

Section 14: Child-Related Services & Government Programs

Construct:

Attends/Invited to Parenting Training

CHILD-RELATED SERVICES AND GOVERNMENT PROGRAMS: Construct:
Attends/Invited to Parenting Training

Construct: Attends/Invited to Parenting Training

Question #: 6.1

Survey: EHS – 1 Month

6.1. Next, I will ask you some questions about services you may have received that relate to your role as (a father/an important man in (CHILD)'s life).

Since (MONTH—6 MONTHS AGO), have any of the following things happened?

Did anyone from a program, hospital or health agency, or social service agency or religious organization invite you to a meeting or event that related to children?

YES..... 01

NO..... 00

A. What agency, organization or program was this person from?

EHS..... 01

OTHER (SPECIFY)..... 02

Construct: Attends/Invited to Parenting Training

Question #: 6.2

Survey: EHS – 1 Month

6.2. Since (MONTH-6 MONTHS AGO), have you attended classes, lectures, group activities for parents, or events that provided information on parenting or training to help you be a better parent?

YES..... 01

NO..... 02

A. How many of these meetings have you attended since (MONTH-6 MONTHS AGO)?

/ (Insert #) / MEETINGS

B. What agency, organization or program held (this/these) meeting(s)?

EHS..... 01

OTHER (SPECIFY)..... 02

C. INTERVIEWER: IS THIS A PROGRAM FAMILY?

YES..... 01

NO..... 00

1) How many of these meetings were Early Head Start or Early Head Start-sponsored meetings?

/ (Insert #) / MEETINGS

Construct: Attends/Invited to Parenting Training

Question #: 7.1

Survey: EHS – 6 Month

7.1.Next, I will ask you some questions about services you may have received that relate to your role as an important man in (CHILD)'s life.

Since (MONTH-MONTH OF LAST INTERVIEW), have any of the following things happened?

Did anyone from a program, health agency, or social service agency invite you to a meeting or event that related to children?

YES..... 01

NO..... 00

A. What agency or program was this person from?

EHS..... 01

OTHER (SPECIFY)..... 00

Construct: Attends/Invited to Parenting Training

Question #: 7.2

Survey: EHS – 6 Month

7.2. Since (MONTH-MONTH OF LAST INTERVIEW), have you attended classes, lectures, group activities for parents, or events that provided information on parenting or training to help you be a better parent?

YES..... 01

NO..... 00

A. How many of these meetings have you attended since (MONTH-MONTH OF LAST INTERVIEW)?

/ (Insert #) / MEETINGS

B. What agency or program held (this/these) meeting(s)?

EHS..... 01

OTHER (SPECIFY)..... 00

C. INTERVIEWER: IS THIS A PROGRAM FAMILY?

YES..... 01

NO..... 00

1) How many of these meetings were Early Head Start or Early Head Start-sponsored meetings?

/ (Insert #) / MEETINGS

Construct:
Attends Program's Board Meeting

CHILD-RELATED SERVICES AND GOVERNMENT PROGRAMS: Construct:
Attends Program's Board Meetings

Construct: Attends Program's Board Meeting

Question #: 7.4

Survey: EHS – 6 Month

- 7.4. A. Have you attended an EHS Policy Council or Governing Board Meeting?
- YES..... 01
- NO..... 00
- B. How many of these meetings have you attended since (MONTH-MONTH OF LAST INTERVIEW)?
- /(Insert #)/ MEETINGS

Construct:

**Where Receive Information About
Caring for Child**

CHILD-RELATED SERVICES AND GOVERNMENT PROGRAMS: Construct: Where
Receive Information About Caring for Child

Construct: Where Receive Information About Caring for Child

Question #: 6.0

Survey: EHS – 1 Month

6.0. Who do you talk to or where do you go when you need to get information about taking care of (CHILD)? **PROBE**: Anyone or anyplace else?

CIRCLE ALL THAT APPLY

PEOPLE

- OWN MOTHER/STEPMOTHER..... 01
- OWN FATHER/STEPFATHER..... 02
- OTHER FEMALE RELATIVE..... 03
- OTHER MALE RELATIVE..... 04
- CHILD’S MOTHER..... 05
- OTHER PERSON (SPECIFY)..... 06

PEDIATRICIAN..... 07

PLACES

- EHS..... 08
- OTHER AGENCY (SPECIFY)..... 09

LIBRARY..... 10

BOOKS/MAGAZINES..... 11

OTHER (SPECIFY)..... 12

DOCTOR’S OFFICE/CLINIC..... 13

CHILD-RELATED SERVICES AND GOVERNMENT PROGRAMS: Construct: Where
Receive Information About Caring for Child

Construct:
Program Affiliated Child Care

Construct: Program Affiliated Child Care

Question #: 7.5

Survey: EHS – 6 Month

7.5. Have you taken (CHILD) to childcare or a child development center or picked up (CHILD) from there?

YES..... 01

NO..... 00

A. About how many times per month do you drop off or pick up (CHILD) from childcare or a child development center?

/(Insert #)/ TIMES PER MONTH

B. When you drop off or pick up (CHILD), do you talk to the person who takes care of (CHILD)?

YES..... 01

NO..... 00

C. INTERVIEWER: IS THIS A PROGRAM FAMILY?

YES..... 01

NO..... 00

1) Is this childcare part of or affiliate with or sponsored by EHS?

