

WORKING P A P E R

The Los Angeles Family and Neighborhood Survey, Wave 2

Household Questionnaires

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**THE LOS ANGELES FAMILY AND NEIGHBORHOOD SURVEY, WAVE 2:
HOUSEHOLD QUESTIONNAIRES**

October 2010

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PREFACE

The Los Angeles Family and Neighborhood Survey, Wave 2, was funded by grants from the Eunice Kennedy Shriver National Institute of Child Health and Human development (Grants R01 HD035944 and R01 HD049865), the National Institute of Aging (Grant R01 AG022005), and the National Institute of Environmental Health Sciences (Grant R01 ES13907). Additional funding was provided by the National Institutes of Health's Office of Behavioral and Social Science Research, the Health Resources and Services Administration of the U.S. Department of Health and Human Services, and the Russell Sage Foundation. The L.A.FANS project is very grateful to these sponsors for their financial and other support throughout the design, planning, and conduct of the Wave 2 survey.

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The questionnaires for L.A.FANS-2 were primarily modified versions of those for L.A.FANS-1. Please see the acknowledgements in the L.A.FANS-1 Household Questionnaires documentation (<http://www.rand.org/pubs/drafts/DRU2400.3-2/>) for a description of the roles of the project team in designing the L.A.FANS-1 questionnaires. Revision and development for the L.A.FANS-2 questionnaires was led by Anne Pebley (UCLA and RAND; L.A.FANS-2 Co-Director) and Christine Peterson (RAND; L.A.FANS-2 Data Manager), with advice from Narayan Sastry (University of Michigan and RAND; L.A.FANS-2 Co-Director), Marianne Bitler (UC Irvine), Arleen Brown (UCLA), Elizabeth Bruch (University of Michigan), Noreen Goldman (Princeton), Arie Kapteyn (RAND), Robert Mare (UCLA), Beate Ritz (UCLA), Judith Seltzer (UCLA), James Smith (RAND), Neeraj Sood (RAND), Rachel Veerman (UCLA), Michelle Wilhelm (UCLA), and Karen Yuhas (RAND; L.A.FANS-2 Project Director). Rhonda Moats (University of Michigan) edited and formatted the questionnaires for this publication.

1. INTRODUCTION

The Los Angeles Family and Neighborhood Survey (L.A.FANS) is a longitudinal study of families in Los Angeles County and of the neighborhoods in which they live. L.A.FANS was originally designed to answer key research and policy questions in three areas: the effects of neighborhoods and families on children's development; the effects of welfare reform at the neighborhood level; and the process of residential mobility and neighborhood change. L.A.FANS also provides a data set for studying other important social, economic, and policy issues, including: adult health and health disparities, immigrant well-being, social ties and neighborhood interaction, marriage patterns, ethnic identity, family survival strategies, family dynamics, health insurance coverage, and self-reported vs. measured health status.

The first wave (L.A.FANS-1), which was fielded between April 2000 and January 2002, interviewed adults and children living in 3,085 households in a diverse stratified probability sample of 65 neighborhoods throughout Los Angeles County. In Wave 2 of L.A.FANS, we attempted to reinterview in person all primary respondents from Wave 1 who were residing in Los Angeles County, whether or not they continued to live in their Wave 1 neighborhoods. In addition, we interviewed a sample of individuals who moved into each sampled neighborhood between Waves 1 and 2. Fieldwork for the second wave of L.A.FANS took place between August 2006 and December 2008.

2. L.A.FANS-2 QUESTIONNAIRES

General Principles

The L.A.FANS-2 questionnaires were modified versions of the L.A.FANS-1 questionnaires. The English versions of the L.A.FANS-1 Questionnaires are available online at <http://www.rand.org/pubs/drafts/2005/DRU2400.3-2.pdf> and the Spanish versions are at <http://www.rand.org/pubs/drafts/2005/DRU2400.4.pdf>. Information on the origins of questions used in L.A.FANS-1 (many of which were also used in L.A.FANS-2) is available at http://lasurvey.rand.org/documentation/questionnaires/origin_questions.pdf.

The development of questionnaires for both waves of the survey was based on five general principles:

1. Whenever possible, use questions and question sequences which have been used in well-designed recent surveys of national population samples in the U.S. to facilitate comparisons;
2. Record responses in the format in which respondents give them rather than asking interviewers to translate or convert them into other formats;
3. Ask questions of the household member most likely to know about a given subject area;
4. Insure that respondents were asked only questions pertinent to them, using wording which reflected their own situation; and
5. Language and grammar in both English and Spanish versions of the questions must be clear and as simple as possible.

For L.A.FANS-2 questionnaires we adopted three additional principles. First, wherever possible, panel respondents were not asked to again report time-invariant information (e.g., birth place, birth date) that they had already provided in Wave 1.

Second, for each major topic area (e.g., marital status, education) in the Adult and Parent modules (described below), we attempted to deal with the “seam problem” common to longitudinal surveys.¹ Specifically, at the beginning of each section, we presented the respondent with the information about their status as it had been recorded at the time of L.A.FANS-1 and asked if that information was correct. If they said it was not correct, we asked for the correct information and also for an explanation of the discrepancy.

Third, new entrant respondents in Wave 2 completed the same questionnaires as panel respondents did in Wave 1 with only a few modifications: (1) most new questions added in L.A.FANS-2 were asked of both panel respondents and new entrants and (2) new entrants were asked to provide retrospective information in the Event History Calendar (EHC) and other parts of the questionnaires for the previous seven years (rather than the past two years as in L.A.FANS-1) so that information for approximately the same length of time was available for panel members and new entrants.

¹ See D.H. Hill, (1987), “Response Errors Around the Seam: Analysis of Change in a Panel with Overlapping Reference Periods,” Proceedings of the Section on Survey Research Methods, American Statistical Association, pp. 210–215.

Description of L.A.FANS-2 Questionnaire Modules

The L.A.FANS-2 questionnaires use the same modular system as in L.A.FANS-1. Table 2.1 summarizes the L.A.FANS-2 modules and identifies which respondents complete each module. Compared with the Wave 1 questionnaires, major changes include splitting the Roster into two parts—the Update Roster and Current Roster—and adding the Health Assessment Module. Note that the terms “questionnaires” and “module” are used interchangeably below.

As in the Wave 1 questionnaires, each of these modules has a specific function. The names and functions of modules in Wave 2 are essentially the same as in Wave 1 with some additions.

Table 2.1. Respondents and Questionnaire Modules for In-Person Interviews

Respondents	Questionnaire Module					
	Adult	Parent	PCG	Child	Household	Health Measures
Randomly-Sampled Adults (RSAs)	X					X
Randomly-Sampled Children (RSCs) and Sampled Siblings (SIBs)						
• RSC/SIB aged 3 to 8						X
• RSC/SIB aged 9 to 17				X		X
• RSC/SIB age 18+	X					X
Primary Caregivers (PCGs) of RSCs/SIBs	X	X	X			
HH Respondent					X	

New entrant respondents and panel respondents living in Los Angeles County were interviewed in person. The following six questionnaire modules were administered to these respondents.

1. The **Roster** is comprised of two parts, the **Update Roster** and the **Current Roster**.

The **Update Roster** is administered *only* in households which contain at least one panel respondent (i.e., RSA, RSC, and SIB). *New Entrant households skip the Update Roster entirely.* In selecting the Update Roster respondent, preference was given to panel respondents age 18 years and older who lived full-time in the household. First preference was given to the panel RSA, then the Wave 1 PCG, then the panel RSC (if ≥18 years), and then the panel SIB (if ≥18 years). If none of these respondents were available, the Update Roster could be completed by any resident adult age 18 years or older.

The Update Roster collected the following information:

- For everyone who was living in the L.A.FANS-1 household (not just panel respondents), it collected information on current location regardless of whether or not they were full-time, part-time, or non-residents of the household at Wave 2. No additional information was collected about people living in Wave 1 households who were not panel members.

- For panel members who live elsewhere or are living in this household only part time, it also collected information on their location, their contact information, and their basic characteristics (e.g., age, marital status, education, employment).

The **Current Roster** was used to list everyone in the current household and to collect basic information on all current residents. It was completed both in households containing a panel respondent and in new entrant households. In new entrant households, the Current Roster respondent could be anyone living more than half time in the household who is 18 years or older. In panel households, the Current Roster was completed by the Update Roster respondent.

2. The **Household Module** collected data on the income, assets, and liabilities of the family of the primary respondents (RSA and RSC/SIB). The Household Module respondent was selected in the Current Roster and is the person identified by the Current Roster respondent as most likely to know about family finances.
3. The **Adult Module** collected information from all adults in the survey about themselves. In other words, this module asks each adult respondent (RSAs and PCGs) to report on their own characteristics and experiences. In Wave 2, “aged up” RSCs and SIBs—i.e., those who were 18 years of age or older at the time of the survey—answered the Adult Module to provide information about themselves.
4. The **Parent Module** collected information from the PCG about each sampled child. In other words, it collected information from parents about their children. It is the primary source of information about all children age 17 years and younger in the sample. Note that there is no Parent Module for “aged up” panel RSCs/SIBs who are 18 years of age and older.
5. The **PCG Module** collected supplemental information about the PCG herself as well as information about parenting that does not pertain to a particular child (e.g., whether the family eats dinner together). The Adult Module is the primary source of information about each PCG herself, but the PCG Module provides information about the PCG’s self-esteem, partner relations, etc.
6. The **Child Module** collects information from sampled children about themselves. However, because children were reporting on themselves, they had to be old enough to do so. Thus, only children 9 years of age and older (and ≤ 17 years) who agreed to be interviewed completed the Child Module. Note that there is no Child Module for “aged up” panel RSCs/SIBs who are 18 years of age and older.
7. L.A.FANS-2 also included a **Health Assessment Module** for sampled children and adults.

Differences between L.A.FANS Wave 1 and Wave 2 Questionnaires

The questionnaires in Waves 1 and 2 were quite similar in their functions, uses, and questions included. Table 2.2 summarizes the main differences between the questionnaires. To simplify the use of questionnaires across the two waves, we attempted to use the same question numbers for the same items in each wave. However, users are cautioned to compare the versions of the question or question sequence included in each questionnaire themselves before use.

Table 2.2. Differences between L.A.FANS Wave 1 and Wave 2 Questionnaires

Module/Section	General Description	Major Differences in Wave 2
W1 Roster/ W2 Current Roster		
Section A	Household member list, eligibility, and parents of children under 18 years	Order of some of the questions changed. For example, age (RA4a) is now asked earlier in the module. RA8 is a new question. <u>Added</u> RA10bline, RA11A_mom, RA11A_momline, RA11A_dad, RA11A_dadline, RA35a, RA38a, RA43.
Section B	Background of household members	<u>Added</u> RB8–RB12 to identify those eligible to be selected as new entrants.
Section C	Home language	<u>Added</u> RC4 on language residents speak to each other.
W2 Update Roster		
		New in W2. Collects location information and some characteristics for W1 Rs who are not full-time residents of the current household.
Adult Module		
Section A	Check on respondent identification information	Additional identifying information for panel respondents.
Section B	Neighborhood description	<u>Dropped</u> items on neighborhood name (AB3), friendliest neighbor (AB13–14), emergency food and homeless shelters (AB17–25), time spent away from home and (AB27–29). <u>Added</u> items for panel Rs <i>only</i> on retrospective neighborhood perceptions (AB30–42).
Section C	Family background	<u>Added</u> items on immigration (AC36-c–36-d, AC37A–37C, AC44–49, AC37 wording changed), language use (AC51–58e), and preference neighborhood racial composition (AC60–61).
Section D	Educational history	<u>Added</u> section for panel respondents (AD26–58), section for panel RSCs and SIBs (≥18) including PSAT/SAT scores (AD63–86), item on total family income (AD90–94).
Section E	Marriage/cohabitation and fertility history	New entrants complete marriage/cohab. history for past 72, rather than 24, months. <u>Dropped</u> attitudes about fertility (AE92). <u>Added</u> SAQ section for young adults (AE68B–68L, AE183–193), age at first sex and contraception (AE68M–68P, AE194–196), marriage/cohab. section for panel Rs (AE100–181), fertility history update for panel Rs (AE200–233).
Section F	Spouse/partner proxy questions	<u>Added</u> profit/loss from business (AF10A), additional characteristics (AF14–22).
Section G	Social ties	<u>Added</u> items on survival, age at death and cause of death for parents (AG1–1f), survival of stepparents (AG2a), new siblings for panel Rs (AG6C–D), and discrimination (AG21–29).
Section HA	Preparation for EHC	New section verifying info going into EHC.
Section H	EHC	Covers period since W1 for panel Rs or 6 years for new entrants. <u>Added</u> questions to employment domain on whether employer offers health insurance and on salary brackets for those who could not report a specific amounts, plus flags in all domains for parts of dates that were estimates.
Section HB	Follow-up on EHC	New section that verifies current status information from EHC.
Section J	Residential follow-up	<u>Added</u> section for panel Rs (AJ12–18).
Section K	Employment follow-up	<u>Added</u> items on contact with other ethnic groups (AK17–18).
Section L	Welfare follow-up	<u>Dropped</u> items on CalWORKS requirements (AL4–8, AL13–22).
Section YA	Young adults section	New self-administered section for young adults (including RSCs and

Module/Section	General Description	Major Differences in Wave 2
		SIBs≥18) adapted from items from Child Module on arrest, incarceration, drug and alcohol use.
Section M	Health status	<u>Dropped</u> general attitudes (AM33). <u>Added</u> attitudes about teens (AM34), self-rated health at W1 (AM26), management of chronic disease (AM4b1–4i4), age quit smoking (AM10B), diet/exercise (AM35–46), detailed self-reported health and vignettes (AM48–59B). CIDI Depression Inventory in Adult instead of PCG Module.
Section N	Contact information	AN9 wording changed and AN10 dropped. Wording on other questions changed from “in the next year” to “in the next few years.”
Parent Module		
Section A	Relationship check	<u>Added</u> age, birthdate, living arrangements and other reconciliation questions for <i>panel</i> RSCs and SIBs (PA9–PA23).
Section B	Living arrangements	Same in both waves.
Section C	Residential history	In W1 covers only previous 2 years. In W2 covers the period since birth for both panel and new entrant RSC/SIBs.
Section D	Place of birth and immigrant status	PD1 not asked for panel Rs for whom info collected in W1. <u>Added</u> immigrations questions (PD5–PD8).
Section E	Child support, paternity, contact with absent parent, father involvement	<u>Added</u> PEX1B–1P to clarify PCG-child relationship and characteristics of child’s parents. And PE61–62 to clarify immigration status of absent parents.
Section F	School	<u>Added</u> PF7X, PF7A–PF7C to clarify home-schooling, and questions on all schools attended since age 5 for panel & new entrant RSC/SIB.
Section G	Child care, before/after school care, & early childhood education	<u>Added</u> PG2B on likelihood would have used child care.
Section H	Social/behavior dev. & HOME scale	Same in both waves.
Section J	RSC’s sibs (if PCG is not the mother)	<u>Dropped</u> PJ9–PJ10 on where sibling lives.
Section K	Child health	<u>Added</u> PK1B for report of child’s health at W1. <u>Dropped</u> PK7–PK9 on hospitalization. <u>Added</u> PK10A–PK10H for additional information on asthma. <u>Added</u> items in PK12 on allergies and heart condition; PK21 was split into two sets of questions asking separately about (a) illness or injury and (b) a check up. <u>Dropped</u> PK26 on immunization and PK27e–k. <u>Added</u> PK29–PK30 on exercise.
PCG Module		
Section A	CIDI depression invent.	Entire section moved to Adult Module.
Section B	Self-assessment	Same in both waves.
Section C	Family routines	<u>Dropped</u> GC10–GC13 on drug use.
Section D	Social support	Same in both waves.
Section E	Relationship with spouse or partner	Same in both waves.
Section F	Home characteristics	New section in W2 related to indoor air pollution.

Module/Section	General Description	Major Differences in Wave 2
Household Module		
Section A	Family income and assets	<p><u>Added</u> unfolding brackets for many questions on amounts. Some categories regrouped for HA15.</p> <p><u>Added</u> HA20a, HA27a and HA48a for clarification; HA24a1–HA24a1d on amount left on mortgage; HA25a1–HA25a2d on inheriting or receiving house as a gift; HA98a1–HA98a2c on other debts.</p>
Child Module		
Section A	Younger children (ages 9–11 years)	<u>Added</u> CA36 on ethnicity of friends.
Section B	Older children (ages 12–17 years)	<u>Added</u> CB10A on where does homework; CB12A–CB12J and CB16A–CB16J on SAT/PSAT and talk about college; CB106 on ethnicity of friends; CB107–CB109B about parent attitudes; CB110–CB114 on diet; CB115 on vigorous physical activity.
Household Observation Module		Same in both waves. Interviewer observations on the household physical environment and child-respondent interactions.

Los Angeles Family and Neighborhood Survey, Wave 2 (L.A.FANS-2)

ROSTER MODULE

Notes

- This is the first questionnaire administered in each panel or sampled New Entrant household.
- Roster respondent can be any adult age 18 and older who lives in the household. If multiple adults are available in a given HH, preference should be given in choosing the roster respondent to the W1 RSA and PCG. If neither is available, preference should be given to the W1 RSC (if ≥ 18) and SIB (if ≥ 18), if available. Otherwise interview any available adult.
- Set UR and CR indicators for whether Update roster and Current roster are to be done. We need a flag in the Current Roster that indicates whether or not each individual is also listed in the Update Roster or not.

Preloads

- Wave 1 Roster (names, sexes, roster ids, FT / PT resident status, ages, and birthdates where available of all residents from W1 roster; flags for whether person was RSA, RSC, SIBW1, PCGW1, or other). Note roster list should also include any new names (i.e., name changes) we know about from the ITS or tracing operations as well as original W1 names
- Whether sampled RSA, RSC, PCGW1, or SIBW1 were interviewed in W1
- Type of household (from case management system). See list for types of household in question R-UA1 below

Lists created during update roster

- Current roster list (The current roster list is a list of all current residents in the HH. For panel HHs, panel respondents will be placed on the current roster list if they currently live in the HH.)
- Missing person list
- Deceased person list

Questionnaire formatting key

- **Black bold**: Question numbers
- Black normal: Interviewer to read question text
- BLACK UPPER CASE: Interviewer and programming instructions
- ***BLACK BOLD ITALIC UPPER CASE***: Comments

PART I: UPDATE ROSTER

SECTION UPDATE X. FINDING ROSTER RESPONDENT

***START HERE FOR ALL HOUSEHOLDS, REGARDLESS OF HH TYPE
QUESTIONS FOR SELECTION OF APPROPRIATE ROSTER RESPONDENT AT THE DOORSTEP***

RX1. Are you at least 18 years or older?

- 1. YES
- 5. NO (GO TO RX1b)

RX1a. And do you live at this address more than half the time?

- 1. YES (GO TO ROBS1)
- 5. NO (GO TO RX1b)

RX1b. Is there someone available I can speak to who is over 18 years old and lives here at least half the time?

- 1. YES, AND IS AVAILABLE TO SPEAK TO (GO TO RX1)
- 2. YES, BUT PERSON IS NOT AVAILABLE NOW (GO TO RX1c)
- 3. NO, NO ONE OVER 17 IN THE HOUSEHOLD FULL TIME (GO TO RX1d)

RX1c_1. When would be a good time to reach that person?

INTERVIEWER: RECORD DATE AND TIME (ON PAPER)

RX1d. I have recorded that no one 18 or older lives in this household at least half the time. Is that correct?

- 1. YES
- 5. NO

RX1e. Can I speak to the oldest person who lives in this household at least half the time?

- 1. YES
- 5. NO (GO TO RX1c_2)

RX1c_2. When would be a good time to reach that person?

INTERVIEWER RECORD DATE AND TIME. TERMINATE INTERVIEW.

RX1f. How old are you?

INTERVIEWER: IF THIS PERSON IS OVER 18 RETURN TO RX1 AND START OVER OR IF PERSON IS NOT 18 THEN RETURN TO RX1F AND ENTER CORRECT AGE.

RX1g. Do you live at this address more than half the time?

- 1. YES (GO TO ROBS1)
- 5. NO

SECTION UPDATE ROBS. INTERVIEWER OBSERVATIONS OF RESPONDENT

ROBS1. INTERVIEWER OBSERVATION: CODE WHAT RACE OR RACES YOU WOULD SAY THE RESPONDENT IS IF YOU DID NOT KNOW ANYTHING ABOUT HIM / HER

DO NOT ASK RESPONDENT FOR INFORMATION OR HELP!! CODE ALL THAT APPLY.

1. LATINO
2. WHITE
3. AFRICAN-AMERICAN, BLACK
4. ASIAN
5. PACIFIC ISLANDER
6. NATIVE AMERICAN / AMERICAN INDIAN

ROBS1A. CHECK ROBS1:

IF ROBS1=ONE RESPONSE CODE CHECKED, GO TO R_UA1
 IF ROBS1=MORE THAN ONE RESPONSE CHECKED, CONTINUE

ROBS2. INTERVIEWER OBSERVATION: CODE WHAT SINGLE RACE OR GROUP YOU WOULD SAY BEST DESCRIBES THE RESPONDENT IF YOU DID NOT KNOW ANYTHING ABOUT HIM / HER

DO NOT ASK RESPONDENT FOR INFORMATION OR HELP!! CODE ONLY ONE.

1. LATINO
2. WHITE
3. AFRICAN-AMERICAN, BLACK
4. ASIAN
5. PACIFIC ISLANDER
6. NATIVE AMERICAN / AMERICAN INDIAN

SECTION UPDATE A. DETERMINE WHICH ROSTER SECTIONS ARE TO BE COMPLETED

R_UA1. WHAT TYPE OF HOUSEHOLD IS THIS?

1. PANEL HOUSEHOLD (RSA, RSC, OR SIB LIVE HERE) AT W1 ADDRESS OR ELSEWHERE IN ANY OF THE 65 TRACTS SAMPLED FOR W1 (SET UR=1 AND CR=1)
2. PANEL HOUSEHOLD (RSA, RSC, OR SIB LIVE HERE) NOT LOCATED IN ONE OF THE 65 SAMPLED TRACTS (SET UR=1 AND CR=1)
3. NEW ENTRANT HOUSEHOLD IN W1 TRACT (INCLUDES COMPLETE TURNOVERS, NEW CONSTRUCTION, W1 REFUSALS, AND W1 VACANT) (SET UR=0 AND CR=1)

R_UA2. LANGUAGE OF ROSTER INTERVIEW

1. ENGLISH
2. SPANISH

R_UA3_1. Before we get started, may I have your full name?

GIVEN NAME(S): _____ MIDDLE NAME: _____ FAMILY NAME(S): _____ SUFFIX: _____

R_UA4. INTERVIEWER CHECK: RESPONDENT IS:

1. MALE
2. FEMALE

R_UA5. CAPI CHECK R_UA1:

1. THIS IS A PANEL HOUSEHOLD (i.e., R_UA1=1 OR R_UA1=2)
2. THIS IS NOT A PANEL HOUSEHOLD (i.e., R_UA1=3) (GO TO R_UA15)

R_UA6. CAPI INSTRUCTION: DISPLAY W1 ROSTER NAMES, IDS, SEXES, AND ESTIMATED CURRENT AGES AND R_UA3 AND R_UA4

R_UA6line. INTERVIEWER: CHECK LIST OF W1 ROSTER NAMES. IS THERE OBVIOUS MATCH BETWEEN NAME IN R_UA3 AND NAME AND SEX ON W1 ROSTER LIST?

1. YES (INTERVIEWER: ENTER ID MATCHING ID NUMBER FROM W1 ROSTER LIST): _____ (ID)
5. NO (GO TO R_UA12)

R_UA12. Could you have used a different name in [W1 INTERVIEW MONTH AND YEAR]?

[IF FEMALE, PROBE: Perhaps a maiden name or another married name?]

1. YES
5. NO (GO TO R_UA15) (CODE AS A NON-MATCH TO THE W1 ROSTER. PUT NAME IN CURRENT ROSTER AND CODE NEWMEMBER=1)

R_UA13. What name or names would you have used?

PROBE: Are there any other names you might have used?

INTERVIEWER: RECORD ALL NAMES

R_UA14line. INTERVIEWER: COMPARE NAMES TO W1 ROSTER NAMES

1. A NAME GIVEN IN R_UA13 MATCHES OR IS SIMILAR TO A W1 ROSTER NAME, RECORD ID OF THIS POTENTIAL MATCH _____ (ID) (GO TO R_UA7)
0. NO NAME IS SIMILAR (CODE AS A NON-MATCH TO THE W1 ROSTER. PUT NAME IN CURRENT ROSTER AND CODE NEWMEMBER=1)

R_UA14name. YOU JUST RECORDED THAT [R_UA14LINE] IS THE RESPONDENT. IS THIS CORRECT?

1. YES
5. NO

QUESTIONS TO ENSURE THAT ROSTER RESPONDENT IS THE SAME PERSON INTERVIEWER HAS IDENTIFIED IN W1 ROSTER LIST

R_UA7. In [W1 INTERVIEW MONTH AND YEAR], we interviewed you or others who lived with you. At that time you were about [AGE AT W1] which would make you about [CALCULATED CURRENT AGE] now. Is that correct?

1. YES, CORRECT AGE
5. NO, NOT CORRECT AGE (GO TO R_UA9)

REFUSALS GO TO R_UA9

R_UA8. And at that time, you were [W1 MARITAL STATUS] and had completed [W1 YEARS AND LEVEL OF SCHOOL COMPLETED]. Is that right?

1. YES (CODE AS MATCH, ENTER ROSTER RESP. IN UPDATED ROSTER AND IN CURRENT ROSTER AND GO TO R_UA15)
5. NO (GO TO R_UA11)

R_UA9. To make sure my information is correct, what is your birthdate?

DAY _____, MONTH _____, AND YEAR _____

REFUSALS GO TO R_UA11

R_UA9a. We need an idea of your age. Can you tell me what age you are?

R_UA10. CAPI CHECK: USE R_UA9 AND W1 INTERVIEW DATE TO CALCULATE AGE AT W1:

1. ABSOLUTE VALUE OF CALCULATED AGE MINUS W1 ROSTER AGE <=2 YEARS (GO TO R_UA15)
2. ABSOLUTE VALUE OF CALCULATED AGE MINUS W1 ROSTER AGE > 2 YEARS

R_UA11. At that time in [W1 INTERVIEW MONTH AND YEAR], there was someone living in the household named [W1 MATCH NAME] who was [W1 MATCH AGE], was [W1 MARITAL STATUS], and had completed [W1 YEARS AND LEVEL OF SCHOOL COMPLETED]. Are you related to this person? How?

RECORD VERBATIM RESPONSE: _____

R_UA11ck. INTERVIEWER CHECK: DID RESPONDENT SAY HE / SHE IS THE PERSON DESCRIBED IN R_UA11?

GO TO R_UA15 (CODE AS A NON-MATCH TO THE W1 ROSTER. PUT NAME IN CURRENT ROSTER AND CODE NEWMEMBER=1)

R_UA15. CAPI CHECK:

1. UR=1
2. UR NE 1 (GO TO CURRENT ROSTER RA1b)

SECTION UPDATE B. FIND HOUSEHOLD MEMBERS FROM W1 INTERVIEW

R_UB1. CAPI CHECK:

1. RESPONDENT WAS ON HH ROSTER AT THE TIME OF W1
2. RESPONDENT WAS NOT ON HH ROSTER AT THE TIME OF W1

R_UB2. IF R_UB1=1: I would like to ask you about all the people who were living or staying with you in [WAVE 1 INTERVIEW MONTH AND YEAR] when we last interviewed your household.

IF R_UB1=2: I would like to ask you about all the people who were living or staying with [IF THERE WAS AN RSA, FILL "[RSA NAME]"] [IF THERE WAS A PCGW1, FILL "and [PCGW1 NAME]"] [IF THERE WAS AN RSC, FILL "and [RSC NAME]"] in [MONTH AND YEAR OF WAVE 1 INTERVIEW].

CAPI INSTRUCTION: LOOP THROUGH FOR EACH PERSON [X=1 TO 22] ON W1 ROSTER.

R_UB2A. CAPI CHECK:

1. PERSON X IS ROSTER RESPONDENT (GO TO R_UB31)
2. PERSON X IS NOT ROSTER RESPONDENT

FIND OUT WHICH W1 RESPONDENTS LIVE HERE

R_UB3. The [first / next] person is [PERSON X] and [he / she] should be about [ESTIMATED WAVE 2 AGE] years old now. Does [he / she] live or stay here with you now?

1. YES, LIVES HERE PUT PERSON X ON CURRENT ROSTER
5. NO (GO TO R_UB4)
6. NEVER HEARD OF THIS PERSON (PUT PERSON X ON MISSING PERSONS LIST AND GO TO R_UB31)
9. PERSON DIED (CODE AS DECEASED ON ROSTER, ADD TO DECEASED PERSONS LIST) (GO TO R_UB31)

R_UB3a. Does [PERSON X] live here full time or part time? Full-time means at least half of the time. Part-time means less than half of the time?

1. FULL-TIME RESIDENT OF HHL D (PUT PERSON X ON CURRENT ROSTER, GO TO R_UB3a)
2. PART-TIME RESIDENT OF HHL D (PUT PERSON X ON CURRENT ROSTER)

FOR W1 HH MEMBERS WHO DO NOT LIVE HERE AT ALL OR WHO ARE PART-TIME RESIDENTS BUT WERE FULL-TIME W1 RESIDENTS

R_UB4. CAPI CHECK:

1. PERSON X IS W1 RSA, RSC, PCGW1, OR SIB
3. PERSON X NOT W1 RESPONDENT (GO TO R_UB31)

FOR W1 RESPONDENTS WHO DO NOT LIVE HERE AT ALL OR WHO ARE PART-TIME RESIDENTS

R_UB5. Where does [PERSON X] live or stay [most of the time]? What city and state?

IF NOT IN THE U.S.: What state or province and country?

