

OMB No.: 0970-0143

Expiration Date: 10/31/01

# EARLY HEAD START

## PARENT INTERVIEW

*FOR PARENTS OF  
3-YEAR-OLD CHILDREN*

Public reporting burden for this collection of information is estimated to average 2 hours per response for the interview and assessments, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to ACF Reports Clearance Officer, Paperwork Reduction Project (OMB# 0970-0143), Administration for Children and Families, Office of Information Services, 370 L'Enfant Promenade, S.W., Washington, DC 20447. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The OMB number for this project is 0970-0143.

MPR ID #:

DATA COLLECTOR ID #:

DATE:  /  / 19   
MONTH DAY YEAR

TIME START:  :  AM/PM

TIME END:  :  AM/PM

Final Disposition Code:



Conducted for:  
Mathematica Policy Research, Inc.  
P.O. Box 2393  
Princeton, NJ 08543-2393  
and  
Administration on Children, Youth, and Families  
U.S. Department of Health and Human Services

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Items 4.16 A-J. PRS. *Parent-Caregiver Relationship Scale*. Copyright James Elicker, Illene C. Noppe, and Lloyd D. Noppe, 1996.

Items various, starting at 5.7. HOME. Caldwell, Bettye M., and Robert H. Bradley. *Administration Manual: Home Observation for Measurement of the Environment*. Little Rock, AR: University of Arkansas at Little Rock, 2003.

Items 9.1 A-MM. CBC. *Achenbach System of Empirically-Based Assessment, Child Behavior Checklist*. Achenbach, Thomas M. and Leslie A. Rescorla. *Manual for the ASEBA Preschool Forms and Profiles*. Burlington, VT: University of Vermont Department of Psychiatry, 2000.

**INTERVIEWER: PLEASE NOTE: IN QUESTIONS THAT REFER TO THE PARENT/MOTHER OF THE FOCUS CHILD, WE MEAN "THE PERSON FUNCTIONING IN THAT ROLE WHO IS THE RESPONDENT." THIS COULD BE THE MOTHER, FATHER, GRANDMOTHER OR SOME OTHER RELATIVE. PLEASE ADAPT THE SPECIFIC QUESTION LANGUAGE AS NECESSARY.**

## **INTRODUCTION**

---

Hello. Thank you for agreeing to talk with us (again). As I mentioned (on the phone/when we made the appointment), the entire visit will take about 2 hours. The visit has three parts. (Just as we did last time.) I will need to spend about a half hour with (CHILD), letting (him/her) show me some of the things (he/she) has been learning. Next, I will take out different toys for (CHILD) to play with while I videotape you and (him/her) together. While you, (CHILD) and I are working together, it would be best if we were not interrupted. Finally, I will be asking you some questions about (CHILD) and your family routines. (Many of these questions are the same or similar to questions we asked you when [CHILD] was 2 years old.) As we go along, I will be telling you what we need you to do. And please, if you have any questions, feel free to ask them!

If at any time you need to take a break to take care of (CHILD) (or your other children), please let me know.

All the information you give me is confidential. Neither your name nor (CHILD)'s will be attached to any of the information you give us. If there is ever anything you are not comfortable talking about or doing, please let me know and we will skip that part.

Is this a good time for (CHILD)? We can start with (his/her) activities or with the interview if you think (he/she) isn't at (his/her) best right now.

**IS THIS A GOOD TIME FOR CHILD?**

**YES ..... 01 → GO TO SECTION 0**

**NO ..... 00 → START INTERVIEW,  
RETURN TO SECTION 0  
WHEN CHILD IS READY**

**SECTION 0**  
**CHILD ASSESSMENT AND VIDEOTAPE**

---

**INTERVIEWER: WHEN ARE YOU DOING THE BAYLEY?**

AT START OF VISIT ..... 01

AFTER START OF QUESTIONNAIRE ..... 00 → **Which section?**

**INTRODUCTION TO THE BAYLEY:**

0.1 Now I would like to give (CHILD) a chance to show us some of the skills (he/she) has been learning. These activities are designed to be fun for children and we think (he/she) will enjoy most of them.

I will need a few minutes to get my materials set up. Would you please see if (CHILD) needs anything such as (changing/a bathroom break) or a snack so that (he/she) will be comfortable. (Also, we need to make sure that the other children let (CHILD) do these tasks by (him/her)self).

0.2 All the toys we will use are non-toxic, clean and safe, and have been thoroughly washed. We don't expect (CHILD) to be able to do all the tasks. They are designed for a wide range of children. Please don't try and help (him/her) out.

WHEN YOU DO THE BAYLEY, IF POSSIBLE, HAVE THE PARENT COMPLETE THE SELF ADMINISTERED QUESTIONNAIRE. QUESTIONS IN THE SAQ ARE 1.1, 1.2, 1.3, 7.1-7.3, 9.1 AND 10.1-10.5.

**PROCEED WITH BAYLEY BOOKLET.**

**WHEN CHILD HAS HAD A BREAK, ADMINISTER THE PPVT-111.**

# SECTION 1

## RAISING A CHILD

---

1.0 INTERVIEWER: DID PARENT COMPLETE THE SELF-ADMINISTERED  
VERSION OF THESE QUESTIONS (SAQ 1)?

YES ..... 01 → GO TO SECTION 2

NO ..... 00 → CONTINUE

1.1 ITEMS DELETED FROM THIS VERSION TO PROTECT  
AUTHOR/PUBLISHER COPYRIGHT. SEE PAGE ii FOR FULL CITATION.

PSI

1.2

PSI

ITEMS DELETED FROM THIS VERSION TO PROTECT  
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1.3 ITEMS DELETED FROM THIS VERSION.



## SECTION 2

### CHILD'S HEALTH

---

(The next/my first) questions are about (CHILD)'s health.

2.1 Overall, since (THIS MONTH) of last year, would you say (CHILD)'s health has been . . .

NHI

**PROBE:** In the last 12 months.

CIRCLE ONE

Excellent, . . . . . 01

Very good, . . . . . 02

Good, . . . . . 03

Fair, or . . . . . 04

Poor? . . . . . 05

2.2 A. Since (his/her) second birthday, how many **different** times has (CHILD) stayed in a hospital for at least one night?

|\_\_|\_\_| TIMES

NONE . . . . . 00 → **GO TO Q2.3**

B. Altogether, since (his/her) second birthday, how many nights did (CHILD) stay in a hospital?

|\_\_|\_\_|\_\_| NIGHTS

C. (Was this/Were any of these) hospitalization(s) because of an accident or injury?

YES ..... 01

NO ..... 00 → **GO TO D**

1) How many of these hospitalizations were because of an accident or injury?

|\_\_|\_\_| NUMBER OF HOSPITALIZATIONS

2) How many nights did (CHILD) stay in the hospital because of an accident or injury?

|\_\_|\_\_| NUMBER OF NIGHTS

**D. CODE WITHOUT ASKING IF ONLY ONE HOSPITALIZATION:**

How many of the (NUMBER IN Q2.2A) hospitalizations were because of . . .

1) Dehydration/diarrhea? ..... |\_\_|\_\_|\_\_| TIMES

2) Asthma/Pneumonia/acute respiratory infection/bronchitis/breathing problems? ..... |\_\_|\_\_|\_\_| TIMES

3) Surgery or an operation? (SPECIFY) . |\_\_|\_\_|\_\_| TIMES

\_\_\_\_\_ |\_\_|\_\_|

4) High fever of unknown cause? ..... |\_\_|\_\_|\_\_| TIMES

5) Something else? (SPECIFY) ..... |\_\_|\_\_|\_\_| TIMES

\_\_\_\_\_ |\_\_|\_\_|

2.3 **INTERVIEWER CODE: FAMILY LIVES:**

- IN AN APARTMENT . . . . . 01 →
- IN A HOUSE . . . . . 02
- PUBLIC SHELTER . . . . . 03

A. **WHAT FLOOR?**  
|\_|\_| FLOOR

2.4-  
2.8 **NO QUESTIONS 2.4-2.8 IN THIS VERSION.**

2.9 How often does (CHILD) ride in a private car? Would you say . . .

scs

CIRCLE ONE

- Every day, . . . . . 01
- A few times a week, . . . . . 02
- A few times a month, or . . . . . 03
- Never? . . . . . 04 → **GO TO Q3.1**

scs

A. When you take (CHILD) in a car, do you usually put (him/her) in a car seat, booster seat, in the regular seat with a seatbelt on, or does (he/she) just sit in the car?

CIRCLE ONE

- CAR SEAT . . . . . 01
- BOOSTER SEAT . . . . . 02
- REGULAR SEATBELT . . . . . 03
- PARENT'S LAP . . . . . 04
- NO RESTRAINT . . . . . 05

B. When you take (CHILD) in a car, does (he/she) usually sit in the front seat or back seat?

CIRCLE ONE

- FRONT ..... 01
- BACK ..... 02
- VARIES ..... 03

## SECTION 3

### HOUSEHOLD COMPOSITION

---

3.1 Not including you and (CHILD), how many other people lived in this (house/apartment) with you last month?

**PROBE:** In the last 30 days.

|\_|\_|\_|

NO ONE ELSE--ONLY SELF  
AND (CHILD) ..... 00 → **GO TO Q4.1**

3.2 Are any of these people (your/MOTHER'S) spouse or partner?

YES ..... 01

NO ..... 00

3.3 How (are these people/is this person) related to (CHILD)?

**CIRCLE CODE THEN RECORD NUMBER OF PEOPLE IN BOXES.**

CIRCLE ALL THAT APPLY

FATHER ..... 01 → |\_\_|\_\_|

STEPPARENT ..... 02 → |\_\_|\_\_|

AUNT, UNCLE, GREAT-AUNT OR  
GREAT-UNCLE ..... 03 → |\_\_|\_\_|

GRANDPARENT OR GREAT GRANDPARENT ... 04 → |\_\_|\_\_|

SIBLING (BROTHER OR SISTER) ..... 05 → |\_\_|\_\_|

STEPBROTHER OR STEPSISTER ..... 06 → |\_\_|\_\_|

NEPHEW OR NIECE ..... 07 → |\_\_|\_\_|

COUSIN ..... 08 → |\_\_|\_\_|

OTHER RELATIVE OR IN-LAW ..... 09 → |\_\_|\_\_|

NON-RELATIVE ADULT (INCLUDE MOTHER'S  
PARTNER, BOYFRIEND) ..... 10 → |\_\_|\_\_|

NON-RELATIVE CHILD ..... 11 → |\_\_|\_\_|

OTHER (SPECIFY) ..... 12 → |\_\_|\_\_|

\_\_\_\_\_ |\_\_|\_\_| \_\_\_\_\_

MOTHER ..... 13 → |\_\_|\_\_|

FOSTER MOTHER ..... 14 → |\_\_|\_\_|

FOSTER PARENT ..... 15 → |\_\_|\_\_|

**TOTAL SHOULD EQUAL NUMBER IN Q3.1**

3.4 **INTERVIEWER: CHECK Q3.1, PAGE 9. DO MOTHER AND CHILD LIVE WITH ANYONE ELSE?**

YES ..... 01  
 NO ..... 00 → **GO TO Q4.1**

3.5 I'm going to read you some statements about how the people who live with you get along and settle arguments. For each statement, please tell me if you strongly agree, mildly agree, mildly disagree, or strongly disagree with it for your household.

FES

SHOW  
CARD  
1

(READ ITEM.) Do you strongly agree, mildly agree, mildly disagree, or strongly disagree with this?

