11)
 - BOTH 3 (GO TO D10)

D10. On school days, does (CHILD) receive that care before school, after school, or both?

- RCBFAFT1-RCBFAFT4**
- BEFORE SCHOOL 1
 - AFTER SCHOOL 2
 - BOTH 3

D11. Is the care that (CHILD) receives from (his/her) (RELATIVE) regularly scheduled at least once each week?

RCWEEK1- YES 1 (GO TO D13)
RCWEEK4 NO 2 (GO TO D12)

D12. Does (CHILD'S) (RELATIVE) care for (him/her) on some other regularly scheduled basis, at least once each month?

RCMONTH1- YES 1 (GO TO D15)
RCMONTH4 NO 2 (GO TO BOX BEFORE D29)

D13. How many days each week does (CHILD) receive care from (his/her) (RELATIVE)?

RCDAYS1- DAYS
RCDAYS4

D14. How many hours each week does (CHILD) receive care from (his/her) (RELATIVE)?

RCHRS1- HOURS
RCHRS4

If D13 = 1, go to D19. Else, go to D18.

D15. For how many weeks each month does (CHILD) receive care from (his/her) (RELATIVE)?

RCWKSMO1- WEEKS
RCWKSMO4

D16. During (that week/those weeks), how many days each week does (CHILD) receive care from (his/her) (RELATIVE)?

RCDAYWK1- DAYS
RCDAYWK4

D17. And during (that week/those weeks), how many hours each week does (CHILD) receive care from (his/her) (RELATIVE)?

RCHRSWK1- HOURS (GO TO D19)
RCHRSWK4

D18. On the days that (CHILD) receives care, that would be (HOURS) per day, on average. Is that right?

*
YES 1 (GO TO D19)
NO 2 (CORRECTION SCREEN)

D19. How many children are usually cared for together, in the same group at the same time, by (CHILD'S) (RELATIVE), counting (CHILD)?

RCKIDS1-RCIDS4 NUMBER □□

D20. How many (adults/people) usually care for (CHILD) at the same time [at your home/at (his/her) (RELATIVE'S) home]?

RCADLTS1-RCADLTS4 NUMBER □

D21. How old was (CHILD) in years and months when this particular regular care arrangement with (his/her) (RELATIVE) began?

RCSTRYR1-RCSTRYR4 [(CHILD) WAS ___ YEARS AND ___ MONTHS OLD WHEN FIRST RECEIVED CARE FROM ANY RELATIVE.]

RCSTRMM1-RCSTRMM4 YEARS () MONTHS ()

D22. What language does (CHILD'S) (RELATIVE) speak most when caring for (CHILD)?

RCSPEAK1-RCSPKOS1/R-RCSPKOS4/R ENGLISH 1
SPANISH 2
ANOTHER LANGUAGE 91
SPECIFY _____

D23. When (CHILD) is sick, does (his/her) (RELATIVE) still care for (him/her)?

RCSICK1-RCICK4 YES 1
NO 2

If D5 = 4 or 5 and D5OV < 18 (relative caregiver is a sibling under age 18), go to D25. Else, ask D24.

D24. Has (CHILD'S) (RELATIVE) received education or training specifically related to young children, such as in early childhood education or child psychology?
[DO NOT PROBE.]

RCEDUC1-RCEDUC4 YES 1
NO 2

D25. Is there any charge or fee for the care (CHILD) receives from (his/her) (RELATIVE), paid either by you or someone else?

RCFEE1-RCFEE4 YES 1 (GO TO D26)
NO 2 (GO TO BOX AFTER D28)

D26. Do any of the following people or organizations help to pay for (CHILD'S) (RELATIVE) to care for (him/her)? How about ...

		YES	NO
RCOUTH1-RCOUTH4	a. A relative of (CHILD) outside your household who provides money <u>specifically</u> for that care?	1	2
RCWEL1-RCWEL4	b. A social service or welfare agency?	1	2
RCEMPL1-RCEMPL4	c. An employer?	1	2
RCOTHER1-RCOTHER4	d. Someone else?	1	2
RCOTHOS1/R-RCOTHOS4/R	Who is that? _____		

D27. How much does your household pay for (CHILD'S) (RELATIVE) to care for (him/her)? [IF NOTHING, ENTER ZERO.]

RCCOST1-RCCOST4	\$□□□□.□□
RCUNIT1-RCUNIT4	UNIT:
RCCSTOS1/R-RCCSTOS4/R	PER HOUR 1
	PER DAY 2
	PER WEEK 3
	PER MONTH 4
	PER YEAR 5
	OTHER 91
	SPECIFY _____

If D27 = zero, or NUMKID12 (number of children in the household age 12 or younger) = 1, go to box after D28OV. Else, ask D28.

D28. Is this amount for (CHILD) only or does it include other children in your household?

RCSTHH1-RCSTHH4	CHILD ONLY	1	(GO TO BOX AFTER D28OV)
	CHILD AND OTHER(S)	2	(GO TO D28OV)

D28OV. How many children is this amount for, including (CHILD)?

RCSTHN1-RCSTHN4	NUMBER □
------------------------	----------------

If D4 = 2, (one relative arrangement), ask D29. Else, if D4OV => 2 (more than one relative arrangement), return to D5 until the number of arrangements in D4OV are completed, then ask D29.

D29. Does (CHILD) have another care arrangement with a relative on a regular basis?

*	YES	1	(GO TO D5)
	NO	2	(GO TO E1)

Nonrelative Care

E1. Now I'd like to ask you about any care (CHILD) receives from nonrelatives in a private home. This includes care by home child care providers, regular sitters, or neighbors, but does not include Head Start, day care centers, nursery schools, or preschools.

Is (CHILD) now receiving care in a private home on a regular basis from someone who is not related to (him/her) (including care provided before or after school)?

NCNOW

YES 1 (GO TO E3)
 NO 2 (GO TO E2)

E2. Has (CHILD) ever received care in a private home from a nonrelative on a regular basis?

NCEVER

YES 1 (GO TO E3)
 NO 2 (GO TO BOX BEFORE F1)

E3. How old was (CHILD) in years and months when (he/she) first received regular care in a private home from any nonrelative?

NCAGEYR
NCAGEMO

YEARS () MONTHS ()

If E1 = 2, go to box before F1. Else, ask E4.

E4. Do you currently have more than one regular care arrangement with a nonrelative for (CHILD)?

*

YES 1 (GO TO E4OV)
 NO 2 (GO TO BOX AFTER E4OV)

E4OV. How many different regular care arrangements do you have with nonrelatives?

NCARRNEW

[CODE 1 NOT USED]
 TWO 2
 THREE 3
 FOUR 4

Ask E5 through E28OV for each nonrelative who cares for child.

NOTE: The variable NCARRNEW indicates the total number of nonrelative arrangements reported, ranging from 1 to 4. This variable is a final count which took into consideration the answers to items E4, E4OV, E29, and any corrections made at item H1.

E5. [Let's start with the nonrelative who provides the most care./Now let's talk about the next care provider.] Is that care provided in your own home or in another home?

**NCPLACE1-
NCPLACE4**

- OWN HOME 1 (GO TO E6)
- OTHER HOME 2 (GO TO E7)
- BOTH/VARIES 3 (GO TO E7)
- NOW SAYS NO OTHER NONRELATIVE ARRANGEMENT
[DISPLAY ONLY FOR 2ND OR HIGHER ARRANGEMENT] 9 (GO TO F1)

E6. Does this person who cares for (CHILD) live in your household?

**NCINHH1-
NCINHH4**

- YES 1 (GO TO BOX AFTER E7)
- NO 2 (GO TO BOX AFTER E7)

E7. How long does it take to go from (CHILD'S) home to that person's home? Would you say...

**NCTIME1-
NCTIME4**

- Less than 10 minutes, 1
- 10 to 20 minutes, 2
- 20 to 30 minutes, or 3
- More than 30 minutes? 4

If ECPATH = K or S, ask E8. Else, go to E10.

E8. Does (CHILD) receive that care on school days, weekends, or both?

**NCWHEN1-
NCWHEN4**

- SCHOOL DAYS 1 (GO TO E9)
- WEEKENDS 2 (GO TO E10)
- BOTH 3 (GO TO E9)

E9. On school days, does (CHILD) receive that care before school, after school, or both?

**NCBFAFT1-
NCBFAFT4**

- BEFORE SCHOOL 1
- AFTER SCHOOL 2
- BOTH 3

E10. Is the care that (CHILD) receives from that person regularly scheduled at least once each week?

**NCWEEK1-
NCWEEK4**

- YES 1 (GO TO E12)
- NO 2 (GO TO E11)

E11. Does that person care for (CHILD) on some other regularly scheduled basis, at least once each month?

**NCMONTH1-
NCMONTH4**

- YES 1 (GO TO E14)
- NO 2 (GO TO BOX BEFORE E29)

E12. How many days each week does (CHILD) receive care from that person?