1. CITY _____ STATE / PROVINCE _____ COUNTRY _____
2. DON'T HAVE ANY INFORMATION WHERE PERSON X IS (CODE AS MISSING ON THE UPDATE ROSTER, ADD TO MISSING PERSONS LIST. IF A1=1 GO TO R_UB12. IF A1=2 GO TO R_UB11)
3. NEVER HEARD OF PERSON X (CODE AS MISSING ON THE ROSTER, ADD TO MISSING PERSONS LIST AND GO TO R_UB31)
4. PERSON X DIED (CODE AS DECEASED ON ROSTER, ADD TO DECEASED PERSONS LIST) (GO TO R_UB31)
5. SAME ADDRESS AS PREVIOUS W1 HH MEMBER (ON LIST ABOVE) (GO TO R_UB8)
6. SAME CITY AS PREVIOUS W1 HH MEMBER (ON LIST ABOVE)
- 2. REFUSED (CODE AS MISSING ON THE ROSTER, ADD TO MISSING PERSONS LIST. IF A1=1 GO TO R_UB12. IF A1=2 GO TO R_UB11)

R_UB6. Do you have an address and phone number for [PERSON X]? Any other phone numbers, such as their number at work or a cell phone number? Do you have an e-mail address? How about a zip code (or postal code if outside the U.S.)?

1. HAVE CONTACT INFORMATION: RECORD ADDRESS, TELEPHONE NUMBERS, E-MAIL
2. SAME AS ANOTHER HOUSEHOLD MEMBER'S ADDRESS PREVIOUSLY RECORDED. WHICH RESPONDENT? RECORD ID NUMBER AND NAME. (GO TO R_UB8)
3. PRISON / JAIL, INCARCERATED
4. IN INSTITUTION

R_UB6x. When do you expect [PERSON X] to be released from [JAIL NAME / INSTITUTION NAME]?

1. RESPONDENT GIVES A DATE
2. RESPONDENT SAYS PERSON X WILL NEVER BE RELEASED

R_UB7. What is the best way to contact [PERSON X]?

1. HOME PHONE
2. HOME E-MAIL
3. AT WORK PHONE: _____
4. AT WORK E-MAIL: _____
5. CELL PHONE
6. BY MAIL
7. IN PERSON
8. OTHER: _____
9. SAME AS PREVIOUS PERSON

UB8. CAPI CHECK:

1. R_UA1=1 (PANEL HH IN W1 TRACT) (GO TO R_UB12)

2. R_UA1=2 AND THERE IS AN ADDRESS IN R_UB5 / R_UB6 (PANEL HH IN NON-W1 TRACT)
3. R_UA1=2 AND NO ADDRESS REPORTED IN R_UB5 / R_UB6 (GO TO R_UB11)
4. R_UB6=3 OR R_UB6=4

CHECK THE POSSIBILITY THAT PERSON X STILL LIVES IN W1 DWELLING

R_UB9. INTERVIEWER: COMPARE ADDRESS IN R_UB5 / R_UB6 WITH W1 ADDRESS.

1. ADDRESS IS THE SAME OR MAY BE THE SAME AS W1 ADDRESS
2. ADDRESS IS DIFFERENT (GO TO R_UB11)

R_UB10. Just to make sure my information is correct. This address [PERSON X] now lives at [most of the time], [ADDRESS FROM R_UB5 / R_UB6] is the same address [he / she] lived at in [W1 INTERVIEW MONTH AND YEAR]. Is that correct?

1. YES (GO TO R_UB20)
5. NO

WHEN MOVED FROM W1 ADDRESS

R_UB11. When was the last time [PERSON X] lived at [W1 ADDRESS]?

1. DATE: MONTH _____ DAY _____ YEAR _____
2. _____ MONTHS / YEARS AGO
3. NEVER LIVED THERE (GO TO R_UB20)
- 1. DON'T KNOW (GO TO R_UB12A)
- 2. REFUSED (GO TO R_UB12A)

R_UB11a. Why did [PERSON X] move away from that address?

RECORD VERBATIM RESPONSE: _____ (GO TO R_UB20)

WHEN HH MEMBER MOVED FROM HH IN W1 TRACT

R_UB12. When was the last time [PERSON X] lived here at this address [full time]?

1. DATE: MONTH _____ YEAR _____ (GO TO R_UB12E)
2. _____ MONTHS / YEARS AGO (GO TO R_UB12E)
3. NEVER LIVED HERE (GO TO R_UB20)
4. SAME AS OTHER W1 HOUSEHOLD MEMBER

R_UB12_name. INTERVIEWER: YOU JUST ENTERED THAT [NAME FROM R_UB12] LAST LIVED AT THIS ADDRESS ON THE SAME DATE AS PERSON X. IS THIS CORRECT? IF NOT GO BACK TO R_UB12 AND ENTER CORRECT ID.

R_UB12a. Was it more than three years ago, that is before [MONTH AND YEAR THREE YEARS AGO], less than three years ago, or what?

1. MORE THAN THREE YEARS AGO (GO TO R_UB12D)
2. LESS THAN THREE YEARS AGO
3. ABOUT THREE YEARS AGO (GO TO R_UB12E)
4. IT WAS _____ MONTHS AGO OR _____ YEARS AGO (GO TO R_UB12E)

R_UB12b. Was it more than a year ago, that is before [MONTH AND YEAR 12 MONTHS AGO], less than a year ago, or what?

1. MORE THAN A YEAR AGO (GO TO R_UB12E)
2. LESS THAN A YEAR AGO
3. ABOUT A YEAR AGO (GO TO R_UB12E)

4. IT WAS _____ MONTHS AGO OR _____ YEARS AGO (GO TO R_UB12E)

R_UB12c. Was it more than six months ago, that is before last [MONTH SIX MONTHS AGO], less than six months ago, or what?

1. MORE THAN SIX MONTHS AGO
5. LESS THAN SIX MONTHS AGO
3. ABOUT SIX MONTHS AGO
4. IT WAS _____ MONTHS AGO OR _____ YEARS AGO

ALL GO TO R_UB12E

R_UB12d. Was it more than five years ago, that is before [MONTH AND YEAR FIVE YEARS AGO], less than five years ago, or what?

1. MORE THAN FIVE YEARS AGO
2. LESS THAN FIVE YEARS AGO
3. ABOUT FIVE YEARS AGO
4. IT WAS _____ MONTHS AGO OR _____ YEARS AGO

R_UB12e. Why did [PERSON X] [move away from this address / stop living here full time]?

RECORD VERBATIM RESPONSE: _____ (GO TO R_UB20)

R_UB13–R_UB18d DROPPED

CHARACTERISTICS QUESTIONS ASKED ONLY FOR W1 RESPONDENTS (RSA, RSC, PCGW1, SIBW1) WHO ARE NOT IN THE CURRENT HH

R_UB20. IS [PERSON X] THE RSA, RSC, PCGW1 OR SIBW1?

1. YES
5. NO (GO TO R_UB31)

R_UB21. Has [PERSON X] changed [his / her] name or does [he / she] sometimes use another name?

1. CHANGED NAME OR USES ANOTHER NAME
2. USES ONLY [PERSON X]

R_UB22. How old is [PERSON X] now?

1. _____ YEARS

IF R_UB22 >=15 OR R_UB22=8 OR R_UB22=9 CONTINUE
ELSE IF W2 IMPLIED AGE IS >=15 CONTINUE,
ELSE GO TO R_UB15

R_UB23. Is [he / she] currently married, separated, divorced, widowed or never legally married?

1. CURRENTLY MARRIED (GO TO R_UB25)
2. SEPARATED
3. DIVORCED
4. WIDOWED
5. NEVER LEGALLY MARRIED

R_UB24. Is [he / she] currently living in a relationship with a partner, girlfriend or boyfriend?

1. YES
5. NO

R_UB25. Has [he / she] ever had any children?

- 1. YES
- 5. NO

R_UB26. Who does [PERSON X] live with?

MARK ALL THAT APPLY

- 1. LIVES ALONE
- 2. LIVES WITH SPOUSE / PARTNER
- 3. LIVES WITH OWN CHILDREN
- 4. LIVES WITH OTHER RELATIVES
- 5. LIVES WITH NON-RELATIVES, ROOM MATES, FRIENDS
- 88. REFUSED
- 99. DOES NOT KNOW WITH WHOM PERSON LIVES

IF R_UB22 >=5 CONTINUE

ELSE IF W2 IMPLIED AGE IS >=5 CONTINUE

ELSE GO TO R_UB29

R_UB27. How much school has [PERSON X] completed?

INTERVIEWER NOTE: FOR THOSE CURRENTLY IN SCHOOL, THIS DOES NOT INCLUDE THE CURRENT YEAR OF SCHOOL, UNLESS IT IS ALREADY COMPLETED

- 0. NONE
- 1. to 11. _____ (GRADE 1 THROUGH 11)
- 12. HIGH SCHOOL GRADUATE OR COMPLETED GED
- 13. SOME VOCATIONAL SCHOOL
- 14. COMPLETED VOCATIONAL SCHOOL
- 15. SOME COLLEGE
- 16. ASSOCIATES' DEGREE (AA)
- 17. BACHELORS' DEGREE (BA, BS)
- 18. SOME GRADUATE OR PROFESSIONAL SCHOOL (AFTER COMPLETING COLLEGE)
- 19. COMPLETED GRADUATE / PROFESSIONAL DEGREE

R_UB28. Is [PERSON X] currently in school?

- 1. YES
- 5. NO

R_UB29. CAPI CHECK

- 1. IF R_UB22 >=16 OR W2 IMPLIED AGE IS >=16
- 2. OTHER (GO TO R_UB31)

R_UB30. Does [PERSON X] currently have a paid job?

- 1. YES
- 5. NO

R_UB31. END OF LOOP. START LOOP AGAIN AT R_UB2A WITH NEXT PERSON ON W1 ROSTER LIST. AFTER LOOP IS COMPLETE GO TO SECTION C

SECTION UPDATE C. ADDITIONAL INFORMATION ON DECEASED PERSONS

R_UC1. CAPI CHECK: ANYONE ON DECEASED LIST?

1. YES
5. NO (GO TO SECTION D)

R_UC2. CAPI INSTRUCTION: LOOP THROUGH R_UC3 TO R_UC14 FOR EACH PERSON ON DECEASED LIST

FOR ALL DECEASED PERSONS FROM W1 HH

R_UC3. You mentioned that [DECEASED NAME] is no longer alive. Could you tell me, when did [he / she] die?

INTERVIEWER: TRY TO GET AS MUCH INFORMATION ON DEATH DATE OF THE PERSON

1. DAY _____ MONTH _____ YEAR _____ (GO TO R_UC4)

R_UC3a. Was it more than three years ago, that is before [MONTH AND YEAR THREE YEARS AGO], less than three years ago, or what?

1. MORE THAN THREE YEARS AGO (GO TO R_UC3D)
2. LESS THAN THREE YEARS AGO
3. ABOUT THREE YEARS AGO (GO TO R_UC4)
4. NUMBER OF MONTHS OR YEARS AGO GIVEN (GO TO R_UC4)
- 1. DOESN'T KNOW THE PERSON, NEVER HEARD OF PERSON

R_UC3b. Was it more than a year ago, that is before [MONTH AND YEAR ONE YEAR AGO], less than a year ago, or what?

1. MORE THAN A YEAR AGO (GO TO R_UC4)
2. LESS THAN A YEAR AGO
3. ABOUT A YEAR AGO (GO TO R_UC4)
4. NUMBER OF MONTHS OR YEARS AGO GIVEN (GO TO R_UC4)
- 1. DOESN'T KNOW THE PERSON, NEVER HEARD OF PERSON

R_UC3c. Was it more than six months ago, that is before [MONTH SIX MONTHS AGO], less than six months ago, or what?

1. MORE THAN SIX MONTHS AGO
2. LESS THAN SIX MONTHS AGO
3. ABOUT SIX MONTHS AGO
4. NUMBER OF MONTHS OR YEARS AGO GIVEN
- 1. DOESN'T KNOW THE PERSON, NEVER HEARD OF PERSON

ALL GO TO R_UC4

R_UC3d. Was it more than five years ago, that is before [MONTH AND YEAR FIVE YEARS AGO], less than five years ago, or what?

1. MORE THAN FIVE YEARS AGO
2. LESS THAN FIVE YEARS AGO
3. ABOUT FIVE YEARS AGO
4. IT WAS _____ MONTHS AGO OR _____ YEARS AGO

R_UC4. CAPI CHECK:

1. THIS IS A W1 DWELLING
2. THIS IS NOT A W1 DWELLING (GO TO R_UC6)

R_UC5. Did [he / she] live here in this household at the time [he / she] died?

1. YES

5. NO

GO TO R_UC7

R_UC6. Did [he / she] live on [W1 STREET] in [W1 CITY] when [he / she] died?

1. YES
5. NO

R_UC7. CAPI CHECK:

1. [DECEASED NAME] IS RSA, RSC, PCGW1 OR SIBW1
2. [DECEASED NAME] IS NOT RSA, RSC, PCGW1 OR SIBW1 (GO TO R_UC14)

R_UC8. CAPI CHECK:

1. R_UC5=1 OR R_UC6=1 (GO TO R_UC11)
2. OTHER

R_UC9. When did [DECEASED NAME] [stop living here with you / stop living at W1 ADDRESS]? What month and year?

1. MONTH _____ YEAR _____

R_UC10. Where was [DECEASED NAME] living at the time of [his / her] death?

1. CITY: _____ STATE: _____ COUNTRY: _____
2. SAME ADDRESS AS PREVIOUS PERSON X: _____ ID NUMBER _____ NAME _____

R_UC11. Did [DECEASED NAME] die in the same city and state [he / she] lived in or somewhere else?

1. SAME CITY, STATE, AND COUNTRY
2. SOMEWHERE ELSE: CITY _____ STATE _____ COUNTRY _____

R_UC12. What was [DECEASED NAME] father's last name?

1. FATHER'S NAME _____

R_UC12a. What was [DECEASED NAME]'s date of birth?

PROBE: Do you know the month and the year of birth?

- DAY: _____ MONTH: _____ YEAR: _____

R_UC13. Can you give me [DECEASED NAME]'s Social Security Number?

1. YES, IT'S _____

R_UC14. GO TO NEXT PERSON ON DECEASED LIST. IF NO ONE ELSE ON THE LIST GO TO SECTION D.

SECTION UPDATE D. MISSING PERSON INFORMATION

R_UD1. CAPI CHECK: ANY ONE ON THE MISSING PERSONS LIST?

1. YES
5. NO (GO TO CURRENT ROSTER R-UA1a)

R_UD2. CAPI CHECK:

1. [MISSING PERSON X] IS RSA, RSC, PCGW1 OR SIB
2. [MISSING PERSON X] IS NOT RSA, RSC, PCGW1 OR SIB

GO TO R_UD13

R_UD2a. CAPI CHECK:

1. R HAS HEARD OF [MISSING PERSON X]
2. R HAS NOT HEARD OF [MISSING PERSON X] (GO TO R_UD11)

R_UD3. When we interviewed [MISSING PERSON X] [IF PERSON X=RSC OR SIBW1 AND WAS <9 YEARS OLD AT W1 INTERVIEW, FILL "or his parent or guardian"] in [YEAR OF W1 INTERVIEW], [he / she] agreed to be interviewed again in the future. Do you have any information on how to get in touch with [MISSING PERSON X] or where he or she may be?

PROBE: Please remember that we will keep this information strictly confidential.

1. HAVE CONTACT INFORMATION
ADDRESS: _____ APT.: _____
CITY: _____ STATE: __ ZIP / POSTCODE: _____
COUNTRY _____
HOME TEL.: _____ WORK TEL.: _____ CELL PHONE: _____
HOME E-MAIL: _____ WORK E-MAIL: _____
2. SAME AS ANOTHER HOUSEHOLD MEMBER'S ADDRESS PREVIOUSLY RECORDED. WHICH RESPONDENT? _____ ID NUMBER _____ NAME _____
3. PRISON / JAIL, INCARCERATED (GO TO R_UD3x)
4. IN INSTITUTION (GO TO R_UD3x)
5. PERSON IS DEAD
-1. DON'T KNOW (GO TO R_UD5)

R_UD3x When do you expect [MISSING PERSON X] to be released from [JAIL NAME]?

1. RESPONDENT GIVES A DATE: Month _____ Year _____
2. RESPONDENT SAYS PERSON WILL NEVER BE RELEASED

R_UD4. What is the best way to contact [MISSING PERSON X]?

1. HOME PHONE _____
2. HOME E-MAIL _____
3. AT WORK PHONE _____
4. AT WORK E-MAIL _____
5. CELL PHONE _____
6. BY MAIL _____
7. IN PERSON
8. DOESN'T KNOW THE PERSON, NEVER HEARD OF PERSON (GO TO R_UD11)
9. OTHER _____
10. SAME AS A PREVIOUS HOUSEHOLD MEMBER'S, ID _____

R_UD5. CAPI CHECK:

1. THIS IS A W1 DWELLING
2. THIS IS NOT A W1 DWELLING (GO TO R_UD8)

R_UD6. When was the last time [MISSING PERSON X] lived at this address?

1. DATE: MONTH _____ DAY _____ YEAR _____ (GO TO R_UD7)
2. _____ MONTHS / YEARS AGO (GO TO R_UD7)
3. NEVER LIVED THERE (GO TO R_UD10)

4. DOESN'T KNOW THE PERSON, NEVER HEARD OF PERSON (GO TO R_UD11)
5. SAME DATE RECORDED FOR PREVIOUS PERSON. WHICH RESPONDENT?
ID _____ NAME _____

INTERVIEWER: ENTER ROSTER ID OF PERSON WHO MOVED ON THE SAME DATE / ID OF PERSON WITH SAME DATE

R_UD6a. Was it more than three years ago, that is before [MONTH AND YEAR THREE YEARS AGO], less than three years ago, or what?

1. MORE THAN THREE YEARS AGO (GO TO R_UD6D)
2. LESS THAN THREE YEARS AGO
3. ABOUT THREE YEARS AGO (GO TO R_UD7)
4. IT WAS _____ MONTH AND / OR _____ YEARS AGO (GO TO R_UD7)
5. DOESN'T KNOW THE PERSON, NEVER HEARD OF PERSON (GO TO R_UD11)

R_UD6b. Was it more than a year ago, that is before [MONTH 12 MONTHS AGO], less than a year ago, or what?

1. MORE THAN A YEAR AGO (GO TO R_UD7)
2. LESS THAN A YEAR AGO
3. ABOUT A YEAR AGO (GO TO R_UD7)
4. IT WAS _____ MONTH AND / OR _____ YEARS AGO (GO TO R_UD7)
5. DOESN'T KNOW THE PERSON, NEVER HEARD OF PERSON (GO TO R_UD11)

R_UD6c. Was it more than six months ago, that is before [MONTH SIX MONTHS AGO], less than six months ago, or what?

1. MORE THAN SIX MONTHS AGO
2. LESS THAN SIX MONTHS AGO
3. ABOUT SIX MONTHS AGO
4. IT WAS _____ MONTH AND / OR _____ YEARS AGO
5. DOESN'T KNOW THE PERSON, NEVER HEARD OF PERSON (GO TO R_UD11)

ALL GO TO R_UD7

R_UD6d. Was it more than five years ago, that is before [MONTH AND YEAR FIVE YEARS AGO], less than five years ago, or what?

1. MORE THAN FIVE YEARS AGO
2. LESS THAN FIVE YEARS AGO
3. IT WAS ABOUT FIVE YEARS AGO
4. IT WAS _____ MONTH AND / OR _____ YEARS AGO
5. DOESN'T KNOW THE PERSON, NEVER HEARD OF PERSON (GO TO R_UD11)

R_UD7. Why did [MISSING PERSON X] move away from this address?

RECORD VERBATIM RESPONSE: _____ (GO TO R_UD10)

R_UD8. When was the last time [MISSING PERSON X] lived at [W1 ADDRESS]?

1. DATE: MONTH _____ DAY _____ YEAR _____ (GO TO R_UD9)
2. _____ MONTHS / YEARS AGO (GO TO R_UD9)
3. NEVER LIVED HERE (GO TO R_UD10)
4. DOESN'T KNOW THE PERSON, NEVER HEARD OF PERSON (GO TO R_UD11)
5. SAME DATE RECORDED FOR PREVIOUS PERSON. WHICH RESPONDENT?
ID _____ NAME _____

INTERVIEWER: ENTER ROSTER ID OF PERSON WHO MOVED ON THE SAME DATE / ID OF PERSON WITH SAME DATE

R_UD8a. Was it more than three years ago, that is before [MONTH AND YEAR THREE YEARS AGO], less than three years ago, or what?

1. MORE THAN THREE YEARS AGO (GO TO R_UD8D)
2. LESS THAN THREE YEARS AGO
3. ABOUT THREE YEARS AGO (GO TO R_UD9)
4. IT WAS _____ MONTH AND / OR _____ YEARS AGO (GO TO R_UD9)
5. DOESN'T KNOW THE PERSON, NEVER HEARD OF PERSON (GO TO R_UD11)

R_UD8b. Was it more than a year ago, that is before [MONTH AND YEAR ONE YEAR AGO], less than a year ago or what?

1. MORE THAN A YEAR AGO (GO TO R_UD9)
2. LESS THAN A YEAR AGO
3. ABOUT ONE YEAR AGO (GO TO R_UD9)
4. IT WAS _____ MONTH AND / OR _____ YEARS AGO (GO TO R_UD9)
5. DOESN'T KNOW THE PERSON, NEVER HEARD OF PERSON (GO TO R_UD11)

R_UD8c. Was it more than six months ago, that is before [MONTH AND YEAR SIX MONTH AGO], less than six months ago, or what?

1. MORE THAN SIX MONTHS AGO
2. LESS THAN SIX MONTHS AGO
3. ABOUT SIX MONTHS AGO
4. IT WAS _____ MONTH AND / OR _____ YEARS AGO
5. DOESN'T KNOW THE PERSON, NEVER HEARD OF PERSON (GO TO R_UD11)

ALL GO TO R_UD9

R_UD8d. Was it more than five years ago, that is before [MONTH AND YEAR FIVE YEARS AGO], less than five years ago, or what?

1. MORE THAN FIVE YEARS AGO
2. LESS THAN FIVE YEARS AGO
3. ABOUT FIVE YEARS AGO
4. IT WAS _____ MONTH AND / OR _____ YEARS AGO

R_UD9_N. Why did [MISSING PERSON X] move away from that address?

1. MOVED FOR OTHER REASON. RECORD VERBATIM RESPONSE: _____
2. MOVED WITH ANOTHER FAMILY MEMBER

R_UD10. CAPI CHECK:

1. HAVE FULL STREET ADDRESS, CITY, STATE, COUNTRY, AND PHONE NUMBER FOR [MISSING PERSON X] (GO TO R_UD13)
2. OTHER

R_UD11. IF R_UD2a=1: Is there anyone else who lives here who would know how to get in touch with [MISSING PERSON X] or have more complete information about how to get in touch with [him / her]?

IF R_UD2a=2: Is there anyone who lives here who might know [MISSING PERSON X] and how to get in touch with [him / her]?

1. YES INTERVIEWER: RECORD AS MUCH INFORMATION AS POSSIBLE
FIRST NAME: _____ LAST NAME: _____
HOME TEL.: _____ WORK TEL.: _____ CELL PHONE: _____
HOME E-MAIL: _____ WORK E-MAIL: _____
RELATIONSHIP TO [MISSING PERSON X] _____

5. NO, THERE IS NO ONE ELSE

R_UD12. IF R_UD11=yes (1): Is there anyone else you can think of who may know how to get in touch with [him / her]?

IF R_UD11=no (2) or DK or RF: Is there anyone else who may know how to get in touch with [him / her]?

PROBE: For example [someone else living here,] a neighbor, a friend, someone this person worked with, a family member or someone else?

PROBE: ANYONE ELSE? (REPEAT)

1. YES. INTERVIEWER: RECORD AS MUCH INFORMATION AS POSSIBLE FOR AS MANY CONTACTS AS POSSIBLE

GIVEN NAME: _____ FAMILY NAME: _____

ADDRESS 1: _____ ADDRESS 2: _____

COUNTRY: _____

HOME PHONE: _____ CELL PHONE: _____

RELATIONSHIP TO [MISSING PERSON X]: _____

HOME EMAIL: _____ WORK EMAIL: _____

5. NO, NO ONE ELSE

R_UD13. GO TO NEXT PERSON ON MISSING PERSONS LIST AND RETURN TO R_UD2.

IF NO ONE ELSE IS ON THE LIST, GO TO CURRENT ROSTER R-UA1a.

PART II: CURRENT ROSTER

THIS PART IS COMPLETED BOTH BY NEW ENTRANT HOUSEHOLDS AND PANEL HOUSEHOLDS

SECTION CURRENT A. INTRODUCTION AND COMPILING RESIDENT LIST

IF UR=1 THEN USE THIS INTRODUCTION

RA1a. I would like to ask you about **other** people who live or stay in your household now, aside from those we just talked about.

GO TO RA3

ENTRY POINT FOR HHs WHICH DID NOT COMPLETE UPDATE ROSTER

IF UR=0 USE THIS INTRODUCTION

RA1b. I'd like to ask you to help me understand your living situation here. We'll start with some questions about the people living or staying at this address.

RA2. Please give me the name of everyone who stayed here in this house or apartment last night [, aside from people we already talked about].

To make sure I keep people straight, can you give me their full names? We will keep this and all other information strictly confidential. But if you feel more comfortable giving only first names, nicknames or initials, that is ok too.

INTERVIEWER: RECORD ALL NAMES. ASK FOR FULL NAMES, BUT ACCEPT FIRST NAMES, NICKNAMES OR INITIALS IF NECESSARY.

IF UR=1, ADD THESE NAMES TO THE END OF THE LIST GENERATED BY THE UPDATE ROSTER

IF UR=1, SET A FLAG NEWMEMBER=1 FOR HH MEMBERS ADDED IN THIS QUESTION

IF UR=0, START AT LINE 1 OF CURRENT ROSTER

RA3. Does anyone else usually live here or stay here who did not stay here last night?

Please include people who are away at school or college, lodgers, boarders, or people you employ who live here. Also include babies, small children, foster children, and anyone who usually stays here but is away traveling, in the hospital, in jail or prison, or somewhere else.

INTERVIEWER: RECORD ALL NAMES. ASK FOR FULL NAMES, BUT ACCEPT FIRST NAMES, NICKNAMES OR INITIALS IF NECESSARY

IF UR=1 SET A FLAG NEWMEMBER=1 FOR HH MEMBERS ADDED IN THIS QUESTION

RA4. Did anyone else stay here for one or more nights in the last two weeks, since [MONTH / DAY TWO WEEKS AGO]?

IF UR=1 SET A FLAG NEWMEMBER=1 FOR HH MEMBERS ADDED IN THIS QUESTION,

INTERVIEWER: RECORD ALL NAMES. ASK FOR FULL NAMES, BUT ACCEPT FIRST NAMES, NICKNAMES OR INITIALS IF NECESSARY

ASK FOR EACH PERSON ON THE LIST

RA4a. How old [are you / is [NAME]]?

PROBE: We need an idea of [your / NAME's] age. Can you tell me about how old [you are / he or she is]?

1. _____ MONTHS (0–11) USE ONLY IF YOUNGER THAN 1 YEAR (GO TO RA5)
2. _____ YEARS (1–120) (GO TO RA5)

CAPI CHECK: RA4a CAN ONLY=MONTHS OR YRS, NOT BOTH

RA5. CAPI CHECK:

1. ONLY ONE PERSON ON THE LIST (CODE THIS PERSON AS HHHNAME AND GO TO RA9)
5. MORE THAN ONE PERSON ON THE LIST

RA6. Now I want to find out how everyone on this list is related. First, please tell me whose [apartment / house] is this? That is, who rents or owns this [apartment / house]?

INTERVIEWER NOTE: THERE CAN BE ONE OR TWO OWNERS / RENTERS

_____ (Name of first person) _____ (Line num of first person)
 _____ (Name of second person) _____ (Line num of second person)

CAPI CHECK: IS THE PERSON OR PERSONS ABOVE BOTH AT LEAST 16 YEARS OLD? IF NOT, DOUBLE CHECK WITH RESPONDENT TO BE SURE PERSON UNDER 16 IS OWNER / RENTER IN CASE LINE NUMBER COPIED WRONG.

CAPI CHECK: IF TWO PEOPLE NAMED IN RA6, RANDOMLY SELECT ONE. CODE THIS PERSON AS HEAD OF HOUSEHOLD [HHHNAME].

My computer randomly chose [HHHNAME]. So let's talk about how each person in this household is related to [HHHNAME].

RA6_b. Is there anyone else who rents or owns this [apartment / house]?

1. YES
5. NO

RA6_own1CK. PROBE: I have recorded that the person who rents or owns this [apartment / house] is [HHHNAME] and that [HHHNAME] is [AGE] years old. Is this correct?

LOOP THROUGH EVERYONE ON THE CURRENT HH LIST. [NAME] INDICATES THE NAME OF EACH PERSON ON THE LIST

RA6b. CAPI CHECK: IS [NAME] EQUAL TO RESPONDENT'S NAME?

1. YES
5. NO

RA6c. CAPI CHECK: IS HHHNAME THE SAME AS RESPONDENT'S NAME?

1. YES (IF RA6B=1, CODE RA7=0 THEN GO TO RA9)
5. NO

RA6d. CAPI CHECK: IS HHHNAME SAME AS [NAME]?

1. YES (CODE RA7=0 THEN GO TO RA9)
5. NO

RA7. How [are you / is NAME] related to [HHHNAME / you]?

0. HOUSEHOLD HEAD
1. HUSBAND OR WIFE
2. PARTNER (LOVER, GIRLFRIEND, BOYFRIEND)

3. BIOLOGICAL CHILD
4. STEPCCHILD
5. ADOPTED CHILD
6. FOSTER CHILD
7. CHILD OF PARTNER (CHILD OF LOVER, GIRLFRIEND, BOYFRIEND)
8. SON-IN-LAW OR DAUGHTER-IN-LAW
9. PARENT
10. STEPPARENT
11. PARENT-IN-LAW
12. GRANDPARENT
13. BROTHER OR SISTER
14. STEPBROTHER OR STEPSISTER
15. HALF-BROTHER OR HALF-SISTER
16. BROTHER-IN-LAW OR SISTER-IN-LAW
17. GRANDCHILD
18. UNCLE OR AUNT
19. NEPHEW OR NIECE
20. OTHER RELATIVE, SPECIFY: _____
21. ROOMMATE
22. FRIEND
23. LIVE-IN MAID, CARE PROVIDER, SERVANT OR DOMESTIC WORKER
24. OTHER NONRELATIVE, SPECIFY: _____
25. EX-SPOUSE
26. PARENT'S LOVER / PARTNER
27. SON OR DAUGHTER'S LOVER / PARTNER
28. COUSIN
29. GREAT GRANDPARENT

IF RA7=99 CONTINUE, ELSE GO TO RA9

RA7_ver. I have recorded that [you are / NAME is] [HHHNAME's / your] [RELATIONSHIP FROM RA7]. Is that correct?