**CODE ONLY ONE RESPONSE FOR EACH STATEMENT.**

	STRONGLY AGREE	MILDLY AGREE	MILDLY DISAGREE	STRONGLY DISAGREE
A. We fight a lot .....	04	03	02	01
B. We hardly ever lose our tempers .....	04	03	02	01
C. We sometimes get so angry we throw things .....	04	03	02	01
D. We often criticize each other .....	04	03	02	01
E. We sometimes hit each other .....	04	03	02	01

## SECTION 4

### CHILD CARE

---

[NO SHOW CARD 2 THIS INTERVIEW]

The next questions are about how much time you and other people spend taking care of (CHILD).

4.1 Is (CHILD) currently being cared for in any regular child care arrangement for two weeks or more while you work, go to school, or participate in some regular activity. Think about child care arrangements like the ones listed on this card. By regular we mean arrangements for at least 10 hours per week that lasted two weeks or more.

NLSY

SHOW  
CARD  
3

YES ..... 01 → **GO TO Q4.3**

NO ..... 00

4.2 Is (CHILD) currently being cared for by anyone else on a regular basis?

YES ..... 01

NO ..... 00 → **GO TO SECTION 5**



4.3 Not counting yourself, how many different child care arrangements are you currently using for (CHILD)?

Please count each sitter or child care provider separately. Count only those that lasted two weeks or more and please count only those that you used at least 10 hours per week.

**NOTE: IF RESPONDENT STARTED WITH ONE ARRANGEMENT AND THEN RETURNED TO IT AGAIN AFTER AN INTERRUPTION OF AT LEAST ONE MONTH, COUNT AS SEPARATE ARRANGEMENTS.**

|\_\_|\_\_| ARRANGEMENTS

4.4 Are there any other child care arrangements that (CHILD) is regularly in for less than 10 hours a week?

YES ..... 01

NO ..... 00 → **GO TO GRID INSTRUCTIONS**

A. How many?

|\_\_|\_\_| ARRANGEMENTS

<b>SHOW CARD 3</b>	<ol style="list-style-type: none"><li>1. CHILD'S FATHER OR STEPFATHER</li><li>2. YOUR PARTNER OR BOYFRIEND</li><li>3. CHILD'S GRANDPARENT OR GREAT-GRANDPARENT</li><li>4. ANOTHER RELATIVE OF THE CHILD</li><li>5. SOMEONE ELSE WHO ISN'T RELATED TO THE CHILD</li><li>6. A DAY CARE CENTER, NURSERY SCHOOL OR PRESCHOOL</li><li>7. SOME OTHER ARRANGEMENT</li></ol>
----------------------------	--

**THIS PAGE INTENTIONALLY LEFT BLANK.**

**GRID INSTRUCTIONS:**

RECORD NAME OF CURRENT PROVIDER IN FIRST COLUMN. IF Q4.3 IS MORE THAN ONE, RECORD INFORMATION ON THE ARRANGEMENT CHILD IS IN FOR THE MOST HOURS IN THE FIRST COLUMN. THEN RECORD NAMES OF OTHER CURRENT PROVIDERS IN ORDER OF HOURS OF CARE.

IF MORE THAN ONE PROVIDER USED DURING THE SAME TIME PERIOD, LIST FIRST THE CHILDCARE PROVIDER WHO PROVIDES MOST HOURS OR CARE TO CHILD.

<p><b>ASK QUESTIONS 4.5 AND 4.5A FOR ALL CURRENT PROVIDERS. THEN ASK QUESTIONS 4.6-4.12 FOR EACH PROVIDER.</b></p> <p>4.5 What (is/was) the child care arrangement you currently are using (for the <u>most hours</u>/for the next most hours)?</p> <p><input type="checkbox"/> ECCO</p> <p><input type="checkbox"/> <b>SHOW CARD 3</b></p> <p><b>RECORD NAME OF PROVIDER OR PLACE. THEN CODE TYPE OF ARRANGEMENT FROM SHOW CARD 3.</b></p>	<p style="text-align: center;"><b>1 - MOST HOURS CURRENT</b></p> <hr/> <hr/> <p style="text-align: center;">(NAME)</p>
<p>A. <b>CODE WITHOUT ASKING IF KNOWN:</b> What type of arrangement is that?</p> <p>1. CHILD'S FATHER OR STEPFATHER ..... 01</p> <p>2. YOUR PARTNER OR BOYFRIEND ..... 02</p> <p>3. CHILD'S GRANDPARENT OR GREAT-GRANDPARENT ..... 03</p> <p>4. ANOTHER RELATIVE OF THE CHILD ..... 04</p> <p>5. SOMEONE ELSE WHO ISN'T RELATED TO THE CHILD ..... 05</p> <p>6. A DAY CARE CENTER, NURSERY SCHOOL OR PRESCHOOL ..... 06</p> <p>7. SOME OTHER ARRANGEMENT ..... 07</p>	<p style="text-align: center;"><b>TYPE OF ARRANGEMENT</b></p> <p style="text-align: center;">↓</p> <p style="text-align: center;"><u>CIRCLE ONE</u></p> <p style="text-align: right;">06 } → <b>GO TO Q4.8</b></p> <p style="text-align: right;">07 }</p>
<p>4.6 How old is this person? Is (he/she) 17 or under, 18 to 60, or over 60 years of age?</p>	<p>17 OR UNDER ..... 01</p> <p>18 to 60 ..... 02</p> <p>Over 60 ..... 03</p>
<p>4.7 Where does (PERSON) <u>usually</u> take care of (CHILD)?</p>	<p style="text-align: right;"><u>CIRCLE ONE</u></p> <p>CHILD'S HOME ..... 01</p> <p>PROVIDER'S HOME ..... 02</p> <p>BOTH, PROVIDER (IS/WAS) HOUSEHOLD MEMBER ..... 03</p> <p>OTHER (SPECIFY) ..... 04</p> <p style="text-align: right;"> _ _ </p>

2 - MOST HOURS CURRENT	3 - MOST HOURS CURRENT	4 - MOST HOURS CURRENT
<hr/> <hr/> <p>(NAME)</p>	<hr/> <hr/> <p>(NAME)</p>	<hr/> <hr/> <p>(NAME)</p>
<p><b>TYPE OF ARRANGEMENT</b></p> <p>↓</p> <p><u>CIRCLE ONE</u></p> <p>..... 01</p> <p>..... 02</p> <p>..... 03</p> <p>..... 04</p> <p>..... 05</p> <p>..... 06 } → <b>GO TO Q4.8</b></p> <p>..... 07 }</p>	<p><b>TYPE OF ARRANGEMENT</b></p> <p>↓</p> <p><u>CIRCLE ONE</u></p> <p>..... 01</p> <p>..... 02</p> <p>..... 03</p> <p>..... 04</p> <p>..... 05</p> <p>..... 06 } → <b>GO TO Q4.8</b></p> <p>..... 07 }</p>	<p><b>TYPE OF ARRANGEMENT</b></p> <p>↓</p> <p><u>CIRCLE ONE</u></p> <p>..... 01</p> <p>..... 02</p> <p>..... 03</p> <p>..... 04</p> <p>..... 05</p> <p>..... 06 } → <b>GO TO Q4.8</b></p> <p>..... 07 }</p>
<p>17 OR UNDER ..... 01</p> <p>18 to 60 ..... 02</p> <p>Over 60 ..... 03</p>	<p>17 OR UNDER ..... 01</p> <p>18 to 60 ..... 02</p> <p>Over 60 ..... 03</p>	<p>17 OR UNDER ..... 01</p> <p>18 to 60 ..... 02</p> <p>Over 60 ..... 03</p>
<p><u>CIRCLE ONE</u></p> <p>CHILD'S HOME ..... 01</p> <p>PROVIDER'S HOME ..... 02</p> <p>BOTH, PROVIDER (IS/WAS) HOUSEHOLD MEMBER ... 03</p> <p>OTHER (SPECIFY) ..... 04</p> <hr/> <p>     _ _ </p>	<p><u>CIRCLE ONE</u></p> <p>CHILD'S HOME ..... 01</p> <p>PROVIDER'S HOME ..... 02</p> <p>BOTH, PROVIDER (IS/WAS) HOUSEHOLD MEMBER ... 03</p> <p>OTHER (SPECIFY) ..... 04</p> <hr/> <p>     _ _ </p>	<p><u>CIRCLE ONE</u></p> <p>CHILD'S HOME ..... 01</p> <p>PROVIDER'S HOME ..... 02</p> <p>BOTH, PROVIDER (IS/WAS) HOUSEHOLD MEMBER ... 03</p> <p>OTHER (SPECIFY) ..... 04</p> <hr/> <p>     _ _ </p>

		<b>1</b>
4.8	How many months old was (CHILD) when you first used that arrangement for (him/her)?	_ _  MONTHS OLD
	A. <b>CODE WITHOUT ASKING IF KNOWN:</b> In what month (and year) did you first use that arrangement?	_ _  /  _ _  MO YR
4.9	About how many hours a week (does/did) (PROVIDER) take care of (CHILD)?	_ _  HOURS
4.10	<b>CHECK Q4.5A AND Q4.7. IS ARRANGEMENT BY A RELATIVE IN CHILD'S HOME?</b>	YES ..... 01 NO ..... 00
4.11	<b>CHECK Q4.5. IS THERE ANOTHER ARRANGEMENT?</b>	YES .. 01 → GO TO COLUMN 2 NO ... 00 → GO TO Q4.11a

2	3	4
_ _  MONTHS OLD	_ _  MONTHS OLD	_ _  MONTHS OLD
_ _  /  _ _  MO YR	_ _  /  _ _  MO YR	_ _  /  _ _  MO YR
_ _  HOURS	_ _  HOURS	_ _  HOURS
YES ..... 01 NO ..... 00	YES ..... 01 NO ..... 00	YES ..... 01 NO ..... 00
YES .. 01 → GO TO COLUMN 3 NO ... 00 → GO TO Q4.11a	YES .. 01 → GO TO COLUMN 4 NO ... 00 → GO TO Q4.11a	YES .. 01 NO ... 00 } → GO TO Q4.11a

4.11a A. Other than the child care providers you just told me about, did you regularly use any other child care arrangements for (CHILD) since (DATE OF LAST PSI)?

YES ..... 01  
NO ..... 00 → GO TO Q4.12

B. How many other child care arrangements have you used regularly to care for (CHILD) since (DATE OF LAST PSI)?

|\_|\_| NUMBER OF OTHER ARRANGEMENTS

**ELIGIBILITY FOR OBSERVATION CHART**

1. <b>BASIC RULE:</b> CARE FOR 2 WEEKS OR MORE AT 10 HOURS PER WEEK OR MORE.		
2.	<b>RELATIVE</b>	<b>NON-RELATIVE</b>
Child's Home . . . . .	NOT ELIGIBLE	ELIGIBLE
Elsewhere . . . . .	ELIGIBLE*	ELIGIBLE

\*Exception: Do not ask if care is by the biological father.

4.12 **CHECK QUESTIONS 4.5, 4.9 AND 4.10. IDENTIFY THE PROVIDER WHO IS ELIGIBLE FOR THE OBSERVATION BASED ON THE CHART ABOVE. START WITH PROVIDER FOR MOST HOURS. IF THAT PROVIDER IS NOT ELIGIBLE, CONSIDER NEXT PROVIDER.**

A. IS THERE A PROVIDER WHO IS ELIGIBLE BASED ON THE CONDITIONS ABOVE?

YES . . . . . 01

NO . . . . . 00 → **GO TO Q5.0**

4.13 (Not including [INELIGIBLE PROVIDER]), I see that (CHILD) spends the most hours being cared for by (PRIMARY PROVIDER). Is this correct?