**NCDAYS1-
NCDAYS4** DAYS

E13. How many hours each week does (CHILD) receive care from that person?

NCHRS1-NCHRS4 HOURS

If E12 = 1, go to E18. Else, go to E17.

E14. For how many weeks each month does (CHILD) receive care from that person?

**NCWKSMO1-
NCWKSMO4** WEEKS

E15. During (that week/those weeks), how many days each week does (CHILD) receive care from that person?

**NCDAYWK1-
NCDAYWK4** DAYS

E16. And during (that week/those weeks), how many hours each week does (CHILD) receive care from that person?

**NCHRSWK1-
NCHRSWK4** HOURS (GO TO E18)

E17. On the days that (CHILD) receives care, that would be (HOURS) per day, on average. Is that right?
*

YES 1 (GO TO E18)
NO 2 (CORRECTION SCREEN)

E18. How many children are usually cared for together, in the same group at the same time, by that person, counting (CHILD)?

**NCKIDS1-
NCKIDS4** NUMBER

E19. How many adults usually care for (CHILD) at the same time [at (your/that) home]?

**NCADLTS1-
NCADLTS4** NUMBER

E20. How old was (CHILD) in years and months when this particular regular care arrangement with that person began?

NCSTRYR1-NCSTRYR4 [(CHILD) WAS ___ YEARS AND ___ MONTHS OLD WHEN FIRST RECEIVED CARE FROM ANY NONRELATIVE.]
NCSTRMM1-NCSTRMM4 YEARS () MONTHS ()

E21. How did you learn about this person as a care provider for (CHILD)?
 [CODE ALL THAT APPLY.]

NCFRIEN1-NCFRIEN4 FRIENDS/NEIGHBORS/RELATIVES/COWORKERS 1
NC1PEMPL-NC4PEMPL PLACE OF EMPLOYMENT 2
NCSCHL1-NCSCHL4 PUBLIC OR PRIVATE SCHOOL 3
NCCHURC1-NCCHURC4 CHURCH, SYNAGOGUE, OR OTHER PLACE OF WORSHIP . . . 4
NCSOCWK1-NCSOCWK4 WELFARE OR SOCIAL SERVICE CASEWORKERS 5
NCADS1-NCADS4 NEWSPAPER/ADVERTISEMENTS/YELLOW PAGES 6
NCAGENC1-NCAGENC4 RESOURCE AND REFERRAL (R&R) AGENCY 7
NCKNEW1-NCKNEW4 R ALREADY KNEW PROVIDER 8
NCCHILD1-NCCHILD4 PROVIDER CARED FOR ANOTHER CHILD OF R'S 9
NCREFER1-NCREFER4 REFERENCE MATERIALS 10
NCBULLE1-NCBULLE4 PUBLIC BULLETIN BOARDS/FLYERS 11
NCSOURC1-NCSOURC4 OTHER 91
NCSRCOS1/R-NCSRCOS4/R SPECIFY _____

E22. What language does (CHILD's) care provider speak most when caring for (CHILD)?

NCSPKOS1/R-NCSPKOS4/R ENGLISH 1
 SPANISH 2
 ANOTHER LANGUAGE 91
 SPECIFY _____

E23. When (CHILD) is sick, does that person still care for (him/her)?

NCSICK1-NCSICK4 YES 1
 NO 2

E24. Has (CHILD's) care provider received education or training specifically related to young children, such as in early childhood education or child psychology?
 [DO NOT PROBE.]

NCEDUC1-NCEDUC4 YES 1
 NO 2

E25. Is there any charge or fee for the care (CHILD) receives from this person, paid either by you or someone else?

NCFEE1-NCFEE4 YES 1 (GO TO E26)
 NO 2 (GO TO BOX AFTER E28OV)

E26. Do any of the following people or organizations help to pay for this care provider to care for (CHILD)? How about...

		YES	NO
NCREL1- NCREL4	a. A relative of (CHILD) outside your household who provides money <u>specifically</u> for that care?	1	2
NCWELF1-NCWELF4	b. A social service or welfare agency?	1	2
NCEMPL1-NCEMPL4	c. An employer?	1	2
NCOTHER1-NCOTHER4	d. Someone else?	1	2
NCOTHOS1/R- NCOTHOS4/R	Who is that? _____		

E27. How much does your household pay this person to care for (CHILD)?
[IF NONE, ENTER ZERO.]

NCCOST1-NCCOST4	\$□□□□.□□
NCUNIT1-NCUNIT4	UNIT:
NCCSTOS1/R- NCCSTOS4/R	PER HOUR 1
	PER DAY 2
	PER WEEK 3
	PER MONTH 4
	PER YEAR 5
	OTHER 91
	SPECIFY _____

If E27 = zero, or NUMKID12 (number of children in the household age 12 or younger) = 1, go to box after E28OV. Else, ask E28.

E28. Is this amount for (CHILD) only or does it include other children in your household?

NCSTHH1- NCSTHH4	CHILD ONLY	1	(GO TO BOX AFTER E28OV)
	CHILD AND OTHER(S)	2	(GO TO E28OV)

E28OV. How many children is this amount for, including (CHILD)?

NCSTHN1-NCSTHN4 NUMBER □

If E4 = 2, (one nonrelative arrangement), ask E29. Else, if E4OV => 2 (more than one nonrelative arrangement), return to E5 until the number of arrangements in E4OV are completed, then ask E29.

E29. Does (CHILD) have another care arrangement in a private home with a nonrelative on a regular basis?

*	YES	1	(GO TO E5)
	NO	2	(GO TO BOX BEFORE F1)

Head Start Programs

*If ECPATH = I, go to box before G1.
 If ECPATH = K, S, H, go to F2.
 Else, if ECPATH=N, ask F1.*

F1. Is (CHILD) now attending Head Start?

HSNOW YES 1 (GO TO F3)
 NO 2 (GO TO F2)

F2. Has (CHILD) ever attended Head Start?

HSEVER YES 1 (GO TO F3)
 NO 2 (GO TO BOX AFTER F3)

F3. How old was (CHILD) in years and months when (he/she) first attended any Head Start program?

HSAGEYR YEARS () MONTHS ()
HSAGEMO

If F1 = 1, go to F4. Else, go to box before G1.

F4. Where is the Head Start program located? For example, is it in a church or synagogue, a school, a community center, its own building, or some other place?

HSPLACE

YOUR HOME	1	(GO TO F6)
ANOTHER HOME	2	(GO TO F6)
A CHURCH, SYNAGOGUE, OR OTHER PLACE OF WORSHIP . . .	3	(GO TO F5)
A PUBLIC ELEMENTARY, JUNIOR HIGH, OR HIGH SCHOOL . . .	4	(GO TO F5)
A PRIVATE ELEMENTARY, JUNIOR HIGH, OR HIGH SCHOOL . . .	5	(GO TO F5)
A COLLEGE OR UNIVERSITY	6	(GO TO F5)
A COMMUNITY CENTER	7	(GO TO F5)
A PUBLIC LIBRARY	8	(GO TO F5)
ITS OWN BUILDING	9	(GO TO F5)
MORE THAN ONE PLACE	10	(GO TO F4OV)
SOME OTHER PLACE	91	(GO TO F4OV)

F4OV. (Where is that?/What are those places?)
HSPLACOS/R [LIST ALL PLACES.] _____

F5. (Is that/Are any of those places) also the location of your job [or (his/her) OTHER PARENT’S job]?

HSWORK YES 1
 NO 2

F6. Is that Head Start program a public or private program?

HSPUBL PUBLIC 1
PRIVATE 2

F7. Is that Head Start program run by a government agency, such as your local school district?

HSGOVT YES 1
NO 2

If F4 = 1 (program in own home) go to F9. Else, ask F8.

F8. How long does it take to go from (CHILD'S) home to the Head Start program? Would you say...

HSTIME Less than 10 minutes, 1
10 to 20 minutes, 2
20 to 30 minutes, or 3
More than 30 minutes? 4

F9. On the days that (CHILD) goes to Head Start, does (he/she) go for a full-day or part-day program?

HSTYPE FULL-DAY 1
PART-DAY 2

F10. Does (CHILD) go to the Head Start program on a regularly scheduled basis at least once each week?

HSWEEK YES 1(GO TO F12)
NO 2 (GO TO F11)

F11. Does (CHILD) go to the Head Start program on some other regularly scheduled basis, at least once each month?

HSMONTH YES 1 (GO TO F14)
NO 2 (GO TO BOX BEFORE G1)

F12. How many days each week does (CHILD) go to the Head Start program?

HSDAYS DAYS

F13. How many hours each week does (CHILD) go to the Head Start program?

HSHRS HOURS

If F12 = 1, go to F18. Else, go to F17.

F14. For how many weeks each month does (CHILD) go to the Head Start program?