1. YES
5. NO

IF RA7=1 FOR [PERSONX], SET RA10=1 AND RA10A=1 AND RA10B=[ID OF HH HEAD] AND GO TO RA11
 IF RA7=2 FOR [PERSONX], SET RA10=2 AND RA10A=1 AND RA10B=[ID OF HH HEAD] AND GO TO RA11

RA8. Please tell me why you are not sure how [you are / NAME is] related to [HHHNAME / you]?

RECORD VERBATIM RESPONSE: _____

RA9. OBSERVE OR ASK: Is [NAME] male or female?

1. MALE
2. FEMALE

IF 0<=RA4A < 15 GO TO RA11 (DO NOT ASK MARRIAGE QUESTION FOR 0-14 YEAR OLDS)

RA10. [Are you / is he or she] married or currently living with a partner?

1. MARRIED
2. LIVING WITH A PARTNER (WITHOUT BEING MARRIED)
3. NEITHER (GO TO RA11)
4. (IF VOLUNTEERED) BOTH MARRIED AND LIVING WITH A PARTNER (OTHER THAN SPOUSE)

RA10a. [Does your / Does his or her] [spouse / partner] live here in this household?

1. YES
5. NO (GO TO RA11)

RA10bline. What is [your / his / her] [husband / wife / partner]'s name?

RECORD ROSTER LINE NUMBER OF SPOUSE / PARTNER FOR [NAME]

RA11. [Do you / Does NAME] live here full time or part time? Full-time means at least half of the time. Part-time means less than half time.

PROBE: Just give me your best guess.

1. FULL TIME (SPENDS HALF TIME OR MORE IN THIS HH)
2. PART TIME (SPENDS LESS THAN HALF TIME IN THIS HH)

DATA USER NOTE: THE SPANISH VERSION OF "Full-time means at least half of the time. Part-time means less than half time." WAS NOT INCLUDED IN THE CAPI CODE.

RA11A. CAPI CHECK RA4A AND RA11: IS RA11=1 AND IS [NAME] 18 TO 24 YEARS OLD?

1. YES
5. NO (GO TO RA12)

RA11A_mom. [Does your / Does NAME's] biological, adoptive or step-mother live here full time?

1. YES
5. NO

RA11A_momline. What is [your / NAME's] mother's name?

ENTER ID NUMBER FROM DISPLAYED ROSTER OF PERSON WHO IS MOTHER

RA11A_dad. [Does your / Does NAME's] biological, adoptive or step-father live here full time?

1. YES
5. NO

RA11A_dadline. What is [your / NAME's] father's name?

ENTER ID NUMBER FROM DISPLAYED ROSTER OF PERSON WHO IS FATHER

END OF LIST 1 LOOP WHICH BEGAN AT RA6B

CREATE ROSTER LIST 2 OF ELIGIBLES WHICH IS ALL THOSE WITH RA11=1. QUESTIONS RA12–RA42 ARE FOR ELIGIBLES ONLY. IF RA11=2 GO TO SECTION B.

LIST 2 LOOP BEGIN: ASK RA12–RA42 FOR EACH PERSON ON LIST 2

NOW COLLECT MOTHER, FATHER, PCG, AND FATHER-EQUIVALENT INFORMATION FOR EACH CHILD—17 AND YOUNGER—ON ELIGIBLE LIST (LIST 2)

RA12. CHECK RA4a. IS [NAME] 17 YEARS OR YOUNGER?

1. YES
5. NO (GO TO END OF LOOP)

RA13. CAPI CHECK LIST 2: DOES THIS HH CONTAIN ONLY ONE PERSON?

1. YES (CODE NAME AS NO PCG AND CODE AS EMANCIPATED MINOR [EM]. GO TO END OF LOOP)

5. NO (CONTINUE)

RA14. CAPI CHECK RA4a: IS [NAME] 16 OR 17 YEARS OLD?

- 1. YES (CONTINUE)
- 5. NO (GO TO CAPI CHECK ABOVE RA20)

RA14a. CAPI CHECK RA7: IS [NAME] THE CHILD / STEPCCHILD / ADOPTED CHILD / FOSTER CHILD / CHILD OF PARTNER / GRANDCHILD / NIECE / NEPHEW OF HHH HEAD?

- 1. YES (GO TO CAPI CHECK ABOVE RA20)
- 5. NO (CONTINUE)

RA15. CAPI CHECK RA7: IS [NAME] HEAD OF HOUSEHOLD?

- 1. YES (CONTINUE)
- 5. NO (GO TO RA16)

RA15a. CAPI CHECK RA7: DOES [NAME] HAVE A PARENT / STEPPARENT / GRANDPARENT / AUNT / UNCLE IN THE HOUSEHOLD?

- 1. YES (GO TO CAPI CHECK ABOVE RA20)
- 5. NO (CODE AS NO PCG AND EM=1 AND TO TO END OF LOOP)

RA16. CAPI CHECK: IS [NAME] OLDEST IN HOUSEHOLD?

- 1. YES (CODE NAME AS NO PCG AND CODE AS EMANCIPATED MINOR [EM]. GO TO END OF LOOP)
- 5. NO (CONTINUE)

RA16a. CAPI CHECK: IS OLDEST PERSON IN HOUSEHOLD THE SPOUSE / PARTNER OF [NAME]?

- 1. YES (CODE AS NO PCG AND EM=1 AND GO TO END OF LOOP)
- 5. NO

ITEMS RA17–RA19 DELETED

THIS SECTION COLLECTS INFORMATION ON ALL CHILDREN'S MOTHERS AND, FOR MOTHERS OUTSIDE OF THE HH, WHICH PEOPLE HAVE THE SAME MOTHER

RA20CHECK. CAPI CHECK: IF CHILD HAS BIO OR ADOPTIVE MOM IN HH, SET VALUES FOR OBVIOUS ANSWERS, THEN GO TO CAPI CHECK ABOVE RA24 (WOULD ONLY KNOW IF HAD GONE THROUGH LOOP FOR A LEAST 1 CHILD). ELSE CONTINUE. THE OBJECTIVE IS TO FILL IN THE CHILD MATRIX OF QUESTIONS RA20–RA23 FOR ALL CHILDREN OF GIVEN PARENT, NOT JUST THE FIRST CHILD OF THE GIVEN PARENT.

IF NAME CODED RA7=3 OR 5 AND HHHEAD=FEMALE, SET THE FOLLOWING VALUES AND THEN SKIP TO CAPI CHECK ABOVE RA24:

RA20=1, RA21=HHHNAME, RA21 id=HHHEADID
CHECK LIST 1 FOR ANY OTHERS WITH RA7=3 OR 5.
IF THERE ARE OTHERS, DO THE FOLLOWING:

SET RA22=1

ENTER NAMES AND ROSTER IDS OF THOSE CHILDREN INTO RA23

IF THERE ARE NO OTHERS, SET RA22=5

ELSE IF RA20 IS FILLED IN, GO TO CAPI CHECK ABOVE RA24

ELSE IF RA20 IS BLANK, THEN ASK

RA20INTRO. IF CHILD 1: Next, I want to ask you about the parents of children and teens who usually live here. ELSE: Now I'd like to ask you about the parents of [NAME].

RA20. Does [NAME]'s birth or adoptive mother live or stay in this household?

- 1. YES
- 5. NO (GO TO RA22)

RA21LINE. What is [NAME]'s mother's name?

CAPI CHECK: SHOW LIST 1

INTERVIEWER: RECORD NAME AND LINE NUMBER OF CHILD'S MOTHER

RA21NAME. I have just recorded that [NAME] is the mother's name. Is this correct?

- 1. YES
- 5. NO

RA22. Does anyone else in this household have the same birth or adoptive mother as [NAME]?

- 1. YES
- 5. NO (GO TO CAPI CHECK ABOVE RA24)

RA23_idx. Who has the same mother as [NAME]?

CAPI CHECK: SHOW LIST 1

INTERVIEWER: RECORD EACH NAME AND LINE NUMBER, REGARDLESS OF AGE.

FOR EACH CHILD LISTED IN RA23 SET RA20=1, RA21=NAME OF MOTHER, RA21 ID=ROSTER ID OF MOTHER, RA22=1

RA23_checkX. I have just recorded that [NAME] also has the same mother. Is this correct?

- 1. YES
- 5. NO

THIS SECTION COLLECTS INFORMATION ON ALL CHILDREN'S FATHERS AND WHICH PEOPLE HAVE THE SAME FATHER

RA24CHECK. CAPI CHECK: IF CHILD HAS BIO OR ADOPTIVE DAD IN HH, SET VALUES FOR OBVIOUS ANSWERS, THEN GO TO CAPI CHECK AT A28 (would only know if had gone through loop for a least 1 child).

THE OBJECTIVE IS TO FILL IN THE CHILD MATRIX OF QUESTIONS RA24–RA27 FOR ALL CHILDREN OF A GIVEN PARENT, NOT JUST THE FIRST CHILD OF THE GIVEN PARENT.

IF [NAME] CODED RA7=3 OR 5 AND HHHEAD=MALE, SET THE FOLLOWING VALUES AND THEN SKIP TO CAPI CHECK AT RA28:

RA24=1, RA25=HHHNAME, RA25 id=HHHEADID
CHECK LIST 1 FOR ANY OTHERS WITH RA7=3 OR 5.

IF THERE ARE OTHERS, DO THE FOLLOWING:

SET RA26=1

ENTER NAMES AND ROSTER IDS OF THOSE CHILDREN INTO RA27

IF THERE ARE NO OTHERS, SET RA26=5

ELSE IF RA24 IS BLANK, CONTINUE

ELSE IF RA24 IS FILLED IN, GO TO CAPI CHECK AT RA28

RA24. Does [NAME]'s birth or adoptive father live or stay in this household?

- 1. YES
- 5. NO (GO TO RA26)

RA25LINE. What is [NAME]'s father's name?

CAPI CHECK: SHOW LIST 1

INTERVIEWER: RECORD NAME AND LINE NUMBER OF CHILD'S FATHER

RA25ck. I have just recorded that [NAME] is the father's name. Is this correct?

- 1. YES
- 5. NO

RA26. Does anyone else in this household have the same birth or adoptive father as [NAME]?

- 1. YES
- 5. NO (GO TO RA28)

RA27_idX. Who has the same father as [NAME]?

CAPI CHECK: SHOW LIST 1

INTERVIEWER: RECORD EACH NAME AND LINE NUMBER, REGARDLESS OF AGE.

BE SURE THAT ALL CHILDREN GET TO RA28, EVEN IF RA20–RA23 AND / OR RA24–RA27 WERE NOT ASKED DIRECTLY BECAUSE CHILD WAS SIBLING OF EARLIER CHILD.

RA27_checkX. I have just recorded that [NAME] also has the same father. Is this correct?

- 1. YES
- 5. NO

THIS SECTION DETERMINES WHO IS PCG FOR KIDS WITHOUT FULL-TIME RESIDENT MOTHERS IN HH

RA28. CHECK RA20: DOES [NAME]'S BIO / ADOPT MOTHER LIVE IN HH?

- 1. YES
- 5. NO (GO TO RA30)

RA29. CHECK RA11: IS [NAME]'S BIO / ADOPT MOTHER A FULL-TIME RESIDENT?

- 1. YES (GO TO RA39)
- 5. NO

RA30. CAPI CHECK RA24: DOES [NAME] HAVE BIO OR ADOPTIVE DAD IN HH?

- 1. YES
- 5. NO

IF RA28 AND RA30=5, GO TO RA33

IF RA30=5, GO TO CAPI CHECKS BELOW RA31

RA31. CAPI CHECK RA11: IS [NAME]'S BIO / ADOPT FATHER A FULL-TIME RESIDENT?

- 1. YES
- 5. NO

IF RA28=5 AND RA30=1 AND RA31=1, GO TO RA32

RA32_Intro. IF RA28=5 AND RA30=1 AND RA31=5: From the information I have, [NAME]'s father only lives here part-time. (GO TO RA33)

IF RA28=1 AND RA29=5 AND RA30=5: From the information I have, [NAME]'s mother only lives here part-time. (GO TO RA36)

IF RA28=1 AND RA29=5 AND RA30=1 AND RA31=5: From the information I have, [NAME]'s mother and father both live here part-time. (GO TO RA36)

IF RA28=1 AND RA29=5 AND RA30=1 AND RA31=1: From the information I have, [NAME]'s mother only lives here part-time. (GO TO RA32)

RA32. CAPI CHECK: ANYONE BESIDES DAD AND [NAME] OVER 17 IN HH?

1. YES (CONTINUE)
5. NO (GO TO END OF LOOP)

IF NAME CODED RA7=4 OR 6 AND HHHEAD=FEMALE, FILL IN THE FOLLOWING OBVIOUS ANSWERS AND THEN GO TO RA39.

IF RA7=4 SET RA33=1

IF RA7=6 SET RA33=2

SET RA34=HHNAME, SET RA34 id=HHHEAD ID

RA33. Does [NAME] have [a stepmother, foster mother, or] someone else who lives in this household at least half time who is like a mother to [him / her]?

1. YES, STEPMOTHER
2. YES, FOSTER MOTHER
3. YES, OTHER MOTHER EQUIVALENT
4. NO (GO TO RA36)

RA34_name. What is the name of [NAME]'s [stepmother / foster mother / person who is like a mother]?

CAPI CHECK: SHOW LIST 2 ONLY

INTERVIEWER: RECORD NAME AND LINE NUMBER OF PERSON

IF RA33=1 OR 2, GO TO RA39

IF RA33=3 AND PERSON IN RA34 IS NOT HEAD OF HH, CONTINUE

RA35. How is [NAME IN RA34] related to [NAME]?

1. HUSBAND OR WIFE
2. PARTNER (LOVER, GIRLFRIEND, BOYFRIEND)
3. BIOLOGICAL CHILD
4. STEPCHILD
5. ADOPTED CHILD
6. FOSTER CHILD
7. CHILD OF PARTNER (CHILD OF LOVER, GIRLFRIEND, BOYFRIEND)
8. SON-IN-LAW OR DAUGHTER-IN-LAW
9. PARENT
10. STEPPARENT
11. PARENT-IN-LAW
12. GRANDPARENT
13. BROTHER OR SISTER
14. STEPBROTHER OR STEPSISTER
15. HALF-BROTHER OR HALF-SISTER
16. BROTHER-IN-LAW OR SISTER-IN-LAW
17. GRANDCHILD
18. UNCLE OR AUNT
19. NEPHEW OR NIECE
20. OTHER RELATIVE, SPECIFY: _____

21. ROOMMATE
22. FRIEND
23. LIVE-IN MAID, CARE PROVIDER, SERVANT OR DOMESTIC WORKER
24. OTHER NONRELATIVE, SPECIFY: _____
25. EX-SPOUSE
26. PARENT'S LOVER / PARTNER
27. SON OR DAUGHTER'S LOVER / PARTNER
28. COUSIN
29. GREAT GRANDPARENT

IF RA35=99 CONTINUE, ELSE GO TO RA39

RA35a. Please tell me why you are not sure how [NAME IN RA34] is related to [NAME]?

RECORD VERBATIM RESPONSE: _____

ALL GO TO RA39

RA36line. Who is the adult living here at least half time who is primarily responsible for [NAME] when [he / she] stays here in this household?

CAPI CHECK: SHOW LIST 2 ONLY

INTERVIEWER: RECORD NAME AND LINE NUMBER

99. NO ONE IN HOUSEHOLD

IF ANSWER TO RA36=HHHEAD, GO TO RA39

IF RA36=99, CONTINUE

ELSE GO TO RA38

RA36ck. I have just recorded that [NAME] is the adult in the household who is primarily responsible. Is this correct?

1. YES
5. NO

RA37. Maybe I misunderstood. From what you've told me, no adult living at least half time in this household is responsible for [NAME]. Is that correct?

1. YES (CODE NAME AS NO PCG AND CODE AS EM. GO TO END OF LOOP)
5. NO (RE-ASK RA36)

RA38. How is [NAME IN RA36] related to [NAME]?

1. HUSBAND OR WIFE
2. PARTNER, LOVER, GIRLFRIEND, BOYFRIEND
3. BIOLOGICAL CHILD
4. STEPCHILD
5. ADOPTED CHILD
6. FOSTER CHILD
7. CHILD OF LOVER / PARTNER
8. SON-IN-LAW OR DAUGHTER-IN-LAW
9. PARENT
10. STEPPARENT
11. PARENT-IN-LAW
12. GRANDPARENT
13. BROTHER OR SISTER
14. STEPBROTHER OR STEPSISTER
15. HALF-BROTHER OR HALF-SISTER

16. BROTHER-IN-LAW OR SISTER-IN-LAW
17. GRANDCHILD
18. UNCLE OR AUNT
19. NEPHEW OR NIECE
20. OTHER RELATIVE, SPECIFY: _____
21. ROOMMATE
22. FRIEND
23. LIVE-IN MAID, CARE PROVIDER, SERVANT OR DOMESTIC WORKER
24. OTHER NONRELATIVE, SPECIFY: _____
25. EX-SPOUSE
26. PARENT'S LOVER / PARTNER
27. SON OR DAUGHTER'S LOVER / PARTNER
28. COUSIN
29. GREAT GRANDPARENT

IF RA38=99 CONTINUE
ELSE GO TO RA39

RA38a. Please tell me why you are not sure how [NAME IN RA36] is related to [NAME]?

RECORD VERBATIM RESPONSE: _____

THIS SECTION DETERMINES WHO IS FATHER FIGURE FOR KIDS WITHOUT A FATHER IN THE HOUSEHOLD

RA39. CHECK RA24:

1. NO BIO / ADOPT FATHER IN THE HOUSEHOLD
2. BIO / ADOPT FATHER IS IN THE HOUSEHOLD (GO TO END OF LOOP)

IF NAME CODED A7=4 OR 6 AND HHHEAD=MALE, FILL IN THE FOLLOWING OBVIOUS ANSWERS AND THEN GO TO END OF LOOP.

IF RA7=4 SET RA40=1

IF RA7=6 SET RA40=2

SET RA41=HHHNAME, SET RA41 id=HHHEAD ID

RA40. Does [NAME] have a stepfather, a foster father, or someone else in this household who is like a father to [him / her]?

1. YES, STEPFATHER
2. YES, FOSTER FATHER
3. YES, OTHER FATHER FIGURE
4. NO (GO TO END OF LOOP)

RA41. Who is [NAME]'s [stepfather / foster father / person who is like a father]?

CAPI CHECK: SHOW LIST 1

INTERVIEWER: RECORD NAME AND LINE NUMBER
99. NO ONE IN HOUSEHOLD

IF RA40=1 OR 2, GO TO END OF LOOP

IF PERSON CODED IN RA41 IS NOT HEAD OF HH, CONTINUE

ELSE CONTINUE

RA41LINE. ENTER LINE NUMBER OF STEP / FOSTER FATHER: INTERVIEWER ENTER 99 IF NO ONE IN HOUSEHOLD

RA42. How is [NAME IN RA41] related to [NAME]?

1. HUSBAND OR WIFE
2. PARTNER, LOVER, GIRLFRIEND, BOYFRIEND
3. BIOLOGICAL CHILD
4. STEPCHILD
5. ADOPTED CHILD
6. FOSTER CHILD
7. CHILD OF LOVER / PARTNER
8. SON-IN-LAW OR DAUGHTER-IN-LAW
9. PARENT
10. STEPPARENT
11. PARENT-IN-LAW
12. GRANDPARENT
13. BROTHER OR SISTER
14. STEPBROTHER OR STEPSISTER
15. HALF-BROTHER OR HALF-SISTER
16. BROTHER-IN-LAW OR SISTER-IN-LAW
17. GRANDCHILD
18. UNCLE OR AUNT
19. NEPHEW OR NIECE
20. OTHER RELATIVE, SPECIFY: _____
21. ROOMMATE
22. FRIEND
23. LIVE-IN MAID, CARE PROVIDER, SERVANT OR DOMESTIC WORKER
24. OTHER NONRELATIVE, SPECIFY: _____
25. EX-SPOUSE
26. PARENT'S LOVER / PARTNER
27. SON OR DAUGHTER'S LOVER / PARTNER
28. COUSIN
29. GREAT GRANDPARENT

IF RA42=99 CONTINUE
 ELSE GO TO LOOP END AFTER RA43

RA43. Please tell me why you are not sure how [NAME IN RA41] is related to [NAME]?

RECORD VERBATIM RESPONSE: _____

LIST 2 LOOP END. IF ANY MORE PEOPLE ON LIST, GO BACK TO RA12, ELSE CONTINUE

SECTION CURRENT B. BACKGROUND OF HOUSEHOLD MEMBERS

RB1_Intro. Finally, I have a few [other] questions about [you / each person who lives or stays in this household].

LOOP START: ASK RB1–RB5 FOR EACH PERSON ON LIST 1

IF RA4a=6 OR MORE OR RA4a=DK / REFUSED, CONTINUE
 ELSE GO TO RB2

RB1. How much school [have you / has NAME] completed?

INTERVIEWER NOTE: FOR THOSE CURRENTLY IN SCHOOL, THIS DOES NOT INCLUDE THE CURRENT YEAR OF SCHOOL, UNLESS IT IS ALREADY COMPLETED

0. NONE
1. to 11. _____ (GRADE 1 THROUGH 11)
12. HIGH SCHOOL GRADUATE OR COMPLETED GED
13. SOME VOCATIONAL SCHOOL
14. COMPLETED VOCATIONAL SCHOOL

15. SOME COLLEGE
16. ASSOCIATES' DEGREE (AA)
17. BACHELORS' DEGREE (BA, BS)
18. SOME GRADUATE OR PROFESSIONAL SCHOOL (AFTER COMPLETING COLLEGE)
19. COMPLETED GRADUATE / PROFESSIONAL DEGREE

RB2. [Are you / Is NAME] Latino, white, African-American, Asian or something else?

CODE ALL THAT APPLY

1. LATINO
2. WHITE
3. AFRICAN-AMERICAN, BLACK
4. ASIAN
5. PACIFIC ISLANDER
6. NATIVE AMERICAN / AMERICAN INDIAN

IF RA4A=14 OR MORE OR RA4a=DK / REFUSED, CONTINUE, ELSE GO TO B5

IF NAME=HHHNAME AND RA7=3 FOR ANYONE, SET RB3=1 THEN GO TO CAPI CHECK ABOVE RB4

IF NAME CODED RA7=9 OR 12, SET RB3=1 THEN GO TO CAPI CHECK ABOVE RB4

RB3. [Have you / has NAME] ever had any children?

1. YES
5. NO

IF RA4A=16 OR MORE OR RA4a=DK / REFUSED CONTINUE, ELSE GO TO RB5

RB4. [Have you / has NAME] had a paid job full time or part time, at any time in the past month?

1. YES
5. NO

RB5. Did [you / NAME] receive any type of public assistance or welfare benefits during the past month?

1. YES
5. NO

RB6. [Were you / Was NAME] covered by any type of health insurance during the past month? This includes insurance through a job, through a plan you or someone else bought, or through a program like MediCal or Healthy Families?

1. YES
5. NO

LOOP END. GO BACK TO RB1 FOR NEXT PERSON ON LIST 1. IF NO ONE LEFT ON LIST, CONTINUE

CREATE LIST 3. IF W1DWELLING=1 AND PERSON IS ON LIST 2, AND NEWMEMBER=1, AND PERSON BORN BEFORE WAVE 1, PUT PERSON ON LIST 3. LOOP BEGIN FOR PERSONS ON LIST 3

RB7. CAPI CHECK:

1. NO ONE ON LIST 3 (GO TO SECTION C)
2. AT LEAST ONE PERSON ON LIST 3, CONTINUE

RB8. Here is a map of this neighborhood you live in. Several years ago, that is in [MONTH YEAR OF W1 INTERVIEW], did [NAME] live in this neighborhood (either in this house or somewhere else) or did [he / she] live outside this neighborhood?

1. IN AREA SHOWN ON MAP (GO TO RB11)
2. SOMEWHERE ELSE, NOT IN THE AREA SHOWN ON MAP (GO TO RB11)

RB9. Where did [NAME] live at that time? Did [he / she] live in [NAME OF CITY FOR TRACT] at that time?

1. YES, IN [CITY NAME]
5. NO, NOT IN [CITY NAME] (CODE RB8=2 AND GO TO RB11)
- 1. DON'T KNOW (GO TO RB11)

RB10. What part of [NAME OF CITY THAT THIS TRACT IS LOCATED IN] did [he / she] live in at that time?

PROBE: Do you know the street name?

RECORD VERBATIM RESPONSE: _____

RB10a. INTERVIEWER: LOOK AT MAP, WORK WITH RESPONDENT, AND TRY TO DETERMINE WHETHER OR NOT THIS PLACE IS WITHIN THE AREA SHOWN ON MAP. IF YES, CODE RB8=1. IF OBVIOUSLY NOT WITHIN THIS AREA, CODE RB8=2.

1. YES, THE LOCATION IS WITHIN THE AREA SHOWN ON MAP
5. NO, THE LOCATION IS NOT WITHIN THE AREA SHOWN ON MAP

RB11. Did [NAME] move into this neighborhood shown on the map before or after [TRACT INTERVIEW DATE]?

1. BEFORE (GO TO RB13)
2. AFTER (GO TO RB13)
- 1. DON'T KNOW
- 2. REFUSED (GO TO RB13)

INTERVIEWER: IF RESPONDENT SAYS PERSON MOVED AT THE TIME OF THE TRACT INTERVIEW DATE, ASK: Would you say it was just before or just after this date?

RB12. If you had to guess when [NAME] moved into this neighborhood, would you say it was before or after [TRACT INTERVIEW DATE]?

1. BEFORE
2. AFTER

RB13. END OF LOOP. GO BACK TO RB7 AND REPEAT FOR EVERYONE ON LIST 3. THEN CONTINUE

SECTION CURRENT C. HOME LANGUAGE

RC1. Do you [and others who live here in this household] speak any language other than [English / Spanish] at home?

1. YES
5. NO (GO TO RESPONDENT SELECTION)

RC2. Besides [English / Spanish], [what other languages do you speak / what languages are spoken in your household]?

CODE ALL THAT APPLY

1. ENGLISH
2. SPANISH
3. ARMENIAN
4. CAMBODIAN / KHMER
5. CHINESE (e.g., MANDARIN, CANTONESE, OTHER)

6. FARSI OR PERSIAN
7. JAPANESE
8. KOREAN
9. LATIN AMERICAN INDIGENOUS / INDIAN LANGUAGE (e.g., QUICHÉ, KANJOBAL, ZAPOTEC, MIXTEC)
10. RUSSIAN
11. TAGALOG
12. VIETNAMESE
13. OTHER, SPECIFY: _____
14. MIDDLE EASTERN (e.g., ARABIC)
15. SOUTH ASIAN (e.g., HINDI, URDU)
16. OTHER SOUTHEAST ASIAN (e.g., MALAY, INDONESIAN, THAI, LAOTIAN)
17. AFRICAN LANGUAGES (e.g., SWAHILI)
18. OTHER EUROPEAN LANGUAGES (e.g., FRENCH, GERMAN, DUTCH, SWEDISH)

RC3. CAPI CHECK RA5:

1. RESPONDENT LIVES ALONE (GO TO RESPONDENT SELECTION BELOW)
2. RESPONDENT LIVES WITH OTHERS (CONTINUE)

RC4. When you are talking to each other what language do you and others who live here in this household generally speak?

CODE ALL THAT APPLY

1. ENGLISH
2. SPANISH
3. ARMENIAN
4. CAMBODIAN / KHMER
5. CHINESE (MANDARIN, CANTONESE, OTHER)
6. FARSI OR PERSIAN
7. JAPANESE
8. KOREAN
9. LATIN AMERICAN INDIGENOUS / INDIAN LANGUAGE (e.g., QUICHÉ, KANJOBAL, ZAPOTEC, MIXTEC)
10. RUSSIAN
11. TAGALOG
12. VIETNAMESE
13. OTHER, SPECIFY: _____
14. MIDDLE EASTERN (e.g., ARABIC)
15. SOUTH ASIAN (e.g., HINDI, URDU)
16. OTHER SOUTHEAST ASIAN (e.g., MALAY, INDONESIAN, THAI, LAOTIAN)
17. AFRICAN LANGUAGES (e.g., SWAHILI)
18. OTHER EUROPEAN LANGUAGES (e.g., FRENCH, GERMAN, DUTCH, SWEDISH)

SECTION CURRENT S: RESPONDENT SELECTION

S1. CAPI INSTRUCTION: DETERMINE WHO LIVES IN THIS HOUSEHOLD. CHECK UA1 AT BEGINNING OF ROSTER (NOT RA1 IN CURRENT ROSTER) AND THE LIST OF CURRENT HH MEMBERS AND THE VARIABLE NEWMEMBER

1. THE PANEL RSA IS IN THIS HOUSEHOLD (SET RSA_P=1)
2. THE PANEL RSC IS IN THIS HOUSEHOLD (SET RSC_P=1)
3. THE PCG_W1 IS IN THIS HOUSEHOLD (SET PCG_W1=1)
4. THE SIB_W1 IS IN THIS HOUSEHOLD (SET SIB_W1=1)
5. THERE ARE NEW ENTRANTS IN THIS HOUSEHOLD AND THIS HOUSEHOLD IS IN ONE OF THE LAFANS TRACTS (FLAG_NE=1)

Los Angeles Family and Neighborhood Survey, Wave 2 (L.A.FANS-2)

HOUSEHOLD QUESTIONNAIRE

ONE HOUSEHOLD QUESTIONNAIRE IS COMPLETED FOR EACH NUCLEAR FAMILY CONTAINING A SAMPLED RESPONDENT.

PRELOAD FROM HOUSEHOLD ROSTER:

- Whether Respondent (R) has a spouse or partner
- Sex of R's spouse or partner
- Whether R has children in household (aged 10–17 years)
- Whether R has only one child in household (aged 10–17 years)
- Whether R's spouse or partner (if any) has children in the household (aged 10–17 years)
- Whether R's spouse or partner (if any) has only one child in the household (aged 10–17 years)
- Roster List 1 (all household members listed)

NOTES

- Questions are asked about income and earnings in the previous year. The specific year mentioned in each question is based on the date of interview. For example, for interviews conducted during calendar year 2007, the questions asked about income and earnings during calendar year 2006.