YES . . . . . 01

NO . . . . . 00 →

<p><b>PROBE TO CLARIFY MOST RECENT ELIGIBLE ARRANGEMENT WITH MOST HOURS.</b></p>
--

A. ELIGIBLE CURRENT PROVIDER IS:

PROVIDER NUMBER: |\_\_|\_\_|

PROVIDER/CENTER NAME:

\_\_\_\_\_

4.14 How much (does/did) your household pay for this (program/arrangement)?  
**RECORD AMOUNT AND TIME PERIOD.**

HOUSEHOLD PAYS NOTHING . . .	00	} → <b>GO TO Q4.16</b>
CHILDCARE PROVIDED IN EXCHANGE FOR OTHER SERVICE . . . . .	99	

\$ |\_\_|\_\_|\_\_|. |\_\_|\_\_| PER

↓

HOUR . . . . .	01
DAY . . . . .	02
WEEK . . . . .	03
EVERY TWO WEEKS . . . .	04
MONTH . . . . .	05
YEAR . . . . .	06
DON'T KNOW . . . . .	-1

4.15 Is this amount for (CHILD) only, or does it cover other children from your household?

CIRCLE ONE

CHILD ONLY . . . . .	01
OTHER CHILDREN . . . . .	02 →
DON'T KNOW . . . . .	-1

A. How many other children?   _ _
---



4.16

PRS

Next, I am going to read some statements parents have made about the people who take care of their children. For each one, please tell me if you strongly agree, mildly agree, mildly disagree, or strongly disagree with the statement about (PROVIDER).

SHOW  
CARD  
1

(READ STATEMENT.) Do you strongly agree, mildly agree, mildly disagree, or strongly disagree with the statement about (PROVIDER).

**CODE ONLY ONE RESPONSE FOR EACH STATEMENT.**

	STRONGLY AGREE	MILDLY AGREE	(DO NOT READ) NOT SURE	MILDLY DISAGREE	STRONGLY DISAGREE
A. You feel that (PROVIDER) genuinely cares for (CHILD) .....	01	02	03	04	05
B. (PROVIDER) is someone you can rely on .....	01	02	03	04	05
C. You have a great deal of personal respect for (PROVIDER) .....	01	02	03	04	05
D. Overall (PROVIDER) is a caring person .....	01	02	03	04	05
E. (PROVIDER) has the knowledge and skills needed to be a good caregiver	01	02	03	04	05
F. You and (PROVIDER) really seem to value your relationship with each other .....	01	02	03	04	05
G. You know that (CHILD) really enjoys being with (PROVIDER) .....	01	02	03	04	05
H. You always trust (PROVIDER) to give (CHILD) good, consistent care .....	01	02	03	04	05
I. You really like (PROVIDER) as a person and enjoy being in (her/his) presence .....	01	02	03	04	05
J. When (PROVIDER) and you disagree about how (CHILD) should be taken care of, it is easy for you to work through your differences .....	01	02	03	04	05

## SECTION 5

### ABOUT CHILD'S FATHER

---

#### 5.0 INTERVIEWER: YOU ARE INTERVIEWING . . .

CIRCLE ONE

- MOTHER . . . . . 01
- FATHER . . . . . 02 → GO TO SECTION 5  
SUPPLEMENT--FATHER
- GRANDMOTHER . . . . . 03
- OTHER FEMALE
- RELATIVE (SPECIFY) . . . . . 04
- \_\_\_\_\_ |\_\_|\_\_|
- OTHER (SPECIFY) . . . . . 05 → GO TO SECTION 6
- \_\_\_\_\_ |\_\_|\_\_|
- FOSTER MOTHER . . . . . 06
- FOSTER FATHER . . . . . 07

The next questions are about (CHILD)'s father and other men who might be important to (him/her).

#### 5.1 What is your relationship with (CHILD)'s biological father now? Is he your . . .

CIRCLE ONE

- Husband, . . . . . 01
- Live-in partner, . . . . . 02
- Boyfriend, . . . . . 03
- Friend, . . . . . 04
- Something else, or (SPECIFY) . . . . . 05
- \_\_\_\_\_ |\_\_|\_\_|
- Are you not in any relationship  
with him at all? . . . . . 06
- SEPARATED/DIVORCED . . . . . 07
- DECEASED . . . . . 08

ESTABLISHING MEN TO ASK ABOUT

5.2

CCDP

**CODE WITHOUT ASKING IF KNOWN:**

Now, I'd like to talk about (CHILD) and (his/her) relationship with (his/her) father. Does (CHILD)'s biological father live with you and (CHILD)?

CIRCLE ONE

CHILD USUALLY LIVES WITH  
BIOLOGICAL FATHER . . . . . 01 → **GO TO Q5.4**

CHILD LIVES WITH BIOLOGICAL  
FATHER SOME OF THE TIME  
(SPLIT CUSTODY) . . . . . 02

CHILD DOES NOT LIVE WITH  
BIOLOGICAL FATHER . . . . . 03

VOLUNTEERED: BIOLOGICAL  
FATHER DECEASED . . . . . 04

DON'T KNOW WHO BIOLOGICAL  
FATHER IS . . . . . 05

5.3 Is there someone (else) who you consider to be like a father to (CHILD)?  
 This should be someone who spends time playing with (CHILD), taking care of (him/her) and, in general, doing the kinds of things a man who is close to a young child might do with (him/her).

YES ..... 01  
 NO ..... 00

→ **GO TO SECTION 5  
 INSTRUCTION BELOW**

A. Is this person your husband, partner, boyfriend, or (CHILD's) grandfather, or another relative, or someone else?

CIRCLE ONE

HUSBAND ..... 01  
 PARTNER ..... 02  
 BOYFRIEND ..... 03  
 MATERNAL GRANDFATHER ..... 04  
 PATERNAL GRANDFATHER ..... 05  
 OTHER RELATIVE ..... 06  
 OTHER (SPECIFY) ..... 07

→ **GO TO C**

\_\_\_\_\_ | |

B. What is his relationship to you?

BROTHER ..... 01  
 FRIEND ..... 02  
 OTHER (SPECIFY) ..... 03

\_\_\_\_\_ | |

C. Does he live in this (house/apartment) with you?

YES ..... 01  
 NO ..... 00

**SECTION 5 INSTRUCTIONS:**

Q5.2	Q5.3	ASK THE FOLLOWING:
01	+ NOT ASKED	= SECTION 5A
02, 03	+ 00	= SECTION 5B, PAGE 28
02, 03	+ 01	= SECTIONS 5B <b>AND</b> 5C, PAGE 28 THROUGH 34
04, 05, OR NOT ASKED	+ 01	= SECTION 5C, PAGE 32
04, 05, OR NOT ASKED	+ 00	= GO TO SECTION 6, PAGE 35

**SECTION 5A**

**RESIDENT BIOLOGICAL FATHER**

---

5.4 **CODE WITHOUT ASKING IF KNOWN:**  
What is (CHILD)'s biological father's first name?

ECCO

\_\_\_\_\_ REFUSED ..... -3 →

CONTINUE. READ "HE"  
OR "[CHILD'S] FATHER"  
AS THE SUBSTITUTION IN  
REMAINING QUESTIONS.

5.5 Is (FATHER) currently working, in school, in a training program or is he doing something else?

ECCO

CIRCLE ALL THAT APPLY

- WORKING ..... 01
- UNEMPLOYED ..... 02
- LOOKING FOR WORK ..... 03
- LAI D OFF ..... 04
- IN SCHOOL/TRAINING ..... 05
- IN JAIL ..... 06
- IN MILITARY ..... 07
- SOMETHING ELSE (SPECIFY) ... 08
- \_\_\_\_\_ |\_\_|\_\_|
- RETIRED ..... 09
- DISABLED ..... 10
- IN TREATMENT ..... 11
- DON'T KNOW ..... -1

5.6 Has (FATHER) been living with you since (CHILD)'s second birthday?

**PROBE:** For the whole time?

YES ..... 01

NO ..... 00 → **GO TO Q5.7**

A. Since (CHILD)'s second birthday, how many months has he lived with you?

|\_\_|\_\_| MONTHS

[NO SHOW CARD 4 THIS INTERVIEW]

5.7 In the past month, how often has (FATHER) looked after (CHILD) while you did other things? Was it . . .

CCDP

**PROBE:** The last 30 days.

CIRCLE ONE

SHOW  
CARD  
5

Every day or almost every day, . . . . 01

A few times a week, ..... 02

A few times a month, ..... 03

HOME

Once or twice, or ..... 04

Never? ..... 05

5.7A **NO QUESTION 5.7A IN THIS VERSION.**

5.7B And, in a typical day, do you, (FATHER) and (CHILD) get to eat together?

YES ..... 01 →  
NO ..... 00

<b>Which meals?</b> CIRCLE ALL THAT APPLY
Breakfast ..... 01
Lunch ..... 02
Dinner ..... 03

[NO SHOW CARD 6 THIS INTERVIEW]

5.8 **NO QUESTION 5.8 IN THIS VERSION.**

**GO TO SECTION 6, PAGE 35**

**SECTION 5B**

**NON-RESIDENT BIOLOGICAL FATHER**

---

5.9 **INTERVIEWER: CHECK Q5.2, PAGE 23. IS THERE A NON-RESIDENT BIOLOGICAL FATHER TO ASK ABOUT (Q5.2=02 OR 03)?**

YES ..... 01

NO ..... 00 → **GO TO SECTION 5C, Q5.23, PAGE 32**

5.10 **CODE WITHOUT ASKING IF KNOWN:**  
What is (CHILD)'s biological father's first name?

ECCO

\_\_\_\_\_ REFUSED ..... -3 →

**CONTINUE. READ "HE" OR "[CHILD'S] FATHER" AS THE SUBSTITUTION IN REMAINING QUESTIONS.**

5.11 Is (FATHER) currently working, in school or training program or is he doing something else?

ECCO

CIRCLE ALL THAT APPLY

- WORKING ..... 01
- UNEMPLOYED ..... 02
- LOOKING FOR WORK ..... 03
- LAID OFF ..... 04
- IN SCHOOL/TRAINING ..... 05
- IN JAIL/PRISON ..... 06
- IN MILITARY ..... 07
- SOMETHING ELSE (SPECIFY) ... 08

- \_\_\_\_\_ | |
- RETIRED ..... 09
  - DISABLED ..... 10
  - IN TREATMENT ..... 11
  - DON'T KNOW ..... -1



5.12-  
5.13

**NO QUESTIONS 5.12-5.13 IN THIS VERSION.**

5.13A Since (CHILD)'s second birthday, has (CHILD) had any contact with (FATHER)?

- YES ..... 01
- NO ..... 00 → **GO TO Q5.20**

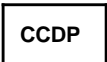
5.14 And, in the last three months since (MONTH), about how often has (CHILD) seen (his/her) father? Was it . . .



CIRCLE ONE

- Every day or almost every day, . . . . 01
- A few times a week, . . . . . 02
- A few times a month, . . . . . 03
- About once a month, . . . . . 04
- Less often than that, or . . . . . 05
- Never? . . . . . 06 → **GO TO Q5.18**

5.15 In the past month, how often has (FATHER) looked after (CHILD) while you did other things? Was it . . .



**PROBE:** In the last 30 days.



CIRCLE ONE

- Every day or almost every day, . . . . 01
- A few times a week, . . . . . 02
- A few times a month, . . . . . 03
- Once or twice, or . . . . . 04
- Never? . . . . . 05



5.15A **NO QUESTION 5.15A IN THIS VERSION.**

B. And, in a typical day, do you, (FATHER) and (CHILD) get to eat together?

YES ..... 01 →  
 NO ..... 00

<b>Which meals?</b>	
	<u>CIRCLE ALL THAT APPLY</u>
Breakfast .....	01
Lunch .....	02
Dinner .....	03

5.16-  
5.17 **NO QUESTIONS 5.16-5.17 IN THIS VERSION.**

5.18 Since (CHILD's) second birthday, how often has (FATHER) done any of the following for (CHILD)

(READ ITEM.) Has (FATHER) done this often, sometimes or never?