HSWKSMO WEEKS

F15. During (that week/those weeks), how many days each week does (CHILD) go to the Head Start program?

HSDAYSWK DAYS

F16. And during (that week/those weeks), how many hours each week does (CHILD) go to the Head Start program?

HSHRSWK HOURS (GO TO F18)

F17. On the days that (CHILD) goes to Head Start, that would be (HOURS) per day, on average. Is that right?

*

YES 1 (GO TO F18)
NO 2 (CORRECTION SCREEN)

F18. Does the time (CHILD) spends at Head Start include the Head Start program only, or does it also include child care before or after the program?

HSONLY
HEAD START ONLY 1 (GO TO F20)
HEAD START AND CHILD CARE 2 (GO TO F19)

F19. How many of the (HOURS) hours each week are spent in the Head Start program itself?

HSHRSONL HOURS

F20. How many children are usually in (CHILD'S) room or group, at the same time, at the Head Start program, counting (CHILD)?

HSKIDS NUMBER

F21. How many adults are usually in (CHILD'S) room or group, at the same time, at the Head Start program?

HSADLTS NUMBER

F22. How old was (CHILD) in years and months when (he/she) started going to this particular Head Start program?

[(CHILD) WAS ___ YEARS AND ___ MONTHS OLD WHEN FIRST ATTENDED ANY HEAD START PROGRAM.]

HSSTRTYR YEARS () MONTHS ()
HSSTRTMO

F23. How did you learn about this Head Start program for (CHILD)? [CODE ALL THAT APPLY.]

HSFRIEND	FRIENDS/NEIGHBORS/RELATIVES/COWORKERS	1
HSPLEMP	PLACE OF EMPLOYMENT	2
HSSCHOOL	PUBLIC OR PRIVATE SCHOOL	3
HSCHURCH	CHURCH, SYNAGOGUE, OR OTHER PLACE OF WORSHIP	4
HSSOCWKR	WELFARE OR SOCIAL SERVICE CASEWORKERS	5
HSADS	NEWSPAPER/ADVERTISEMENTS/YELLOW PAGES	6
HSAGENCY	RESOURCE AND REFERRAL (R&R) AGENCY	7
HSKNEW	R ALREADY KNEW PROVIDER	8
HSCHILD	ATTENDED BY ANOTHER CHILD OF R'S	9
HSREFER	REFERENCE MATERIALS	10
HSBULLET	PUBLIC BULLETIN BOARDS/FLYERS	11
HSSOURCE	OTHER	91
HSSOUROS/R	SPECIFY _____	

F24. What language does (CHILD'S) Head Start teacher speak most with (him/her)?

HSSPEAK	ENGLISH	1
HSSPEAOS/R	SPANISH	2
	ANOTHER LANGUAGE	91
	SPECIFY _____	

F25. Has (CHILD'S) Head Start teacher received education or training specifically related to young children, such as in early childhood education or child psychology?
[DO NOT PROBE.]

HSEUDUC	YES	1
	NO	2

F26. Does that Head Start program encourage parents to contribute a certain number of hours each week or month?

HSPARHRS	YES	1
	NO	2

F27. Have you (or another adult in your household) worked at (CHILD'S) Head Start program in the last month, that is, since (MONTH) (DAY)?

HSPARWRK	YES	1
	NO	2

F28. Does the Head Start program have a parent advisory group or policy council?

HSPARADV	YES	1
	NO	2

F29. Does the Head Start program provide any of the following services to (CHILD) or your family?

		YES	NO
HSTEST	a. Hearing, speech, or vision testing?	1	2
HSPHYSEX	b. Physical examinations?	1	2
HSDENTAL	c. Dental examinations?	1	2
HSDISABL	d. Formal testing for developmental or learning problems?	1	2
HSSICK	e. Sick child care?	1	2

F30. Is there any charge or fee for the Head Start program, paid either by you or someone else?

HSFEE	YES	1	(GO TO F31)
	NO	2	(GO TO BOX BEFORE G1)

F31. Do any of the following people or organizations help to pay for (CHILD) to go to Head Start? How about ...

		YES	NO
HSREL	a. A relative of (CHILD) outside your household who provides money <u>specifically</u> for the Head Start program?	1	2
HSWELF	b. A social service or welfare agency? 1 2		
HSEMP	c. An employer?	1	2
HSOTHER	d. Someone else?	1	2
HSOTHEOS/R	Who is that? _____		

F32. How much does your household pay for (CHILD) to go to the Head Start program?
[IF NOTHING, ENTER ZERO.]

HSCOST	\$□□□□.□□	
HSUNIT	UNIT:	
HSCOSTOS/R	PER HOUR	1
	PER DAY	2
	PER WEEK	3
	PER MONTH	4
	PER YEAR	5
	OTHER	91
	SPECIFY _____	

If F32 = zero, or NUMKID12 (number of children in the household age 12 or younger) = 1, go to box before G1. Else, ask F33.

F33. Is this amount for (CHILD) only or does it include other children in your household?

HSCOSTHH	CHILD ONLY	1	(GO TO BOX BEFORE G1)
	CHILD AND OTHER(S)	2	(GO TO F33OV)

F33OV. How many children is this amount for, including (CHILD)?

HSCOSTHN NUMBER □

CENTER-BASED PROGRAMS/INCLUDING SCHOOL-BASED PROGRAMS

*If ECPATH = I, N, ask G1.
Else, if ECPATH = K, S, or H, go to G5.*

G1. (Not including the Head Start program,) Is (CHILD) now attending a day care center, nursery school, preschool, or prekindergarten?

CPNNOW

YES 1 (GO TO G3)
NO 2 (GO TO G2)

G2. Has (CHILD) ever gone to a day care center, nursery school, preschool, or prekindergarten (other than Head Start)?

CPNEVER

YES 1 (GO TO G3)
NO 2 (GO TO BOX BEFORE H1)

G3. How old was (CHILD) in years and months when (he/she) first went to any day care center, nursery school, preschool, or prekindergarten (other than Head Start)?

CPNAGEYR
CPNAGEMO

YEARS () MONTHS ()

If G1 = 2, go to box before H1. Else, ask G4.

G4. (Not including Head Start,) How many different day care centers, nursery schools, preschools, or prekindergartens does (CHILD) currently go to?

CPARRNEW

NUMBER □ (GO TO BOX AFTER G9)

G5. Is (CHILD) now attending a day care center or a before or after school program at a school or in a center?

CPSNOW

[IF B13 = 2, THEN G5 SHOULD = 1.]

YES 1 (GO TO G7)
NO 2 (GO TO G6)

G6. Has (CHILD) ever attended a day care center, nursery school, preschool, prekindergarten, or before or after school program at a school or in a center?

CPSEVER

YES 1 (GO TO G7)
NO 2 (GO TO BOX BEFORE H1)

NOTE: The variable CPARRNEW indicates the total number of center-based arrangements reported, ranging from 1 to 3. This variable is a final count that took into consideration the answers to items G4, G41, and any corrections at item H1.

G7. How old was (CHILD) in years and months when (he/she) first attended any day care center, nursery school, preschool, prekindergarten, or before or after school program?

CPSAGEYR
CPSAGEMO

YEARS () MONTHS ()

G8. That would mean that (CHILD attended (his/her) first program (before/after) (he/she) started (kindergarten/first grade), is that right?

*

YES 1 (GO TO BOX)
NO 2 (CORRECTION SCREEN)

If G5 = 2, go to box before H1. Else, ask G9.

G9. How many different day care centers or before or after school programs does (CHILD) currently go to?

CPARRNEW

NUMBER □

Ask G10 through G40OV for each program.

G10. (Let's start with the program where (CHILD) spends the most time./Let's talk about the next program). Where is the program located? For example, is it in a church or synagogue, a school, a community center, its own building, or some other place?

CPPLACE1-
CPPLACE3

YOUR HOME 1 (GO TO G13)
ANOTHER HOME 2 (GO TO G13)
A CHURCH, SYNAGOGUE OR OTHER PLACE OF WORSHIP . . . 3 (GO TO G12)
A PUBLIC ELEMENTARY, JUNIOR HIGH, OR HIGH SCHOOL . . . 4 (GO TO BOX BEFORE G11)
A PRIVATE ELEMENTARY, JUNIOR HIGH, OR HIGH SCHOOL . . 5 (GO TO BOX BEFORE G11)
A COLLEGE OR UNIVERSITY 6 (GO TO G12)
A COMMUNITY CENTER 7 (GO TO G12)
A PUBLIC LIBRARY 8 (GO TO G12)
ITS OWN BUILDING 9 (GO TO G12)
MORE THAN ONE PLACE 10 (GO TO G10OV)
SOME OTHER PLACE 91 (GO TO G10OV)
NOW SAYS NO OTHER CENTER-BASED ARRANGEMENT
[DISPLAY ONLY FOR 2ND OR HIGHER ARRANGEMENT] . . . 11 (GO TO BOX BEFORE H1)

G10OV. (Where is that?/What are those places?)
[LIST ALL PLACES.] _____

CPPLCOS1/R-CPPLCOS3/R

*If G10 = 4 and [(ECPATH = K and B6 = 1) or (ECPATH = S and C2 = 1)] (enrolled in public school) ask G11.
If G10 = 5 and [(ECPATH = K and B6 = 2) or (ECPATH = S and C2 = 2)] (enrolled in private school) ask G11. Else, go to G12.*

NOTE: The variable CPARRNEW indicates the total number of center-based arrangements reported, ranging from 1 to 3. This variable is a final count that took into consideration the answers to items G9, G41, and any corrections at item H1.