Questionnaire formatting key

- **Black bold:** Question numbers
- Black normal: Interviewer to read question text
- BLACK UPPER CASE: Interviewer and programming instructions
- ***BLACK BOLD ITALIC UPPER CASE:*** Comments

HHCONSENT. Before we get started, there are a couple of important things I want you to know about this study. This is an on-going study of families and neighborhoods in Los Angeles County. The goal of the study is to understand how families and neighborhoods affect people's health and well-being. I would like to ask you some questions about your family's finances. The questions will take about 30 minutes and should be easy to answer. Your participation in this study is completely voluntary, but very important. You can choose not to participate, you can choose to answer some but not all questions, and you can stop the interview at any time. The answers that you give us will be used for research purposes only. We will keep all information confidential and completely separate from any information that might identify anyone in this household personally. Are you willing to participate?

HA1INTRO. Now I have some questions about [your / your family's] income during the last calendar year, that is January through December [2005 / 2006 / 2007]. We need this information to understand the economic status of households in Los Angeles. As with other all questions in this survey, the information you provide will be kept completely confidential.

HA1. During [2005 / 2006 / 2007] did you yourself receive any income from a job? This includes wages, salary, commissions, and tips.

INTERVIEWER INSTRUCTION: INCLUDE WAGES AND SALARY FROM SELF-EMPLOYMENT

1. YES
5. NO (GO TO HA3)

HA2. During [2005 / 2006 / 2007] how much income did you receive from all these sources?

INTERVIEWER INSTRUCTION: DO NOT PROBE "DON'T KNOW" OR "REFUSED" RESPONSE.

\$ __, __ __ __, __ __ __ (RANGE 0-9,999,999, VERIFY AT 500,000)

IF HA2=D OR R, GO TO HA2a, ELSE IF HA2=0, GO TO HA2d, ELSE GO TO HA3

HA2a. Was it more than \$29,000, less than \$29,000, or what?

1. MORE THAN \$29,000
5. LESS THAN \$29,000
6. ABOUT \$29,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE 1-9,999,999 VERIFY AT 500,000)

IF HA2a=5, GO TO HA2c

IF HA2=R or D AND HA2a=R or D, GO TO HA3

IF HA2a=6 OR 7, GO TO HA3

HA2b. Was it more than \$50,000, less than \$50,000, or what?

1. MORE THAN \$50,000
5. LESS THAN \$50,000
6. ABOUT \$50,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE 1-9,999,999 VERIFY AT 500,000) (GO TO HA3)

HA2c. Was it more than \$15,000, less than \$15,000, or what?

1. MORE THAN \$15,000
5. LESS THAN \$15,000
6. ABOUT \$15,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE 1-9,999,999 VERIFY AT 29,000) (GO TO HA3)

HA2d. How is it that you worked last year but had 0 earnings?

ENTER VERBATIM RESPONSE: _____

HA3. CAPI CHECK: RESPONDENT'S MARITAL STATUS:

1. R's SPOUSE / PARTNER IS LIVING IN HOUSEHOLD WITH RESPONDENT
2. RESPONDENT DOES NOT HAVE A SPOUSE OR PARTNER
3. RESPONDENT IS NOT LIVING WITH HIS / HER PARTNER OR SPOUSE

IF HA3=2 OR 3, GO TO HA6

HA4INTRO. Now I would like to ask about your [husband / wife / partner].

HA4. During [2005 / 2006 / 2007] did [he / she] receive any income from a job? This includes wages, salary, commissions, or tips.

INTERVIEWER INSTRUCTION: INCLUDE WAGES AND SALARY FROM SELF-EMPLOYMENT

1. YES
5. NO (GO TO HA6)

HA5. During [2005 / 2006 / 2007] how much income did [he / she] receive from all these sources?

\$ __, __ __ __, __ __ __ (RANGE 0–9,999,999 VERIFY AT 500,000)

HA5a. Was it more than \$31,000, or less than \$31,000, or what?

1. MORE THAN \$31,000
5. LESS THAN \$31,000
6. ABOUT \$31,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE 1–9,999,999 VERIFY AT 500,000)

IF HA5a=5, GO TO HA5c

IF HA5=R or D AND HA5a=R or D, GO TO HA6

IF HA5a=6 or 7, GO TO HA6

HA5b. Was it more than \$56,000, less than \$56,000, or what?

1. MORE THAN \$56,000
5. LESS THAN \$56,000
6. ABOUT \$56,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE 1–9,999,999 VERIFY AT 500,000)

GO TO HA6

HA5c. Was it more than \$17,000, less than \$17,000, or what?

1. MORE THAN \$17,000
5. LESS THAN \$17,000
6. ABOUT \$17,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE 1–9,999,999 VERIFY AT 31,000)

GO TO HA6

HA5d. How is it that [he / she] worked last year, but had 0 earnings?

ENTER VERBATIM RESPONSE: _____.

HA6. CAPI CHECK ROSTER LIST 1: DOES RESPONDENT HAVE CHILD OR CHILDREN AGES 10–17 IN HH?

1. 1 CHILD
2. MORE THAN 1 CHILD
3. NONE

HA7. DOES RESPONDENT HAVE SPOUSE / PARTNER?

1. SPOUSE
2. PARTNER
3. NEITHER

IF HA6=3 AND HA7=3, GO TO HA14

IF HA6=1 OR 2 AND HA7=3, GO TO HA10

IF HA7=1 or 2, GO TO HA8

HA8. CAPI CHECK ROSTER LIST 1: RESPONDENT'S SPOUSE / PARTNER SEX?

1. MALE
2. FEMALE

HA9. CAPI CHECK ROSTER LIST 1: DOES SPOUSE / PARTNER HAVE CHILD OR CHILDREN AGES 10–17 IN HH WHO ARE NOT CHILDREN OF RESPONDENT?

1. 1 CHILD
2. MORE THAN 1 CHILD
3. NONE

IF HA6 AND HA9=3, GO TO HA14

HA10. Now I want to ask you about children of yours [and /or those of your husband / wife / partner] living with you who are ages 10–17.

HA11. During [2005 / 2006 / 2007] did such a child age 10–17 of yours or your [husband / wife / partner] earn any income from a job? Please include wages, salary, commissions, and tips.)

INTERVIEWER INSTRUCTION: INCLUDE WAGES AND SALARY FROM SELF-EMPLOYMENT.

1. YES
5. NO

IF HA11=5 GO TO HA14

HA11x. CAPI CHECK: IF 1 CHILD AGED 10–17, SET HA12 TO 1 AND GO TO HA13.

HA12. How many of these children had income from a job?

HA13. During [2005 / 2006 / 2007], how much did [this child age 10–17 / these children age 10–17] receive from wages, salary, commissions, and tips [combined]?

INTERVIEWER INSTRUCTION: DO NOT PROBE “DON’T KNOW” OR “REFUSED” RESPONSE.

\$ __ __, __ __ __ (RANGE 0–9,999,999 VERIFY AT 15,000)

IF HA13=D or R, GO TO HA13a, ELSE IF HA13=0, GO TO HA13d, ELSE GO TO HA14

HA13a. Was it more than \$1,200, less than \$1,200, or what?

1. MORE THAN \$1,200
5. LESS THAN \$1,200
6. ABOUT \$1,200
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE 1–49,999 VERIFY AT 15,000)

IF HA13a=5, GO TO HA13c
 IF HA13=R or D AND HA13a=R or D, GO TO HA14
 IF HA13a=6 OR 7, GO TO HA14

HA13b. Was it more than \$2,300, less than \$2,300, or what?

1. MORE THAN \$2,300
5. LESS THAN \$2,300
6. ABOUT \$2,300
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE 1–49,999 VERIFY AT 15,000)

GO TO HA14

HA13c. Was it more than \$500, less than \$500, or what?

1. MORE THAN \$500
5. LESS THAN \$500
6. ABOUT \$500
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE 1–49,999 VERIFY AT 1,200)

GO TO HA14

HA13d. How is it that [this child / the children] worked last year but had 0 earnings?

ENTER VERBATIM RESPONSE: _____.

HA14. Now I am going to read you a list of types of income that many households receive. Please tell me whether or not you [and your partner / wife / husband] [and your child / children under age 18] in this household received any income from each of these sources in [2005 / 2006 / 2007].

HA15. Did [any of] you receive income in [2005 / 2006 / 2007] from...

INTERVIEWER INSTRUCTION: READ EACH CATEGORY:

HA15a. Child support payments?

1. YES
5. NO

HA15b. Unemployment compensation / Unemployment?

1. YES
5. NO

HA15c. Workers' Compensation?

1. YES
5. NO

HA15d. Social Security payments, including payments for children?

1. YES
5. NO

HA15e. SSI or Supplemental Security Income (a federal government program to provide money to disabled persons and low-income elderly)?

- 1. YES
- 5. NO

HA15f. Food stamps (income to lower income families to purchase food)?

- 1. YES
- 5. NO

HA15ga. Public assistance payments or foster care payments? This includes CalWORKs, County Assistance, Cash assistance, TANF, AFDC, General Relief, Government payments for foster care, or other government welfare payments.

- 1. YES
- 5. NO

HA15h. Energy or housing assistance from the government?

- 1. YES
- 5. NO

HA15k. Income from pensions, retirement income, trusts, annuities or survivor benefits (not including income from IRAs, Keoghs or 401(k) accounts)?

- 1. YES
- 5. NO

HA15x. CAPI CHECK: if ANY OF HA15a THROUGH HA15k=YES

- 1. YES
- 5. NO

IF HA15x=5 GO TO HA18

IF HA15a=5, GO TO PRE HA17b.

HA17a. About how much in total child support, across all the children under age 18 who received child support, was received in [2005 / 2006 / 2007]?

PROBE: While you may not know the exact amount, please tell me about how much it was during all of [2005 / 2006 / 2007].

\$ ____, ____, ____ (RANGE 1–84,999, VERIFY AT 24,000)

IF HA15b=5, GO TO PRE HA17c

HA17b1. Who got Unemployment Compensation?

CAPI CHECK; SHOW ROSTER LIST 1. ASK HA17b2 FOR EACH PERSON OVER 15 FROM TABLE CREATED IN HA17b1.

HA17b2. About how much income did [NAME FROM HA17b1] receive in Unemployment Compensation in [2005 / 2006 / 2007]?

PROBE: While you may not know the exact amount, please tell me about how much it was during all of [2005 / 2006 / 2007]

\$ ____, ____, ____ (RANGE 1–25,999, VERIFY AT 8,000)

IF HA15c=5 GO TO PRE HA17d

HA17c1. Who got Worker's Compensation?

CAPI CHECK; SHOW ROSTER LIST 1. ASK HA17c2 FOR EACH PERSON OVER 15 FROM TABLE CREATED IN HA17c1.

HA17c2. About how much income did [NAME FROM HA17c] receive in Worker's Compensation in [2005 / 2006 / 2007]?

PROBE: While you may not know the exact amount, please tell me about how much it was during all of [2005 / 2006 / 2007].

\$ __ __, __ __ __ (RANGE 1-55,999, VERIFY AT 28,000)

HA17c2a. Did anyone else get Worker's Compensation?

IF HA15d=5, GO TO PRE HA17e

HA17d. About how much income did you [and / or your spouse / partner] receive taken together from Social Security in [2005 / 2006 / 2007] including payments for children?

PROBE: While you may not know the exact amount, please tell me about how much it was during all of [2005 / 2006 / 2007].

\$ __ __ __, __ __ __ (RANGE 1-111,999, VERIFY AT 40,000)

IF HA15e=5 GO TO PRE HA17f

HA17e1. Who got SSI or Supplemental Security Income?

CAPI CHECK; SHOW ROSTER LIST 1. ASK HA17e2 FOR EACH PERSON FROM TABLE CREATED IN HA17e1.

HA17e2. About how much income did [NAME FROM HA17e1] receive in SSI in [2005 / 2006 / 2007]?

PROBE: While you may not know the exact amount, please tell me about how much it was during all of [2005 / 2006 / 2007].

\$ __ __, __ __ __ (RANGE 1-47,999, VERIFY AT 24,000)

IF HA15f=5 GO TO PRE HA17ga

HA17f. About how many dollars worth of Food Stamps did all the persons who got Food Stamps receive altogether in [2005 / 2006 / 2007]?

PROBE: Be sure to only include Food Stamps received by you [and /or your spouse / parter] [and / or your children under age 18]

PROBE: While you may not know the exact amount, please tell me about how much it was during all of [2005 / 2006 / 2007].

\$ __ __, __ __ __ (RANGE 1-27,999, VERIFY AT 12,000)

IF HA15ga=5 GO TO PRE HA17h

HA17ga. About how much income did all the persons who got Public Assistance Payments or Foster Care Payments receive taken together from Public Assistance or Foster Care in [2005 / 2006 / 2007]?

PROBE: While you may not know the exact amount, please tell me about how much it was during all of [2005 / 2006 / 2007].

\$ __ __, __ __ __ (RANGE 1-41,999, VERIFY AT 21,000)

IF HA15h=5 GO TO PRE HA17k

HA17h. About how much income did everyone who got Energy or Housing Assistance from the Government receive taken together from Energy or Housing Assistance from the Government in [2005 / 2006 / 2007]?

PROBE: While you may not know the exact amount, please tell me about how much it was during all of [2005 / 2006 / 2007].

\$ __ __, __ __ __ (RANGE 1-29,999, VERIFY AT 10,000)

IF HA15k=5 GO TO HA18

HA17k1. Who got payments from pensions, trusts, annuities, or survivor benefits (not including Social Security, IRAs, Keoghs, or 401(k)s)?

CAPI CHECK; SHOW ROSTER LIST 1. ASK HA17k2 FOR EACH PERSON FROM TABLE CREATED IN HA17k1.

HA17k2. About how much income did [NAME FROM HA17k1] receive in pensions, trusts, annuities, or survivor benefits in [2005 / 2006 / 2007]?

PROBE: While you may not know the exact amount, please tell me about how much it was during all of [2005 / 2006 / 2007].

\$ __ __ __, __ __ __ (RANGE 1-161,999, VERIFY AT 81,000)

HA17k2a. Did anyone else get payments from pensions, trusts, annuities, or survivor benefits (not including IRAs, Keoghs, or 401(k)s)?

- 1. YES
- 5. NO

HA18. Is this [house / apartment]...

- 1. Rented by someone in this household?
- 2. Owned or being bought by someone living in this household?
- 3. Or neither

IF HA18=2, GO TO HA21

IF HA18=3, COMPLETE VERBATIM RESPONSE: _____, and GO TO HA26.

INTERVIEWER INSTRUCTION: IF R SAYS HE / SHE / HHLD MEMBER MANAGES PROPERTY AND THUS DOES NOT PAY RENT, MARK HA18=1 AND CONTINUE TO HA19.

HA19ID. In whose name is this [house / apartment] rented?

INTERVIEWER: ENTER NAME AND ROSTER LINE NUMBER

_____ Name | _____ | _____ | Line Number
 _____ Name | _____ | _____ | Line Number

IF THE HOUSE / APARTMENT IS NOT RENTED IN THE NAME OF ANYONE IN THE HOUSEHOLD, ENTER 99 FOR LINE NUMBER.

HA19A. Is this [house / apartment] rented in anyone else's name?

- 1. YES
- 5. NO

HA20. How much is the rent?

- \$____ PER DAY (RANGE=1-999, VERIFY AT 400)
- \$____ PER WEEK (RANGE=1-3,999, VERIFY AT 1,500)
- \$____ PER 2 WEEKS (RANGE=1-19,999, VERIFY AT 5,000)
- \$____ PER MONTH (RANGE=1-49,999, VERIFY AT 15,000)
- \$____ PER YEAR (RANGE=1-999,999, VERIFY AT 120,000)
- \$__ DOES NOT PAY RENT (RANGE=0)

CAPI CHECK HA20: ONE ANSWER SHOULD BE LISTED UNDER THE DAY, WEEK, 2 WEEKS, MONTH, YEAR, or "DOES NOT PAY RENT".

IF HA20 IS COMPLETED, GO TO HA29
ELSE IF RESPONSE IS "Does not pay rent" THEN GO TO HA20a.

HA20_1. Is that...

- 1. Per day
- 2. Per week
- 3. Per two weeks
- 4. Per month
- 5. Per year

HA20a. How is it that you live here but no one pays rent?

- 1. Manages the property
- 2. Other, specify

GO TO HA29

HA21ID. In whose name is this [house / apartment] owned?

INTERVIEWER: ENTER ROSTER ID OF NAME

_____ Name |_____|_____| Line Number
 _____ Name |_____|_____| Line Number

IF THE HOUSE / APARTMENT IS NOT OWNED IN THE NAME OF ANYONE IN THE HOUSEHOLD, ENTER 99 FOR LINE NUMBER.

A22. Is there a mortgage or loan on this [house / apartment]?

- 1. YES
- 5. NO

IF HA22=5, GO TO HA25
IF HA22=D OR R, GO TO HA25

HA23. How much is the monthly payment for all mortgages and loans on this house combined?

\$____ PER MONTH (RANGE=1-99,997, VERIFY AT 40,000)

HA23_s. IF GIVE OTHER THAN MONTHLY AMOUNT, ENTER VERBATIM RESPONSE:

_____.

HA24. Does this amount include property taxes or insurance?

1. INCLUDES PROPERTY TAXES
2. INCLUDES INSURANCE
3. INCLUDES BOTH TAXES AND INSURANCE
4. NEITHER

HA24a1. Please tell me about how much you still owe for your house on the mortgage.

INTERVIEWER INSTRUCTION: DO NOT PROBE "DON'T KNOW" OR "REFUSED" RESPONSE.

\$ __, __ __ __, __ __ __ (RANGE=1-7,999,999, VERIFY AT 1,100,000)

If HA24a1=D or R, GO TO HA24a1a, ELSE GO TO HA25

HA24a1a. Is it more than \$280,000, or less than \$280,000, or what?

1. MORE THAN \$280,000
5. LESS THAN \$280,000
6. ABOUT \$280,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1-7,999,999, VERIFY AT 1,100,000)

IF HA24a1a=5, GO TO HA28a1c

IF HA24a1a=R or D AND HA24a1=R or D, GO TO HA25

IF HA24a1a=6 OR 7, GO TO HA25

HA24a1b. Is it more than \$500,000, less than \$500,000, or what?

1. MORE THAN \$500,000
5. LESS THAN \$500,000
6. ABOUT \$500,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1-7,999,999, VERIFY AT 1,100,000)

IF HA24a1b=1, GO TO HA24a1d

IF HA24a1b=5 OR 6 OR 7, GO TO HA25

HA24a1c. Is it more than \$180,000, less than \$180,000, or what?

1. MORE THAN \$180,000
5. LESS THAN \$180,000
6. ABOUT \$180,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1-7,999,999, VERIFY AT 280,000)

GO TO HA25

HA24a1d. Is it more than \$1,100,000, less than \$1,100,000, or what?

1. MORE THAN \$1,100,000
5. LESS THAN \$1,100,000
6. ABOUT \$1,100,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1-7,999,999, VERIFY AT 1,100,000)

HA25. Please tell me about how much you think this house would sell for if you sold it today?

INTERVIEWER INSTRUCTION: DO NOT PROBE "DON'T KNOW" OR "REFUSED" RESPONSE.

\$ _____ (RANGE=1-11,999,999, VERIFY AT 1,500,000)

If HA25=D or R, GO TO HA25a, ELSE GO TO HA25a1

HA25a. Is it more than \$280,000, or less than \$280,000, or what?

1. MORE THAN \$280,000
5. LESS THAN \$280,000
6. ABOUT \$280,000
7. OTHER AMOUNT: \$ _____ (RANGE=1-11,999,999, VERIFY AT 1,500,000)

IF HA25a=5, GO TO HA25c

IF HA25=R or D AND HA25a=R or D, GO TO HA25a1

IF HA25a=6 OR 7, GO TO HA25a1

HA25b. Is it more than \$500,000, less than \$500,000, or what?

1. MORE THAN \$500,000
5. LESS THAN \$500,000
6. ABOUT \$500,000
7. OTHER AMOUNT: \$ _____ (RANGE=1-11,999,999, VERIFY AT 1,500,000)

IF HA25b=1, GO TO HA25d

IF HA25b=5 OR 6 OR 7, GO TO HA25a1

HA25c. Is it more than \$180,000, less than \$180,000, or what?

1. MORE THAN \$180,000
5. LESS THAN \$180,000
6. ABOUT \$180,000
7. OTHER AMOUNT: \$ _____ (RANGE=1-11,999,999, VERIFY AT 280,000)

GO TO HA25a1

HA25d. Is it more than \$1,100,000, less than \$1,100,000, or what?

1. MORE THAN \$1,100,000
5. LESS THAN \$1,100,000
6. ABOUT \$1,100,000
7. OTHER AMOUNT: \$ _____ (RANGE=1-11,999,999, VERIFY AT 1,500,000)

HA25a1. In what year did you buy, inherit, or receive as a gift this house?

YEAR _____ (RANGE=1930-2007)

HA25a2. Please tell me about how much this house was worth when you bought / inherited / received it.

INTERVIEWER INSTRUCTION: DO NOT PROBE "DON'T KNOW" OR "REFUSED" RESPONSE.

\$ _____ (RANGE=1-9,999,999, VERIFY AT 1,100,000)

If HA25a2=D or R, GO TO HA25a2a, ELSE GO TO HA29

HA25a2a. Was it more than \$280,000, or less than \$280,000, or what?

1. MORE THAN \$280,000
5. LESS THAN \$280,000
6. ABOUT \$280,000
7. OTHER AMOUNT: \$ _____ (RANGE=1-9,999,999, VERIFY AT 1,000,000)

IF HA25a2a=5, GO TO HA25a2c
IF HA25a2a=R or D AND HA25a2=R or D, GO TO HA29
IF HA25a2a=6 OR 7, GO TO HA29

HA25a2b. Was it more than \$500,000, less than \$500,000, or what?

1. MORE THAN \$500,000
5. LESS THAN \$500,000
6. ABOUT \$500,000
7. OTHER AMOUNT: \$ ____, ____, ____ (RANGE=1-9,999,999, VERIFY AT 1,000,000)

IF HA25a2b=1, GO TO HA25a2d
IF HA25a2b=5 OR 6 OR 7, GO TO HA29

HA25a2c. Was it more than \$180,000, less than \$180,000, or what?

1. MORE THAN \$180,000
5. LESS THAN \$180,000
6. ABOUT \$180,000
7. OTHER AMOUNT: \$ ____, ____, ____ (RANGE=1-9,999,999, VERIFY AT 1,000,000)

GO TO HA29

HA25a2d. Was it more than \$1,100,000, less than \$1,100,000, or what?

1. MORE THAN \$1,100,000
5. LESS THAN \$1,100,000
6. ABOUT \$1,100,000
7. OTHER AMOUNT: \$ ____, ____, ____ (RANGE=1-9,999,999, VERIFY AT 1,000,000)

GO TO HA29

HA26. Who owns or rents this [house / apartment]?

INTERVIEWER: CODE RESPONSE TO ANSWERS BELOW

1. SOMEONE IN THIS HOUSEHOLD
2. EX-SPOUSE OR EX-PARTNER
3. FAMILY MEMBER LIVING OUTSIDE THE HOUSEHOLD
4. EMPLOYER
5. SOCIAL SERVICE ORGANIZATION
6. OTHER, SPECIFY
7. FRIEND

IF HA26=1, LOOP BACK TO HA18
IF HA26=4 OR 5, GO TO HA29
IF HA26=6, ENTER VERBATIM RESPONSE: _____, AND GO TO HA29

HA27. Does that person pay rent or a mortgage payment on this [house / apartment]?

1. YES, RENT
2. YES, MORTGAGE PAYMENT
5. NO

IF HA27=1 OR 2, GO TO HA28
IF HA27=5, GO TO HA27a
IF HA27=D OR R, GO TO HA28

HA27a. How is it that no one pays rent for this [house / apartment]?

1. MANAGES PROPERTY
2. OTHER, SPECIFY: _____,

GO TO HA29

HA28. How much is the [rent / mortgage payment] each month?

\$ ____,____ PER MONTH (RANGE=1–99,997, VERIFY AT 40,000)

HA29. How many bedrooms are there in this [house / apartment]?

__ BEDROOMS (RANGE=0–20, VERIFY AT 10)

HA30. And how many bathrooms?

__ BATHROOMS (RANGE=1–15, VERIFY AT 8)

HA31. Aside from bedrooms, bathrooms, and the kitchen, how many other rooms are there in this [house / apartment]?

__ OTHER ROOMS (RANGE=0–30, VERIFY AT 15)

HA32. Do you have a back yard or patio [as part of this apartment]?

1. YES
5. NO

HA33 INTRO. Savings and investments are an important part of family finances. The next questions ask about a number of different kinds of savings or investments that you may have.

HA33. Do you or your [husband / wife / partner] have any real estate, [other than your main home,] such as land, rental real estate, a partnership, or money owed to you on a land contract or mortgage?

1. YES
2. [IF VOLUNTEERED] YES, MORE THAN ONE
5. NO

IF HA33=5, D, OR R, GO TO HA43

HA34. If you sold all that and then paid off any debts you owed against it, about how much would you get?

INTERVIEWER INSTRUCTION: DO NOT PROBE “DON’T KNOW” OR “REFUSED” RESPONSE. IF AMOUNT IS EQUAL TO ZERO OR IS NEGATIVE, CODE 0 (ZERO).

\$ ____,____,____ (RANGE=0–14,999,999, VERIFY AT 4,000,000)

IF HA34=D OR R, GO TO HA35, ELSE, GO TO HA38

HA35. Would it amount to more than \$110,000, less than \$110,000, or what?

1. MORE THAN \$110,000
5. LESS THAN \$110,000
6. ABOUT \$110,000
7. OTHER AMOUNT: \$ ____,____,____ (RANGE=0–14,999,999, VERIFY AT 4,000,000)

IF HA35=5, GO TO HA37

IF HA34=R or D AND HA35=R or D, GO TO HA38

IF HA35=6 OR 7, GO TO HA38

HA36. Would it amount to more than \$370,000, less than \$370,000, or what?

1. MORE THAN \$370,000
5. LESS THAN \$370,000
6. ABOUT \$370,000
7. OTHER AMOUNT: \$ ____, ____, ____ (RANGE=0–14,999,999, VERIFY AT 4,000,000)

IF HA36=1, GO TO HA37a

IF HA36=5 OR 6 OR 7, GO TO HA38

HA37. Would it amount to more than \$40,000, less than \$40,000, or what?

1. MORE THAN \$40,000
5. LESS THAN \$40,000
6. ABOUT \$40,000
7. OTHER AMOUNT: \$ ____, ____, ____ (RANGE=0–14,999,999, VERIFY AT 110,000)

GO TO HA38

HA37a. Would it amount to more than \$2,200,000, less than \$2,200,000, or what?

1. MORE THAN \$2,200,000
5. LESS THAN \$2,200,000
6. ABOUT \$2,200,000
7. OTHER AMOUNT: \$ ____, ____, ____ (RANGE=0–14,999,999, VERIFY AT 4,000,000)

HA38. Do you [or your husband / wife / partner] currently receive any income or rent from [that property / those properties]?

1. YES
5. NO

IF HA38=5, D, OR R, GO TO HA43

HA39. Before any expenses, about how much did you receive from this income between January and December [2005 / 2006 / 2007]?

PROBE: Please do not include rental income from a business or farm that you own.

INTERVIEWER INSTRUCTION: DO NOT PROBE “DON’T KNOW” OR “REFUSED” RESPONSE.

\$ ____, ____, ____ (RANGE=0–9,999,999, VERIFY AT 1,000,000)

IF HA39=D OR R, GO TO HA40, ELSE, GO TO HA43

HA40. Would it amount to more than \$14,000, less than \$14,000, or what?

1. MORE THAN \$14,000
5. LESS THAN \$14,000
6. ABOUT \$14,000
7. OTHER AMOUNT: \$ ____, ____, ____ (RANGE=0–9,999,999, VERIFY AT 1,000,000)

IF HA40=5, GO TO HA42

IF HA39=R or D AND HA40=R or D, GO TO HA43

IF HA40=6 OR 7, GO TO HA43

HA41. Would it amount to more than \$35,000, less than \$35,000, or what?

1. MORE THAN \$35,000
5. LESS THAN \$35,000
6. ABOUT \$35,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=0–9,999,999, VERIFY AT 1,000,000)

IF HA41=1, GO TO HA42a

IF HA41=5 OR 6 OR 7, GO TO HA43

HA42. Would it amount to more than \$5,000, less than \$5,000, or what?

1. MORE THAN \$5,000
5. LESS THAN \$5,000
6. ABOUT \$5,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=0–9,999,999, VERIFY AT 14,000)

GO TO HA43

HA42a. Would it amount to more than \$130,000, less than \$130,000, or what?

1. MORE THAN \$130,000
5. LESS THAN \$130,000
6. ABOUT \$130,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=0–9,999,999, VERIFY AT 1,000,000)

HA43. Do you or your [husband / wife / partner] own part or all of a business or farm?

1. YES
2. [IF VOLUNTEERED] YES, MORE THAN ONE
5. NO

IF HA43=5, D, OR R, GO TO HA53

HA44. If you sold all that and then paid off any debts you owed against it, about how much would you get?

INTERVIEWER INSTRUCTION: DO NOT PROBE "DON'T KNOW" OR "REFUSED" RESPONSE. IF AMOUNT IS EQUAL TO ZERO OR IS NEGATIVE, CODE 0 (ZERO).

\$ __, __ __ __, __ __ __ (RANGE=0–9,999,999, VERIFY AT 2,000,000)

IF HA44=D OR R, GO TO HA45, ELSE, GO TO HA48

HA45. Would it amount to more than \$240,000, less than \$240,000, or what?

1. MORE THAN \$240,000
5. LESS THAN \$240,000
6. ABOUT \$240,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=0–9,999,999, VERIFY AT 2,000,000)

IF HA45=5, GO TO HA47

IF HA44=R or D AND HA45=R or D, GO TO HA48

IF HA45=6 OR 7, GO TO HA48

HA46. Would it amount to more than \$600,000, less than \$600,000, or what?