**CODE ONLY ONE RESPONSE FOR EACH STATEMENT.**

	OFTEN	SOMETIMES	NEVER
A. Bought clothes, toys or presents for (CHILD)? .....	01	02	03
B. Paid for (CHILD)'s medical insurance, doctor bills, or medicines? .....	01	02	03
C. Given you extra money to help out? .....	01	02	03

5.19 Since (CHILD)'s second birthday, have you made a new legal agreement, a new informal agreement, is your old agreement unchanged, or do you now have no arrangement at all with (FATHER)?

CIRCLE ONE

NEW LEGAL ..... 01  
 NEW INFORMAL ..... 02  
 UNCHANGED ..... 03 → **GO TO Q5.21**  
 NOT NEEDED, MARRIED TO  
 FATHER ..... 04    → **GO TO Q5.23**  
 NONE ..... 05    →

5.20 Since (CHILD)'s second birthday, did you have to go to court to establish that (FATHER) was (CHILD)'s legal father?

YES ..... 01  
NO ..... 00

A. When was a (formal/informal) agreement reached about child support payments? (What month and year?)

**PROBE:** Your best estimate will be fine.

|\_\_|\_\_|/19 |\_\_|\_\_|  
MONTH YEAR

5.21 How much per month is (FATHER) supposed to pay for (CHILD)'s support?

ECCO

**PROBE:** Your best estimate will be fine.

\$ |\_\_|\_\_|\_\_| PER MONTH

NONE ..... 00

A. Since (DATE IN Q5.20A/CHILD)'s second birthday) how many times have you received money from (CHILD)'s father for (his/her) support?

|\_\_|\_\_| TIMES

NEVER ..... 00

5.22 **NO QUESTION 5.22 IN THIS VERSION.**

**SECTION 5C**  
**FATHER FIGURE**

---

5.23 **INTERVIEWER: CHECK Q5.3, PAGE 24. IS THERE A FATHER-FIGURE TO ASK ABOUT?**

YES ..... 01  
NO ..... 00 → **GO TO Q6.1,  
PAGE 35**

5.24 My next questions are about (PERSON IN Q5.3A OR B) who you feel is an important man in (CHILD)'s life. What is his first name?

**ECCO**

\_\_\_\_\_  
REFUSED ..... -3 →

**CONTINUE. READ "HE"  
OR "FATHER FIGURE" AS  
THE SUBSTITUTION IN  
REMAINING QUESTIONS.**

5.25 **CODE WITHOUT ASKING IF KNOWN:**  
Is this the person you told us about when (CHILD) was 24 months old?

YES ..... 01  
NO ..... 00

5.26

ECCO

Is (FATHER-FIGURE) currently working, in school or training program or is he doing something else?

CIRCLE ALL THAT APPLY

- WORKING ..... 01
- UNEMPLOYED ..... 02
- LOOKING FOR WORK ..... 03
- LAI D OFF ..... 04
- IN SCHOOL/TRAINING ..... 05
- IN JAIL ..... 06
- IN MILITARY ..... 07
- SOMETHING ELSE (SPECIFY) ... 08

- 
- |  |  |
|--|--|
|  |  |
|--|--|
- RETIRED ..... 09
  - DISABLED ..... 10
  - IN TREATMENT ..... 11
  - DON'T KNOW ..... -1

5.27

**INTERVIEWER: IS THIS A NEW FATHER-FIGURE?**

- YES ..... 01
- NO ..... 00 → **GO TO Q5.29**

A. What is the highest grade or year of regular school that he has completed?

**CODE GED AS 12**

CIRCLE ONE

- ELEMENTARY SCHOOL ..... 01 02 03 04 05 06
- MIDDLE/HIGH SCHOOL ..... 07 08 09 10 11 12
- COLLEGE ..... 13 14 15 16
- POST-COLLEGE ..... 17
- DON'T KNOW ..... -1

5.28 **NO QUESTION 5.28 IN THIS VERSION.**

5.29 Has (FATHER-FIGURE) lived with you since (CHILD's) second birthday?

YES ..... 01

NO ..... 00 → **GO TO Q5.30**

A. How many months has he lived with you since (CHILD)'s second birthday?

|\_\_|\_\_| MONTHS

5.30 In the past month, how often has (FATHER-FIGURE) looked after (CHILD) while you did other things? Is it . . .

CCDP

**PROBE:** In the last 30 days.

SHOW  
CARD  
5

CIRCLE ONE

Every day or almost every day, . . . . 01

A few times a week, . . . . . 02

A few times a month, . . . . . 03

HOME

Once or twice, or . . . . . 04

Never? . . . . . 05

5.30A **NO QUESTION 5.30A IN THIS VERSION.**

B. And, in a typical day, do you, (FATHER-FIGURE) and (CHILD) get to eat together?

YES ..... 01 →

NO ..... 00

**Which meals?**  
CIRCLE ALL THAT APPLY  
Breakfast ..... 01  
Lunch ..... 02  
Dinner ..... 03

5.31 **NO QUESTION 5.31 IN THIS VERSION.**

## SECTION 6

### FAMILY ROUTINES

---

The next questions are about some of your family routines.

6.1 **CODE WITHOUT ASKING IF KNOWN:**

HOME

Do you have a television?

YES ..... 01

NO ..... 00 → **GO TO Q6.2**

A. About how many hours is the television on in your home during a typical weekend day?

**PROBE:** Your best estimate will be fine.

|\_\_|\_\_| HOURS

LESS THAN 1 HOUR ..... 00

HOME

B. Still, thinking about a typical weekend day for your family. How much time would you say (CHILD) spends watching television on a typical weekend day?

|\_\_|\_\_| HOURS

LESS THAN 1 HOUR PER  
WEEKEND DAY ..... 00

HOME

C. Now, think for a moment about a typical weekday for your family. How much time would you say (CHILD) spends watching television on a typical weekday?

|\_\_|\_\_| HOURS

LESS THAN 1 HOUR PER  
WEEKDAY DAY ..... 00

6.2

FRQ

Does (CHILD) have a regular bedtime during the week?

YES ..... 01

NO ..... 00 → GO TO Q6.2C

A. When is (CHILD)'s regular bedtime?

|\_|\_|:|\_|\_|

B. How many times in the last week, Monday through Friday, was (CHILD) put to bed at that time?

**CIRCLE ONE ONLY**

00    01    02    03    04    05

C. Some families have a routine of things they do when it is time to put a child to sleep. Do you (or FATHER/FATHER-FIGURE) have a regular routine of things you do with (CHILD) when you put (him/her) to sleep?

YES ..... 01

NO ..... 00 → GO TO Q6.3



D. What kinds of things are part of (CHILD)'s regular bedtime routine?

**PROBE:** Anything else?

CIRCLE ALL THAT APPLY

- GIVE COMFORT TOY/OBJECT . . . 01 →
- BATHE OR WASH . . . . . 02
- CHANGE DIAPER/TAKE TO TOILET . . . . . 03
- READ A STORY . . . . . 04
- TELL A STORY . . . . . 05
- CUDDLE/RUB CHILD'S BACK . . . . 06
- PLAY GAME . . . . . 07
- TALK . . . . . 08
- GIVE DRINK/SNACK . . . . . 09
- SING OR HUM . . . . . 10
- OTHER (SPECIFY) . . . . . 11

**PROBE:** Comfort toy = teddy bear, stuffed animal, doll, etc.

Comfort object = blanket, pillow, piece of cloth, etc.

- 
- |  |  |  |  |  |
|--|--|--|--|--|
|  |  |  |  |  |
|--|--|--|--|--|
- WATCH TV/VIDEO . . . . . 12
  - PUT ON PJS . . . . . 13
  - COMB/BRUSH HAIR . . . . . 14
  - TURN OFF TV . . . . . 15
  - GO FOR WALK/PLAY/  
GO OUTSIDE . . . . . 16
  - DIM/LOWER/TURN OFF  
LIGHTS . . . . . 17
  - QUIET TIME . . . . . 18
  - CLEAN UP/STRAIGHTEN UP . . . . 19
  - BRUSH TEETH . . . . . 20
  - LISTEN TO MUSIC . . . . . 21
  - KISS FAMILY MEMBERS  
GOOD NIGHT . . . . . 22
  - GIVE MEDICINE . . . . . 23

E. How many times in the last week, Monday through Friday, were you (or FATHER/FATHER-FIGURE) and (CHILD) able to follow this type of routine?

**CIRCLE ONE ONLY**

- 00    01    02    03    04    05

6.3 Does (CHILD) have one regular place where (he/she) usually sleeps at night?

**PROBE:** The same place.

YES ..... 01

NO ..... 00 → **GO TO Q6.4**

A. Where does (CHILD) usually sleep?

CIRCLE ONE

IN OWN ROOM ..... 01

ALONE IN LIVING ROOM ..... 02

ALONE IN OTHER ROOM ..... 03

WITH PARENT, IN ROOM ..... 04

WITH PARENT, IN BED ..... 05

WITH PARENT AND OTHER  
CHILDREN IN ROOM ..... 06

WITH OTHER ADULT ..... 07

WITH OTHER CHILDREN ..... 08

AT SOMEONE ELSE'S  
HOME (SPECIFY) ..... 09

\_\_\_\_\_ | |

B. How many times in the last week, Monday through Friday, did (CHILD) go to sleep in this place?

**CIRCLE ONE ONLY**

00    01    02    03    04    05

6.4

HOME

How much choice is (CHILD) allowed in deciding what foods (he/she) eats at breakfast and lunch? Does (he/she) have ...

A great deal of choice, ..... 01

Some choice, ..... 02

Little choice, or ..... 03

No choice? ..... 04

## SECTION 7

### PARENT-CHILD ACTIVITIES

7.0 **DID PARENT COMPLETE THE SELF-ADMINISTERED VERSION OF THESE QUESTIONS (SAQ 2A, 2B, 2C)?**

YES ..... 01 → **GO TO Q7.4**

NO ..... 00 → **CONTINUE**

7.1 How many times in the past month have you done any of the following with (CHILD)?

SCS  
SNOW

In the past month, how often did you (READ ITEM)? Was it more than once a day, about once a day, a few times a week, a few times a month, rarely, or not at all in the past month?

HOME

**PROBE:** In the last 30 days.

SHOW  
CARD  
9

**CODE ONLY ONE RESPONSE FOR EACH STATEMENT.**

	More Than Once a Day	About Once a Day	A Few Times a Week	A Few Times a Month	Rarely	Not At All
A. Sing nursery rhymes like “Jack and Jill” with (him/her)? .....	01	02	03	04	05	06
B. Sing songs with (him/her)? .....	01	02	03	04	05	06
C. Dance with (him/her)? .....	01	02	03	04	05	06
D. Read stories to (CHILD)? .....	01	02	03	04	05	06
E. Tell stories to (him/her)? .....	01	02	03	04	05	06
F. Play outside in the yard, a park or a playground with (him/her)? .....	01	02	03	04	05	06
G. Play chasing games? .....	01	02	03	04	05	06
H. Take (CHILD) on an outing such as shopping, to the park or a picnic? .....	01	02	03	04	05	06
I. Take (CHILD) with you to a religious service or religious event? .....	01	02	03	04	05	06
J. Take (CHILD) to any type of a museum such as a children’s museum, scientific, art or historical museum? .....	01	02	03	04	05	06
K. Try to tease (CHILD) to get (him/her) to laugh? .....	01	02	03	04	05	06

7.2

In the past month, how often have other family members (READ ITEM)?

HOME

Was it more than once a day, about once a day, a few times a week, a few times a month, rarely, or not at all in the past month?