G11. Is that the school where (CHILD) attends [kindergarten/(GRADE) grade]?

CPPLACK1- YES 1
CPPLACK3 NO 2

G12. (Is that/Are any of those places) also the location of your job [or (his/her) OTHER PARENT'S job]?

CPWORK1- YES 1
CPWORK3 NO 2

G13. Is that a public or private program?

CPPUBL1- PUBLIC 1
CPPUBL3 PRIVATE 2

G14. Is that program run by a government agency, such as your local school district?

CPGOVT1- YES 1
CPGOVT3 NO 2

If G10 = 1 (program is located in own home), go to box before G16. Else, ask G15.

G15. How long does it take to go from (CHILD'S) home to that program? Would you say...

CPTIME1- Less than 10 minutes, 1
CPTIME3 10 to 20 minutes, 2
20 to 30 minutes, or 3
More than 30 minutes? 4

*If ECPATH = I, N, or H ask G16.
Else, go to box after G16.*

G16. On the days that (CHILD) goes to that program, does (he/she) go for a full-day or part-day program?

CPSCHED1- FULL-DAY 1
CPSCHED3 PART-DAY 2

If ECPATH = K or S, ask G17. Else, go to G19.

G17. Does (CHILD) go to that program on school days, weekends, or both?

CPWHEN1- SCHOOL DAYS 1 (GO TO G18)
CPWHEN3 WEEKENDS 2 (GO TO G19)
BOTH 3 (GO TO G18)

G18. On school days, does (CHILD) go to that program before school, after school, or both?

CPBFAFT1- BEFORE SCHOOL 1
CPBFAFT3 AFTER SCHOOL 2
BOTH 3

G19. Does (CHILD) go to that program on a regularly scheduled basis at least once each week?

CPWEEK1- YES 1 (GO TO G21)
CPWEEK3 NO 2 (GO TO G20)

G20. Does (CHILD) go to that program on some other regularly scheduled basis, at least once each month?

CPMONTH1- YES 1 (GO TO G23)
CPMONTH3 NO 2 (GO TO BOX BEFORE G41)

G21. How many days each week does (CHILD) go to that program?

CPDAYS1- DAYS
CPDAYS3

G22. (Other than regular school hours, how/How) many hours each week does (CHILD) go to that program?

CPHRS1- HOURS
CPHRS3

If G21 = 1, go to G27. Else, ask G26.

G23. For how many weeks each month does (CHILD) go to that program?

CPWKSMO1- WEEKS
CPWKSMO3

G24. During (that week/those weeks), how many days each week does (CHILD) go to that program?

CPDAYWK1- DAYS
CPDAYWK3

G25. And during (that week/those weeks), how many hours each week does (CHILD) go to that program?

CPHRSWK1- HOURS (GO TO G27)
CPHRSWK3

G26. On the days that (CHILD) goes to the program, that would be (HOURS) per day, on average. Is that right?

*

- YES 1 (GO TO G27)
 NO 2 (CORRECTION SCREEN)

G27. How many children are usually in (CHILD'S) room or group, at the same time, at that program, counting (CHILD)?

**CPKIDS1-
CPKIDS3**

NUMBER □□

G28. How many adults are usually in (CHILD'S) room or group, at the same time, at that program?

**CPADLTS1-
CPADLTS3**

NUMBER □□

G29. How old was (CHILD) in years and months when (he/she) started going to this particular program?

**CPSTRYR1-
CPSTRYR3
CPSTRMM1-
CPSTRMM3**

[(CHILD) WAS ___ YEARS AND ___ MONTHS OLD WHEN FIRST ATTENDED ANY CENTER OR PROGRAM.]

YEARS () MONTHS ()

G30. How did you learn about that program for (CHILD)?

[CODE ALL THAT APPLY.]

- CPFRIEN1-CPFRIEN3** FRIENDS/NEIGHBORS/RELATIVES/COWORKERS 1
CPLEMPL1-CPLEMPL3 PLACE OF EMPLOYMENT 2
CPSCHL1-CPSCHL3 PUBLIC OR PRIVATE SCHOOL 3
CPCHURC1-CPCHURC3 CHURCH SYNAGOGUE, OR OTHER PLACE OF WORSHIP 4
CPSOCWK1-CPSOCWK3 WELFARE OR SOCIAL SERVICE CASEWORKERS 5
CPADS1-CPADS3 6
 NEWSPAPER/ADVERTISEMENTS/YEL
 LOW PAGES6
CPAGENC1-CPAGENC3 RESOURCE AND REFERRAL (R&R) AGENCY 7
CPKNEW1-CPKNEW3 R ALREADY KNEW PROVIDER 8
CPCHILD1-CPCHILD3 ATTENDED BY ANOTHER CHILD OF R'S 9
CPREFER1-CPREFER3 REFERENCE MATERIALS 10
CPBULLE1-CPBULLE3 PUBLIC BULLETIN BOARDS/FLYERS 11
CPSOURC1-CPSOURC3 OTHER 91
**CPSRCOS1/R-
CPSRCOS3/R** SPECIFY _____

G31. What language does (CHILD'S) care provider or teacher at that program speak most with (him/her)?

- CPSPEAK1-
CPSPEAK3** ENGLISH 1
**CPSPKOS1/R-
CPSPKOS3/R** SPANISH 2
 ANOTHER LANGUAGE 91
 SPECIFY _____

G32. Has (CHILD'S) care provider or teacher received education or training specifically related to young children, such as in early childhood education or child psychology?
[DO NOT PROBE.]

CPEDUC1- YES 1
CPEDUC3 NO 2

G33. Does that program encourage parents to contribute a certain number of hours each week or month?

CPARHRS1- YES 1
CPARHRS3 NO 2

G34. Have you (or another adult in your household) worked at (CHILD'S) program in the last month, that is, since (MONTH) (DAY)?

CPARWRK1- YES 1
CPARWRK3 NO 2

G35. Does that program have a parent advisory group or policy council?

CPARADV1- YES 1
CPARADV3 NO 2

G36. Does that program provide any of the following services to (CHILD) or your family?

		YES	NO
CPTST1-CPTST3	a. Hearing, speech, or vision testing?	1	2
CPHYSEX1-CPHYSEX3	b. Physical examinations?	1	2
CPDENTA1-CPDENTA3	c. Dental examinations?	1	2
CPDISAB1-CPDISAB3	d. Formal testing for developmental or learning problems?	1	2
CPSICK1-CPSICK3	e. Sick child care?	1	2

G37. Is there any charge or fee for this program, paid either by you or someone else?

CPFEE1-CPFEE3 YES 1 (GO TO G38)
NO 2 (GO TO BOX AFTER G40OV)

G38. Do any of the following people or organizations help to pay for (CHILD) to go to that program? How about...

		YES	NO
CPREL1-CPREL3	a. A relative of (CHILD) outside your household who provides money <u>specifically</u> for that program?	1	2
CPWELF1-CPWELF3	b. A social service or welfare agency?	1	2
CPEMPL1-CPEMPL3	c. An employer?	1	2
CPOTHER1-CPOTHER3	d. Someone else?	1	2
CPOTHOS1/R- CPOTHOS3/R	Who is that? _____		

G39. How much does your household pay for (CHILD) to go to that program?
 [IF NOTHING, ENTER ZERO.]

CPCOST1-CPCOST3 \$□□□□.□□
CPUNIT1-CPUNIT3 UNIT:
CPCSTOS1/R- PER HOUR 1
CPCSTOS3/R PER DAY 2
 PER WEEK 3
 PER MONTH 4
 PER YEAR 5
 OTHER 91
 SPECIFY _____

If G39 = zero, or NUMKID12 (number of children in household age 12 or younger) = 1, go to box after G40OV. Else, ask G40.

G40. Is this amount for (CHILD) only or does it include other children in your household?

CPCSHH1- CHILD ONLY 1 (GO TO BOX AFTER G40OV)
CPCSHH3 CHILD AND OTHER(S) 2 (GO TO G40OV)

G40OV. How many children is this amount for, including (CHILD)?