YES..... 01

NO..... 00

Construct: Program Affiliated Child Care

Question #: 7.10

Survey: EHS – 6 Month

7.10. A. INTERVIEWER: IS THIS A PROGRAM FAMILY?

YES..... 01

NO..... 00

B. Have you volunteered to help out at the Early Head Start Program in any way?

YES..... 01

NO..... 00

Construct:
Program/Agency Visits Home

CHILD-RELATED SERVICES AND GOVERNMENT PROGRAMS: Construct:
Program/Agency Visits Home

Construct: Program/Agency Visits Home
Question #: 6.3
Survey: EHS – 1 Month

- 6.3. A. INTERVIEWER: IS THIS A PROGRAM FAMILY?
 YES..... 01
 NO..... 00
- B. Since (MONTH/6 MONTHS AGO), did anyone visit you and (CHILD) at home from Early Head Start? Please don't count (NAMES OF DATA COLLECTORS/RESEARCH STAFF) who may have visited you to talk to you about (CHILD) and collect information for the Early Head Start Evaluation.
 YES..... 01
 NO..... 00
 DON'T KNOW..... -1
 REFUSED..... -3
- C. Since (MONTH, 6 MONTHS AGO), how often did someone from Early Head Start visit you at home? Was it two to three times per week, once a week, two to three times a month, once a month, less than once a month, or only once?
 TWO TO THREE TIMES
 PER WEEK..... 01
 ONCE A WEEK..... 02
 2 TO 3 TIMES PER MONTH..... 03
 ONCE A MONTH..... 04
 LESS THAN ONCE A MONTH..... 05
 ONLY ONCE..... 06
 OTHER (SPECIFY)..... 07
 DON'T KNOW..... -1
 REFUSED..... -3

Construct: Program/Agency Visits Home

Question #: 6.4

Survey: EHS – 1Month

6.4. Since (MONTH, 6 MONTHS AGO), did anyone from (any other/a) program or agency visit you and (CHILD) at home? Please don't count (NAMES OF DATA COLLECTORS/RESEARCH STAFF) who may have visited you to talk to you about (CHILD) and collect information for the Early Head Start Evaluation.

- YES..... 01
- NO..... 00
- DON'T KNOW..... -1
- REFUSED..... -3

Construct: Program/Agency Visits Home

Question #: 6.5

Survey: EHS – 1Month

6.5. A. What is the name of the organization that sent someone to visit you most often?

ORGANIZATION (SPECIFY)..... 00

B. Since (MONTH, 6 MONTHS AGO), how often did someone from (ORGANIZATION IN Q6.5A) visit you at home? Was it two to three times per week, once a week, two to three times a month, once a month, less than once a month, or only once?

- TWO TO THREE TIMES PER WEEK..... 01
- ONCE A WEEK..... 02
- TWO TO THREE TIMES PER MONTH..... 03
- ONCE A MONTH..... 04
- LESS THAN ONCE A MONTH..... 05
- ONLY ONCE..... 06
- OTHER (SPECIFY)..... 07

-
- DON'T KNOW..... -1
 - REFUSED..... -3

Construct: Program/Agency Visits Home

Question #: 7.3

Survey: EHS – 6 Month

7.3. Have you attended a meeting or another event that was just for fathers (or men who had important roles in the lives of children)?

YES..... 01

NO..... 00

A. How many times since (MONTH—MONTH OF LAST INTERVIEW) have you attended a meeting or event that was just for men?

/(Insert)/ MEETING/EVENT

B. What types of meetings or events did you attend?

CIRCLE ALL THAT APPLY

CLASSES..... 01

LECTURES..... 02

GROUP DISCUSSIONS..... 03

GROUP ACTIVITIES..... 04

OTHER (SPECIFY)..... 00

C. What agency held (this/these) meetings(s)/event(s)?

EHS..... 01

OTHER (SPECIFY)..... 00

D. INTERVIEWER: IS THIS A PROGRAM FAMILY?

YES..... 01

NO..... 00

Construct: Program/Agency Visits Home

Question #: 7.7

Survey: EHS – 6 Month

- 7.7. A. INTERVIEWER: IS THIS A PROGRAM FAMILY?
 YES..... 01
 NO..... 00
- B. Since (MONTH—MONTH OF LAST INTERVIEW), did anyone visit you and (CHILD) at home from Early Head Start? Count only visit that you participated in. Please don't count (NAMES OF DATA COLLECTORS/RESEARCH STAFF) who may have visited you to talk to you about (CHILD) and collect information for the Early Head Start Evaluation.
 YES..... 01
 NO..... 00
 DON'T KNOW..... -1
 REFUSED..... -3
- C. Since (MONTH—MONTH OF LAST INTERVIEW), how often did someone from Early Head Start visit you at home? Was it two to three times per week, once a week, two to three times a month, once a month, less than once a month, or only once?