**CODE ONLY ONE RESPONSE FOR EACH STATEMENT.**

More Than Once a Day	About Once a Day	A Few Times a Week	A Few Times a Month	Rarely	Not At All
----------------------	------------------	--------------------	---------------------	--------	------------

- |   |    |    |    |    |    |    |
|---|----|----|----|----|----|----|
| A. Read stories to (CHILD)? . . . . .   | 01 | 02 | 03 | 04 | 05 | 06 |
| B. Taken (CHILD) on an outing such as shopping, to the park or on a picnic? . . . . | 01 | 02 | 03 | 04 | 05 | 06 |

7.3

In the past year, how often have other family members taken or arranged to take (CHILD) to any type of museum as a children’s museum, scientific, art or historical museum? Was it . . .

HOME

- Never, . . . . . 00
- Once or twice, . . . . . 01
- Several times, . . . . . 02
- About once a month, or . . . . . 03
- About once a week or more? . . . . . 04

7.4

In the past month, how many people have helped you out by watching (CHILD) when you were away from home and couldn’t take (him/her) with you? Would you say . . .

HOME

- 1-2, . . . . . 01
- 3-5, or . . . . . 02
- 6 or More . . . . . 03
- NONE . . . . . 00

7.5

Parents sometimes have to be away from home for a night or two. In the past month, have you been away from (CHILD) overnight?

scs

**PROBE:** In the last 30 days.

- YES . . . . . 01
- NO . . . . . 00

7.6 Since (CHILD)'s second birthday, have there ever been periods of **one week or more** when you and (CHILD) did not live together, either because you were away from home or (CHILD) was away from the home?

- YES ..... 01
- NO ..... 00 → **GO TO Q7.8**

7.7 Since (his/her) second birthday, how many times have you and (CHILD) been separated for a week or more?

|\_\_|\_\_| TIMES

A. Why were you and (CHILD) separated?

**PROBE:** Any other reasons?

CIRCLE ALL THAT APPLY

- CHILD'S ILLNESS ..... 01
- COURT OR AGENCY REMOVED  
CHILD FROM HOME ..... 02
- MOTHER'S WORK SCHEDULE .. 03
- MOTHER INSTITUTIONALIZED/  
JAILED ..... 04
- MOTHER MOVED ELSEWHERE . 05
- MOTHER'S VACATION ..... 06
- OTHER (SPECIFY) ..... 07
- \_\_\_\_\_ |\_\_|\_\_|
- OTHER (SPECIFY) ..... 08
- \_\_\_\_\_ |\_\_|\_\_|
- VISITED FATHER/  
FATHER-FIGURE ..... 09
- VISITED RELATIVES ..... 10
- MOTHER'S ILLNESS ..... 11
- RELATIVE ILLNESS/DEATH ..... 12
- SCHOOL/MILITARY ..... 13
- CHILD VISITING MOTHER ..... 14
- CHILD'S VACATION/VISITING  
RELATIVES ..... 15

The next questions are about some of the ways you may spend your time.

7.8 About how often do you read at home? Is it . . .



CIRCLE ONE

- Every day or almost every day, . . . . 01
- A few times a week, . . . . . 02
- Once a week (Only on Sunday), . . . 03
- A few times a month, . . . . . 04
- A few times a year, or . . . . . 05
- Never? . . . . . 06 → **GO TO Q7.10**

7.9 Sometimes the only chance a parent gets to read is when her (child is/ children are) asleep or being cared for by someone else. When do you do your own reading? Is it . . .



CIRCLE ONE

- Only when (CHILD's/your children are) around, . . . . . 01
- Only when (CHILD is/your children are) asleep or with someone else, . . . . . 02
- Sometimes when (CHILD is/ your children are) around, . . . . . 03
- Or do you never have the time or opportunity for your own reading? . . . . . 04

7.10 About how often do you read a newspaper? Is it . . .

TPD

CIRCLE ONE

SHOW  
CARD  
10

- Every day or almost every day, . . . . 01
- A few times a week, . . . . . 02
- Once a week (Only on Sunday), . . . 03
- A few times a month, . . . . . 04
- A few times a year, or . . . . . 05
- Never? . . . . . 06

7.11 About how many books do you have in the house? Is it . . .

HOME

**PROBE:** Books that are written for adults not children.

CIRCLE ONE

- 1-9, . . . . . 01
- 10-20, or . . . . . 02
- More than 20? . . . . . 03
- NONE . . . . . 00

7.12 How many children's books does your child have of (his/her) own? Is it . . .

HOME

CIRCLE ONE

- 1-2, . . . . . 01
- 3-9, . . . . . 02
- 10 or more, or . . . . . 03
- NONE? . . . . . 00

7.13

HOME

Does (CHILD) have the use of a record player, or tape deck, or CD player, or tape recorder here at home and at least 5 children's records or tapes?

**NOTE:** These may be shared with sister or brother.

YES ..... 01  
NO ..... 00

7.14

HOME

Parents with young children sometimes help their children learn different skills. Please tell me which of these things you (or another adult or older child) are helping or have helped (CHILD) to learn here at home.

Have you or anyone else in the household helped (CHILD) learn (ITEM)?

	<u>YES</u>	<u>NO</u>
A. Numbers? .....	01	00
B. The alphabet? .....	01	00
C. Colors? .....	01	00
D. Shapes and sizes? .....	01	00



## SECTION 8

### DISCIPLINE

Young children sometimes do things they are asked not to do, or don't do things they are asked to do. I'm going to read you three examples of the way children can misbehave. For each one I'd like you to tell me what you do if (CHILD) behaves in this way.

8.1 If (CHILD) keeps playing with breakable things, what do you do first?

IHDP
------

**PROBE FOR "NEVER HAPPENS":** What would you do?

**PROBE FOR SECOND RESPONSE:** If that doesn't work, then what?

	<b>A</b>	<b>B</b>
	<b><u>CODE FIRST MENTIONED</u></b>	<b><u>CODE SECOND MENTIONED</u></b>
NOTHING--IGNORE CHILD .....	01	01
KEEP (HIM/HER) IN PLAYPEN AND OUT OF EVERYTHING .....	02	02
SLAP (HIS/HER) HAND WHENEVER (HE/SHE) TOUCHES SOMETHING .....	03	03
TELL (HIM/HER) "NO!" AND EXPECT (HIM/HER) TO OBEY .....	04	04
TELL (HIM/HER) "NO!" AND EXPLAIN WHY .....	05	05
PUT (CHILD) IN (HIS/HER) ROOM .....	06	06
GIVE (CHILD) "TIME OUT" (HAVE CHILD SIT DOWN OR GO TO ROOM FOR PERIOD OF QUIET TIME) .....	07	07
SHOUT AT (HIM/HER) .....	08	08
PUT THINGS OUT OF REACH .....	09	09
OTHER (SPECIFY) .....	10	10
_ _		
OTHER (SPECIFY) .....	11	11
_ _		
DISTRACT WITH ACTIVITY .....	12	12
TAKE CHILD AWAY .....	13	13
COUNT .....	14	14
ASK CHILD FOR OBJECT/OR TO PUT OBJECT DOWN/BACK ...	15	15
NOTHING ELSE (USE THIS CODE IF ONLY ONE OPTION IS GIVEN) .....		-4

8.2 If (CHILD) refuses to eat, what do you usually do?

HISPANIC HOME

**PROBE FOR “NEVER HAPPENS”:** What would you do?

**PROBE FOR SECOND RESPONSE:** If that doesn’t work, then what?

	A	B
	<i><u>CODE FIRST MENTIONED</u></i>	<i><u>CODE SECOND MENTIONED</u></i>
IGNORE (HIM/HER) .....	01	01
STOP FEEDING (CHILD), (CHILD) PROBABLY NOT HUNGRY ..	02	02
TAKE FOOD AWAY .....	03	03
FORCE (CHILD) TO EAT .....	04	04
PUNISH (HIM/HER) VERBALLY .....	05	05
PUNISH (HIM/HER) PHYSICALLY .....	06	06
MAKE NEW FOOD .....	07	07
PLAY A GAME TO GET (HIM/HER) TO EAT .....	08	08
BRIBE (HIM/HER) .....	09	09
EXPLAIN THE IMPORTANCE OF EATING TO (HIM/HER) .....	10	10
SEND (CHILD) TO (HIS/HER) ROOM .....	11	11
GIVE (CHILD) “TIME OUT” (HAVE CHILD SIT DOWN OR GO TO ROOM FOR PERIOD OF QUIET TIME) .....	12	12
OTHER (SPECIFY) .....	13	13
_____  __ __		
OTHER (SPECIFY) .....	14	14
_____  __ __		
CONTINUE TRYING TO GET CHILD TO EAT, BUT DON'T FORCE (HIM/HER) .....	15	15
CALL DOCTOR/CHECK TO SEE IF SICK .....	16	16
NEVER REFUSES TO EAT .....	17	17
NOTHING ELSE (USE THIS CODE IF ONLY ONE OPTION IS GIVEN) .....		-4

8.3 If (CHILD) has a tantrum in a public place, such as a supermarket or bus stop, and words do not work, what do you do?

**PROBE FOR “NEVER HAPPENS”:** What would you do?

**PROBE FOR SECOND RESPONSE:** If that doesn’t work, then what?

	A	B
	<i><u>CODE FIRST MENTIONED</u></i>	<i><u>CODE SECOND MENTIONED</u></i>
IGNORE (HIM/HER); NOT TALK TO (HIM/HER) .....	01	01
SLAP OR PHYSICALLY PUNISH (HIM/HER) .....	02	02
PICK UP CHILD AND LEAVE THE PLACE .....	03	03
LEAVE AND EXPECT CHILD TO FOLLOW .....	04	04
PUNISH (HIM/HER) VERBALLY .....	05	05
SHAKE (HIM/HER) .....	06	06
SHOUT AT (CHILD) .....	07	07
TELL (CHILD) YOU WILL PUNISH (HIM/HER) AT HOME .....	08	08
THREATEN TO TAKE AWAY TREATS .....	09	09
THREATEN “TIME OUT” WHEN YOU GET HOME .....	10	10
OTHER (SPECIFY) .....	11	11
_____  __ __		
OTHER (SPECIFY) .....	12	12
_____  __ __		
GIVE CHILD FOOD .....	13	13
HOLD CHILD .....	14	14
DISTRACT/GIVE CHILD SOMETHING TO PLAY WITH .....	15	15
HASN’T HAPPENED .....	16	16
TALK TO CHILD .....	17	17
LET CHILD HAVE/DO WHAT HE/SHE WANTS .....	18	18
NOTHING ELSE (USE THIS CODE IF ONLY ONE OPTION IS GIVEN) .....		-4

8.4 HOME Sometimes children mind pretty well and sometimes they don’t. In the past week, have you or has anyone in the household spanked (CHILD) because (he/she) was misbehaving or acting up?

**PROBE:** Last seven days.

YES ..... 01

NO ..... 00 → **GO TO Q8.5**

A. How often did this happen in the past week?

|\_\_|\_\_| TIMES

8.5

HOME

Most children get angry at their parents from time to time. If your child got so angry that (he/she) hit you, what would you do?