CPCSHN1- NUMBER □
CPCSHN3

*If ECPATH = I, N and G4 = 1, or if ECPATH = K, S, H and G9 = 1 (one center-based arrangement), ask G41.
 Else, if ECPATH = I, N and G4 => 2, or if ECPATH = K, S, H and G9 => 2 (more than 2 center-based arrangements), return to G10 until the number of arrangements in G4 or G9 are completed, then ask G41.*

G41. Does (CHILD) go to another day care center, (nursery school, preschool, or prekindergarten) (or before/after school program)?

*
 YES 1 (GO TO G10)
 NO 2 (GO TO BOX BEFORE H1)

Program Confirmation

If D1, E1, F1, and G1 or G5 all = 2, (child has no current care arrangements), go to box before I1. If all arrangements are not at least weekly (D11, E10, F10, G19 = 2), then go to box before I1. Else, ask H1 for all arrangements which occur at least once each week.

H1. Now I'd like to confirm the child care or (early childhood) program arrangement(s) that (CHILD) has at least once each week (, not including school).

I've recorded the following arrangement(s).

- (ARRANGEMENT 1) . . . (LOCATION; DAYS & HOURS/WEEK)
- (ARRANGEMENT 2) . . . (LOCATION; DAYS & HOURS/WEEK)
- (ARRANGEMENT 3) . . . (LOCATION; DAYS & HOURS/WEEK)

[That's a total of (HOURS) hours each week (in addition to school)]. Is that right?

*

- YES, CORRECT 1 (GO TO I1)
- NO, ADD ARRANGEMENT 2 (CORRECTION SCREENS)
- NO, DELETE ARRANGEMENT 3 (CORRECTION SCREENS)
- NO, CHANGE INFORMATION 4 (CORRECTION SCREENS)

Parent Preferences

Ask I1 only if D1, E1, F1, G1, or G5 = 1 (child currently participates in at least one arrangement). Ask I1 only once per household for all children in ECPATH = I or N and for all children in ECPATH = K, S, or H.

I1. I'm going to read some things that people look for in selecting child care arrangements or (early childhood/before or after school) programs. For each one, please tell me if you think it is very important, somewhat important, or not important in selecting (an/a before or after school) arrangement for (CHILD). How about...
[RANDOM START FOR RESPONSE CATEGORIES]

		VI	SI	NI
PPTRAIN	a. A caregiver who has special training in taking care of children. Is that	1	2	3
PPSICK	b. A place where children will be cared for when they are sick. Is that	1	2	3
PPCONV	c. A place close to your home. Is that	1	2	3
PPCOST	d. A reasonable cost. Is that	1	2	3
PPKIDS	e. A small number of children in the same class or group. Is that	1	2	3
PPENGL	f. A caregiver or teacher who speaks English with your child. Is that	1	2	3

NOTE: Item H1 allowed interviewers to: 1) correct the location and the number of days and hours for all arrangements, as well as correct the type of relative caregiver, whether an arrangement takes place before or after school, and whether a Head Start program is for a full or part day; 2) identify any duplicate arrangements so that one could be deleted; and 3) add arrangements that should have been reported earlier. If another arrangement was added, the CATI system cycled through the appropriate set of questions (e.g., relative, nonrelative, center) to collect relevant items.

Self-Care: Primary School Children Only

If ECPATH = S, ask J1. Else, go to K1.

J1. Sometimes children spend time caring for themselves, either at home or somewhere else, without an adult or older child responsible for them. Does (CHILD) spend time caring for (himself/herself) on a regular basis?

SCSELF

YES 1 (GO TO J2)
 NO 2 (GO TO K1)

J2. Does (CHILD) care for (himself/herself) at least once each week?

SCWEEK

YES 1 (GO TO J7)
 NO 2 (GO TO J3)

J3. Does (CHILD) care for (himself/herself) on some other regularly scheduled basis, at least once each month?

SCMONTH

YES 1 (GO TO J4)
 NO 2 (GO TO BOX BEFORE K1)

J4. For how many weeks each month does (CHILD) care for (himself/herself)?

SCWKSMO

WEEKS

J5. During (that week/those weeks), how many days each week does (CHILD) care for (himself/herself)?

SCDAYSWK

DAYS

J6. And during (that week/those weeks), how many hours each week does (CHILD) care for (himself/herself)?

SCHRSWK

HOURS (GO TO BOX BEFORE K1)

J7. How many days each week does (CHILD) care for (himself/herself)?

SCDAYS

DAYS

J8. How many hours each week does (CHILD) care for (himself/herself)?

SCHRS

HOURS

Program Continuity

If D2, E2, F2, and G2 or G6 = 2, (child has never participated in nonparental care or programs), go to HAINTRO. Else, ask K1.

K1. [Other than the programs and care arrangements (he/she) has now, since/Since] (the school year started) this past September, have you used any (other) child care arrangements or (early childhood/before or after school) programs for (CHILD) on a regular basis? Please do not include activities or lessons, like sports.

PCOTHER

- YES 1 (GO TO K2)
- NO 2 (GO TO HAINTRO)

K2. How many child care arrangements or programs have you used for (CHILD) on a regular basis since this past September [, not counting the ones (he/she) has now]?

PCNUM

NUMBER

K3. (We will be talking about the 2 most recent of those arrangements or programs.) [Let's start with the most recent of those other arrangements or programs./Let's talk about the second most recent arrangement.] Who provided that care or program? Was it ...

PCWHO1-PCWHO2

A relative such as a grandparent or a brother or sister; 1 (GO TO K4)

PCWHOOS1/R-PCWHOOS2/R

A nonrelative such as a home child care provider or neighbor; 2 (GO TO K4)

[NOT I, K, S] A Head Start program; 3 (GO TO K5)

A day care center, (nursery school, preschool, or prekindergarten/or before/after school) program; . . 4 (GO TO K5)

[NOT I] A community recreation program, pool, or supervised playground; 5 (GO TO K5)

[ONLY S] Did (he/she) take care of (himself/herself); . . . 6 (GO TO K5)

Or did you have some other arrangement? 91 (GO TO K5)
SPECIFY _____

K4. Did that (relative/nonrelative) care for (CHILD) in your own home or in another home?

PCPLACE1-PCPLACE2

- OWN HOME 1
- OTHER HOME 2
- BOTH/VARIES 3

K5. When did that arrangement start and end? That is, in what month and year? [MUST HAVE ENDED SINCE THIS PAST SEPTEMBER]

PCSTRYR1-PCSTRYR2
PCSTRMM1-PCSTRMM2
PCENDYY1-PCENDYY2
PCENDMM1-PCENDMM2

START MONTH () START YEAR 19 ()

END MONTH () END YEAR 19 ()

K6. During the time (CHILD) was in that arrangement, how many days each week did (he/she) [receive care/go to the program/take care of (himself/herself)]?

PCDAYS1- DAYS
PCDAYS2

K7. How many hours each week did (he/she) [receive that care/go to the program/take care of (himself/herself)]?

PCHRS1- HOURS
PCHRS2

K8. What is the main reason that arrangement ended?

- | | | | |
|--------------------|--|-------|----|
| PCREASO1- | PROVIDER CLOSED/STOPPED PROVIDING CARE | ..... | 1 |
| PCREASO2 | CHILD EXCEEDED AGE OF OLD PROGRAM | ..... | 2 |
| | CHILD REACHED AGE FOR NEW PROGRAM | ..... | 3 |
| PCRSNOS1/R- | PARENT OR CHILD UNHAPPY WITH PROGRAM | ..... | 4 |
| PCRSNOS2/R | WANTED EDUCATIONAL PROGRAM | ..... | 5 |
| | PREFERRED PROGRAM BECAME AVAILABLE | ..... | 6 |
| | COULD NO LONGER AFFORD CARE/PROGRAM | ..... | 7 |
| | PARENT CHANGED JOB OR SCHEDULE | ..... | 8 |
| | RESPONDENT/CHILD MOVED | ..... | 9 |
| | PARENT STOPPED WORKING/FINISHED SCHOOL | ..... | 10 |
| | ARRANGEMENT WAS TEMPORARY/SEASONAL | ..... | 11 |
| | OTHER | ..... | 91 |
| | SPECIFY _____ | | |

*If K2 = 1 (one other arrangement since September), ask K9.
 Else, if K2 => 2 (two or more arrangements since September),
 return to K3 until the two most recent arrangements have been
 completed, then go to HAINTRO.*

K9. Other than what we've already talked about, did you use any other (early childhood/before or after school) programs or child care arrangements for (CHILD) since (school began) this past September? Please do not include activities or lessons, like sports.

*

- | | | | |
|-----|-------|---|-----------------|
| YES | ..... | 1 | (GO TO K3) |
| NO | ..... | 2 | (GO TO HAINTRO) |

HOME ACTIVITIES

HAINTRO. (This/These) next question(s) (is/are) about (reading/activities) with (CHILD) in your home.

L1. How many times have you or someone in your family read to (CHILD) in the past week? Would you say ...