1. MORE THAN \$600,000
5. LESS THAN \$600,000
6. ABOUT \$600,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=0–9,999,999, VERIFY AT 2,000,000)

IF HA46=1, GO TO HA47a
IF HA46=5 OR 6 OR 7, GO TO HA48

HA47. Would it amount to more than \$35,000, less than \$35,000, or what?

1. MORE THAN \$35,000
5. LESS THAN \$35,000
6. ABOUT \$35,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=0–9,999,999, VERIFY AT 240,000)

GO TO HA48

HA47a. Would it amount to more than \$2,000,000, less than \$2,000,000, or what?

1. MORE THAN \$2,000,000
5. LESS THAN \$2,000,000
6. ABOUT \$2,000,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=0–9,999,999, VERIFY AT 2,000,000)

HA48. Did you or your [husband / wife / partner] receive any income from [that farm or business / those farms or businesses] between January and December [2005 / 2006 / 2007]?

1. YES
5. NO

IF HA48=5, D, OR R, GO TO HA53

HA48a. Not including any wages or salary income you already reported, did you make a net profit or experience a net loss from any farms or businesses between January and December [2005 / 2006 / 2007]?

1. PROFIT
5. LOSS

IF HA48A=D OR R, GO TO HA53

HA49. About how much did you receive in net [profits / losses] from any farms or businesses between January and December [2005 / 2006 / 2007]?

PROBE: Not including any wages or salary income you already reported.

INTERVIEWER INSTRUCTION: DO NOT PROBE "DON'T KNOW" OR "REFUSED" RESPONSE

\$ __, __ __ __, __ __ __ (RANGE=0–9,999,999, VERIFY AT 500,000)

IF HA49=D OR R, GO TO Ha50, ELSE, GO TO HA53

HA50. Did it amount to more than \$50,000, less than \$50,000, or what?

1. MORE THAN \$50,000
5. LESS THAN \$50,000
6. ABOUT \$50,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=0–9,999,999, VERIFY AT 500,000)

IF HA50=5, GO TO HA52

IF HA49=R or D AND HA50=R or D, GO TO HA53

IF HA50=6 OR 7, GO TO HA53

HA51. Did it amount to more than \$85,000, less than \$85,000, or what?

1. MORE THAN \$85,000
5. LESS THAN \$85,000
6. ABOUT \$85,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=0–9,999,999, VERIFY AT 500,000)

IF HA51=1, GO TO HA52a

IF HA51=5 OR 6 OR 7, GO TO HA53

HA52. Did it amount to more than \$25,000, less than \$25,000, or what?

1. MORE THAN \$25,000
5. LESS THAN \$25,000
6. ABOUT \$25,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=0–9,999,999, VERIFY AT 50,000)

GO TO HA53

HA52a. Did it amount to more than \$325,000, less than \$325,000, or what?

1. MORE THAN \$325,000
5. LESS THAN \$325,000
6. ABOUT \$325,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=0–9,999,999, VERIFY AT 500,000)

HA53. Do you [or your husband / wife / partner] currently have any money or assets that are held in an Individual Retirement Account, that is, in an IRA, KEOGH, or 401(k) account?

1. YES
5. NO

IF HA53=5, D, OR R, GO TO HA60

HA54. About how much is in these accounts in total at the present time?

INTERVIEWER INSTRUCTION: DO NOT PROBE “DON’T KNOW” OR “REFUSED” RESPONSE

\$ __, __ __ __, __ __ __ (RANGE=1–9,999,999, VERIFY AT 500,000)

IF HA54=D OR R, GO TO HA55, ELSE, GO TO HA58

HA55. Does it amount to more than \$30,000, less than \$30,000, or what?

1. MORE THAN \$30,000
5. LESS THAN \$30,000
6. ABOUT \$30,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1–9,999,999, VERIFY AT 500,000)

IF HA55=5, GO TO HA57

IF HA54=R or D AND HA55=R or D, GO TO HA58

IF HA55=6 OR 7, GO TO HA58

HA56. Does it amount to more than \$100,000, less than \$100,000 or what?

1. MORE THAN \$100,000
5. LESS THAN \$100,000
6. ABOUT \$100,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1–9,999,999, VERIFY AT 500,000)

IF HA56=1, GO TO HA57a
IF HA56=5 OR 6 OR 7, GO TO HA58

HA57. Does it amount to more than \$9,000, less than \$9,000, or what?

1. MORE THAN \$9,000
5. LESS THAN \$9,000
6. ABOUT \$9,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1-9,999,999, VERIFY AT 30,000)

GO TO HA58

HA57a. Does it amount to more than \$300,000, less than \$300,000, or what?

1. MORE THAN \$300,000
5. LESS THAN \$300,000
6. ABOUT \$300,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1-9,999,999, VERIFY AT 500,000)

HA58. Have you or your [husband / wife / partner] withdrawn any money or received any payments from these accounts between January and December [2005 / 2006 / 2007]?

1. YES
5. NO

IF HA58=5, D, OR R, GO TO HA60

HA59. Altogether, about how much money did you [and your husband / wife / partner] withdraw from these accounts between January and December [2005 / 2006 / 2007]?

- \$ __, __ __ __, __ __ __ IN TOTAL (RANGE=1-9,999,999, VERIFY AT 500,000)
\$ __, __ __ __ EVERY TWO WEEKS (OR TWICE A MONTH) (RANGE=1-99,999, VERIFY AT 50,000)
\$ __ __ __, __ __ __ EVERY MONTH (RANGE=1-999,999, VERIFY AT 500,000)
\$ __, __ __ __, __ __ __ EACH QUARTER (RANGE=1-9,999,999, VERIFY AT 1,000,000)
\$ __, __ __ __, __ __ __ EVERY 6 MONTHS (RANGE=1-9,999,999, VERIFY AT 1,000,000)
\$ __, __ __ __, __ __ __ EACH YEAR (RANGE=1-9,999,999, VERIFY AT 1,000,000)
\$ __, __ __ __, __ __ __ OTHER TIME PERIOD (RANGE=1-999,999, VERIFY AT 500,000)

LEAVE BLANK FOR WITHDRAWAL NOT CODED IN A GIVEN UNIT

HA60. [Aside from anything you have already told me about] do you [and your husband / wife / partner] have any shares of stock, mutual funds, corporate, municipal, government or foreign bonds, or bond funds, including government savings bonds and treasury bills?

1. YES
5. NO

IF HA60=5, D, OR R, GO TO HA70

HA61. If you sold all those and paid off anything you owed against them, about how much would you have?

INTERVIEWER INSTRUCTION: DO NOT PROBE "DON'T KNOW" OR "REFUSED" RESPONSE. IF AMOUNT IS EQUAL TO ZERO OR IS NEGATIVE, CODE 0 (ZERO).

\$ __, __ __ __, __ __ __ (RANGE=0-9,999,999, VERIFY AT 500,000)

IF HA61=D OR R, GO TO HA62, ELSE, GO TO HA65

HA62. Would it amount to more than \$25,000, less than \$25,000, or what?

1. MORE THAN \$25,000
5. LESS THAN \$25,000
6. ABOUT \$25,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1-9,999,999, VERIFY AT 500,000)

IF HA62=5, GO TO HA64
IF HA61=R or D AND HA62=R or D, GO TO HA65
IF HA62=6 OR 7, GO TO HA65

HA63. Would it amount to more than \$120,000, less than \$120,000, or what?

1. MORE THAN \$120,000
5. LESS THAN \$120,000
6. ABOUT \$120,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1-9,999,999, VERIFY AT 500,000)

IF HA63=1, GO TO HA64a
IF HA63=5 OR 6 OR 7, GO TO HA65

HA64. Would it amount to more than \$6,000, less than \$6,000, or what?

1. MORE THAN \$6,000
5. LESS THAN \$6,000
6. ABOUT \$6,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1-9,999,999, VERIFY AT 25,000)

GO TO HA65

HA64a. Would it amount to more than \$185,000, less than \$185,000, or what?

1. MORE THAN \$185,000
5. LESS THAN \$185,000
6. ABOUT \$185,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1-9,999,999, VERIFY AT 500,000)

HA65. Did these investments pay any dividends or interest between January and December [2005 / 2006 / 2007]?

1. YES
5. NO

IF HA65=5, D, OR R, GO TO HA70

HA66. About how much did you receive from these investments between January and December [2005 / 2006 / 2007]?

INTERVIEWER INSTRUCTION: DO NOT PROBE "DON'T KNOW" OR "REFUSED" RESPONSE

\$ __, __ __ __, __ __ __ (RANGE=1-9,999,999, VERIFY AT 500,000)

IF HA66=D OR R, GO TO HA67, ELSE, GO TO HA70

HA67. Did it amount to more than \$3,000, less than \$3,000, or what?

1. MORE THAN \$3,000
5. LESS THAN \$3,000
6. ABOUT \$3,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1-9,999,999, VERIFY AT 500,000)

IF HA67=5, GO TO HA69
IF HA66=R or D AND HA67=R or D, GO TO HA70
IF HA67=6 OR 7, GO TO HA70

HA68. Did it amount to more than \$9,000, less than \$9,000, or what?

1. MORE THAN \$9,000
5. LESS THAN \$9,000
6. ABOUT \$9,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1-9,999,999, VERIFY AT 500,000)

IF HA68=1, GO TO HA69a
IF HA68=5 OR 6 OR 7, GO TO HA70

HA69. Did it amount to more than \$500, less than \$500, or what?

1. MORE THAN \$500
5. LESS THAN \$500
6. ABOUT \$500
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1-9,999,999, VERIFY AT 3,000)

GO TO HA70

HA69a. Did it amount to more than \$40,000, less than \$40,000, or what?

1. MORE THAN \$40,000
5. LESS THAN \$40,000
6. ABOUT \$40,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1-9,999,999, VERIFY AT 500,000)

HA70. [Aside from anything you have already told me about] Do you [and your husband / wife / partner] have any checking or savings accounts, certificates of deposit, or money market funds?

1. YES
5. NO

IF HA70=5, D, OR R, GO TO HA80

HA71. If you added up all such accounts, about how much would they amount to right now?

INTERVIEWER INSTRUCTION: DO NOT PROBE "DON'T KNOW" OR "REFUSED" RESPONSE

\$ __, __ __ __, __ __ __ (RANGE=1-9,999,999, VERIFY AT 500,000)

IF HA71=D OR R, GO TO HA72, ELSE, GO TO HA75

HA72. Would it amount to more than \$4,000, less than \$4,000, or what?

1. MORE THAN \$4,000
5. LESS THAN \$4,000
6. ABOUT \$4,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1-9,999,999, VERIFY AT 500,000)

IF HA72=5, GO TO HA74
IF HA71=R or D AND HA72=R or D, GO TO HA75
IF HA72=6 OR 7, GO TO HA75

HA73. Would it amount to more than \$12,000, less than \$12,000, or what?

1. MORE THAN \$12,000
5. LESS THAN \$12,000
6. ABOUT \$12,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1–9,999,999, VERIFY AT 500,000)

IF HA73=1, GO TO HA74a

IF HA73=5 OR 6 OR 7, GO TO HA75

HA74. Would it amount to more than \$1,000, less than \$1,000, or what?

1. MORE THAN \$1,000
5. LESS THAN \$1,000
6. ABOUT \$1,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1–9,999,999, VERIFY AT 4,000)

GO TO HA75

HA74a. Would it amount to more than \$90,000, less than \$90,000, or what?

1. MORE THAN \$90,000
5. LESS THAN \$90,000
6. ABOUT \$90,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1–9,999,999, VERIFY AT 500,000)

HA75. Do these accounts or money market funds pay any interest?

1. YES
5. NO

IF HA75=5, D, or R, GO TO HA80

HA76. About how much did you receive from these between January and December [2005 / 2006 / 2007]?

INTERVIEWER INSTRUCTION: DO NOT PROBE "DON'T KNOW" OR "REFUSED" RESPONSE

\$ __, __ __ __, __ __ __ (RANGE=1–9,999,999, VERIFY AT 500,000)

IF HA76=D OR R, GO TO HA77, ELSE, GO TO HA80

HA77. Did you receive more than \$200, less than \$200, or what in interest from savings and checking accounts between January and December [2005 / 2006 / 2007]?

1. MORE THAN \$200
5. LESS THAN \$200
6. ABOUT \$200
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1–9,999,999, VERIFY AT 500,000)

IF HA77=5, GO TO HA79

IF HA76=R or D AND HA77=R or D, GO TO HA80

IF HA77=6 OR 7, GO TO HA80

HA78. Did you receive more than \$1,500, less than \$1,500, or what?

1. MORE THAN \$1,500
5. LESS THAN \$1,500
6. ABOUT \$1,500
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1–9,999,999, VERIFY AT 500,000)

IF HA78=1 GO TO HA79a

IF HA78=5 OR 6 OR 7, GO TO HA80

HA79. Did you receive more than \$25, less than \$25, or what?

1. MORE THAN \$25
5. LESS THAN \$25
6. ABOUT \$25
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1–9,999,999, VERIFY AT 500,000)

GO TO HA80

HA79a. Did you receive more than \$7,000, less than \$7,000, or what?

1. MORE THAN \$7,000
5. LESS THAN \$7,000
6. ABOUT \$7,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1–9,999,999, VERIFY AT 500,000)

HA80. Do you or your [husband / wife / partner] own one or more cars? Please include only cars that work.

1. YES
5. NO

HA81. Do you [or your husband / wife / partner] own any [other] types of vehicles, like trucks, a trailer, a motor home, a boat, or an airplane?

1. YES
5. NO

IF HA80 AND HA81=5, GO TO HA86 INTRO

HA82. What are all your cars and any other vehicles worth altogether, minus anything you still owe on them?

INTERVIEWER INSTRUCTIONS: DO NOT PROBE "DON'T KNOW" OR "REFUSED" RESPONSE. IF AMOUNT IS EQUAL TO ZERO OR IS NEGATIVE, CODE 0 (ZERO).

\$ __, __ __ __, __ __ __ (RANGE=0–9,999,999, VERIFY AT 250,000)

IF HA82=D OR R, GO TO HA83, ELSE, GO TO HA86 INTRO

HA83. Would they be worth more than \$10,000, less than \$10,000, or what?

1. MORE THAN \$10,000
5. LESS THAN \$10,000
6. ABOUT \$10,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1–9,999,999, VERIFY AT 250,000)

IF HA83=5, GO TO HA85

IF HA82=R or D AND HA83=R or D, GO TO HA86 INTRO

IF HA83=6 OR 7, GO TO HA86 INTRO

HA84. Would they be worth more than \$20,000, less than \$20,000, or what?

1. MORE THAN \$20,000
5. LESS THAN \$20,000
6. ABOUT \$20,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1–9,999,999, VERIFY AT 250,000)

IF HA84=1 THEN GO TO HA85a

IF HA84=5 OR 6 OR 7, GO TO HA86 INTRO

HA85. Would they be worth more than \$4,000, less than \$4,000, or what?

1. MORE THAN \$4,000
5. LESS THAN \$4,000
6. ABOUT \$4,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1–9,999,999, VERIFY AT 250,000)

GO TO HA86 INTRO

HA85a. Would they be worth more than \$60,000, less than \$60,000, or what?

1. MORE THAN \$60,000
5. LESS THAN \$60,000
6. ABOUT \$60,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1–9,999,999, VERIFY AT 250,000)

HA86 INTRO. I have just a few more questions about your household finances.

HA87. Do you [or your husband / wife / partner] have any other savings or assets, such as jewelry, money owed to you by others, a collection for investment purposes, rights in an estate where you are the beneficiary, other trust funds, or an annuity?

INTERVIEWER INSTRUCTION: DO NOT INCLUDE THE CASH VALUE OF ANY LIFE INSURANCE POLICIES

1. YES
5. NO

IF HA87=5, D, OR R, GO TO HA97

HA88. If you sold all that and then paid off any debts you owed against it, about how much would you have?

INTERVIEWER INSTRUCTION: DO NOT PROBE "DON'T KNOW" OR "REFUSED" RESPONSE. IF AMOUNT IS EQUAL TO ZERO OR IS NEGATIVE, CODE 0 (ZERO).

\$ __, __ __ __, __ __ __ (RANGE=0–9,999,999, VERIFY AT 500,000)

IF HA88=D OR R, GO TO HA89, ELSE, GO TO HA92

HA89. Would it amount to more than \$22,000, less than \$22,000 or what?

1. MORE THAN \$22,000
5. LESS THAN \$22,000
6. ABOUT \$22,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1–9,999,999, VERIFY AT 500,000)

IF HA89=5, GO TO HA91

IF HA88=R or D AND HA89=R or D, GO TO HA92

IF HA89=6 OR 7, GO TO HA92

HA90. Would it amount to more than \$90,000, less than \$90,000, or what?

1. MORE THAN \$90,000
5. LESS THAN \$90,000
6. ABOUT \$90,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1–9,999,999, VERIFY AT 500,000)

IF HA90=1, GO TO HA91a

IF HA90=5 OR 6 OR 7, GO TO HA92

HA91. Would it amount to more than \$6,000, less than \$6,000, or what?

1. MORE THAN \$6,000
5. LESS THAN \$6,000
6. ABOUT \$6,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1–9,999,999, VERIFY AT 500,000)

GO TO HA92

HA91a. Would it amount to more than \$350,000, less than \$350,000, or what?

1. MORE THAN \$350,000
5. LESS THAN \$350,000
6. ABOUT \$350,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1–9,999,999, VERIFY AT 500,000)

HA92. Did any of these other savings or assets pay any income between January and December [2005 / 2006 / 2007]

1. YES
5. NO

IF HA92=5, D, OR R, GO TO HA97

HA93. About how much income did you receive from these other assets between January and December [2005 / 2006 / 2007]?

INTERVIEWER INSTRUCTION: DO NOT PROBE "DON'T KNOW" OR "REFUSED" RESPONSE

\$ __, __ __ __, __ __ __ (RANGE=1–9,999,999, VERIFY AT 500,000)

IF HA93=D OR R, GO TO HA94, ELSE, GO TO HA97

HA94. Did it amount to more than \$10,000, less than \$10,000, or what?

1. MORE THAN \$10,000
5. LESS THAN \$10,000
6. ABOUT \$10,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1–9,999,999, VERIFY AT 500,000)

IF HA94=5, GO TO HA96

IF HA93=R or D AND HA94=R or D, GO TO HA97

IF HA94=6 OR 7, GO TO HA97

HA95. Did it amount to more than \$40,000, less than \$40,000, or what?

1. MORE THAN \$40,000
5. LESS THAN \$40,000
6. ABOUT \$40,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1–9,999,999, VERIFY AT 500,000)

GO TO HA97

HA96. Did it amount to more than \$5,000, less than \$5,000, or what?

1. MORE THAN \$5,000
5. LESS THAN \$5,000

6. ABOUT \$5,000

7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1–9,999,999, VERIFY AT 10,000)

HA97. Other than what you have already told me about, did you [or your husband / wife / partner] receive any other income between January and December [2005 / 2006 / 2007], for example, from alimony or maintenance payments, veteran’s payments, consulting fees, royalties, financial support from relatives or friends, and so forth?

1. YES

5. NO

IF HA97=5, D, or R, GO TO HA98a1

HA98. How much did you [and your husband / wife / partner] receive altogether from these other sources between January and December [2005 / 2006 / 2007]?

INTERVIEWER INSTRUCTION: DO NOT PROBE “DON’T KNOW” OR “REFUSED” RESPONSE

\$ __, __ __ __, __ __ __ (RANGE=1–9,999,999, VERIFY AT 500,000)

IF HA98=D OR R, GO TO HA98a, ELSE GO TO HA98a1

HA98a. Did it amount to more than \$10,000, less than \$10,000, or what?

1. MORE THAN \$10,000

5. LESS THAN \$10,000

6. ABOUT \$10,000

7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1–9,999,999, VERIFY AT 500,000)

IF HA98a=5, GO TO HA98c

IF HA98=R or D AND HA98a=R or D, GO TO HA98a1

IF HA98a=6 OR 7, GO TO HA98a1

HA98b. Did it amount to more than \$40,000, less than \$40,000, or what?

1. MORE THAN \$40,000

5. LESS THAN \$40,000

6. ABOUT \$40,000

7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1–9,999,999, VERIFY AT 500,000)

GO TO HA98a1

HA98c. Did it amount to more than \$5,000, less than \$5,000, or what?

1. MORE THAN \$5,000

5. LESS THAN \$5,000

6. ABOUT \$5,000

7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1–9,999,999, VERIFY AT 10,000)

HA98a1. Other than any debts against property, businesses or farms, stocks or bonds, and cars or other vehicles that you have already told me about, do you or your [husband / wife / partner] have any other outstanding debts right now, for example, from credit card debts, educational loans, medical bills, money owed to relatives or friends, and so forth?

1. YES

5. NO

IF HA98a1=5, D, or R, GO TO HA99

HA98a2. How much do you [and your husband / wife / partner] owe altogether for these other debts?

INTERVIEWER INSTRUCTION: DO NOT PROBE "DON'T KNOW" OR "REFUSED" RESPONSE

\$ __, __ __ __, __ __ __ (RANGE=1-9,999,999, VERIFY AT 500,000)

IF HA98a2=D OR R, GO TO HA98a2a, ELSE GO TO HA99

HA98a2a. Does it amount to more than \$10,000, less than \$10,000, or what?

1. MORE THAN \$10,000
5. LESS THAN \$10,000
6. ABOUT \$10,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1-9,999,999, VERIFY AT 500,000)

IF HA98a2a=5, GO TO HA98a2c

IF HA98a2=R or D AND HA98a2a=R or D, GO TO HA99

IF HA98a2a=6 OR 7, GO TO HA99

HA98a2b. Does it amount to more than \$40,000, less than \$40,000, or what?

1. MORE THAN \$40,000
5. LESS THAN \$40,000
6. ABOUT \$4,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1-9,999,999, VERIFY AT 500,000)

GO TO HA99

HA98a2c. Does it amount to more than \$5,000, less than \$5,000, or what?

1. MORE THAN \$5,000
5. LESS THAN \$5,000
6. ABOUT \$5,000
7. OTHER AMOUNT: \$ __, __ __ __, __ __ __ (RANGE=1-9,999,999, VERIFY AT 10,000)

HA99. CAPI ROSTER CHECK: IS THERE ANOTHER DESIGNATED RESPONDENT WHO SHOULD COMPLETE THIS HOUSEHOLD MODULE?

1. YES
5. NO

IF HA99=5, GO TO HA100, ELSE, REPEAT THIS MODULE FOR THE NEXT RESPONDENT.

HA100. Thank you. That's the end of this part of the interview.

Los Angeles Family and Neighborhood Survey, Wave 2 (L.A.FANS-2)

ADULT QUESTIONNAIRE

QUESTIONNAIRE FOR ALL SAMPLED RSAs, PCGs, RSCs ≥18, and SIBs ≥18

Preloads (from W2 Roster Module and W1 data)

- Type of respondent: RSA-P, RSC-PA, SIB-PA, PCGW1, PCGW2, RSA-NE, PCG-NE
- Whether or not respondent was actually interviewed in W1
- Whether this is a complete turnover household
- Respondent's name, roster id, age, sex, marital / cohabitation status, spouse / partner's name, educational attainment at W1 (panel respondents only)
- Is respondent the same person who completed current roster
- Wave 1 Adult questionnaire interview date
- Date and place of birth for panel respondents
- For panel respondents who were married or living in a relationship at W1: date of marriage or beginning of cohabitation for the marriage or relationship that respondent is in at the time of W1
- For panel respondents who were divorced, separated, or widowed and not cohabiting at W1: date that their most recent marriage ended
- For RSC_P and SIB_P age 18 and over: relationship of PCGW1 to them and sex of PCGW1
- Whether respondent currently lives with a parent
- Whether respondent currently lives with bio father
- Whether respondent currently lives with bio mother
- Whether respondent currently lives with stepfather
- Whether respondent currently lives with stepmother
- Respondent's current home address
- For W1 respondent: street address and city / state where nonresident father, nonresident mother, nonresident stepfather, nonresident stepmother lived at W1 interview
- For W1 respondent: number of full brothers / sisters reported in W1 interview
- For W1 respondent: residence address at W1 interview
- For W1 respondent: whether respondent was born in USA
- For W1 respondent: whether respondent ever smoked from W1 interview
- For W1 respondent: whether respondent was in school at W1 interview
- For W1 respondent: number of respondent's bio / adopted children at W1 interview
- For W1 respondent: number of respondent's bio / adopted children not in W2 household and not located in tracking / screener / update roster

Event History Calendar (EHC) Preloads from W2 Roster Module and W1 data

- For W1 respondent: residence address at W1 interview and date moved in
- For W1 respondent: employment status at W1 interview, including employer, employer address, occupation, activities / duties, full / part-time status, weekly hours, profit / loss or wage / salary
- For W1 respondent: unemployment / absence from work at W1 interview
- For W1 respondent: public assistance at time of W1 interview
- For W1 respondent: health insurance at time of W1 interview

Questionnaire formatting key

- **Black bold:** Question numbers
- Black normal: Interviewer to read question text
- BLACK UPPER CASE: Interviewer and programming instructions
- ***BLACK BOLD ITALIC UPPER CASE:*** Comments

SECTION A. INFORMATION CHECK

AOBS. INTERVIEWER OBSERVATION: CODE WHAT RACE OR RACES YOU WOULD SAY THE RESPONDENT IS IF YOU DID NOT KNOW ANYTHING ABOUT HIM / HER.

DO NOT ASK RESPONDENT FOR INFORMATION OR HELP!! CODE ALL THAT APPLY.

1. Latino
2. White
3. African-American, Black
4. Asian
5. Pacific Islander
6. Native American / American Indian

AOBSa. CHECK AOBS ABOVE.

IF AOBS=ONE RESPONSE CODE CHECKED, GO TO BEGINNING OF QUESTIONNAIRE
IF AOBS=MORE THAN ONE RESPONSE CHECKED, CONTINUE

AOBS2. INTERVIEWER OBSERVATION: CODE WHAT SINGLE RACE OR GROUP YOU WOULD SAY BEST DESCRIBES THE RESPONDENT IF YOU DID NOT KNOW ANYTHING ABOUT HIM / HER.

DO NOT ASK RESPONDENT FOR INFORMATION OR HELP!! CODE ONLY ONE.

1. Latino
2. White
3. African-American, Black
4. Asian
5. Pacific Islander
6. Native American Indian

AA1. CAPI CHECK: IS R SAME AS RESPONDENT WHO COMPLETED THE CURRENT ROSTER (CR)?

1. YES (GO TO AA6)
5. NO

AA2. First, I would like to double check some information. Your name is [FIRST NAME OF R] [FAMILY NAME OF R] and you are [R's MARITAL STATUS FROM HH ROSTER]. This is the household you usually live or stay in. Is this correct?

INTERVIEWER: VERIFY SPELLING OF RESPONDENT'S NAME

1. YES (GO TO AA4)
5. NO

AA3. Which information is not correct?

INTERVIEWER: IF THIS IS CLEARLY OR PROBABLY THE INCORRECT INDIVIDUAL (I.E., WRONG NAME, LIVES SOMEWHERE ELSE), STOP THE INTERVIEWER AND LOCATE THE RIGHT INDIVIDUAL.

INTERVIEWER: CHOOSE ALL INFORMATION NOT CORRECT FROM THE LIST BELOW

1. SPELLING OF NAME (NAME CORRECT BUT MISSPELLED)
2. NAME (NAME NOT CORRECT)
3. MARITAL STATUS WRONG
4. NOT WHERE R USUALLY LIVES OR STAYS (R LIVES SOMEWHERE ELSE MOST OF THE TIME)
5. NAME CHANGED

CREATE LOOPS OF QUESTIONS TO CORRECT INCORRECT INFORMATION.

Follow-up questions for incorrect information:

AA3_a. What is the correct spelling for your name?

AA3_b. What is your correct name?

AA3_c. What is your current marital status?

AA3_d. I have that this is the household you currently live in. Is this correct?

AA3_e. What name do you use now?

AA4. CHECK PRELOAD: SPOUSE OR PARTNER CURRENTLY IN HH.

PROGRAMMER NOTE: SPOUSE / PARTNER DOES NOT NEED TO BE A FULL TIME HOUSEHOLD RESIDENT.

1. YES
2. SPOUSE NOT IN HH, BUT IS MARRIED/COHABITING
5. NO (GO TO AA6)

AA5. To make sure my information is current: Your [husband / wife / partner]'s name is [SPOUSE / PARTNER NAME FROM HH ROSTER]. Is that correct?

1. YES (SET CUR_SPN=[SPOUSE / PARTNER NAME FROM HH ROSTER]) (GO TO AA6)
5. NO

AA5A. What is your [husband / wife / partner]'s name?

INTERVIEWER: ENTER SPOUSE / PARTNER'S FIRST NAME:

FIRST NAME: _____ LAST NAME: _____

AA5B. INTERVIEWER CHECK W2 ROSTER NAMES AGAINST NAME IN AA5A.

1. NAME IN AA5A IS IN W2 ROSTER (ENTER W2) ROSTER ID NUMBER _____ AND GO TO AA6)
2. NAME IN AA5A IS SIMILAR TO ONE IN W2 ROSTER
3. NAME IN AA5A IS NOT IN W2 ROSTER (GO TO AA5D)

AA5C. My computer tells me that there is someone named _____ living in your household. Is that your [husband / wife / partner]?

1. Yes (ENTER W2 ROSTER ID NUMBER ___) (GO TO AA6)
5. No

AA5D. Is there another name that your [husband / wife / partner] uses?

PROBE: What name or names?

1. FIRST NAME: _____ LAST NAME: _____
2. FIRST NAME: _____ LAST NAME: _____
3. FIRST NAME: _____ LAST NAME: _____
5. No other name (ENTER 99 FOR W2 ROSTER ID OF SPOUSE / PARTNER) (GO TO AA6)

AA5E. INTERVIEWER CHECK W2 ROSTER NAMES AGAINST NAME(S) IN AA5D:

1. NAME IN AA5D IS IN W2 ROSTER (ENTER W2 ROSTER ID NUMBER _____ AND GO TO AA6)

2. NAME MENTIONED IN AA5D IS SIMILAR TO ONE IN W2 ROSTER
3. NAME MENTIONED IN AA5D IS NOT IN W2 ROSTER (ENTER 99 FOR W2 ROSTER ID OF SPOUSE / PARTNER, GO TO AA6)

AA5F. My computer tells me that there is someone named _____ living in your household. Is that your [husband / wife / partner]?