**PROBE:** Anything else?

CIRCLE ALL THAT APPLY

HIT (HIM/HER) BACK ..... 01

SEND (HIM/HER) TO  
(HIS/HER) ROOM ..... 02

SPANK (HIM/HER) ..... 03

TALK TO (HIM/HER) ..... 04

IGNORE IT ..... 05

GIVE (HIM/HER) HOUSEHOLD  
CHORE ..... 06

HOLD CHILD'S HANDS UNTIL  
(HE/SHE) WAS CALM ..... 07

OTHER (SPECIFY) ..... 08

\_\_\_\_\_ | |

YELL AT CHILD ..... 09

## SECTION 9

### CHILD BEHAVIOR

---

9.0 **DID PARENT COMPLETE THE SELF-ADMINISTERED VERSION OF THESE QUESTIONS (SAQ3)?**

YES ..... 01 → **GO TO SECTION 10**

NO ..... 00 → **CONTINUE**

9.1 ITEMS DELETED FROM THIS VERSION TO PROTECT  
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CBC

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## SECTION 10

### STRESSFUL EVENTS

---

10.0 **DID PARENT COMPLETE THE SELF-ADMINISTERED VERSION OF THESE QUESTIONS (SAQ4)?**

YES ..... 01 → **GO TO SECTION 11**

NO ..... 00 → **CONTINUE**

10.1 I am going to read you a list of things that sometimes happen to people. We'd like to know which of these, if any, have happened to you in the past year.

	<u>YES</u>	<u>NO</u>
A. Have you had a relative or close friend in jail? .....	01	00
B. Has someone you were close to died or been killed in the last year? .....	01	00
C. During the past year, have you lived in a household where someone had a problem with alcohol or drugs? .....	01	00
D. Has someone abused you physically, emotionally, or sexually? .....	01	00

10.2

From  
FACES

For each of the following items, please tell me how often each one happened to you in the past year?

(READ ITEM.) Has this happened never, once, or more than once?

**CODE ONLY ONE RESPONSE FOR EACH STATEMENT.**

	NEVER	ONCE	MORE THAN ONCE	(DO NOT READ) REFUSED
a. I heard or saw violent crime take place in my neighborhood .....	01	02	03	-3
b. I know someone who was victim of a violent crime in my neighborhood .....	01	02	03	-3
c. I was a victim of violent crime in my neighborhood .....	01	02	03	-3

10.3

Has (CHILD) been a witness to a violent crime in the past year?

YES ..... 01  
 NO ..... 00  
 REFUSED ..... -3

10.4

Has (CHILD) been a witness to domestic violence in the past year?

YES ..... 01  
 NO ..... 00  
 REFUSED ..... -3

10.5

Has (CHILD) been the victim of a violent crime in the past year?

YES ..... 01  
 NO ..... 00  
 REFUSED ..... -3



# SECTION 11

## HOW PARENT HAS BEEN FEELING

11.1 In general, would you say your health is . . .

MOS 1,3

- Excellent, . . . . . 01
- Very good, . . . . . 02
- Good, . . . . . 03
- Fair, or . . . . . 04
- Poor? . . . . . 05

11.2 I am going to read a list of ways you may have felt or behaved. Looking at the categories on this card, please tell me how often you have felt this way during the past week.

CESD  
SHORT

SHOW  
CARD  
16

How often during the past week have you felt (READ STATEMENT)--would you say: rarely or never, some or a little of the time, occasionally or a moderate amount of time, or most or all of the time? **REPEAT FOR B-L AND CIRCLE ONE CODE FOR EACH.**

**PROBE:** During the last 7 days.

**CODE ONLY ONE RESPONSE FOR EACH STATEMENT.**

	RARELY OR NEVER (LESS THAN 1 DAY)	SOME OR A LITTLE (1-2 DAYS)	OCCASIONALLY OR MODERATE (3-4 DAYS)	MOST OR ALL (5-7 DAYS)
A. Bothered by things that usually don't bother you . . . . .	01	02	03	04
B. You did not feel like eating; your appetite was poor . . . . .	01	02	03	04
C. That you could not shake off the blues, even with help from family and friends . . . . .	01	02	03	04
D. You had trouble keeping your mind on what you were doing . . . . .	01	02	03	04
E. Depressed . . . . .	01	02	03	04
F. That everything you did was an effort . . . . .	01	02	03	04
G. Fearful . . . . .	01	02	03	04
H. Your sleep was restless . . . . .	01	02	03	04
I. You talked less than usual . . . . .	01	02	03	04
J. You felt lonely . . . . .	01	02	03	04
K. You felt sad . . . . .	01	02	03	04
L. You could not get "going" . . . . .	01	02	03	04

## SECTION 12

### WRAP UP QUESTIONS FOR RESPONDENT

---

12.1 Before we finish up, I have a few questions about how typical today was.

Was this a typical day for (CHILD)?

**PROBE:** Don't count my being here.

YES ..... 01 → **GO TO Q12.2**

NO ..... 00

A. Why not?

**PROBE:** Any other reasons?

CIRCLE ALL THAT APPLY

CHILD WAS SICK OR TEETHING ..... 01

PARENT WAS SICK ..... 02

CHILD OFF SCHEDULE (DID NOT SLEEP, EAT, WAKE UP, ETC. AT REGULAR TIME) ..... 03

CHILD BEHAVIOR DIFFERENT IN OTHER WAY ..... 04

FEWER CHILDREN AROUND THAN USUAL ..... 05

MORE CHILDREN AROUND THAN USUAL ..... 06

TANTRUMS/ACTED UP/LESS COOPERATIVE THAN USUAL ..... 07

MORE COOPERATIVE THAN USUAL/ UNUSUALLY WELL BEHAVED ..... 08

OTHER (SPECIFY) ..... 09

\_\_\_\_\_ |\_\_|\_\_|  
CHILD USUALLY AT DAY CARE/  
PARENT AT WORK ..... 10

B. How different was it? Was it . . .

CIRCLE ONE

Only slightly different, . . . . . 01

Somewhat different, or . . . . . 02

Really different? . . . . . 03

12.2

How much did my presence disrupt the routine or affect your activities or (CHILD)'s? Would you say . . .

CIRCLE ONE

Only slightly, . . . . . 01

Somewhat, or . . . . . 02

A great deal? . . . . . 03

12.3

Did you do anything differently because I was here?

YES ..... 01

NO ..... 00 → GO TO Q12.4

A. What did you do differently?

**PROBE:** Anything else?

CIRCLE ALL THAT APPLY

CHANGED ENVIRONMENT (CLEANED,  
MOVED FURNITURE, ETC.) ..... 01

INTERACTED LESS WITH CHILDREN .. 02

INTERACTED MORE WITH  
CHILDREN ..... 03

FELT UNCOMFORTABLE ..... 04

CHANGED BABY'S SCHEDULE (KEPT  
AWAKE, DIDN'T FEED, ETC.) ..... 05

WOULD HAVE GONE OUT ..... 06

WOULD HAVE CLEANED ..... 07

WOULD HAVE SPANKED/POPPED/  
SLAPPED CHILD ..... 08

OTHER (SPECIFY) ..... 09

\_\_\_\_\_ | | | | | | | |

GOT UP EARLY/EARLIER  
THAN USUAL ..... 10

DIDN'T WATCH TV/FAVORITE  
SHOW(S) ..... 11

MOTHER'S/PRIMARY  
CAREGIVER'S SCHEDULE  
CHANGED ..... 12

12.4

Did (CHILD) do anything differently because I was here?

YES ..... 01

NO ..... 00 → GO TO Q12.5

A. What did (CHILD) do differently because I was here?

**PROBE:** Anything else?

CIRCLE ALL THAT APPLY

SHOWED OFF ..... 01

WATCHED THE OBSERVER .... 02

WAS QUIET, LESS ACTIVE ..... 03

CRIED MORE ..... 04

OTHER (SPECIFY) ..... 05

\_\_\_\_\_ |\_\_|\_\_| |\_\_|\_\_|  
SHORTER NAP/NO NAP ..... 06

TANTRUMS/DIFFICULT/  
FRUSTRATED ..... 07

MORE ACTIVE ..... 08

CURIOUS ABOUT INTERVIEWER/  
ASSESSMENTS/TOYS ..... 09

PLAYED MORE/PLAYED WITH  
NEW TOYS ..... 10

LEARNED/DID NEW  
ACTIVITIES ..... 11

12.5

Was the daily routine different because I was here?

YES ..... 01

NO ..... 00 → **GO TO Q12.6**

A. What was different?

**PROBE:** Anything else?

CIRCLE ALL THAT APPLY

STAYED AT HOME OR INSIDE  
WHEN WOULD HAVE GONE  
OUT ..... 01

DELAYED NAPS OR MEALS .... 02

OFFERED MORE ACTIVITIES  
FOR CHILD ..... 03

POSTPONED DOING CHORES,  
PHONE CALLS, TAKING SHOWER,  
HAVING FRIEND OVER ..... 04

OTHER (SPECIFY) ..... 05

\_\_\_\_\_

WOULD BE IN DAY/CHILD CARE/  
SCHOOL ..... 06

12.6

Has (CHILD) had a cold or other kind of respiratory infection in the past week?

SCS

YES ..... 01

NO ..... 00

12.7

scs

Last night, how did (CHILD) sleep? Did (he/she) sleep through the night or wake up?

CIRCLE ONE

SLEPT THROUGH THE NIGHT . . 01

WOKE UP DURING THE NIGHT  
AND NEEDED CHANGING, TO  
GO TO BATHROOM OR FOOD . . 02

DID NOT SLEEP WELL . . . . . 03

**FOLLOW-UP INTERVIEW WITH CHILD CARE PROVIDER**

12.8

**CHECK QUESTION 4.13A. IS THERE AN ELIGIBLE PROVIDER?**

YES . . . . . 01

NO . . . . . 00 → **GO TO Q12.10**

FULL NAME OF PROVIDER OR CENTER: \_\_\_\_\_

<b>OFFICE ONLY</b>									
PROVIDER ID:									

12.9

For another part of this study we would like to spend a little time with (CHILD) when (he/she) is in child care. We would like your consent to contact (PROVIDER) and ask (him/her/the center) if we may observe (CHILD) when (he/she) is there. We will give (PROVIDER/CENTER) \$20 for participating.

Is it okay for us to contact (PROVIDER/CENTER)?

YES ..... 01  
NO ..... 00 →

**TRY AND ADDRESS  
CONCERNS, IF STILL A  
REFUSAL, GO TO Q12.10**

A. In order for us to contact (PROVIDER), we would like you to sign this consent form so that (PROVIDER) will know that you have given your okay for this visit. We would not want to ask (PROVIDER) to let us in without being able to show (him/her/them) something from you.

**HAND RESPONDENT CONSENT FORM AND READ WITH HER**

B. Please tell me (his/her/THE CENTER'S) address and telephone number.

ADDRESS: \_\_\_\_\_

PHONE NUMBER: (    ) - \_\_\_\_\_ - \_\_\_\_\_

C. We would appreciate your telling (PROVIDER) that we will be calling (him/her/them) in a few days.



**FOLLOW-UP INTERVIEW WITH FATHER/FATHER-FIGURE:**

**12.10-0 INTERVIEWER: IS SITE PART OF FATHER STUDY?**

YES ..... 01  
NO ..... 00 → **GO TO Q12.15,  
PAGE 66**

**NOTE TO INTERVIEWER:** IF YOUR SITE IS NOT VIDEOTAPING FATHERS, DROP THE WORDING IN BRACKETS. THIS VISIT WILL ONLY BE 1 HOUR.