- HAREADFM** Not at all, 1
 Once or twice, 2
 Three or more times, or 3
 Every day? 4

If ECPATH = S, ask L2. Else, go to box after L2.

L2. How many times did (CHILD) read to you or someone in your family in the past week? Would you say ...

- HAREADCH** Not at all, 1
 Once or twice, 2
 Three or more times, or 3
 Every day? 4

If AGE94 =< 2, go to HINTRO. Else, ask L3.

L3. In the past week, have you or someone in your family told (CHILD) a story?

- HASTORY** YES 1 (GO TO L4)
 NO 2 (GO TO L5)

L4. Was that one or two times, or three or more?

- HASTORYN** ONE OR TWO TIMES 1
 THREE OR MORE 2

L5. In the past month, have you or someone in your family visited a library with (CHILD)?

- HALIBRAY** YES 1
 NO 2

Health and Disability

HINTRO. Now I have a few questions about (CHILD'S) health.

M1. When (CHILD) was born, did (he/she) weigh more than 5 and a half pounds?

HD5LBS YES 1
NO 2

M2. In general, would you say that (CHILD'S) health is...

HDHEALTH Excellent, 1
Very good, 2
Good, 3
Fair, or 4
Poor? 5

M3. Has a doctor or other health professional ever told you that (CHILD) was developmentally delayed?

HDDELAY YES 1
NO 2

If AGE94 => 3, ask M4. Else, if AGE94 =< 2, go to M6.

M4. Does (CHILD) have any of the following disabilities?
[RANDOM START; KEEP E AND F, G AND H TOGETHER; KEEP J LAST.]

			YES	NO
HDLEARN	a.	A specific learning disability?	1	2
HDRETARD	b.	Mental retardation?	1	2
HDSPEECH	c.	A speech impairment?	1	2
HDDISTRB	d.	A serious emotional disturbance?	1	2
HDDEAF	e.	Deafness?	1	2
HDHEAR	f.	[DO NOT DISPLAY IF e=1] Another hearing impairment?	1	2
HDBLIND	g.	Blindness?	1	2
HDVISUAL	h.	[DO NOT DISPLAY IF g=1] Another visual impairment?	1	2
HDORTHO	i.	An orthopedic impairment?	1	2
HDOTHER	j.	Another health impairment lasting 6 months or more?	1	2

*If any M4a-j = 1, ask M5.
Else, go to box after M6.*

M5. (Does/Do) (CHILD'S) (disability/disabilities) affect (his/her) ability to learn?
HDAFFECT

YES 1
 NO 2

If AGE94 => 3, go to box after M6. Else, ask M6.

M6. Does (CHILD) have any of the following disabilities?
 [RANDOM START; KEEP A AND B, C AND D TOGETHER; KEEP G LAST.]

				YES	NO
HDDEAF	a.	Deafness?	1		2
HDHEAR	b.	[DO NOT DISPLAY IF a=1] Another hearing impairment?	1		2
HDBLIND	c.	Blindness?	1		2
HDVISUAL	d.	[DO NOT DISPLAY IF c=1] Another visual impairment?	1		2
HDORTHO	e.	An orthopedic impairment?	1		2
HDDEVEL	f.	Severe developmental delay?	1		2
HDOTHER	g.	Another health impairment (lasting 6 months or more)?	1		2

*If AGE94 => 3 and any M4a-j = 1, ask M7.
 If AGE94 =< 2 and any M6a-g = 1, ask M8.
 Else, go to LFINTRO.*

M7. Is (CHILD) receiving services for (his/her) (disability/disabilities) from...

				YES	NO
HDSCHL	a.	Your local school district?	1		2
HDGOVT	b.	A state or local health or social service agency?	1		2
HDDOCTOR	c.	A doctor or clinic	1		2
HDSOURCE	d.	Some other source?	1		2
HDSOUROS/R		What is that? _____			

If M7a-d all = 2, go to LFINTRO. Else, go to next box.

M8. Is (CHILD) receiving services for (his/her) (disability/disabilities)...

				YES	NO
HDIFSP	a.	Through an Individualized Family Service Plan, or IFSP?	1		2
HDINFSRC	b.	From any other source?	1		2
HDINFOS/R		What is that? _____			

*If M8a=2 and M8b=2 (child does not receive services) go to LFINTRO.
Else, go to next box.*

*If ECPATH = K or S go to M12.
If ECPATH = H, go to LFINTRO.
If F1 = 1 (child attends Head Start), ask M9.
Else, go to box after M9.*

M9. Does the Head Start program (CHILD) attends coordinate or provide those services?

HDHEAD YES 1
NO 2

If ECPATH = I or N and G1 = 1 (child attends a day care center, nursery school, or preschool), ask M10. Else, go to box after M11.

M10. (Does the/Do any of the) day care center(s), nursery school(s), or preschool(s) (CHILD) attends coordinate or provide those services?

HDCENT YES 1
NO 2

*If M10 = 1 and child has more than one center-based arrangement, ask M11.
If M10 = 1 and child attends only one center-based program, autocode M11 to equal that center.
Else, go to box after M11.*

M11. Which centers or programs coordinate or provide those services?
[MARK ALL THAT APPLY.]

**HDSERV1-
HDSERV3** [DISPLAY ALL CENTER-BASED ARRANGEMENTS:]
(ARRANGEMENT 1: LOCATION; DAYS & HOURS/WEEK)
(ARRANGEMENT 2: LOCATION; DAYS & HOURS/WEEK)
(ARRANGEMENT 3: LOCATION; DAYS & HOURS/WEEK)

*If ECPATH = K or S, ask M12.
If ECPATH = I, N and F1 = 1 or G1 = 1 (child attends Head Start or a day care center, nursery school, or preschool), ask M12.
Else, go to LFINTRO.*

NOTE: The HDSERV variables at item M11 indicate whether center-based programs reported for children with disabilities provide services. Since a maximum of three centers were reported for any child, there are three HDSERV variables on the file. HDSERV1 indicates whether the first-reported center provides services (1=yes, 2=no); HDSERV2 indicates whether the second-reported center (if any) provides services; and HDSERV3 indicates whether the third-reported center (if any) provides services.

M12. [ASK IF M9 = 1 AND FOR EACH ARRANGEMENT IN M11.]
 Do all of the children in (CHILD'S) (class at school/room or group at) (the Head Start program/the program/ARRANGEMENT#) have disabling conditions, or is (he/she) in a mixed (class/group) with some children who have disabilities and some who don't?

CHMIX
HDMIX ALL HAVE DISABILITIES 1
CPMIX1- SOME DO, SOME DON'T 2
CPMIX3

If M12 = 2, ask M13. Else, ask M12 for next center-based arrangement or go to LFINTRO.

M13. Does (CHILD) usually spend all of (his/her) time in the mixed (class/group), or does (he/she) sometimes leave the (class/group) for separate services or instruction?

CHMIXALL
HDMIXALL SPENDS ALL TIME IN THE MIXED CLASS/GROUP 1
CPMIXAL1- SOMETIMES LEAVES THE MIXED CLASS/GROUP 2
CPMIXAL3

The mother and father sections are asked only once per mother and father in the household.

Parent/Guardian Characteristics

LFINTRO. Now I have some questions about [(you) (and) (CHILD'S) (mother/stepmother/foster mother) (and) (father/stepfather/foster father)]. [Let's start with (you)/(CHILD'S) mother].]

Mother Items

If HHMOM = 1 or 2 (mother or female guardian), ask N1. Else, if HHMOM = 3 (no mother/female guardian), go to box before O1.

N1. What is [your/(CHILD'S) (mother's/stepmother's/foster mother's)] marital status?

MOMSTAT MARRIED/REARRIED 1
 SEPARATED 2
 DIVORCED 3
 WIDOWED 4
 NEVER MARRIED 5

N2. How old (were you/was (CHILD'S) (mother/stepmother/foster mother) when (you/she) first became a mother, stepmother, or guardian to any child?

MOMNEW YEARS

NOTE: Items M12 and M13 are asked of several different types of children with disabilities. CHMIX and CHMIXALL apply to classes at school for kindergartners or primary schoolers; HDMIX and HDMIXALL apply to classes or groups at Head Start programs that provide services (i.e., when HDHEAD=yes); and CPMIX1, CPMIXAL1, CPMIX2, CPMIXAL2, and CPMIX3, CPMIXAL3 apply to the classes or groups at the first-, second-, and third-reported center-based programs that provide services (i.e., when HDSERV1, HDSERV2, or HDSERV3 = yes).

N3. What was the first language [you/(CHILD's) (mother/stepmother/foster mother)] learned to speak?

MOMLANG	ENGLISH	1	(GO TO N5)
MOMLANOS/R	SPANISH	2	(GO TO N4)
	ANOTHER LANGUAGE	91	(GO TO N4)
	SPECIFY _____		

N4. What language [do you/does (CHILD'S) (mother/stepmother/foster mother)] speak most at home now?