CIRCLE ONE

- 2 TO 3 TIMES PER WEEK..... 01
 ONCE A WEEK..... 02
 2 TO 3 TIMES PER MONTH..... 03
 ONCE A MONTH..... 04
 LESS THAN ONCE A MONTH..... 05
 ONLY ONCE..... 06
 OTHER (SPECIFY)..... 00
 DON'T KNOW..... -1
 REFUSED..... -3

Construct: Program/Agency Visits Home

Question #: 7.8

Survey: EHS – 6 Month

7.8. Since (MONTH—MONTH OF LAST INTERVIEW), did anyone from (any other/a) program or agency visit you and (CHILD) at home? Count any visits that you participated in. Please don't count (NAMES OF DATA COLLECTORS/RESEARCH STAFF) who may have visited you to talk to you about (CHILD) and collect information for the Early Head Start Evaluation.

- YES..... 01
- NO..... 00
- DON'T KNOW..... -1
- REFUSED..... -3

Construct: Program/Agency Visits Home

Question #: 7.9

Survey: EHS – 6 Month

7.9. A. What is the name of the organization that sent someone to visit you most often?

ORGANIZATION (SPECIFY)..... 00

B. Since (MONTH—MONTH OF LAST INTERVIEW), how often did someone from (ORGANIZATION IN Q7.9A) visit you at home? Was it two to three times per week, once a week, two to three times a month, once a month, less than once a month, or only once?

CIRCLE ONE

TWO TO THREE TIMES

PER WEEK..... 01

ONCE A WEEK..... 02

2 TO 3 TIMES PER MONTH..... 03

ONCE A MONTH..... 04

LESS THAN ONCE A MONTH..... 05

ONLY ONCE..... 06

OTHER (SPECIFY)..... 00

DON'T KNOW..... -1

REFUSED..... -3

Construct:

**Welfare and Child Support
Policy in Father's State**

CHILD-RELATED SERVICES AND GOVERNMENT PROGRAMS: Construct:
Welfare and Child Support Policy in Father's State

Construct: Welfare and Child Support Policy in Father's State
Question #: F8
Survey: FF-F

F8. Now I'd like to ask you some questions about welfare and child support policies in your city. Can a mother receive welfare if she is married and living with her husband?

YES..... 1
NO..... 2
DON'T KNOW..... 98

Construct: Welfare and Child Support Policy in Father's State
Question #: F9
Survey: FF-F

F9. Can a mother receive welfare if she is not married and lives with baby's father?

YES..... 1
NO..... 2
DON'T KNOW..... 98

Construct: Welfare and Child Support Policy in Father's State
Question #: F10
Survey: FF-F

F10. How many months or years in total can a mother receive welfare?

/(Insert #)/ YEARS
/(Insert #)/ MONTHS
DON'T KNOW..... 98

Construct: Welfare and Child Support Policy in Father's State
Question #: F11
Survey: FF-F

F11. How long can a mother receive welfare before she is required to work?
/(Insert #)/ YEARS
/(Insert #) MONTHS
DON'T KNOW..... 98

Construct: Welfare and Child Support Policy in Father's State
Question #: F12
Survey: FF-F

F12. Can a Judge make a father pay child support even if he wanted an abortion?
YES..... 1
NO..... 2
DON'T KNOW..... 98

Construct: Welfare and Child Support Policy in Father's State
Question #: F13
Survey: FF-F

F13. Can a blood test prove whether a man is really the father of the child?
YES..... 1
NO..... 2

Construct: Welfare and Child Support Policy in Father's State
Question #: F14
Survey: FF-F

F14. Has anyone at the hospital talked to you or given you information about establishing paternity?

- YES..... 1
- NO..... 2

Construct: Welfare and Child Support Policy in Father's State
Question #: F15
Survey: FF-F

F15. If a man gets a woman pregnant and doesn't want to marry her, how likely is it that he will be required to pay child support for the child? Would you say there is:

- No chance 1
- A little chance..... 2
- A 50-50 chance..... 3
- A pretty good chance, or..... 4
- An almost certain chance..... 5