**12.10 INTERVIEWER: CHECK QUESTIONS 5.2 AND 5.3**

**A. DOES CHILD LIVE WITH (HIS/HER) BIOLOGICAL FATHER?**

YES ..... 01 → **GO TO Q12.11**  
NO ..... 00

**B. CHILD HAS ...**

NON-RESIDENT BIOLOGICAL  
FATHER BUT **NO** FATHER-  
FIGURE ..... 01  
NO IDENTIFIED FATHER—**ONLY**  
A FATHER-FIGURE ..... 02 → **GO TO Q12.11**

NON-RESIDENT BIOLOGICAL  
FATHER **AND** A  
FATHER-FIGURE ..... 03 →

**FOLLOW INSTRUCTIONS  
IN BOX BELOW**

NO BIOLOGICAL FATHER  
(RESIDENT OR NON-RESIDENT)  
AND NO FATHER-FIGURE ..... 04 → **GO TO Q12.15,  
PAGE 66**

IF YOUR SITE WILL ONLY INTERVIEW ONE FATHER OR FATHER-FIGURE, **GO TO Q12.12.**  
IF YOUR SITE WILL INTERVIEW BOTH THE NON-RESIDENTIAL FATHER AND THE FATHER-FIGURE, **GO TO Q12.13, PAGE 63**

12.11 (BIOLOGICAL FATHER **OR** FATHER-FIGURE ONLY—CHOOSE APPROPRIATE LANGUAGE)

We would like to have a chance to talk to (FATHER/FATHER-FIGURE) and ask him some of the same types of questions we have asked you. [And we'd also like to videotape him playing with (CHILD).] The interview [and videotaping] will take about 1 [½] hours and we would give him \$20 to thank him for helping us learn more about (CHILD) and his relationship with (him/her).

A. What is his full name?

**GO TO Q12.14, PAGE 65**

12.12 (CHILD HAS BOTH NON-RESIDENT BIOLOGICAL FATHER **AND** FATHER-FIGURE)

We would like to have a chance to talk to the man who spends the most time with (CHILD) and is most important in (his/her) life. We would like to ask this person some of the same types of questions we have asked you. [And we'd also like to videotape him playing with (CHILD).] The interview [and videotaping] will take about 1 [½] hours and we would give him \$20 to thank him for helping us learn more about (CHILD) and his relationship with (him/her).

**REFER TO (Q5.14, Q5.15) AND (Q5.30 AND Q5.31).  
PAGE 29 PAGE 34**

I see from what you told me earlier that (CHILD) spends more time with (NON-RESIDENT FATHER OR FATHER-FIGURE) than with (NON-RESIDENT FATHER OR FATHER-FIGURE). Is (NON-RESIDENT FATHER OR FATHER-FIGURE) the person I should interview (and videotape with [CHILD])?

YES ..... 01 → **GO TO B**  
NO ..... 00 → **GO TO A**

A. Why do you feel we should interview (FATHER/FATHER-FIGURE)? **RECORD VERBATIM**

---

---

B. RESPONDENT'S CHOICE IS ...

--	--

NON-RESIDENT FATHER ..... 01  
FATHER-FIGURE ..... 02

C. What is his full name?

**GO TO Q12.14, PAGE 65**

**SITE INTERVIEWING BOTH FATHER/FATHER-FIGURE:**

12.13 We would like to talk to both (CHILD)'s father and the man who spends the most time with (CHILD) and is important in (his/her) life and is like a father to the child. We'd like to ask these persons separately some of the same types of questions we have asked you. [And we'd like to videotape the FATHER-FIGURE playing with (CHILD).] The interview [and videotape] would take about 1 [½] hour[s] and we would give them each \$20 to thank them for helping us learn more about (CHILD) and his relationship with (him/her).

A. Is (FATHER-FIGURE) the person we should interview as the (CHILD)'s father-figure?

YES ..... 01 → **GO TO B**

NO ..... 00

A-1. Is there somebody else we should interview that you feel is an important man in (CHILD)'s life?

YES ..... 01

NO ..... 00 → **GO TO E**

A-2. Who would that person be?

NAME: \_\_\_\_\_

A-3. So we can understand the change, please tell me why you feel we should interview (NEW) instead of (OLD).

\_\_\_\_\_  
\_\_\_\_\_

B. Is he available now to talk with me about the interview?

YES ..... 01

NO ..... 00 → **GO TO Q12.13E**

C. May I talk to (FATHER-FIGURE) now to discuss this study with him?

YES ..... 01 → **GO TO Q12.13E**

NO ..... 00

D. Please tell (FATHER-FIGURE) that we will be calling him to discuss this study. I would like to leave this letter with you for him. The letter explains the study. When would be the best time for me to reach him?

RECORD DATE AND TIME ON CONTACT SHEET

E. When it comes to (NON-RESIDENT BIOLOGICAL FATHER), do you have any objections to us attempting to reach him to be in this study? We will not be asking him to be videotaped with (CHILD).

YES ..... 01 → **GO TO G**

NO ..... 00

F. 1) What is the best way to reach him?

---

---

2) Please tell me (NON-RESIDENT BIOLOGICAL FATHER)'s address and telephone number.

---

---

**GO TO Q12.14**

G. It is possible that some of the fathers will hear about this study and will ask us to become a part of it. If he approaches us, we'd still like to talk with him. If he calls us, may we talk with him? We will not be asking him to be videotaped with (CHILD).

RECORD HER RESPONSE

---

---

**CONTINUE WITH Q12.15**

12.14 IS FATHER/FATHER-FIGURE PRESENT?

YES ..... 01  
NO ..... 00 → **GO TO B**

A. After we finish, may I talk to (FATHER/FATHER-FIGURE) to discuss this study with him?

YES ..... 01 → **GO TO Q12.15**  
NO ..... 00

B. Please tell (FATHER/FATHER-FIGURE) that we will be calling him (in a month or two) to discuss this study. I would like to leave this letter with you for him. The letter explains the study. When would be the best time for me to reach him?

RECORD DATE AND TIME ON CONTACT SHEET

C. What is the best phone number for me to use to reach (FATHER/FATHER-FIGURE)?

---

D. IS THIS A NON-RESIDENT FATHER/FATHER-FIGURE?

YES ..... 01

NO ..... 00 → **GO TO Q12.15**

1) Please tell me (FATHER/FATHER-FIGURE)'s address

---

---

2) If we have trouble reaching (FATHER/FATHER-FIGURE), is there someone else who would be able to help us find (father/father-figure).

---

---

---

---

---

12.15 IS YOUR SITE DOING VIDEOTAPING OF THE CHILD AND A FATHER OR FATHER-FIGURE?

YES ..... 01

NO ..... 00 → **GO TO Q12.16**

A. HAVE YOU IDENTIFIED A NON-RESIDENT FATHER OR NON-RESIDENT FATHER-FIGURE AS THE PERSON TO VIDEOTAPE?

YES ..... 01

NO ..... 00 → **GO TO Q12.16**

B. READ THE "REQUEST TO VIDEOTAPE CHILD AND FATHER/FATHER-FIGURE" FORM WITH THE PARENT AND ASK HER TO SIGN THE FORM.

## TRACKING INFORMATION AND INTERVIEWER OBSERVATIONS

Thank you for letting me spend this time here. I would like to thank you for participating in the survey and will give you \$15 and this gift in just a few minutes. We plan to contact you again in a few months and we need to know how to get in touch with you.

**INTERVIEWER: VERIFY ALL INFORMATION ON CONTACT SHEET AND PEOPLE WHO CAN HELP FIND ME FORM, THEN ASK:**

Is there anyone else I can contact who will know how to get in touch with you?

**INTERVIEWER: COLLECT NAMES, ADDRESSES, PHONE NUMBERS AND RELATIONSHIPS OF PEOPLE WHO CAN HELP FIND RESPONDENT. WRITE INFORMATION CLEARLY ON PEOPLE WHO CAN HELP FIND ME FORM.**

A. IF POSSIBLE, BE SURE TO COLLECT TRACKING INFORMATION FOR RESPONDENT'S:

- PARENTS
- GRANDPARENTS
- SIBLINGS

B. CROSS OUT ANY CONTACTS THAT ARE NO LONGER VALID.

C. UPDATE AND CORRECT THE INFORMATION FOR CONTACTS THAT ARE STILL VALID.

**USE BACK OF PEOPLE WHO CAN HELP FIND ME FORM FOR ADDITIONAL INFORMATION IF NECESSARY.**

12.16 IS THE (FATHER/FATHER-FIGURE) AVAILABLE NOW?

YES ..... 01 →

**Read in-person  
contact script to  
him.**

NO ..... 00 →

**CONTINUE WITH  
CLOSING**

12.17 **CLOSING**

Thank you very much. Those are all our questions. We'll be back in touch in a few months.

**SECTION 13**

**INTERVIEWER OBSERVATIONS OF HOME ENVIRONMENT**

---

**INTERVIEWER: PLEASE COMPLETE THIS SECTION AFTER YOU LEAVE THE RESPONDENT'S HOME.**

**ANSWER ON THE BASIS OF YOUR PERSONAL OBSERVATIONS OF THE HOME AND THE MOTHER/CHILD INTERACTIONS AT THE TIME OF YOUR VISIT.**

**A. PARENT-CHILD INTERACTION**

**13A.1 MOTHER USES CORRECT GRAMMAR AND PRONUNCIATION.**

To receive credit the mother must be able to communicate with you. Pronunciation with enough precision that the mother can be understood is more important than precise grammar.

EASILY UNDERSTOOD . . . . . 01  
NOT EASILY UNDERSTOOD . . . . . 00

**13A.2 WHEN SPEAKING OF OR TO CHILD, MOTHER'S VOICE CONVEYS POSITIVE FEELING.**

Is the mother pleased with her child? Does she enjoy (him/her) and talk about (him/her) in a pleasant, joyful manner rather than talk in a flat tone which communicates, "She's here, so I'll put up with her."

POSITIVE . . . . . 01  
NOT POSITIVE . . . . . 00

**13A.3 MOTHER CONVERSES WITH CHILD AT LEAST TWICE DURING VISIT (SCOLDING AND DEGRADING COMMENTS ARE NOT COUNTED).**

This item involves maternal conversation, not just vocalization which can be any sounds or words exchanged with the child. The mother must make an effort to converse with the child and ask questions, to talk about things, or to engage in verbal interchange other than scolding or degrading comments.

CONVERSES . . . . . 01  
DID NOT CONVERSE . . . . . 00



13A.4 **MOTHER ANSWERS CHILD’S QUESTIONS OR REQUESTS VERBALLY.**  
 In order to receive credit for this item the mother must make an effort to answer the question for the child. If the mother is unable to answer it at the moment, she may tell the child she doesn’t know but that they will look up the answer later. Responses such as “Mother’s busy, go away” or “Don’t bother me now” do not receive credit.

ANSWERS ..... 01  
 DID NOT ANSWER ..... 00

13A.5 **MOTHER USUALLY RESPONDS VERBALLY TO CHILD’S TALKING.**  
 The key here is that the mother recognizes and acknowledges the child’s vocalizations and does not ignore them. For a score of “01” the response may be a word or series of words or sounds such as, “Uh huh,” “Um” or “Sure.” If the child does not vocalize in any way during the interview, thereby giving no opportunity for response, the score would be “00.”

RESPONDS VERBALLY ..... 01  
 DOES NOT RESPOND VERBALLY ..... 00

13A.6 **MOTHER SPONTANEOUSLY PRAISES CHILD’S QUALITIES OR BEHAVIOR TWICE DURING VISIT.**  
 The key word here is “spontaneous,” but since most mothers enjoy talking about and are proud of their children, this is not too hard to observe. Frequently a mother will tell you how well her child throws a ball or runs and will brag on how well he/she dresses himself/herself or can get his/her own drink.

SPONTANEOUS PRAISE ..... 01  
 NOT SPONTANEOUS PRAISE ..... 00

13A.7 **MOTHER CARESSES, KISSES OR CUDDLES CHILD AT LEAST ONCE DURING VISIT.**  
 This need not be a wild burst of showy affection. Simple signs of concern such as a mother gently tucking the child’s shirt in, holding him/her on her lap, holding a hand, or a gentle pat on the shoulder would all receive a “01.”