MOMSPEAK	ENGLISH	1	
MOMSPEOS/R	SPANISH	2	
	[DISPLAY ANOTHER LANGUAGE SPECIFIED IN N3]	3	
	ANOTHER LANGUAGE	91	
	SPECIFY _____		

N5. In what country [were you/was (CHILD'S) (mother/stepmother/foster mother)] born?

MOMBORN	UNITED STATES (50 STATES OR D.C.)	1	(GO TO N7)
MOMBOOS1/R	U.S. TERRITORIES: PUERTO RICO, GUAM, AMERICAN SAMOA,		
MOMBOOS2/R	US VIRGIN ISLANDS, MARIANA ISLANDS, OR		
	SOLOMON ISLANDS	2	(GO TO N6)
	SPECIFY _____		
	SOME OTHER COUNTRY	3	(GO TO N6)
	SPECIFY _____		

N6. How old (were you/was she) when (you/she) first moved to the (United States/50 states or the District of Columbia)?

MOMUSAGE	AGE	<input type="checkbox"/> <input type="checkbox"/>
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N7. What is the highest grade or year of school that [you/(CHILD'S) (mother/stepmother/foster mother)] completed?

MOMGRAD1	UP TO 8TH GRADE	1	(ENTER ACTUAL GRADE, GO TO N8)
MOMGRAD2	9TH TO 11TH GRADE	2	(ENTER ACTUAL GRADE, GO TO N8)
MOMGRADE	12TH GRADE BUT NO DIPLOMA	3	(GO TO N8)
	HIGH SCHOOL DIPLOMA/EQUIVALENT	4	(GO TO N9)
	VOC/TECH PROGRAM AFTER HIGH SCHOOL		
	BUT NO VOC/TECH DIPLOMA	5	(GO TO N8)
	VOC/TECH DIPLOMA AFTER HIGH SCHOOL	6	(GO TO N8)
	SOME COLLEGE BUT NO DEGREE	7	(GO TO N7OV)
	ASSOCIATE'S DEGREE	8	(GO TO N8)
	BACHELOR'S DEGREE	9	(GO TO N9)
	GRADUATE OR PROFESSIONAL SCHOOL BUT NO DEGREE . .	10	(GO TO N9)
	MASTER'S DEGREE (MA, MS)	11	(GO TO N9)
	DOCTORATE DEGREE (PHD, EDD)	12	(GO TO N9)
	PROFESSIONAL DEGREE BEYOND BACHELOR'S DEGREE		
	(MEDICINE/MD; DENTISTRY/DDS; LAW/JD/LLB; ETC.)	13	(GO TO N9)

NOTE: For question N4, category 3 is coded as 91 in the data file.

N7OV. (Did you/Did she) earn a vocational or technical diploma after leaving high school?

MOMVOCDI YES 1
NO 2

N8. (Do you/Does she) have a high school diploma or its equivalent, such as a GED?

MOMDIPL YES 1
NO 2

N9. During the past week, did [you/(CHILD's) (mother/stepmother/foster mother)] work at a job for pay?

MOMWORK YES 1 (GO TO N11)
NO 2 (GO TO N10)
RETIRED 3 (GO TO N13)

N10. (Were you/Was she) on leave or vacation from a job during the past week?

MOMLEAVE YES 1 (GO TO N11)
NO 2 (GO TO N13)

N11. About how many total hours per week (do you/does she) usually work for pay, counting all jobs?
[IF HOURS VARY, PROBE FOR AVERAGE PER WEEK.]

WEEKLY HOURS □□

N12. Counting all jobs, about how much (do you/does she) earn before taxes and other deductions?

MOMEARN AMOUNT □□□□□.□□

MOMUNIT
MOMUNIOS/R

PER
HOUR 1
DAY 2
WEEK 3
BI-WEEKLY 4
MONTH 5
YEAR 6
OTHER 91
SPECIFY _____

If ECPP respondent completed an Adult Education interview (AE): If A7 = 1 (worked in the past 12 months in AE), copy response from J23 (number of months worked in AE) into N16. If A7 = 2 (did not work in past 12 months in AE), then set N13 = 0.

N13. How many months (,if any,) (have you/has she) worked for pay in the past 12 months?

MOMMTHS MONTHS □□

If N9 or N10 = 1 (working or on leave/vacation), go to N18. If N9 = 3 (retired), autocode N16 = 3 and go to N18. Else, ask N14.

N14. (Have you/Has she) been actively looking for work in the past 4 weeks?

- MOMLOOK** YES 1 (GO TO N15)
 NO 2 (GO TO N16)

N15. What (have you/has she) been doing in the past 4 weeks to find work?
 [CODE ALL THAT APPLY.]

- MOMPUBL** CHECKED WITH PUBLIC EMPLOYMENT AGENCY 1
MOMPRIV CHECKED WITH PRIVATE EMPLOYMENT AGENCY 2
MOMEMPL CHECKED WITH EMPLOYER DIRECTLY/SENT RESUME 3
MOMREL CHECKED WITH FRIENDS OR RELATIVES 4
MOMANSAD PLACED OR ANSWERED ADS/SENT RESUME 5
MOMREAD READ WANT-ADS 6
MOMOTHER SOMETHING ELSE 91
MOMOTHOS/R SPECIFY _____

If N15 = 1 through 5, go to N17. Else, go to N16.

N16. What (were you/was she) doing most of last week? Would you say ...

- MOMACTY** Keeping house or caring for children, 1
 Going to school, 2
 Retired, 3
 Unable to work, or 4
MOMACTOS/R Something else? 91
 What was that? _____

If N15 = 91, ask N17. Else, go to N18.

N17. Could (you/she) have taken a job last week if one had been offered?

- MOMTAKE** YES 1
 NO 2

N18. (Are you/Is she) attending or enrolled in a school, college, university, or adult learning center, or receiving vocational education or job training [other than at (your/her) regular job]?

- MOMENROL** YES 1 (GO TO N19)
 NO 2 (GO TO BOX AFTER N19)

N19. How many hours each week (do you/does she) attend school or training?
 [REFERS TO ACTUAL TIME, NOT CREDIT HOURS.]

- MOMENHRS** HOURS □□

If N9=1 or N10=1 or N16=2 or N18=1 (mother/female guardian is employed for pay or attending school or training), ask N20 for each child.
 Else, go to box before O1.

N20. [DISPLAY CARE ARRANGEMENTS/PROGRAMS, IF ANY]
 What is (CHILD) usually doing or how is (he/she) usually cared for during most of the hours that [you/(CHILD)'s mother/stepmother/foster mother] (are/is) at (work) (or) (school or training)? For example, is (CHILD)(in school,)[(at one of the/at the) arrangement(s) we talked about,] cared for by (his/her) other parent, or something else?

MOMCARE	ARRANGEMENT NUMBER	□□
MOMCAROS/R	IN SCHOOL [ECPATH=K,S ONLY]	21
	MOTHER WORKS AT HOME/CARES FOR CHILD	
	AT WORK OR SCHOOL	22
	CARED FOR BY CHILD'S OTHER PARENT/	
	STEPPARENT/FOSTER PARENT	23
	SELF CARE [ECPATH = S ONLY]	24
	MATERNITY LEAVE	25
	SOMETHING ELSE	91
	SPECIFY _____	

N21. Does that arrangement cover all of the hours that [you/(CHILD)'s mother/stepmother/foster mother] (are/is) at (work) (or) (school or training)?

MOMCAROT	YES	1	(GO TO BOX AFTER N22)
	NO	2	(GO TO N22)

N22. [DISPLAY CARE ARRANGEMENTS/PROGRAMS, IF ANY]
 What is (CHILD) usually doing or how is (he/she) usually cared for during most of the other hours that [you/(CHILD)'s mother/stepmother/foster mother] (are/is) at (work) (or) (school or training)? Is (CHILD)(in school,)[(at one of the/at the) arrangement(s) we talked about,] cared for by (his/her) other parent, or something else?

MOMCARWH	ARRANGEMENT NUMBER	□□
MOMCWHOS/R	IN SCHOOL [ECPATH=K,S ONLY]	21
	MOTHER WORKS AT HOME/CARES FOR CHILD	
	AT WORK OR SCHOOL	22
	CARED FOR BY CHILD'S OTHER PARENT/	
	STEPPARENT/FOSTER PARENT	23
	SELF CARE [ECPATH = S ONLY]	24
	MATERNITY LEAVE	25
	SOMETHING ELSE	91
	SPECIFY _____	

If HHDAD = 1 or 2 (father or male guardian), ask O1. Else, if HHDAD = 3 (no father or male guardian), go to HHINTRO.

Father Items

O1. What was the first language [you/(CHILD'S) (father/stepfather/foster father)] learned to speak?