1. Yes (ENTER W1 ROSTER ID NUMBER _____)
5. No ROSTER (ENTER 99 FOR W2 ROSTER ID OF SPOUSE / PARTNER)

AA6. CAPI CHECK: IS THIS A PANEL RESPONDENT WHO WAS INTERVIEWED IN W1?

1. YES
5. NO (GO TO AB1)

AA7. When we spoke to you last in [W1 INTERVIEW MONTH AND YEAR] you were living [here at this address / at [FILL W1 ADDRESS IF DIFFERENT FROM CURRENT ADDRESS]] [IF PCGW1 OR RSA WAS LIVING WITH RESPONDENT IN W1, FILL: "with [PCGW1 OR RSA NAME]"] [IF RSC WAS LIVING HERE, FILL "and [RSC NAME]"] [IF SIB WAS LIVING HERE, FILL "and [SIB NAME]"]. Is that correct?

1. Yes (GO TO AA9)
5. No

AA8. Which part is incorrect?

INTERVIEWER: CHOOSE ALL INFORMATION NOT CORRECT FROM THE LIST BELOW. MARK ALL THAT APPLY.

1. NOT INTERVIEWED IN [W1 INTERVIEW MONTH AND YEAR], BUT INTERVIEWED AT ANOTHER TIME
2. DOES NOT REMEMBER BEING INTERVIEWED OR IS UNSURE, BUT COULD HAVE BEEN INTERVIEWED
3. RESPONDENT IS SURE THAT HE / SHE WAS NOT INTERVIEWED IN W1
4. RESPONDENT NOT LIVING HERE / AT ADDRESS SHOWN IN [W1 INTERVIEW MONTH AND YEAR], BUT DID LIVE THERE AT SOME OTHER TIME / IS LIVING HERE NOW
5. IF RESPONDENT IS NOT AT W1 ADDRESS, FILL: "RESPONDENT SAYS HE / SHE NEVER LIVED AT W1 ADDRESS"
6. RESPONDENT SAYS HE / SHE DID NOT LIVE WITH [THE PERSON / THESE PEOPLE] LISTED, BUT DID LIVE WITH [HIM / HER / THEM]} AT ANOTHER TIME
7. RESPONDENT SAYS HE / SHE NEVER LIVED WITH THE [PERSON / PEOPLE] LISTED
8. OTHER, SPECIFY _____

AA9. Finally, I have recorded that your birthday is [BIRTHMONTH, BIRTHDAY, BIRTHYEAR]. Is that correct?

1. YES (GO TO AB1)
5. NO

AA10. What is your correct birthdate?

Day ____ Month _____ Year _____

AA11. CAPI CHECK: AA10

1. [W1 BIRTHDATE] IS A DIFFERENT MONTH THAN [DATE IN AA10] **AND** [W1 BIRTHDATE] IS MORE THAN TWO YEARS BEFORE OR TWO YEARS AFTER [DATE IN AA10]
2. THERE IS NO BIRTHDATE AVAILABLE FROM W1 (GO TO AA13)
3. OTHERWISE (GO TO AB1)

AA12. CAPI CHECK:

1. AA8=3 AND AA8=5 AND AA8=7 AND AA9=5 AND (AA11=1 OR 2)

INTERVIEWER: THIS IS THE WRONG RESPONDENT. END INTERVIEW AND ENTER CODE 361. ATTEMPT TO FIND CORRECT RESPONDENT AND CONTACT SUPERVISOR. PRESS '1' AND ENTER TO CONTINUE.

2. ELSE IF AA11=1 OR 2

INTERVIEWER: THIS APPEARS TO BE THE WRONG RESPONDENT. ATTEMPT TO CLARIFY SITUATION. IF CANNOT BE CLARIFIED, END INTERVIEW, FIND CORRECT RESPONDENT AND CONTACT SUPERVISOR. PRESS '1' AND ENTER TO CONTINUE.

3. ELSE CONTINUE

INTERVIEWER: IF THIS IS THE CORRECT RESPONDENT PLEASE CORRECT ANY INFORMATION ENTERED PREVIOUSLY THAT IS INCORRECT BEFORE CONTINUING. IF THIS IS NOT THE CORRECT RESPONDENT PLEASE BREAK OFF THE INTERVIEW AND ENTER CODE 361.

AA13. CAPI CHECK (ESTIMATE AGE AT W2):

[W1 AGE] + [YEARS AND FRACTIONS OF YEARS BETWEEN W1 AND W2 BASED ON BOTH INTERVIEW DATES].

NOTE: THOSE WHO REPORTED NEITHER BIRTHDATE NOR AGE AT W1 SHOULD SKIP TO AB1.

AA14. Our records say that you were [W1 AGE IN YEARS] at the time we interviewed you in [W1 INTERVIEW MONTH AND YEAR]. That means you are currently about [ESTIMATE OF CURRENT AGE] years old. Is that correct?

1. YES (GO TO AB1)
5. NO (GO TO AA15)

AA15. How old are you now?

___ Age in years

AA15A. CAPI CHECK:

1. IF [ESTIMATE OF CURRENT AGE] > (AA15 + 2) OR [ESTIMATE OF CURRENT AGE] < (AA15 - 2) (GO TO AA15B)
2. ELSE (GO TO END)

AA15B. INTERVIEWER: THIS APPEARS TO BE THE WRONG RESPONDENT. ATTEMPT TO CLARIFY SITUATION. IF CANNOT BE CLARIFIED, END INTERVIEW AND ENTER CODE 361 AND CONTACT SUPERVISOR. PRESS '1' AND ENTER TO CONTINUE

SECTION B. NEIGHBORHOOD

NOTE: SECTION B ONLY FOR:

- (1) NEW ENTRANT RSAs and PANEL RSAs
- (2) RSCS \geq 18 AND SIBS \geq 18
- (3) PCGS IN HHS OUTSIDE OF WAVE 1 TRACTS WHERE NO OTHER RESPONDENT ANSWERS THESE QUESTIONS

AB1. CAPI CHECK PRELOADS:

1. THIS IS RSA-P OR RSA-NE
2. THIS IS RSC-P \geq 18 OR SIB-P \geq 18

3. THIS IS A PCG WHO:
 - LIVES WITH AN RSC-P AND / OR SIB-P
 - DOES NOT LIVE IN A W1 TRACT
 - DOES NOT LIVE WITH AN RSA-NE OR RSA-P
 - CORESIDENT RSC-P (IF ANY) IS <18
 - CORESIDENT SIB-P (IF ANY) IS <18
4. NONE OF THE ABOVE (GO TO SECTION C)

AB1A. CAPI CHECK: DID THIS RESPONDENT LIVE AT THIS ADDRESS IN WAVE 1?

1. YES
5. NO

AB2. When you are talking to someone about your neighborhood, what do you mean? Is it...

1. The block or street you live on?
2. Several blocks or streets in each direction?
3. The area within a 15-minute walk from your house?
4. An area larger than a 15-minute walk from your house?

AB3. QUESTION DELETED

AB4. Now I have some questions about your neighborhood. For these questions, “neighborhood” includes both the block or street you live on and several blocks or streets in each direction. Please keep this in mind when answering these questions. All things considered, would you say you are very satisfied, satisfied, dissatisfied or very dissatisfied with your neighborhood as a place to live?

1. VERY SATISFIED
2. SATISFIED
3. (IF VOLUNTEERED) NEUTRAL – NOT SATISFIED OR DISSATISFIED
4. DISSATISFIED
5. VERY DISSATISFIED

AB5. About how many adults do you recognize or know by sight in this neighborhood—would you say you recognize no adults, a few, many or most?

1. NO ADULTS
2. A FEW ADULTS
3. MANY ADULTS
4. MOST OR ALL ADULTS

AB6. Now I am going to read you some statements which may or may not be true of your neighborhood. As I said before, for these questions, your neighborhood includes both the block or street you live on and several blocks or streets in each direction. Please look at this card. For each statement tell me whether you strongly agree, agree, disagree or strongly disagree.

AB6a. This is a close-knit neighborhood.

PROBE: This is a cohesive or unified neighborhood

1. Strongly Agree
2. Agree
3. Unsure
4. Disagree
5. Strongly Disagree

AB6b. There are adults in this neighborhood that children can look up to.

1. Strongly Agree
2. Agree
3. Unsure
4. Disagree
5. Strongly Disagree

AB6c. People around here are willing to help their neighbors.

1. Strongly Agree
2. Agree
3. Unsure
4. Disagree
5. Strongly Disagree

AB6d. People in this neighborhood generally don't get along with each other.

1. Strongly Agree
2. Agree
3. Unsure
4. Disagree
5. Strongly Disagree

AB6e. You can count on adults in this neighborhood to watch out that children are safe and do not get in trouble.

1. Strongly Agree
2. Agree
3. Unsure
4. Disagree
5. Strongly Disagree

AB6f. People in this neighborhood do not share the same values.

1. Strongly Agree
2. Agree
3. Unsure
4. Disagree
5. Strongly Disagree

AB6g. People in this neighborhood can be trusted.

1. Strongly Agree
2. Agree
3. Unsure
4. Disagree
5. Strongly Disagree

AB6h. Parents in this neighborhood know their children's friends.

1. Strongly Agree
2. Agree
3. Unsure
4. Disagree
5. Strongly Disagree

AB6i. Adults in this neighborhood know who the local children are.

1. Strongly Agree
2. Agree
3. Unsure

4. Disagree
5. Strongly Disagree

AB6j. Parents in this neighborhood generally know each other.

1. Strongly Agree
2. Agree
3. Unsure
4. Disagree
5. Strongly Disagree

AB7. Next I have three other statements about your neighborhood. For each one, please tell me if it is very likely, likely, unlikely or very unlikely that people in your neighborhood would do the following.

AB7a. If a group of neighborhood children were skipping school and hanging out on a street corner, how likely is it that your neighbors would do something about it? Would you say:

1. Very likely
2. Likely
3. Unsure
4. Unlikely
5. Very unlikely

AB7b. If some children were spray-painting graffiti on a local building, how likely is it that your neighbors would do something about it? Would you say:

1. Very likely
2. Likely
3. Unsure
4. Unlikely
5. Very unlikely

AB7c. If a child was showing disrespect to an adult, how likely is it that people in your neighborhood would scold that child? Would you say:

1. Very likely
2. Likely
3. Unsure
4. Unlikely
5. Very unlikely

AB8. My next questions are about relatives or friends who live in this neighborhood, but who do not live with you.

AB8a. How many of your relatives or in-laws live in your neighborhood? Would you say none, a few, many or most?

1. None
2. A few
3. Many
4. Most or all

AB8b. How many of your friends live in your neighborhood? Would you say none, a few, many or most?

1. None
2. A few
3. Many
4. Most or all

AB9. While you have lived in this neighborhood, have you or anyone in your household had anything stolen or damaged inside or outside your home, including your cars or vehicles parked on the street?

1. YES
5. NO

AB10. How safe is it to walk around alone in your neighborhood after dark? Is it:

1. Completely safe,
2. Fairly safe,
3. Somewhat dangerous, or
4. Completely dangerous?

AB11. Next I am going to ask about some things you might do with people in your neighborhood. For each question, please tell me whether you and others in your neighborhood often do this, sometimes do it, rarely do it or never do it.

AB11a. About how often do you and people in your neighborhood do favors for each other? For example, watch each other's children, help with shopping, lend gardening or house tools. Would you say:

PROBE: Just give me your best guess of how often.

1. Often
2. Sometimes
3. Rarely
4. Never

AB11b. When a neighbor is not at home, how often do you and other neighbors watch over their property? Would you say:

PROBE: Just give me your best guess of how often.

1. Often
2. Sometimes
3. Rarely
4. Never

AB11c. How often do you and other people in the neighborhood ask each other advice about personal things such as child rearing or job openings? Would you say:

PROBE: Just give me your best guess of how often.

1. Often
2. Sometimes
3. Rarely
4. Never

AB12. In the past 30 days, that is since [DATE 30 DAYS AGO], how many of your neighbors have you talked with for 10 minutes or more? Would you say:

1. None
2. 1 or 2
3. 3 to 5
4. 6 or more

AB13 AND AB14 QUESTIONS DELETED

AB15. What store do you [and others in this household] normally go to buy groceries?

INTERVIEWER: IF MORE THAN ONE PLACE, ASK: What is the place you generally get most of your groceries?

_____ (NAME OF STORE, SPECIFY LIMITED)

AB16. Where is [STORE NAME] located?

INTERVIEWER ASK IF NOT CLEAR: What country is [STORE NAME] in?"

INTERVIEWER ASK IF NOT CLEAR: What state?

What city is that in? What street is [STORE NAME] on? What is the closest intersection or cross-street?

STORE1: ON _____ (STREET) AT CORNER OF _____ (STREET) IN _____ (CITY) ____ (STATE)

AB16a. In the past 12 months, was there ever a time when anyone in your household didn't get enough to eat because there wasn't enough money for food?

- 1. YES
- 5. NO

AB17–AB25 QUESTIONS DELETED

AB26. In the past 12 months, have you yourself participated in the following activities? Have you:

AB26a. Neighborhood or block organization meeting?

- 1. YES
- 5. NO

AB26b. Business or civic group? For example, Masons, Elks, Rotary Club?

- 1. YES
- 5. NO

AB26c. Nationality or ethnic pride club?

- 1. YES
- 5. NO

AB26d. A local or state political organization?

- 1. YES
- 5. NO

AB26e. Volunteered in a local organization?

- 1. YES
- 5. NO

AB26f. Veterans' group?

- 1. YES
- 5. NO

AB26g. Labor union?

- 1. YES
- 5. NO

AB26h. Literary, art, study, or discussion groups?

1. YES
5. NO

AB26i. Fraternity, sorority or alumni group?

1. YES
5. NO

AB26j. A group that got together to try to change something in your neighborhood or community?

1. YES
5. NO

AB26k. Another type of local group or organization?

1. YES, SPECIFY _____
5. NO

AB27, AB28, AB29 QUESTIONS DELETED

AB30. CAPI CHECK:

1. PANEL RESPONDENT WHO LIVED AT THIS ADDRESS IN W1
2. PANEL RESPONDENT WHO LIVED AT A DIFFERENT ADDRESS AT W1 (GO TO AB37)
3. NEW ENTRANT RESPONDENT (GO TO END OF SECTION B)

AB31. We interviewed you last time in [W1 INTERVIEW MONTH AND YEAR]. Were you very satisfied, satisfied, dissatisfied or very dissatisfied with this neighborhood as a place to live at that time?

1. VERY SATISFIED
2. SATISFIED
3. (IF VOLUNTEERED) NEUTRAL – NOT SATISFIED OR DISSATISFIED
4. DISSATISFIED
5. VERY DISSATISFIED

AB32. Think about this neighborhood in [W1 INTERVIEW MONTH AND YEAR]. Suppose I said that back then people in this neighborhood could be trusted. Would you strongly agree, agree, disagree, or strongly disagree?

1. Strongly Agree
2. Agree
3. Unsure
4. Disagree
5. Strongly Disagree

AB33. Now suppose I said that back then people in this neighborhood were willing to help their neighbors. Would you strongly agree, agree, disagree, or strongly disagree?

1. Strongly Agree
2. Agree
3. Unsure
4. Disagree
5. Strongly Disagree

AB34. Back then in [W1 INTERVIEW MONTH AND YEAR], if a group of neighborhood children were skipping school and hanging out on a street corner, how likely was it that your neighbors would have done something about it? Would you say:

1. Very likely
2. Likely
3. Unsure
4. Unlikely
5. Very unlikely

AB35. Back then, how safe was it to walk around alone in this neighborhood after dark? Was it:

1. Completely safe,
2. Fairly safe,
3. Somewhat dangerous, or
4. Extremely dangerous?

AB36. Back then, about how often did you and people in your neighborhood do favors for each other? For example, watch each other's children, help with shopping, lend gardening or house tools. Would you say it was:

PROBE: Just give me your best guess of how often.

1. Often
2. Sometimes
3. Rarely
4. Never

GO TO END OF SECTION B

AB37. When we interviewed you in [W1 INTERVIEW MONTH AND YEAR], you lived at [W1 address]. Were you very satisfied, satisfied, dissatisfied or very dissatisfied with that neighborhood as a place to live, at that time?

1. VERY SATISFIED
2. SATISFIED
3. (IF VOLUNTEERED) NEUTRAL – NOT SATISFIED OR DISSATISFIED
4. DISSATISFIED
5. VERY DISSATISFIED

AB38. Think about the neighborhood you lived in in [W1 INTERVIEW MONTH AND YEAR] at [W1 ADDRESS]. Suppose I said that back then in that neighborhood people could be trusted. Would you strongly agree, agree, disagree, or strongly disagree?

1. Strongly Agree
2. Agree
3. Unsure
4. Disagree
5. Strongly Disagree

AB39. Now suppose I said that back then people in that neighborhood were willing to help their neighbors. Would you strongly agree, agree, disagree, or strongly disagree?

1. Strongly Agree
2. Agree
3. Unsure
4. Disagree
5. Strongly Disagree

AB40. Back then in [W1 INTERVIEW MONTH AND YEAR] in [W1 STREET NAME AND CITY NAME], if a group of neighborhood children were skipping school and hanging out on a street corner, how likely was it that your neighbors would have done something about it. Would you say:

1. Very likely
2. Likely

3. Unsure
4. Unlikely
5. Very unlikely

AB41. Back then, how safe was it to walk around alone in that neighborhood after dark? Was it:

1. Completely safe,
2. Fairly safe,
3. Somewhat dangerous, or
4. Extremely dangerous?

AB42. Back then, about how often did you and people in that neighborhood do favors for each other? For example, watch each other's children, help with shopping, lend gardening or house tools. Would you say it was:

PROBE: Just give me your best guess of how often.

1. Often
2. Sometimes
3. Rarely
4. Never

SECTION C. FAMILY BACKGROUND

AC1A. CAPI CHECK:

1. THIS IS AN RSA OR PCG WHO WAS **NOT** IN WAVE 1 OR DID **NOT** COMPLETE ADULT QX IN W1
2. THIS IS A RSC-PA OR SIB-PA
3. OTHER (GO TO C23)

AC1. I would like to ask about your background when you were growing up. Which city and state did you live in when you were age 14?

INTERVIEWER: IF MORE THAN ONE PLACE: Which was the place you lived for most of the time when you were age 14?

PROBE: Was this in the United States?

_____ TOWN / CITY _____ STATE / PROVINCE / TERRITORY _____ COUNTRY

AC2. About how many times did you move from one address to another before your 14th birthday?

1. RESPONDENT GIVES NUMBER: _____ (NUMBER OF TIMES, RANGE 0–99, VERIFY AT 28)
2. RESPONDENT GIVES RANGE OF TIMES: _____ TO _____ TIMES (RANGE 0–99, VERIFY AT 28)

AC2A. CAPI CHECK:

1. THIS IS AN RSA OR PCG WHO WAS **NOT** IN WAVE 1 OR DID **NOT** COMPLETE ADULT QX IN W1
2. THIS IS A RSC-PA OR SIB-PA (GO TO AC23)

THIS SECTION ONLY FOR RSA AND PCG WHO WERE NOT INTERVIEWED IN W1 OR DID NOT COMPLETE ADULT QX IN W1

AC3. Now I have a few questions about your parents. Did you live with both parents from birth until age 14?

INTERVIEWER: THIS INCLUDES BIRTH PARENTS AND ADOPTIVE PARENTS, BUT NOT STEP PARENTS

1. YES (GO TO AC6)
5. NO

AC4. Which parent was not living with you all the time between birth and age 14?

1. MOTHER
2. FATHER
3. BOTH

AC5. Why didn't you live with [your mother / your father / both parents] the entire time?

INTERVIEWER: DO NOT READ ANSWERS. CODE R'S RESPONSE. CODE ALL THAT APPLY.

1. ONE OR BOTH PARENTS DIED
2. PARENTS WERE SEPARATED OR DIVORCED
3. R LEFT HOME
4. R WAS ADOPTED
5. R'S PARENTS WERE NEVER MARRIED OR NEVER LIVED TOGETHER
6. PARENT IN JAIL OR PRISON
7. PARENTS HAD MARITAL OR PERSONAL PROBLEMS
8. RAISED BY GRANDMOTHER, AUNT OR ANOTHER FAMILY MEMBER
9. OTHER, SPECIFY (LIMITED)
10. PARENT LEFT TO WORK ELSEWHERE
11. NEVER KNEW PARENT
12. PARENT ABANDONED FAMILY
13. PARENT MOVED TO OTHER COUNTRY

AC6. In what year was your mother born?

PROBE: About what year was it? An estimate would be helpful.

_____ (YEAR MOTHER WAS BORN) (RANGE 1870–1975)

AC7. How much school did your mother complete?

INTERVIEWER: DO NOT READ ANSWERS. CODE R'S RESPONSE. CODE ONE.

0. NONE
1. TO 11. ___ (GRADES 1 THROUGH 11) (CAPI RANGE 1–11)
12. HIGH SCHOOL GRADUATE OR COMPLETED GED
13. SOME VOCATIONAL SCHOOL
14. COMPLETED VOCATIONAL SCHOOL
15. SOME COLLEGE
16. ASSOCIATES' DEGREE (AA)
17. BACHELORS' DEGREE (BA, BS)
18. SOME GRADUATE OR PROFESSIONAL SCHOOL (AFTER COMPLETING COLLEGE)
19. COMPLETED GRADUATE / PROFESSIONAL DEGREE

AC8. Was your mother born in the United States or another country?

1. BORN IN THE UNITED STATES (GO TO AC10)
2. BORN IN ANOTHER COUNTRY

IF AC8=D OR R, GO TO AC10

AC9. What country was mother born in?

1. UNITED STATES
2. MEXICO
3. CANADA
4. GUATEMALA
5. EL SALVADOR

6. HONDURAS
7. BELIZE
8. NICARAGUA
9. COSTA RICA
10. PANAMA
11. COLOMBIA
12. BRAZIL
13. CHILE
14. IRAN
15. ARMENIA
16. RUSSIA
17. OTHER, SPECIFY: _____

AC10. Now let me ask you about your father. In what year was your father born?

PROBE: About what year was it? An estimate would be helpful.

_____ (YEAR FATHER WAS BORN) (RANGE 1870–1975)

AC11. How much school did your father complete?

INTERVIEWER: DO NOT READ ANSWERS. CODE R'S RESPONSE. CODE ONE.

0. NONE
- 1 TO 11____ (GRADES 1 THROUGH 11)
12. HIGH SCHOOL GRADUATE OR COMPLETED GED
13. SOME VOCATIONAL SCHOOL
14. COMPLETED VOCATIONAL SCHOOL
15. SOME COLLEGE
16. ASSOCIATES' DEGREE (AA)
17. BACHELORS' DEGREE (BA, BS)
18. SOME GRADUATE OR PROFESSIONAL SCHOOL (AFTER COMPLETING COLLEGE)
19. COMPLETED GRADUATE / PROFESSIONAL DEGREE

AC12. Was your father born in the United States or another country?

1. BORN IN THE UNITED STATES (GO TO AC14)
2. BORN IN ANOTHER COUNTRY

IF AC12=D OR R, GO TO AC14

AC13. What country was your father born in?

1. UNITED STATES
2. MEXICO
3. CANADA
4. GUATEMALA
5. EL SALVADOR
6. HONDURAS
7. BELIZE
8. NICARAGUA
9. COSTA RICA
10. PANAMA
11. COLOMBIA
12. BRAZIL
13. CHILE
14. IRAN
15. ARMENIA
16. RUSSIA

17. OTHER, SPECIFY: _____

AC14. CAPI CHECK AC4: DID R LIVE WITH FATHER FROM BIRTH TO AGE 14?

1. NO (AC4=2 OR 3)
2. ELSE GO TO AC17

AC15. Did you live with your father when you were age 14?

1. YES (GO TO AC17)
5. NO

AC16. Who was the head of the household you lived in when you were age 14? By head of household, I mean the person who was the family's main financial support.

IF R VOLUNTEERS THAT HE / SHE LIVED IN MORE THAN ONE HH AT AGE 14, PROBE: Tell me about the household you spent most time in when you were age 14.

INTERVIEWER: DO NOT READ ANSWERS. CODE R'S RESPONSE. CODE ONE.

1. MOTHER
2. GRANDMOTHER
3. GRANDFATHER
4. STEPMOTHER
5. STEPFATHER
6. AUNT
7. UNCLE
8. SOMEONE ELSE, SPECIFY LIMITED
9. BROTHER
10. SISTER
11. LIVED ALONE

AC17. When you were about age 14, what kind of work [was your father / were you / was your AC16 ANSWER] doing? (For example: electrical engineer, stock clerk, typist, farmer)

_____ (VERBATIM – LIMITED TO 500 CHARACTERS)

AC18. What were [your father's / your / your AC16 ANSWER]'s most important activities or duties at this job? (For example: typing, keeping account books, filing, selling cars, operating printing press, finishing concrete)

_____ (VERBATIM – LIMITED TO 500 CHARACTERS)

AC19. What kind of business or industry was this? (For example: TV and radio manufacturing, retail shoe store, State Labor Dept.)

_____ (VERBATIM – LIMITED TO 500 CHARACTERS)

AC20. [Was he / Were you / Was he / Wash she / Was that person]...

1. An employee of a private company, business, or individual for wages, salary or commission?
2. A FEDERAL government employee?
3. A STATE government employee?
4. A COUNTY OR LOCAL government employee?
5. Self-employed in own business, profession, practice or farm?
6. Working without pay in a family business or farm?

IF AC20=5, CONTINUE. ELSE GO TO AC21.

AC20a. Was [his / her / your / that person's] own business incorporated or not incorporated?

1. INCORPORATED
2. NOT INCORPORATED

AC21. During the time you were growing up, until you were about 14 years old, did your family ever receive public assistance even one time?

1. YES
5. NO (GO TO AC23)

AC22. While you were growing up, about how much of the time was your family receiving this public assistance? Was it all of the time, most of the time, or some of the time?

1. ALL OF THE TIME
2. MOST OF THE TIME
3. SOME OF THE TIME

ALL RESPONDENTS

AC23. Please look at this list and tell me what group or groups describe your race or ethnic origin.

CODE ALL THAT APPLY

1. BLACK / AFRICAN-AMERICAN
2. WHITE
3. LATINO / HISPANIC / LATIN AMERICAN
4. ASIAN INDIAN / SOUTH ASIAN
5. CHINESE
6. FILIPINO
7. JAPANESE
8. KOREAN
9. VIETNAMESE
10. OTHER ASIAN
11. NATIVE AMERICAN / AMERICAN INDIAN
12. INUIT / ESKIMO / ALEUT
13. HAWAIIAN
14. PACIFIC ISLANDER
15. OTHER, SPECIFY [NOT ON SHOW CARD]
16. MIDDLE EASTERN (ARAB, PERSIAN, NORTH AFRICAN)

AC24. CHECK AC23:

1. ONLY ONE GROUP CIRCLED (GO TO AC26)
2. OR MORE=NUMBER OF GROUPS CIRCLED

AC25. Which one group on that card best describes your race or national origin?

CODE ONLY ONE

1. BLACK / AFRICAN-AMERICAN
2. WHITE
3. LATINO / HISPANIC / LATIN AMERICAN
4. ASIAN INDIAN / SOUTH ASIAN
5. CHINESE
6. FILIPINO
7. JAPANESE
8. KOREAN
9. VIETNAMESE
10. OTHER ASIAN
11. NATIVE AMERICAN / AMERICAN INDIAN

12. INUIT / ESKIMO / ALEUT
13. HAWAIIAN
14. PACIFIC ISLANDER
15. OTHER, SPECIFY
16. MIDDLE EASTERN (ARAB, PERSIAN, NORTH AFRICAN)

AC26. CAPI CHECK ON AC23 AND AC25:

IF AC23=3 OR AC25=3, CONTINUE. ELSE GO TO AC28.

AC27. Are you a member of any of the national origin or ancestry groups listed on this card? Which group or groups?

CODE ALL THAT APPLY

1. MEXICAN / MEXICANO
2. MEXICAN AMERICAN / CHICANO
3. CENTRAL AMERICAN
4. PUERTO RICAN
5. CUBAN
6. OTHER LATIN AMERICAN
7. OTHER HISPANIC

AC28. Are you Christian, Jewish, Muslim, Buddhist, or something else?

INTERVIEWER: DO NOT READ ANSWERS. CODE R'S RESPONSE.

1. CHRISTIAN, PROTESTANT, CATHOLIC, ROMAN CATHOLIC, GREEK, RUSSIAN OR ARMENIAN ORTHODOX, MORMON
2. JEWISH
3. MUSLIM
4. BUDDHIST
5. HINDU
6. BAHA'I'
7. AGNOSTIC OR ATHEIST
8. RELIGIOUS BUT DOES NOT BELONG TO PARTICULAR RELIGION
9. NO RELIGION
10. OTHER RELIGION, SPECIFY _____

IF AC28=1, ASK AC29. ELSE GO TO AC30.

AC29. What denomination?

INTERVIEWER: DO NOT READ ANSWERS. CODE R'S RESPONSE. CODE ONLY ONE.

1. ROMAN CATHOLIC, CATHOLIC
2. GREEK, RUSSIAN OR ARMENIAN ORTHODOX
3. BAPTIST
4. METHODIST
5. LUTHERAN
6. PRESBYTERIAN
7. EPISCOPALIAN
8. MORMON
9. JEHOVAH'S WITNESS
10. SEVENTH DAY ADVENTIST
11. EVANGELICAL
12. PENTECOSTAL
13. PROTESTANT – NO SPECIFIC DENOMINATION
14. CHRISTIAN – NO SPECIFIC DENOMINATION

15. OTHER CHRISTIAN, SPECIFY _____

AC30. In the past 12 months, about how often have you attended a religious service, like church or synagogue service or mass?

_____ TIMES (RANGE 0–20)

CODE UNIT

1. PER WEEK
2. PER MONTH
3. PER YEAR
4. LESS THAN ONCE A YEAR

AC31. Are you a member of a church, synagogue, mosque, temple or other religious group?

1. YES
5. NO (GO TO AC33)

AC32. Where is this church, synagogue, mosque or temple located?

INTERVIEWER ASK IF NOT CLEAR: What country is this church, synagogue, mosque or temple located in?

INTERVIEWER ASK IF NOT CLEAR: What state?