AFFECTIONATE ..... 01  
 NOT AFFECTIONATE ..... 00

13A.8 **MOTHER SETS UP SITUATION THAT ALLOWS CHILD TO “SHOW OFF” DURING VISIT.**

Does the mother consciously get the child to sing a song, count, show how a toy works or anything that allows the child to do something to impress the visitor?

- SHOW OFF ..... 01
- DID NOT SHOW OFF ..... 00

13A.9 **MOTHER INTRODUCES INTERVIEWER TO CHILD.**

A formal introduction is not necessary for credit. A comment such as, “This is Mrs. Jones, she’s here to talk to us,” or “Show Mrs. Jones the new book you got for your birthday” will receive credit. The object is for the mother to make the child aware of the visitor’s name and the fact that she has come to visit both of them and not just the mother.

- INTRODUCE ..... 01
- DID NOT INTRODUCE ..... 00

13A.10 **MOTHER USES COMPLEX SENTENCE STRUCTURE AND SOME LONG WORDS IN CONVERSING.**

If the mother makes an attempt at carrying on a regular conversation instead of just finding a way to answer all of the questions with “Yes” or “No” or “I don’t know” and not giving any explanation, this should be scored “01.”

- COMPLEX ..... 01
- NOT COMPLEX ..... 00

13A.11 **MOTHER DOES NOT SCOLD (YELL) OR DEROGATE CHILD MORE THAN ONCE DURING VISIT.**

In this item all remarks must be made to the child; that is, the mother must tell the child that he is a bad boy and not simply tell the interviewer that the child is bad. If this occurs more than once during the visit, the item should be scored “00.”

- DID NOT SCOLD ..... 01
- SCOLDED ..... 00

13A.12 **MOTHER DOES NOT USE PHYSICAL RESTRAINT, SHAKE, GRAB, OR PINCH CHILD DURING VISIT.**

In a younger child the mother might be apt to hold the child in her lap even though the child struggles to get down. An older child might be placed in a chair to keep him/her out of the way, or he/she might be jerked back for handling items on a table or pulled away if he/she tried to climb on the interviewer's lap.

- DID NOT USE RESTRAINT . . . . . 01
- RESTRAINED . . . . . 00

13A.13 **MOTHER NEITHER SLAPS OR SPANKS CHILD DURING VISIT.**

This item goes hand in hand with No. 13A.12. In this item the slaps and spanks must be in anger or as a reprimand for some wrongdoing. An affectionate pat on the bottom as the mother sends the child out to play does not mean the item should receive a "00."

- DID NOT SLAP OR SPANK . . . . . 01
- SLAPPED OR SPANKED . . . . . 00

**B. PHYSICAL ENVIRONMENT**

13B.1 **STRUCTURAL SAFETY OF THE HOME: THE HOME'S STATE OF DISREPAIR OR NEGLECT AND THOSE ASPECTS OF THE PHYSICAL ENVIRONMENT THAT COULD BE POTENTIALLY DANGEROUS TO A YOUNG CHILD.**

CIRCLE ONE

Parts of the home appear unsafe; home creates a dangerous environment for the preschool child; plaster coming off ceiling or walls; stairway with boards missing; exposed electrical wiring; kitchen cabinets do not have doors . . . . . 01

Home is neither unsafe nor safe; some obvious safety modifications and repairs to physical environment are needed but the environment does not suggest imminent harm or danger to preschool child; water stains on some ceilings or walls, wallpaper In need of some repair . . . . . 02

No obvious repairs to the home are necessary . . . . . 03

13B.2 **HOME DECOR:** ATTEMPTS TO CREATE A “HOMEY” ENVIRONMENT. RATERS SHOULD BE CAREFUL TO AVOID MAKING JUDGMENTS ABOUT THE ATTRACTIVENESS OR STYLE OF DECOR (E.G., DO NOT INCLUDE PERSONAL BIASES ABOUT “TASTEFUL” OR “TACKY” DECOR).

CIRCLE ONE

Home is devoid of decoration (e.g., dark rooms, drapes drawn or no window treatments, no pictures, nick-nacks or plants; no or insufficient furniture in significant living areas such as living room or dining room) . . . . . 01

Minimal decoration (e.g., bare walls, but one or two table nick-nacks or pictures, bare minimum furniture present such as one couch or one table in the living room) . . . . . 02

Reasonable amount of furniture and room decorations such as nick-nacks, pictures, wallhangings; curtains or window treatments allow light to enter rooms . . . . . 03

13B.3 **CHILD-FRIENDLY HOME:** HOW CHILD-FRIENDLY IS THE HOME ENVIRONMENT? CAPTURE THE DEGREE OF STIMULATION AVAILABLE TO CHILD BASED ON THE PRESENCE OF MATERIALS FOR PLAY AND LEISURE AND THE ACCESSIBILITY OF THESE MATERIALS TO A YOUNG CHILD. **CIRCLE ONE**

CIRCLE ONE

Absence of toys, games and books appropriate for use by a preschool . . . . . 01

Presence of some toys, games and books for preschool age child; toys may be broken or inappropriately dirty; toys and games are generally not within easy reach of the preschool child age child . . . . . 02

Many toys, games and books for preschool age child are in view and could be easily accessed by a child . . . . . 03

13B.4 **ADEQUATE LIVING SPACE FOR NUMBER OF INDIVIDUALS IN THE HOME: THE RELATIVES ROOMINESS OF THE HOME ENVIRONMENT. CIRCLE ONE**

CIRCLE ONE

Inadequate living space available, overcrowded living conditions (e.g., a one bedroom home where preschool child sleeps in parents' bedroom or living room, three or more individuals in one bedroom, preschool child has no other play area than his bedroom) . . . . . 01

Living space is adequate though somewhat cramped (e.g., house does not have living space that would be the equivalent of at least one 9' x 12' room per person) . . . . . 02

Adequate or better living space in the home as indicated by at least one 9' x 12' room per person (e.g., preschool child has his/her own bedroom in addition to indoor play area or playroom; parents and other siblings have their own bedroom, living room and dining room present) . . . . . 03

13B.5 **INTERPERSONAL SPACE: THE "BUSY-NESS" OF THE HOME ENVIRONMENT--THE INTERPERSONAL TRAFFIC ENCOUNTERED DURING THE HOME VISIT.**

CIRCLE ONE

There are many people in the home (e.g., 4-5 related or unrelated individuals not including preschool child and parents) which makes it difficult to find a private place to interview child and parent . . . . . 01

There are one to three related or unrelated individuals in the home making it difficult to have private time with the parent or the child because of frequent interruptions and disruptions . . . . . 02

It is easy for individuals to have a private space where there are no interruptions from others . . . . . 03

13B.6 **OVERALL PHYSICAL ORGANIZATION OF THE HOUSE:**

CIRCLE ONE

Home is cluttered making it difficult to walk around objects, unable to find a clear space to do assessment activities . . . . . 01

Home is moderately cluttered with clothes and other items out and not put away, (e.g., vacuum cleaner out, children's schoolwork scattered in living room area, several pairs of shoes and boots scattered throughout home, objects and clothes line staircases) . . . . . 02

Home is neat and generally organized . . . . . 03

13B.7 **CLEANLINESS:**

CIRCLE ONE

Home is strewn with trash; kitchen area has dirty dishes from several meals; floors are markedly dirty . . . . . 01

Home is generally clean though floors may need to be vacuumed or washed, noticeable dust on furniture . . . . . 02

Home is clean and appears to have been cleaned recently or on a regular basis . . . . . 03

13B.8 **OUTSIDE PLAY ENVIRONMENT:** REFERS TO AREAS OUTSIDE, BUT CONNECTED TO, THE HOME WHERE A YOUNG CHILD COULD PLAY, INCLUDING ANY BACKYARD SPACE AND THE AREA IN FRONT OF THE HOME. THE RATING SHOULD INCLUDE ADEQUACY OF SPACE OF PLAY AREA.

CIRCLE ONE

Home has no outside play area or play area is littered with garbage, dangerous objects (e.g., broken glass) or other hazards (e.g., broken toys with sharp edges, large ditches) . . . 01

Preschool child could not safely use play area unsupervised (e.g., too close to street, next to "hang-out" for older children and adults); backyard area is too small for a young child's outdoor activities (e.g., 10' x 10' enclosed area) . . . . . 02

Safe play area of adequate space with several toys or activity props . . . . . 03

13B.9 **CONDITION OF STREET WHERE CHILD LIVES:** THE CONDITION OR QUALITY OF THE ENVIRONMENT DIRECTLY OUTSIDE THE CHILD'S HOME. RATINGS ARE BASED ON THE NEIGHBORHOOD AS SEEN FROM THE FRONT OR THE BACK OF THE CHILD'S HOME (E.G., THE BLOCK OR STREET ON WHICH THE CHILD LIVES).

CIRCLE ONE

Presence of abandoned cars, debris in the streets and on the sidewalks, abandoned buildings . . . . . 01

There may be one abandoned car, graffiti on one or two walls in the neighborhood or on a mailbox yet most homes are well-kept and have generally clean and well-maintained sidewalks . . . . . 02

No evidence of debris or garbage in the streets; houses and yards appear well-maintained . . . . . 03

**C. INTERVIEWER OBSERVATIONS**

13C.1 **DURING THE ENTIRE VISIT, HOW AT EASE DID THE PARENT APPEAR?**

CIRCLE ONE

- VERY UNCOMFORTABLE ..... 01
- SLIGHTLY ILL AT EASE ..... 02
- MODERATELY COMFORTABLE ..... 03
- COMPLETELY COMFORTABLE AND AT EASE . 04

13C.2 **DURING THE ENTIRE VISIT, HOW DISRUPTIVE DO YOU THINK YOUR PRESENCE WAS?**

CIRCLE ONE

- NOT AT ALL DISRUPTIVE ..... 01
- MINIMALLY DISRUPTIVE ..... 02
- MODERATELY DISRUPTIVE ..... 03
- HIGHLY DISRUPTIVE ..... 04

13C.3 **DURING THE ENTIRE VISIT, HOW MUCH DID THE CHILD TRY TO INTERACT WITH YOU?**

CIRCLE ONE

- DIDN'T NOTICE YOU AT ALL ..... 01
- A FEW GLANCES OR SMILES ONLY ..... 02
- QUITE NUMEROUS GLANCES,  
SMILES, VOCALIZATIONS ..... 03
- PROLONGED WATCHING AND NUMEROUS  
ATTEMPTS TO INTERACT ..... 04



13C.4 **INTERVIEWER: ANSWER THESE QUESTIONS ABOUT YOUR KNOWLEDGE OF THE TREATMENT STATUS OF THE FAMILY.**

**A. DO YOU KNOW THE TREATMENT STATUS OF THIS FAMILY?**

- YES ..... 01
- NO ..... 00 → **GO TO Q13C.5**

**B. WHEN DID YOU FIND OUT?**

CIRCLE ONE

- BEFORE VISIT--FROM EARLIER CONTACT ..... 01
- BEFORE VISIT--FROM OTHER STAFF .. 02
- DURING VISIT ..... 03

13C.5 **INTERVIEW CONDUCTED IN:**

CIRCLE ONE

- ENGLISH ..... 01
- SPANISH ..... 02
- OTHER LANGUAGE (SPECIFY) ..... 03

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13C.6

**I HAVE READ THIS COMPLETED QUESTIONNAIRE AND CERTIFY THAT ALL QUESTIONS REQUIRING ANSWERS HAVE BEEN APPROPRIATELY FILLED IN, AND THAT THIS INTERVIEW HAS BEEN ADMINISTERED TO THE DESIGNATED SAMPLE MEMBER.**

\_\_\_\_\_  
INTERVIEWER

|\_|\_|\_|\_|  
ID NUMBER

\_\_\_\_\_  
DATE