DADLANG	ENGLISH	1	(GO TO O3)
DADLANOS/R	SPANISH	2	(GO TO O2)
	ANOTHER LANGUAGE	91	(GO TO O2)
	SPECIFY _____		

O2. What language [do you/does (CHILD'S) (father/stepfather/foster father)] speak most at home now?

DADSPEAK	ENGLISH	1	
DADSPEOS/R	SPANISH	2	
	[DISPLAY ANOTHER LANGUAGE SPECIFIED IN O1]	3	
	ANOTHER LANGUAGE	91	
	SPECIFY _____		

O3. In what country [were you/was (CHILD'S) (father/stepfather/foster father)] born?

DADBORN	UNITED STATES (50 STATES OR D.C.)	1	(GO TO O5)
DADBOOS1/R	U.S. TERRITORIES: PUERTO RICO, GUAM, AMERICAN SAMOA,		
DADBOOS2/R	US VIRGIN ISLANDS, MARIANA ISLANDS, OR		
	SOLOMON ISLANDS	2	(GO TO O4)
	SPECIFY _____		
	SOME OTHER COUNTRY	3	(GO TO O4)
	SPECIFY _____		

O4. How old (were you/was he) when (you/he) first moved to the (United States/50 states or the District of Columbia)?

DADUSAGE	AGE	<input type="checkbox"/> <input type="checkbox"/>
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O5. What is the highest grade or year of school that [you/(CHILD'S) (father/stepfather/foster father)] completed?

DADGRAD1	UP TO 8TH GRADE	1	(ENTER ACTUAL GRADE, GO TO O6)
DADGRAD2	9TH TO 11TH GRADE	2	(ENTER ACTUAL GRADE, GO TO O6)
DADGRADE	12TH GRADE BUT NO DIPLOMA	3	(GO TO O6)
	HIGH SCHOOL DIPLOMA/EQUIVALENT	4	(GO TO O7)
	VOC/TECH PROGRAM AFTER HIGH SCHOOL BUT NO VOC/TECH DIPLOMA	5	(GO TO O6)
	VOC/TECH DIPLOMA AFTER HIGH SCHOOL	6	(GO TO O6)
	SOME COLLEGE BUT NO DEGREE	7	(GO TO O5OV)
	ASSOCIATE'S DEGREE	8	(GO TO O6)
	BACHELOR'S DEGREE	9	(GO TO O7)
	GRADUATE OR PROFESSIONAL SCHOOL BUT NO DEGREE . .	10	(GO TO O7)
	MASTER'S DEGREE (MA, MS)	11	(GO TO O7)
	DOCTORATE DEGREE (PHD, EDD)	12	(GO TO O7)
	PROFESSIONAL DEGREE BEYOND BACHELOR'S DEGREE (MEDICINE/MD; DENTISTRY/DDS; LAW/JD/LLB; ETC.)	13	(GO TO O7)

NOTE: For Question O2, category 3 is coded as 91 in the data file.

O5OV. (Did you/Did he) earn a vocational or technical diploma after leaving high school?

DADVOCDI YES 1
NO 2

O6. (Do you/Does he) have a high school diploma or its equivalent, such as a GED?

DADDIPL YES 1
NO 2

O7. During the past week, did [you/(CHILD'S) (father/stepfather/foster father)] work at a job for pay?

DADWORK YES 1
NO 2
RETIRED 3

*If O7 = 1 (worked last week), go to O9. If O7 = 3 (retired),
autocode O12 = 3 and go to O14. Else, ask O8.*

O8. (Were you/Was he) on leave or vacation from a job during the past week?

DADLEAVE YES 1 (GO TO O9)
NO 2 (GO TO O10)

O9. About how many total hours per week (do you/does he) usually work for pay, counting all jobs?
[IF HOURS VARY, PROBE FOR AVERAGE PER WEEK.]

DADHOURS WEEKLY HOURS □□

*If O7 or O8 = 1 (working or on leave/vacation), go to O14.
Else, ask O10.*

O10. (Have you/Has he) been actively looking for work in the past 4 weeks?

DADLOOK YES 1 (GO TO O11)
NO 2 (GO TO O12)

O11. What (have you/has he) been doing in the past 4 weeks to find work?
[CODE ALL THAT APPLY.]

DADPUBL CHECKED WITH PUBLIC EMPLOYMENT AGENCY 1
DADPRIV CHECKED WITH PRIVATE EMPLOYMENT AGENCY 2
DAEMPL CHECKED WITH EMPLOYER DIRECTLY/SENT RESUME 3
DADREL CHECKED WITH FRIENDS OR RELATIVES 4
DADANSAD PLACED OR ANSWERED ADS/SENT RESUME 5
DADREAD READ WANT-ADS 6
DADOTHER SOMETHING ELSE 91
DADOTHOS/R SPECIFY _____

If O11 = 1 through 5, go to O13.
Else, go to O12.

O12. What (were you/was he) doing most of last week? Would you say...

- DADACTY** Keeping house or caring for children, 1
DADACTOS/R Going to school, 2
 Retired, 3
 Unable to work, or 4
 Something else? 91
 What was that? _____

If O11 = 91, ask O13. Else, go to O14.

O13. Could (you/she) have taken a job last week if one had been offered?

- DADTAKE** YES 1
 NO 2

O14. (Are you/Is he) attending or enrolled in a school, college, university, or adult learning center, or receiving vocational education or job training [other than on (your/his) regular job]?

- DADENROL** YES 1 (GO TO O15)
 NO 2 (GO TO HHINTRO)

O15. How many hours per week (do you/does he) attend school or training?
 [REFERS TO ACTUAL TIME NOT CREDIT HOURS.]

- DADENHRS** HOURS

The following questions are asked only once per household.

HOUSEHOLD CHARACTERISTICS

HHINTRO. Finally, a few questions about your household.

- P1. Do you...
HOWNHOME Own your home, 1
 Rent your home, or 2
 Have some other arrangement? 3

P2. Besides (PHONE NUMBER), do you have other telephone numbers in your household?

- HOTHNUM** YES 1 (GO TO P3)
 NO 2 (GO TO P4)

P3. How many of these additional telephone numbers are for home use?

- HNUMUSE** NUMBER

P4. During the past 12 months, has your household ever been without telephone service for more than 24 hours?

HPHONSVC YES 1 (GO TO P5)
 NO 2 (GO TO P6)

P5. What was the total amount of time your household was without telephone service in the past 12 months?

HSVCNUM NUMBER □□

HSVCUNIT DAYS 1
 WEEKS 2
 MONTHS 3

P6. So that we can group households geographically, may I have your ZIP code?

HZIPCODE/R ZIP CODE □□□□□

P7. In the past 12 months, has your family received funds or services from any of the following programs? How about...

		YES	NO
HWIC	a. Women, Infants, and Children, or WIC?	1	2
HFOODST	b. Food Stamps?	1	2
HAFDC	c. AFDC, or Aid to Families with Dependent Children?	1	2

P8. In studies like this, households are sometimes grouped according to income. What was the total income of all persons in your household over the past year, including salaries or other earnings, interest, retirement, and so on for all household members.

HINCMRNG Was it....
 \$25,000 or less, or 1 (READ SET 1)
 More than \$25,000? 2 (READ SET 2)

HINCOME Was it...
 [SET 1]
 \$5,000 or less, 1
 \$5,001 to \$10,000, 2
 \$10,001 to \$15,000, 3
 \$15,001 to \$20,000, or 4
 \$20,001 to \$25,000? 5
 [SET 2]
 \$25,001 to \$30,000, 6
 \$30,001 to \$35,000, 7
 \$35,001 to \$40,000, 8
 \$40,001 to \$50,000, 9
 \$50,001 to \$75,000, or 10
 Over \$75,000? 11

Ask P8OV if
 (Number in HH = 2 and HINCOME = 2) or
 (Number in HH = 3 and HINCOME = 3) or
 (Number in HH = 4 and HINCOME = 3) or
 (Number in HH = 5 and HINCOME = 4) or
 (Number in HH = 6 and HINCOME = 4) or
 (Number in HH = 7 and HINCOME = 5) or
 (Number in HH = 8 and HINCOME = 5) or
 (Number in HH = 9 and HINCOME = 6) or
 (Number in HH = 10 and HINCOME = 6) or
 (Number in HH = 11 and HINCOME = 7) or
 (Number in HH = 12 and HINCOME = 7).
 Else, go to CLOSE2.

P8OV. What was your total household income last year, to the nearest thousand?

HINCMEXT

AMOUNT \$□□,□□□

CLOSE1. Thank you, but we are only asking about children in a specific age or grade range. Please hold on for a moment while I check to see if there is anyone else I need to ask you about or anyone else I need to speak with.

CLOSE2. Those are all the questions I have about (CHILD). Please hold on for a moment while I check to see if there is anyone else I need to ask about, (or anyone else I need to speak with).

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