What city is that in? What street is this church, synagogue, mosque or temple located on? What is the closest intersection or cross-street?

ON _____ (STREET) AT CORNER OF _____ IN _____ (CITY) _____ (STATE)

AC32A. CAPI CHECK:

1. THIS IS AN RSA OR PCG WHO WAS **NOT** IN WAVE 1 OR DID **NOT** COMPLETE ADULT QX IN W1
2. THIS IS A PANEL RESPONDENT FOR WHOM WE DO NOT HAVE PLACE OF BIRTH BUT DO HAVE BIRTHDATE (GO TO AC34)
3. OTHER (GO TO AC34_4)

AC33. What is your birthdate?

___ Day ___ Month ___ Year

AC34. Where were you born? What city and state?

PROBE: Was this in the United States?

_____ CITY _____ STATE / PROVINCE / TERRITORY _____ COUNTRY

FOR ALL RESPONDENTS

AC34_4. CAPI CHECK PRELOAD AND AC34: WAS RESPONDENT BORN IN THE UNITED STATES?

1. YES (GO TO AC50)
0. NO

AC36. In what year did you first come to the United States to live or work? Please do not include short trips for shopping, vacation or family visits.

PROBE: How long ago did you first come to the U.S. to live or work?

INTERVIEWER: TRY TO GET A SPECIFIC YEAR IF POSSIBLE. "YEARS AGO" AND "MONTHS AGO" SHOULD ONLY BE USED IF R CAN'T GIVE DATE.

1. _____ CALENDAR YEAR (RANGE 1900–CURRENT YEAR. CANNOT BE BEFORE R WAS BORN)
2. _____ YEARS AGO
3. _____ MONTHS AGO

AC36_a. CAPI CHECK AC36

1. AC36 IS DK OR REFUSED
2. OTHER (GO TO AC36_c)

AC36_b. How old were you when you first came to the United States to live or work? Please do not include short trips for shopping, vacation or family visits.

1. _____ YEARS OLD
2. _____ MONTHS OLD

AC36_c. When you first came to the United States to live or work, did you speak any English?

1. YES
5. NO (GO TO AC37)

AC36_d. How well did you speak English at that time? Was your English very good, good, so-so, or not so good?

1. VERY GOOD
2. GOOD
3. SO-SO
4. NOT SO GOOD, POOR, BAD
5. [IF VOLUNTEERED] ONLY KNEW A FEW WORDS, DIDN'T REALY SPEAK ENGLISH AT ALL

AC37. When was the last time you returned to [COUNTRY OF BIRTH] for more than two months?

PROBE: How long ago was the last time you returned to [COUNTRY OF BIRTH] for more than two months?

1. MONTH _____ AND YEAR _____ PREFERRED
2. NEVER
3. _____ YEARS AGO
4. _____ MONTHS AGO

AC37A. When did you last enter the United States to live or work? What was the most recent time? Please do not include short trips for shopping, vacation, or family visits.

PROBE: How long ago did you last enter the U.S. to live or work?

1. _____ CALENDAR YEAR
2. _____ YEARS AGO
3. _____ MONTHS AGO

AC37B. Did you have a visa or other entry document when you entered the US this last time?

1. YES
5. NO (GO TO AC38)
- 1. DON'T KNOW (GO TO AC38)
- 2. REFUSED (GO TO AC38)

AC37C. What kind of document?

1. RECORD VERBATIM: _____

AC38. Are you a currently citizen of the United States?

1. YES (GO TO AC43)
5. NO

AC39. Do you currently have a permanent residence card or a green card?

1. YES (GO TO AC43)
5. NO

AC40. Have you been granted asylum, refugee status, or temporary protected immigrant status, TPS?

1. YES (GO TO AC49)
5. NO

AC41. Do you have a tourist visa, a student visa, a work visa or permit, or another document which permits you to stay in the US for a limited time?

1. YES (GO TO AC42)
5. NO

AC42. Is this visa or document still valid or has it expired?

1. STILL VALID (GO TO AC49)
2. HAS EXPIRED (GO TO AC49)

AC43. CAPI CHECK: AC38:

1. RESPONDENT IS A CITIZEN
2. OTHER (GO TO AC45)

AC44. When did you become a naturalized?

PROBE: How long ago did you become naturalized (became a U.S. citizen)?

1. DATE GIVEN: Day _____ Month _____ Year _____
2. YEARS AGO _____
3. MONTHS AGO _____
10. BORN ABROAD TO US PARENTS, DIDN'T NEED TO NATURALIZE
11. OTHER, SPECIFY _____

IF AC44=1, 2, 3 OR 11, GO TO AC45. IF AC44=10, GO TO AC50. ELSE CONTINUE.

AC44A. How old were you when you became naturalized or a U.S. citizen?

1. _____ YEARS OLD
2. _____ MONTHS OLD

AC45. When did you get your Green Card or permanent residency in the United States?

PROBE: How long ago did you get your Green Card or permanent residency in the U.S.?

1. DATE GIVEN: Day _____ Month _____ Year _____
2. YEARS AGO _____
3. MONTHS AGO _____
10. BORN ABROAD TO US PARENTS, DIDN'T NEED TO NATURALIZE
11. OTHER, SPECIFY _____

IF AC45=1, 2, 3 OR 11 GO TO AC46. IF AC45=10 GO TO AC50. ELSE CONTINUE.

AC45A. How old were you when you got your Green Card or permanent residency in the United States?

1. _____ YEARS OLD
2. _____ MONTHS OLD

AC46. At the time you got your Green Card, did you have a visa, work permit, or another document which permitted you to stay in the United States?

1. Yes
5. No (GO TO AC46)

AC47. What kind of document?

1. RECORD VERBATIM: _____

AC48. How did you qualify for a Green Card?

INTERVIEWER: DO NOT READ ANSWERS. CODE THE ANSWER THE RESPONDENT GIVES.

1. SPONSORED BY EMPLOYER, GOT IT THROUGH EMPLOYER
2. SPONSORED BY FAMILY MEMBER
3. GREEN CARD LOTTERY OR DIVERSITY PROGRAM
4. REFUGEE, ASYLUM, ASYLEE

AC49. Have you ever entered the United States illegally or without documents?

1. YES
5. NO

AC50. CAPI CHECK:

1. INTERVIEW IS IN SPANISH (SET AC51=1, AC52="SPANISH", GO TO AC55)
2. INTERVIEW IS IN ENGLISH

AC51. In your everyday life, do you regularly speak or read a language other than English?

1. YES
5. NO (GO TO AC59)

AC52. What language or languages other than English do you speak or read regularly?

MARK ALL THAT APPLY

2. SPANISH
3. ARMENIAN
4. CAMBODIAN / KHMER
5. CHINESE (MANDARIN, CANTONESE, OTHER)
6. FARSI OR PERSIAN
7. JAPANESE
8. KOREAN
9. LATIN AMERICAN INDIGENOUS / INDIAN LANGUAGE (E.G., QUICHÉ, KANJOBAL, ZAPOTEC, MIXTEC)
10. RUSSIAN
11. TAGALOG
12. VIETNAMESE
13. OTHER, SPECIFY: _____
15. MIDDLE EASTERN (E.G., ARABIC)
16. SOUTH ASIAN (E.G., HINDI, URDU)
17. OTHER SOUTHEAST ASIAN (E.G., MALAY, INDONESIAN, THAI, LAOTIAN)

18. AFRICAN LANGUAGES (E.G., SWAHILI)

19. OTHER EUROPEAN LANGUAGES (E.G., FRENCH, GERMAN, DUTCH, SWEDISH), SPECIFY: _____

AC53. CAPI CHECK:

1. AC52 HAS ONLY ONE LANGUAGE CHECKED (GO TO AC55)

2. AC52 HAS MORE THAN ONE LANGUAGE CHECKED

AC54. Aside from English, which of these languages do you speak or read most often?

MARK ONLY ONE RESPONSE

2. SPANISH

3. ARMENIAN

4. CAMBODIAN / KHMER

5. CHINESE (MANDARIN, CANTONESE, OTHER)

6. FARSI OR PERSIAN

7. JAPANESE

8. KOREAN

9. LATIN AMERICAN INDIGENOUS / INDIAN LANGUAGE (E.G., QUICHÉ, KANJOBAL, ZAPOTEC, MIXTEC)

10. RUSSIAN

11. TAGALOG

12. VIETNAMESE

13. OTHER, SPECIFY: _____

15. MIDDLE EASTERN (E.G., ARABIC)

16. SOUTH ASIAN (E.G., HINDI, URDU)

17. OTHER SOUTHEAST ASIAN (E.G., MALAY, INDONESIAN, THAI, LAOTIAN)

18. AFRICAN LANGUAGES (E.G., SWAHILI)

19. OTHER EUROPEAN LANGUAGES (E.G., FRENCH, GERMAN, DUTCH, SWEDISH)

AC55. CAPI CHECK AC50, AC52, AC53, AC54

1. IF AC50=1, OTHERLANG="SPANISH"

2. IF AC50=2 AND AC53=1, OTHERLANG=NAME OF LANGUAGE IN AC52

3. IF AC50=2 AND AC53=2, OTHERLANG=NAME OF LANGUAGE IN AC54

AC56. Which language do you speak better, English or [OTHERLANG], or do you speak English and [OTHERLANG] equally well?

1. CAN ONLY SPEAK [OTHERLANG]

2. SPEAKS [OTHERLANG] BETTER

3. SPEAKS ENGLISH AND [OTHERLANG] EQUALLY WELL

4. SPEAKS ENGLISH BETTER

AC57. Which language do you read better, English or [OTHERLANG], or do you read English and [OTHERLANG] equally well?

1. CAN ONLY READ [OTHERLANG]

2. READS [OTHERLANG] BETTER

3. READS ENGLISH AND [OTHERLANG] EQUALLY WELL

4. READS ENGLISH BETTER

5. [IF VOLUNTEERED] CANNOT READ IN EITHER LANGUAGE

6. OTHER, SPECIFY: _____

AC58a. In general, which language do you speak and read more often, English or [OTHERLANG]?

IF RESPONDENT SAYS "BOTH": Do you use both languages about equally or do you use one more than the other?

1. ENGLISH ONLY
2. ENGLISH MORE FREQUENTLY
3. BOTH LANGUAGES ABOUT EQUALLY
4. [OTHERLANG] MORE FREQUENTLY
5. [OTHERLANG] ONLY
8. OTHER, SPECIFY _____

AC58e. What language or languages do you usually speak with your friends?

IF RESPONDENT SAYS "BOTH": Do you use both languages about equally or do you use one more than the other?

1. ENGLISH ONLY
2. ENGLISH MORE FREQUENTLY
3. ENGLISH AND [OTHERLANG] ABOUT EQUALLY
4. [OTHERLANG] MORE FREQUENTLY
5. [OTHERLANG] ONLY
6. SOME OTHER LANGUAGE (NOT ENGLISH OR [OTHERLANG])
8. OTHER, SPECIFY _____

AC59. CAPI CHECK:

1. R IS RSA OR RSA / PCG
2. OTHER (GO TO SECTION D)

AC60. People often prefer one type of neighborhood to another for many different reasons. Now I have two questions about the types of neighborhoods you would prefer to live in.

Imagine that you were looking for a place to live. You found nice, affordable places in five different neighborhoods. The neighborhoods (IF RANDOM NUMBER GENERATOR=1, FILL "are alike in every way, except that they" AND SET FILLORNOT=1) have different numbers of white, black, Asian, and Latino families. I'll show you drawings of these neighborhoods on the computer screen in a minute. Please tell me which one would be your first choice as a place to live, your second choice, and so on. Here are the neighborhoods.

COMPUTER SHOWS 5 RANDOMLY SELECTED NEIGHBORHOODS OUT OF ALL POSSIBLE NEIGHBORHOODS. EACH NEIGHBORHOOD IS DEPICTED AS A "CARD" WITH THREE ROWS OF FIVE HOUSES IN EACH ROW. THE HOUSES ARE DIFFERENT COLORS REFLECTING ETHNICITY AND ALSO MARKED WITH THE NAME OF THE ETHNIC GROUP (ASIAN, WHITE, BLACK, LATINO) [IN SPANISH THE GROUPS ARE: ASIÁTICO, BLANCO NEGRO, LATINO). EACH CARD WILL SAY AT THE TOP "NEIGHBORHOOD X" WHERE X IS A LETTER FROM A TO E, IN ALPHABETICAL ORDER. NEXT TO THE CARDS IS A PLACE FOR THE INTERVIEWER TO RECORD THE RESPONDENT'S RANKING OF EACH NEIGHBORHOOD AS 1, 2, 3, 4, OR 5. IDEALLY, THE COMPUTER PROGRAM WOULD REORGANIZE THE CARDS IN THE ORDER THE RESPONDENT MENTIONS AND DISPLAY THEM ON THE SCREEN, BUT THIS IS NOT ESSENTIAL. SEE ATTACHED EXAMPLE OF A SCREEN.}

NEIGHBORHOOD RESPONDENT'S RANKING (1 TO 5, EACH NUMBER CAN ONLY BE GIVEN ONCE):

- A _____
- B _____
- C _____
- D _____
- E _____

DATA USER NOTE: For 44 cases, due to a problem in assigning the Wave 2 residence addresses in the Roster and because of boundary errors in tract assignments, the tract number used for selecting the neighborhoods to be shown to the respondent was incorrect. The variable WRONG_TRACTID flags cases where the tract number used in the vignettes is not the actual tract where the respondent resides.

AC61. Now imagine your ideal neighborhood that has the ethnic and racial mix that you would personally feel most comfortable living in. Here is a blank card like those I showed you on the screen. Please put a letter in each house on the card to show your ideal neighborhood where you would most like to live. Use A for Asian, B for black, L for Latino or Hispanic, and W for white. Please be sure to put a letter in each house.

INTERVIEWER: CHECK THE CARD TO MAKE SURE THAT IT HAS A LABEL CONTAINING RESPONDENT'S ID NUMBER AND THAT THE RESPONDENT FILLS IN ALL THE HOUSES ON THE CARD.

SECTION D. EDUCATIONAL HISTORY

ADINTRO. Now I would like to talk about your education.

AD1A. CAPI CHECK:

1. THIS RESPONDENT WAS **NOT** INTERVIEWED IN WAVE 1
2. THIS RESPONDENT WAS INTERVIEWED (AS RSA, PCG, RSC, OR SIB) IN WAVE 1 (GO TO AD26)

AD1. CAPI CHECK: WAS RESPONDENT BORN IN THE US? (SEE C34_4)

1. YES (GO TO AD11)
5. NO

AD2. Have you ever gone to school or college at any time in the United States or gotten a GED in the United States? Please do not include ESL courses, citizenship classes, job training, or Job Club.

INTERVIEWER NOTE: ESL STANDS FOR ENGLISH AS A SECOND LANGUAGE

1. YES (GO TO AD11)
5. NO

THIS SECTION FOR NON-W1 RSA WITH SCHOOLING ONLY OUTSIDE THE US

AD3. How much school did you complete outside the United States?

INTERVIEWER: DO NOT READ ANSWERS, CODE R'S RESPONSE. CODE ONE.

0. NONE (GO TO AD19)
1. SOME PRIMARY
2. COMPLETED PRIMARY
3. SOME SECONDARY OR PREPARATORY (GO TO AD5)
4. COMPLETED SECONDARY OR PREPARATORY (GO TO AD5)
5. HIGHER LEVEL THAN SECONDARY (COLLEGE, UNIVERSITY, PROF. SCHOOL) (GO TO D6)

AD4. How many years of primary school have you completed?

__ YEARS COMPLETED (RANGE 1–9) (GO TO AD18)

AD5. How many years of secondary and preparatory school have you completed?

__ YEARS COMPLETED (RANGE 1–9) (GO TO AD18)

AD6. Have you attended college or university?

1. YES (GO TO AD8)
5. NO

AD7. What type of school did you attend after secondary or preparatory school?

_____ (VERBATIM-LIMITED) (GO TO AD18)

AD8. How many years of college or university have you completed?

0. LESS THAN ONE YEAR (GO TO AD18)
1. 1
2. 2
3. 3
4. 4
5. 5+

AD9. Do you have a college or university degree?

1. YES
5. NO (GO TO AD18)

AD10. What is the highest college or university degree that you received?

INTERVIEWER: DO NOT READ ANSWERS. CODE R'S RESPONSE. CODE ONE

1. LICENCIA
2. BACHELOR'S OR EQUIVALENT (LICENCIATURA, ETC.)
3. MASTER'S OR EQUIVALENT
4. DOCTORATE
5. LAW DEGREE
6. MEDICAL DOCTOR DEGREE
7. BUSINESS / TECHNICAL SCHOOL DEGREE
8. OTHER, SPECIFY: _____

GO TO AD18

THIS SECTION FOR NON-W1 RS WHO HAD SOME OR ALL SCHOOLING IN THE US

AD11. Have you graduated from high school, gotten a GED, or neither one?

1. GRADUATED FROM HIGH SCHOOL (GO TO AD14)
2. GOT A GED
3. NEITHER (GO TO AD13)

AD12. How many grades of school did you finish prior to getting your GED?

INTERVIEWER: RECORD LAST GRADE FINISHED PRIOR TO RECEIVING GED

0. NONE
1. FIRST GRADE
2. SECOND GRADE
3. THIRD GRADE
4. FOURTH GRADE
5. FIFTH GRADE
6. SIXTH GRADE
7. SEVENTH GRADE
8. EIGHT GRADE
9. NINTH GRADE
10. TENTH GRADE
11. ELEVENTH GRADE

GO TO AD14

AD13. How many grades of school have you finished?

INTERVIEWER: RECORD LAST GRADE FINISHED

0. NONE (GO TO AD18)
1. FIRST GRADE (GO TO AD18)
2. SECOND GRADE (GO TO AD18)
3. THIRD GRADE (GO TO AD18)
4. FOURTH GRADE (GO TO AD18)
5. FIFTH GRADE (GO TO AD18)
6. SIXTH GRADE (GO TO AD18)
7. SEVENTH GRADE (GO TO AD18)
8. EIGHT GRADE (GO TO AD18)
9. NINTH GRADE
10. TENTH GRADE
11. ELEVENTH GRADE

AD14. Have you attended college?

1. YES
5. NO (GO TO AD18)

AD15. How many years of college you have completed?

0. LESS THAN ONE YEAR (GO TO AD18)
1. 1
2. 2
3. 3
4. 4
5. 5+

AD16. Have you received a college degree?

1. YES
5. NO (GO TO AD18)

AD17. What is the highest college or advanced degree you have received?

INTERVIEWER: DO NOT READ ANSWERS. CODE R'S RESPONSE

1. ASSOCIATE'S / AA
2. BACHELOR'S / BA / BS
3. MASTER'S / MA / MS / MBA
4. DOCTORATE / PH.D.
5. LLB, JD (LAW DEGREE)
6. MD, DDS, DVM, DO (MEDICAL DEGREE)
7. HONORARY DEGREE
8. OTHER, SPECIFY: _____
9. NURSING / DENTAL ASSISTANT DEGREE
10. TEACHING CREDENTIAL

AD18. Think about the highest grade of regular school or highest degree that you completed. In what year did you complete this grade or degree?

___ __ __ __ YEAR COMPLETED

AD19. Are you currently in school? Please include only regular school, not special classes such as English as a Second Language (ESL), GED classes, or citizenship classes.

1. YES
5. NO (GO TO AD21)

AD20. What grade or year of school are you currently in?

INTERVIEWER: INCLUDES ONLY REGULAR SCHOOL, NOT SPECIAL CLASSES SUCH AS ENGLISH AS A SECOND LANGUAGE (ESL), GED CLASSES, OR CITIZENSHIP CLASSES

1. ___ GRADE (GRADES 1 THRU 12)
2. ___ YEAR OF COLLEGE (RANGE 1–15, VERIFY AT 8)
3. ___ YEAR OF GRADUATE OR PROFESSIONAL SCHOOL (RANGE 1–15, VERIFY AT 8)
4. OTHER, SPECIFY LIMITED: _____
5. ___ YEAR OF VOCATIONAL OR TRADE SCHOOL

AD21. Have you received any other degree or a certificate through a vocational school, a training school, or an apprenticeship program? Please do not include ESL, citizenship classes or Job Club.

1. YES
5. NO (GO TO AD62)

AD22. What type of degree or certificate was that?

INTERVIEWER: DO NOT READ ANSWERS. CODE R'S RESPONSE(S). CODE ALL THAT APPLY.

1. VOCATIONAL SCHOOL DEGREE
2. COMMUNITY OR JUNIOR COLLEGE DEGREE
3. DEGREE OR CERTIFICATE FROM BUSINESS OR SECRETARIAL SCHOOL
4. TRAINING IN THE ARMED FORCES, SPECIFY: _____
5. REGISTERED NURSING DEGREE
6. LICENSED NURSING DEGREE
7. MEDICAL TECHNICIAN TRAINING
8. OTHER HEALTH CARE TRAINING, SPECIFY: _____
9. BEAUTICIAN, COSMETOLOGY, BARBER TRAINING
10. POLICE / FIREFIGHTER TRAINING
11. JOB TRAINING THROUGH A GOVERNMENT OR PRIVATE PROGRAM
12. RELIGIOUS INSTRUCTION AND TRAINING
13. OTHER, SPECIFY: _____
14. TEACHER TRAINING, CHILD DEVELOPMENT TRAINING

GO TO AD62

THIS SECTION FOR RESPONDENTS WHO HAD BEEN INTERVIEWED IN WAVE 1. THIS SECTION CONFIRMS AND / OR "CORRECTS" PRELOAD INFORMATION ABOUT R'S EDUCATIONAL ATTAINMENT AND ENROLLMENT STATUS AT W1.

AD26. CAPI CHECK PRELOAD

1. RESPONDENT WAS IN SCHOOL AT TIME OF W1
2. RESPONDENT WAS NOT IN SCHOOL AT TIME OF W1 (GO TO AD35)

AD27. When we interviewed you in [W1 INTERVIEW MONTH AND YEAR] you had completed [YEAR AND LEVEL OF SCHOOL COMPLETED AT WAVE 1] and you were in enrolled in [YEAR AND LEVEL OF SCHOOL R WAS IN AT WAVE 1]. Is this correct?

1. YES (GO TO AD42)
2. NO
 - 1. DON'T KNOW, NOT SURE (GO TO AD35)
 - 2. REFUSED (GO TO AD35)

AD28. What part is incorrect?

INTERVIEWER: CHOOSE ALL THAT APPLY

1. Year and level of school **completed** by the W1 interview is incorrect
2. Was not in school at that time
3. Was in school but enrolled in a different year and level

AD29. CAPI CHECK AD28:

1. RESPONSE 1 AND / OR 2 IS CIRCLED
2. RESPONSE 1 AND 2 ARE NOT CIRCLED (GO TO AD31)

AD30. How much school had you **completed** when you were interviewed in [W1 INTERVIEW MONTH AND YEAR]? Please include only regular school, not special classes such as English as a Second Language (ESL), GED classes, or citizenship classes.

INTERVIEWER NOTE: FOR THOSE CURRENTLY IN SCHOOL AT W1 INTERVIEW, THIS DOES NOT INCLUDE THE CURRENT YEAR OF SCHOOL AT W1 INTERVIEW, UNLESS IT IS ALREADY COMPLETED

0. NONE
1. to 11. (GRADE 1 THROUGH 11) [CAPI RANGE=1-11]
12. HIGH SCHOOL GRADUATE OR COMPLETED GED
13. SOME VOCATIONAL SCHOOL, SPECIFY NUMBER OF YEARS _____
14. COMPLETED VOCATIONAL SCHOOL
15. SOME COLLEGE, SPECIFY NUMBER OF YEARS _____
16. ASSOCIATES' DEGREE (AA)
17. BACHELORS' DEGREE (BA, BS)
18. SOME GRADUATE OR PROFESSIONAL SCHOOL (AFTER COMPLETING COLLEGE), SPECIFY NUMBER OF YEARS _____
19. COMPLETED GRADUATE / PROFESSIONAL DEGREE

AD31. CAPI CHECK AD28:

1. RESPONSE 2 IS CIRCLED
2. RESPONSE 2 IS NOT CIRCLED (GO TO AD33)

AD32. In what year did you complete this grade, level of school, or degree?

___ __ __ __ YEAR COMPLETED

AD33. CAPI CHECK AD28:

1. RESPONSE 3 IS CIRCLED
2. RESPONSE 3 IS NOT CIRCLED (GO TO AD42)

AD34. What year of school were you in when we interviewed you in [W1 INTERVIEW MONTH AND YEAR]? Please include only regular school, not special classes such as English as a Second Language (ESL), GED classes, or citizenship classes.

1. ___ __ GRADE (GRADES 1 THRU 12)
2. ___ __ YEAR OF COLLEGE (RANGE 1-15, VERIFY AT 8)
3. ___ __ YEAR OF GRADUATE OR PROFESSIONAL SCHOOL (RANGE 1-15, VERIFY AT 8)
4. OTHER, SPECIFY LIMITED
5. ___ __ YEARS OF VOCATIONAL OR TRADE SCHOOL

GO TO AD42

FOR THOSE NOT IN SCHOOL AT W1

AD35. When we interviewed [you / PCG IN W1] in [W1 INTERVIEW MONTH AND YEAR] you had **completed** [YEAR AND LEVEL OF SCHOOL COMPLETED AT WAVE 1] and you were not enrolled in school at that time. Is this correct?

INTERVIEWER: "ENROLLED IN SCHOOL" DOES **NOT** INCLUDE ESL COURSES, GED CLASSES, CITIZENSHIP CLASSES, JOB TRAINING OR JOB CLUB.

- 1. YES (GO TO AD42)
- 5. NO
- 1. DON'T KNOW (GO TO AD42)
- 2. REFUSED (GO TO AD42)

AD36. What part is incorrect?

CIRCLE ALL THAT APPLY

- 1. Year and level of school **completed** by the W1 interview is incorrect
- 2. Was in school at that time

AD37. CAPI CHECK AD36:

- 1. RESPONSE 1 WAS CIRCLED
- 2. RESPONSE 1 WAS NOT CIRCLED (GO TO AD40)

AD38. How much school had you *completed* when you were interviewed in [W1 INTERVIEW MONTH AND YEAR]? Please include only regular school, not special classes such as English as a Second Language (ESL), GED classes, or citizenship classes.

INTERVIEWER NOTE: FOR THOSE CURRENTLY IN SCHOOL, THIS DOES NOT INCLUDE THE CURRENT YEAR OF SCHOOL, UNLESS IT IS ALREADY COMPLETED

- 0. NONE
- 1. to 11. (GRADE 1 THROUGH 11) [CAPI RANGE=1-11]
- 12. HIGH SCHOOL GRADUATE OR COMPLETED GED
- 13. SOME VOCATIONAL SCHOOL, SPECIFY NUMBER OF YEARS _____
- 14. COMPLETED VOCATIONAL SCHOOL
- 15. SOME COLLEGE, SPECIFY NUMBER OF YEARS _____
- 16. ASSOCIATES' DEGREE (AA)
- 17. BACHELORS' DEGREE (BA, BS)
- 18. SOME GRADUATE OR PROFESSIONAL SCHOOL (AFTER COMPLETING COLLEGE), SPECIFY NUMBER OF YEARS _____
- 19. COMPLETED GRADUATE / PROFESSIONAL DEGREE

AD39. In what year did you complete this grade, level of school, or degree?

___ ___ ___ YEAR COMPLETED

AD40. CAPI CHECK AD36:

- 1. RESPONSE 2 IS CIRCLED
- 2. RESPONSE 2 IS NOT CIRCLED (GO TO AD42)

AD41. What year of school were you in when we interviewed you in [W1 INTERVIEW MONTH AND YEAR]? Please include only regular school, not special classes such as English as a Second Language (ESL), GED classes, or citizenship classes.

INTERVIEWER: INCLUDES ONLY REGULAR SCHOOL, NOT SPECIAL CLASSES SUCH AS ENGLISH AS A SECOND LANGUAGE (ESL), GED CLASSES, OR CITIZENSHIP CLASSES

INTERVIEWER: ON THIS SCREEN ENTER THE TYPE OF SCHOOL RESPONDENT WAS IN AT W1 AND A NUMBER REPRESENTING THE GRADE OR YEAR OF SCHOOL ON THE NEXT SCREEN."

- 1. ___ GRADE (GRADES 1 THRU 12)

2. ___ YEAR OF COLLEGE (RANGE 1–15, VERIFY AT 8)
3. ___ YEAR OF GRADUATE OR PROFESSIONAL SCHOOL (RANGE 1–15, VERIFY AT 8)
4. OTHER, SPECIFY LIMITED
5. ___ YEARS OF VOCATIONAL OR TRADE SCHOOL

FOR ALL WAVE 1 RESPONDENTS. THIS SECTION COVERS SCHOOLING SINCE W1.

AD42. CAPI CHECK PRELOAD, AD28, AND AD36

1. RESPONDENT WAS IN PRIMARY, MIDDLE OR HIGH SCHOOL AT THE TIME OF WAVE 1
2. RESPONDENT WAS IN COLLEGE AT THE TIME OF WAVE 1 (GO TO D51)
3. RESPONDENT WAS IN GRADUATE OR PROFESSIONAL SCHOOL AT WAVE 1 (GO TO AD53A)
4. RESPONDENT WAS IN SOME OTHER TYPE OF SCHOOL AT WAVE 1 (GO TO AD53A)
5. RESPONDENT WAS NOT IN SCHOOL AND HAD NOT COMPLETED HIGH SCHOOL AT W1
6. RESPONDENT WAS NOT IN SCHOOL AT W1 AND HAD A HIGH SCHOOL DIPLOMA OR A GED BUT NOT A COLLEGE DEGREE (GO TO AD50)
7. RESPONDENT WAS NOT IN SCHOOL AT W1 AND HAD AT LEAST A COLLEGE DEGREE (GO TO AD53B)

FOR RS IN PRIMARY, MIDDLE OR HIGH SCHOOL AT WAVE 1

AD43. Since the last interview in [W1 INTERVIEW MONTH AND YEAR], did you complete your high school diploma or earn a GED?

1. High school diploma (GO TO AD46)
2. GED
3. Neither (GO TO AD47)

AD44. How many grades of school did you finish prior to getting your GED?

INTERVIEWER: RECORD LAST GRADE FINISHED PRIOR TO RECEIVING GED.

0. NONE
1. FIRST GRADE
2. SECOND GRADE
3. THIRD GRADE
4. FOURTH GRADE
5. FIFTH GRADE
6. SIXTH GRADE
7. SEVENTH GRADE
8. EIGHT GRADE
9. NINTH GRADE
10. TENTH GRADE
11. ELEVENTH GRADE

AD45. When did you get your GED? PROBE: How long ago did you get your GED?

INTERVIEWER: TRY TO GET A SPECIFIC DATE IF POSSIBLE. "YEARS AGO" AND "MONTHS AGO" SHOULD ONLY BE USED IF R CAN'T GIVE DATE.

INTERVIEWER: IF R GIVES A SPECIFIC MONTH AND YEAR ENTER 1, IF R GIVES THE NUMBER OF YEARS AGO ENTER 2, OR IF R GIVES THE NUMBER OF MONTHS AGO ENTER 3.

1. Received GED in _____ MONTH _____ YEAR (GO TO AD50)
2. Received GED _____ YEARS ago (GO TO AD50)
3. Received GED _____ MONTHS ago (GO TO AD50)

AD46. When did you finish or graduate from high school?

PROBE: How long ago did you finish or graduate from high school?

INTERVIEWER: TRY TO GET A SPECIFIC DATE IF POSSIBLE. "YEARS AGO" AND "MONTHS AGO" SHOULD ONLY BE USED IF R CAN'T GIVE DATE.

INTERVIEWER: IF R GIVES A SPECIFIC MONTH AND YEAR ENTER 1, IF R GIVES THE NUMBER OF YEARS AGO ENTER 2, OR IF R GIVES THE NUMBER OF MONTHS AGO ENTER 3.

1. Finished high school in _____ MONTH _____ YEAR (GO TO AD50)
2. Finished high school _____ YEARS ago (GO TO AD50)
3. Finished high school _____ MONTHS ago (GO TO AD50)

AD47. Since the last interview, have you completed any additional school? Please include only regular school, not special classes such as English as a Second Language (ESL), GED classes, or citizenship classes.

1. Yes
5. No (GO TO AD55)

AD48. What is the highest grade of school that you completed?

0. NONE
1. FIRST GRADE
2. SECOND GRADE
3. THIRD GRADE
4. FOURTH GRADE
5. FIFTH GRADE
6. SIXTH GRADE
7. SEVENTH GRADE
8. EIGHT GRADE
9. NINTH GRADE
10. TENTH GRADE
11. ELEVENTH GRADE
15. Other, Specify _____

AD49. When did you complete this grade?

PROBE: How long ago did you receive this degree?

1. Completed this grade in _____ MONTH _____ YEAR
2. Completed this grade _____ YEARS ago
3. Completed this grade _____ MONTHS ago

IF AD48=10 OR AD48=11 OR AD48=15, CONTINUE. ELSE, GO TO AD55.

AD50. Since the last interview, have you attended college?

1. YES
5. NO (GO TO AD55)

AD51. How many years of college you have completed?

0. LESS THAN ONE YEAR (GO TO AD55)
1. 1
2. 2
3. 3
4. 4
5. 5+

AD52. Have you received a college degree?

1. YES
5. NO (GO TO AD55)

AD52A. What college degree did you receive?

INTERVIEWER: DO NOT READ ANSWERS. CODE R'S RESPONSE

1. ASSOCIATE'S / AA
2. BACHELOR'S / BA / BS
8. OTHER, SPECIFY: _____

AD52B. When did you get this degree?

PROBE: How long ago did you receive this degree?

INTERVIEWER: TRY TO GET A SPECIFIC DATE IF POSSIBLE. "YEARS AGO" AND "MONTHS AGO" SHOULD ONLY BE USED IF R CAN'T GIVE DATE.

INTERVIEWER: IF R GIVES A SPECIFIC MONTH AND YEAR ENTER 1, IF R GIVES THE NUMBER OF YEARS AGO ENTER 2, OR IF R GIVES THE NUMBER OF MONTHS AGO ENTER 3.

1. Received degree in _____ MONTH ____ YEAR
2. Received degree _____ YEARS ago
3. Received degree _____ MONTHS ago

AD53. Since [the last interview / getting your college degree] have you gotten any additional education? Please include only regular school, not special classes such as English as a Second Language (ESL), GED classes, or citizenship classes.

INTERVIEWER: EDUCATION MEANS FORMAL SCHOOLING SUCH AS COLLEGE, GRADUATE SCHOOL, LAW SCHOOL, NURSING SCHOOL, MEDICAL SCHOOL, ETC.

1. Yes
2. No (GO TO AD55)

AD53A. IF AD42 NE 3 AND AD42 NE 4: How many years of schooling have you completed after you got your [associate's degree or AA / bachelor's degree / college degree]?

ELSE: How many years of graduate, professional or other post-college graduate schooling have you completed?

0. Less than one year
1. One year
2. Two years
3. Three years
4. Four years
5. Five years
6. Six years
7. Seven years
8. Eight years
9. Nine years
10. Ten or more years
19. Other, specify _____

GO TO AD53D

AD53B. Have you attended any school since the last interview in [W1 INTERVIEW MONTH AND YEAR]?

1. YES
5. NO (GO TO AD62)

AD53C. How many years of schooling have you completed since [W1 INTERVIEW MONTH AND YEAR]?

0. Less than one year
1. One year
2. Two years
3. Three years
4. Four years
5. Five years
6. Six years
7. Seven years
8. Eight years
9. Nine years
10. Ten or more years
19. Other, specify _____

AD53D. Did you receive a graduate or an advanced degree?

1. Yes
2. No (GO TO AD55)

AD53E. What is the highest college or advanced degree you have received?

INTERVIEWER: DO NOT READ ANSWERS. CODE R'S RESPONSE

1. ASSOCIATE'S / AA
2. BACHELOR'S / BA / BS
3. MASTER'S / MA / MS / MBA
4. DOCTORATE / PH.D.
5. LLB, JD (LAW DEGREE)
6. MD, DDS, DVM, DO (MEDICAL DEGREE)
7. HONORARY DEGREE
8. OTHER, SPECIFY: _____

AD54. When did you receive this degree?

PROBE: How long ago did you receive this degree?

1. Received degree in _____MONTH _____YEAR (GO TO AD55)
2. Received degree _____ YEARS ago (GO TO AD55)
3. Received degree _____ MONTHS ago (GO TO AD55)

AD55. Since the last interview, have you received any other degree or a certificate through a vocational school, a training school, or an apprenticeship program? Please do not include ESL, citizenship classes or Job Club.

1. YES
5. NO (GO TO AD57)

AD56. What type of degree or certificate was that?

INTERVIEWER: DO NOT READ ANSWERS. CODE R'S RESPONSE(S). CODE ALL THAT APPLY.

1. VOCATIONAL SCHOOL DEGREE
2. COMMUNITY OR JUNIOR COLLEGE DEGREE
3. DEGREE OR CERTIFICATE FROM BUSINESS OR SECRETARIAL SCHOOL
4. TRAINING IN THE ARMED FORCES, SPECIFY
5. REGISTERED NURSING DEGREE
6. LICENSED NURSING DEGREE
7. MEDICAL TECHNICIAN TRAINING
8. OTHER HEALTH CARE TRAINING, SPECIFY

9. BEAUTICIAN, COSMETOLOGY, BARBER TRAINING
10. POLICE / FIREFIGHTER TRAINING
11. JOB TRAINING THROUGH A GOVERNMENT OR PRIVATE PROGRAM
12. RELIGIOUS INSTRUCTION AND TRAINING
13. OTHER, SPECIFY LIMITED
14. TEACHER TRAINING OR CHILD DEVELOPMENT TRAINING

AD57. Are you currently in school? Please include only regular school, not special classes such as English as a Second Language (ESL), GED classes, or citizenship classes.

1. YES
5. NO (GO TO AD59)

AD58. What grade or year of school are you currently in?

INTERVIEWER: INCLUDES ONLY REGULAR SCHOOL, NOT SPECIAL CLASSES SUCH AS ENGLISH AS A SECOND LANGUAGE (ESL), GED CLASSES, OR CITIZENSHIP CLASSES

INTERVIEWER: ON THIS SCREEN ENTER THE TYPE OF SCHOOL R IS CURRENTLY IN AND A NUMBER REPRESENTING THE GRADE OR YEAR OF SCHOOL ON THE NEXT SCREEN.

1. ___ GRADE (GRADES 1 THRU 12)
2. ___ YEAR OF COLLEGE (RANGE 1–15, VERIFY AT 8)
3. ___ YEAR OF GRADUATE OR PROFESSIONAL SCHOOL (RANGE 1–15, VERIFY AT 8)
4. OTHER, SPECIFY _____
5. ___ YEAR OF VOCATIONAL OR TRADE SCHOOL

DATA USER NOTE: The type of other school for AD58=4 was not coded in CAPI. AD58_S contains the year in other school.

AD59. CONTINUE

AD62. CAPI CHECK PRELOAD:

1. R IS PANEL RSC OR SIB OR IS RSA_NE AGE 18–24
2. R IS RSA OR PCG (GO TO AD90)

ONLY FOR PANEL RSCS AND SIBS AND RSA_NE AGE 18–24

AD63. CHECK AD57 AND AD58:

1. RESPONDENT IS CURRENTLY IN HIGH SCHOOL [SET SCHOOL="high school"]
2. RESPONDENT IS CURRENTLY IN COLLEGE [SET SCHOOL="college or university"]
3. RESPONDENT IS CURRENTLY IN GRADUATE OR PROFESSIONAL SCHOOL [SET SCHOOL="graduate or professional school"]
4. RESPONDENT IS CURRENTLY IN SOME OTHER TYPE OF SCHOOL [SET SCHOOL="school"]
5. RESPONDENT IS NOT CURRENTLY IN SCHOOL (GO TO AD67)

AD64. What is the full name of the [SCHOOL] you are currently attending?

FULL NAME: _____

AD64_A. What type of school is this?

INTERVIEWER: DO NOT READ ANSWERS; CODE RESPONDENT'S ANSWER

1. MIDDLE SCHOOL OR JUNIOR HIGH SCHOOL
2. HIGH SCHOOL
3. VOCATIONAL SCHOOL

4. HOME SCHOOL
5. COMMUNITY COLLEGE
6. COLLEGE OR UNIVERSITY
7. MEDICAL, LAW OR BUSINESS SCHOOL
8. GRADUATE SCHOOL
9. OTHER TYPE OF SCHOOL, SPECIFY _____

AD65. Where is this school located? What is the address?

IF AD64_A=5 OR AD64_A=6 OR AD64_A=7 OR AD64_A=8 ASK ONLY FOR CITY AND STATE (NOT STREET ADDRESS). ELSE, ASK FOR STREET ADDRESS AND CITY AND STATE.

PROBE: What is the closest intersection or cross-street? What city is that in?

INTERVIEWER: GET AS MUCH INFORMATION AS POSSIBLE

EXACT STREET ADDRESS _____ ON _____ (STREET) NEAR CORNER OF _____ (STREET)
 CITY: _____ COUNTRY: _____ ZIP CODE (IF KNOWN): _____

AD66. How many grades or years in total have you completed at this school?

1. _____ YEARS GIVEN
2. LESS THAN ONE YEAR

AD67. CAPI CHECK:

1. RESPONDENT HAS A HIGH SCHOOL DIPLOMA
3. RESPONDENT HAS ONLY A GED OR DOES NOT HAVE EITHER ONE (GO TO AD70)

AD68. What was the full name of the school where you got your high school diploma? Where was it located?

PROBE: What was the closest intersection or cross-street? What city was that in?

INTERVIEWER: GET AS MUCH INFORMATION AS POSSIBLE

Name: _____, EXACT STREET ADDRESS: _____ NEAR CORNER OF: _____ (STREET)
 CITY: _____ COUNTRY: _____ ZIP CODE (IF KNOWN): _____

AD69. How many years in total did you complete at this school?

1. _____ YEARS
2. LESS THAN ONE YEAR

AD70. CAPI CHECK:

1. RESPONDENT HAS COMPLETED A COLLEGE DEGREE (AA, BA, BS, ETC)
2. RESPONDENT HAS NOT COMPLETED A COLLEGE DEGREE (GO TO AD73)

AD71. What was the full name of the college or university where you got your college degree? Where was it located? What city and state?

PROBE: What was the closest intersection or cross-street? What city was that in?

PROBE: Your AA or bachelor's degree?

INTERVIEWER: ENTER AS MUCH INFORMATION AS RESPONDENT GIVES YOU. THEN PROBE FOR ANY MISSING INFORMATION. IF AFTER PROBING YOU STILL DO NOT HAVE COMPLETE INFORMATION, ENTER DK OR RF WHERE APPROPRIATE

Name: _____, EXACT STREET ADDRESS: _____ NEAR CORNER OF: _____ (STREET)
CITY: _____ COUNTRY: _____ ZIP CODE (IF KNOWN): _____

GO TO AD90

AD72. How many years in total did you complete at this college or university?

1. _____ YEARS (GO TO AD90)
2. LESS THAN ONE YEAR (GO TO AD90)

AD72B. CAPI CHECK:

1. RESPONDENT CURRENTLY IN SCHOOL (GO TO AD90)
2. RESPONDENT NOT CURRENTLY IN SCHOOL

AD73. CAPI CHECK:

1. RESPONDENT DOES NOT HAVE A HIGH SCHOOL DIPLOMA, AND HAS NOT COMPLETED ANY ADDITIONAL SCHOOL (BEYOND HIGH SCHOOL)
2. RESPONDENT HAS A GED AND HAS NOT COMPLETED ANY ADDITIONAL SCHOOL (BEYOND HIGH SCHOOL)
3. RESPONDENT HAS A HIGH SCHOOL DIPLOMA, BUT NO FURTHER EDUCATION BEYOND HIGH SCHOOL (GO TO AD80)
4. RESPONDENT HAS ATTENDED COLLEGE BUT DOES NOT HAVE COLLEGE DEGREE (ASSOCIATES OR BACHELORS) (GO TO AD84)
5. OTHER (GO TO AD90)

FOR THOSE WHO LEFT HIGH SCHOOL BEFORE GRADUATING (WHETHER OR NOT THEY GOT A GED)

AD74. What was the full name of the last school you attended? Where was it located?

PROBE: What was the closest intersection or cross-street? What city was that in?

1. Name: _____, EXACT STREET ADDRESS: _____ NEAR CORNER OF: _____ (STREET)
CITY: _____ COUNTRY: _____ ZIP CODE (IF KNOWN): _____
5. Never attended school; was always home schooled (GO TO AD76)

AD75. How many years in total did you complete at that school?

1. _____ YEARS GIVEN
2. LESS THAN ONE YEAR

AD75a. When did you stop attending that school?

PROBE: How long ago did you stop attending that school?

1. Stopped attending in (MONTH) _____ (YEAR) _____
2. Stopped attending _____ YEARS ago
3. Stopped attending _____ MONTHS ago

AD76. Why did you stop going to school?

CHECK ALL THAT APPLY

1. Received degree, completed course work, graduated
2. Expelled
3. Suspended
4. Got married
5. Pregnant

6. School was too dangerous
7. Poor grades
8. Did not like school
9. Offered job
10. Entered military
11. Financial difficulties, couldn't afford to go
12. Child care responsibilities
13. Home responsibilities
14. Moved away from school
15. Didn't get along with other students
16. My friends had dropped out of school
17. Had a problem with drugs or alcohol
18. Became the father / mother of a baby
19. Had a health problem
20. District changed / school closed
21. Incarceration / legal problems
22. Transportation problems / too far away
23. OTHER (SPECIFY) _____

AD76a. Did you ever take the Preliminary Scholastic Aptitude Test or the P-SAT?

INTERVIEWER: P-SAT IS A STANDARDIZED TEST THAT STUDENTS GENERALLY TAKE IN THEIR JUNIOR YEAR OF HIGH SCHOOL TO PREPARE FOR TAKING THE SAT (SCHOLASTIC APTITUDE TEST).

1. YES
5. NO

AD76B. Did you ever take the Scholastic Aptitude Test or SAT?

1. YES
5. NO

AD76C. CAPI CHECK:

1. IF AD76A=5 AND AD76B=5 (GO TO AD76J)
2. IF AD76A=1 (GO TO AD76G)
3. OTHERWISE, CONTINUE

R TOOK ONLY THE P-SAT

AD76D. What was your P-SAT verbal or critical reading skills score?

INTERVIEWER: THIS TEST WAS ORIGINALLY CALLED THE "VERBAL" TEST. IT HAS RECENTLY BEEN RENAMED THE "CRITICAL READING SKILLS" TEST.

PROBE: Just give me your best guess.

1. ___ verbal or critical reading score (Range: 20–80)
99. Does not remember

AD76E. What was your P-SAT math skills score?

PROBE: Just give me your best guess

1. ___ math score (Range: 20–80)
99. Does not remember

AD76F. What was your P-SAT writing skills score?

PROBE: Just give me your best guess

1. ___ writing skills score (Range: 20–80) (GO TO AD76J)
99. Does not remember (GO TO AD76J)

AD76G. What was your SAT verbal score?

PROBE: Just give me your best guess

1. ___ verbal score (Range: 200–800)
999. Does not remember

AD76H. What was your SAT math score?

PROBE: Just give me your best guess

1. ___ math score (Range: 200–800)
999. Does not remember

AD76H_1. If you took the SAT writing test, what was your SAT writing score? Please keep in mind that the SAT writing test was not given until the 2004–2005 school year.

PROBE: Just give me your best guess

1. ___ WRITING SCORE (RANGE: 200–800)
888. DID NOT TAKE THE SAT WRITING TEST
999. DOES NOT REMEMBER

FOR THOSE WITH HIGH SCHOOL DIPLOMA BUT NO ADDITIONAL SCHOOL

AD80. How many years in total did you complete at the high school that you got your high school diploma from?

1. _____ YEARS GIVEN
2. LESS THAN ONE YEAR

AD80A. Why have you stopped going to school after high school rather than going on to college?

CHECK ALL THAT APPLY

4. Got married
5. Pregnant
6. School was too dangerous
7. Poor grades
8. Did not like school
9. Offered job
10. Entered military
11. Financial difficulties, couldn't afford to go
12. Child care responsibilities
13. Home responsibilities
14. Moved away from school
15. Didn't get along with other students
16. My friends had dropped out of school
17. Had a problem with drugs or alcohol
18. Became the father / mother of a baby
19. Had a health problem
20. District changed / school closed
21. Incarceration / legal problems
22. Transportation problems / too far away
23. OTHER (SPECIFY) _____

AD80b. Did you ever take the Preliminary Scholastic Aptitude Test or the P-SAT?

INTERVIEWER: P-SAT IS A STANDARDIZED TEST THAT STUDENTS GENERALLY TAKE IN THEIR JUNIOR YEAR OF HIGH SCHOOL TO PREPARE FOR TAKING THE SAT (SCHOLASTIC APTITUDE TEST).

1. YES
5. NO

AD80c. Did you ever take the Scholastic Aptitude Test or SAT?

1. YES
5. NO

AD80d. CAPI CHECK:

1. IF AD80b=5 AND AD80c=5 (GO TO AD80k)
2. IF AD80c=1 (GO TO AD80h)
3. OTHERWISE, CONTINUE

R TOOK ONLY THE P-SAT

AD80e. What was your P-SAT verbal or critical reading skills score?

INTERVIEWER: THIS TEST WAS ORIGINALLY CALLED THE "VERBAL" TEST. IT HAS RECENTLY BEEN RENAMED THE "CRITICAL READING SKILLS" TEST.

PROBE: Just give me your best guess.

1. ___ VERBAL OR CRITICAL READING SCORE (RANGE: 20–80)
99. DOES NOT REMEMBER

AD80f. What was your P-SAT math skills score?

PROBE: Just give me your best guess

1. ___ MATH SCORE (RANGE: 20–80)
99. DOES NOT REMEMBER

AD80g. What was your P-SAT writing skills score?

PROBE: Just give me your best guess

1. ___ WRITING SKILLS SCORE (RANGE: 20–80) (GO TO AD80K)
99. DOES NOT REMEMBER (GO TO AD80K)

AD80h. What was your SAT verbal score?

PROBE: Just give me your best guess

1. ___ VERBAL SCORE (RANGE: 200–800)
999. DOES NOT REMEMBER

AD80j. What was your SAT math score?

PROBE: Just give me your best guess

1. ___ MATH SCORE (RANGE: 200–800)
999. DOES NOT REMEMBER

AD80J_1. If you took the SAT writing test, what was your SAT writing score? Please keep in mind that the SAT writing test was not given until the 2004–2005 school year.

PROBE: Just give me your best guess

1. _____ WRITING SCORE (RANGE: 200–800)
888. DID NOT TAKE THE SAT WRITING TEST
999. DOES NOT REMEMBER

AD80L. Did you ever complete a college application and submit it?

1. YES
5. NO

AD80M. Did you or your parents ever complete and submit the standard college financial aid form known as a FAFSA?

1. YES (GO TO AD90)
5. NO (GO TO AD90)

SECTION FOR THOSE WITH SOME COLLEGE BUT NO DEGREE

AD84. What was the full name of the last college or university that you attended? Where was it located? What city and state?

INTERVIEWER: ENTER AS MUCH INFORMATION AS RESPONDENT GIVES YOU. THEN PROBE FOR ANY MISSING INFORMATION. IF AFTER PROBING YOU STILL DO NOT HAVE COMPLETE INFORMATION, ENTER DK OR RF WHERE APPROPRIATE

NAME _____ CITY _____ STATE _____ COUNTRY _____

AD85. How many years in total did you complete at that college or university?

1. _____ YEARS GIVEN
2. LESS THAN ONE YEAR

AD85A. When did you stop attending college or university?

PROBE: How long ago did you stop attending college or university?

1. Stopped attending in (MONTH) _____ (YEAR) _____
2. Stopped attending _____ YEARS ago
3. Stopped attending _____ MONTHS ago

AD86. Why did you stop attending college?

CHECK ALL THAT APPLY

1. Received degree, completed course work, graduated
2. Expelled
3. Suspended
4. Got married
5. Pregnant
6. School was too dangerous
7. Poor grades
8. Did not like school
9. Offered job
10. Entered military
11. Financial difficulties, couldn't afford to go

12. Child care responsibilities
13. Home responsibilities
14. Moved away from school
15. Didn't get along with other students
16. My friends had dropped out of school
17. Had a problem with drugs or alcohol
18. Became the father / mother of a baby
19. Had a health problem
20. District changed / school closed
21. Incarceration / legal problems
22. Transportation problems / too far away
23. OTHER (SPECIFY): _____

AD90. Now let me ask you about something else. What was your total family income during the calendar year [2006 / 2007 / 2008]? Please include all income for you, your [wife / husband / partner], [all of your children under the age of 18 who live here with you], and all of your [wife / husband / partner]'s children under the age of 18 who live here with you.

1. \$ _____ (GO TO SECTION E)
- 1. DK (CONTINUE)
- 2. RF (CONTINUE)

AD90A. Is the income in another currency?

AD91. Was it more than \$37,000, less than \$37,000, or what?

1. MORE THAN \$37,000
2. LESS THAN \$37,000 (GO TO AD93)
3. ABOUT \$37,000 (GO TO SECTION E)
4. WAS \$ _____ (GO TO SECTION E)

IF AD90=DK OR REFUSED AND AD91=DK OR REFUSED, GO TO SECTION E

AD92. Was it more than \$72,000, less than \$72,000, about \$72,000, or what?

1. MORE THAN \$72,000 (GO TO AD94)
2. LESS THAN \$72,000 (GO TO SECTION E)
3. ABOUT \$72,000 (GO TO SECTION E)
4. WAS \$ _____ (GO TO SECTION E)

AD93. Was it more than \$17,000, less than \$17,000, or what?

1. MORE THAN \$17,000 (GO TO SECTION E)
2. LESS THAN \$17,000 (GO TO SECTION E)
3. ABOUT \$17,000 (GO TO SECTION E)
4. WAS \$ _____ (GO TO SECTION E)

AD94. Was it more than \$181,000, less than \$181,000, or what?

1. MORE THAN \$181,000
2. LESS THAN \$181,000
3. ABOUT \$181,000
4. WAS \$ _____

SECTION E. FERTILITY AND MARRIAGE / COHABITATION HISTORY

AE0A. CAPI CHECK:

1. NEW ENTRANT (I.E., NOT INTERVIEWED IN WAVE 1)
2. WAVE 1 RESPONDENT (GO TO AE100)

NEW ENTRANTS COMPLETE RELATIONSHIP / MARRIAGE HISTORY FOR THE PREVIOUS SIX YEARS – INTENDED TO BE APPROXIMATELY EQUIVALENT TO THE LENGTH OF TIME OF THE AVERAGE WAVE 1 INTERVIEW DATE.

AE0B. CAPI: SET **STARTDATE** EQUALS CURRENT DATE MINUS SIX YEARS (72 MONTHS)

AE1. Now I have some questions about marriage and relationships. I want to ask first about marriages. Just to make sure my information is correct, what is your current marital status? Are you currently legally married, separated, widowed, divorced, or never legally married?

INTERVIEWER NOTE: SEPARATION INCLUDES LEGAL AND INFORMAL SEPARATION

1. CURRENTLY (LEGALLY) MARRIED
2. SEPARATED FROM A MARRIAGE OR MARRIED AND LIVING WITH A PARTNER (OTHER THAN SPOUSE) (GO TO E7)
3. WIDOWED (GO TO AE7)
4. DIVORCED (GO TO AE7)
5. NEVER (LEGALLY) MARRIED (GO TO AE41)

SECTION FOR CURRENTLY MARRIED

AE2. When did you and your [wife / husband] get married? What month and year?

___ MONTH ___ YEAR

AE3. CAPI CHECK AE2:

1. R'S MARRIAGE DATE IS BEFORE [STARTDATE] (GO TO AE62)
5. R'S MARRIAGE DATE IS AFTER [STARTDATE]

AE4. Did you live with your [wife / husband] before you got married?

1. YES
5. NO (GO TO AE13)

AE5. When did you start living with your [wife / husband]?

___ MONTH ___ YEAR

AE6. CAPI CHECK:

1. DATE IN AE5 IS BEFORE [STARTDATE] (GO TO AE62)
5. DATE IN AE5 IS AFTER [STARTDATE] (GO TO AE13)

SECTION FOR THOSE WHO ARE SEPARATED / DIVORCED / WIDOWED

AE7. IF AE1=2 OR 4: When did you and your [wife / husband] stop living together?

IF AE1=3: When did your [wife / husband] die?

___ MONTH ___ YEAR

AE8. When did you and your [wife / husband] get married?

___ MONTH ___ YEAR

AE9. CAPI CHECK AE8:

1. DATE IN AE8 IS BEFORE STARTDATE (GO TO AE30)
5. DATE IN AE8 IS AFTER STARTDATE

AE10. Did you live with your [wife / husband] before you got married?

1. YES
5. NO (GO TO AE13)

AE11. When did you start living with your [wife / husband]?

___ MONTH ___ YEAR

AE12. CAPI CHECK:

1. DATE IN AE11 IS BEFORE [STARTDATE] (GO TO AE30)
5. DATE IN AE11 IS AFTER [STARTDATE]

THIS SECTION COLLECTS INFORMATION ON MARRIAGES AND RELATIONSHIPS BEFORE CURRENT OR MOST RECENT MARRIAGE AND SINCE [STARTDATE]

AE13. Before your [current / most recent] marriage, were you ever married to someone else or did you ever live together with someone else in a relationship?

INTERVIEWER INSTRUCTION: DO NOT INCLUDE LIVING TOGETHER WITH CURRENT HUSBAND / WIFE

1. YES
5. NO (GO TO AE30)

AE14. Aside from your [current / most recent] marriage, when was the last time you got married or starting living with someone in a relationship? What was the date?

INTERVIEWER INSTRUCTION: IF R LIVED WITH SOMEONE AND THEN MARRIED HIM / HER, RECORD DATE OF MARRIAGE.

___ MONTH ___ YEAR

AE15. Were you married or did you live together without being married?

1. MARRIED
2. LIVED TOGETHER WITHOUT BEING MARRIED
3. [IF VOLUNTEERED]: LIVED TOGETHER AND THEN MARRIED

AE16. When did you stop living with that [wife / husband / person]?

___ MONTH ___ YEAR

AE17. CAPI CHECK: CHECK AE14 AND AE15

1. DATE IN AE14 IS BEFORE [STARTDATE] (GO TO AE30)
2. DATE IN AE14 IS AFTER [STARTDATE] AND AE15=2 (GO TO AE21)
3. DATE IN AE14 IS AFTER [STARTDATE] AND AE15=1 OR 3

AE18. Before that marriage, [did you live with your / you lived with your] [wife / husband] without being married. Is that correct?

1. YES
5. NO (GO TO AE21)

AE19. When did you begin living together with your [wife / husband] in a relationship?

___ MONTH ___ YEAR

AE20. CAPI CHECK: CHECK E19

1. DATE IN E19 IS BEFORE [STARTDATE] (GO TO AE30)
5. DATE IN E19 IS AFTER [STARTDATE]

AE21. Before that [marriage / relationship] were you ever married to someone else or did you ever live together with someone else in a relationship?

1. YES
5. NO (GO TO AAE30)

AE22. When did you get married or starting living together that time? What was the date?

INTERVIEWER INSTRUCTION: IF R LIVED WITH SOMEONE AND THEN MARRIED HIM / HER, RECORD DATE OF MARRIAGE.

___ MONTH ___ YEAR

AE23. Were you married or did you live together without being married?

1. MARRIED
2. LIVED TOGETHER WITHOUT BEING MARRIED
3. [IF VOLUNTEERED] LIVED TOGETHER AND THEN MARRIED

AE24. When did you stop living with that [wife / husband / person]?

___ MONTH ___ YEAR

AE25. CAPI CHECK: CHECK AE22 AND AE23

1. DATE IN AE22 IS BEFORE [STARTDATE] (GO TO AE30)
2. DATE IN AE22 IS AFTER [STARTDATE] AND AE23=2 (GO TO AE29)
3. DATE IN AE22 IS AFTER [STARTDATE] AND AE23=1 OR 3

AE26. Before that marriage, [did you live with your / you lived with your] [wife / husband] without being married. Is that correct?

1. YES
5. NO (GO TO AE29)

AE27. When did you begin living together with your [wife / husband] in a relationship?

___ MONTH ___ YEAR

AE28. CAPI CHECK: CHECK AE27:

1. DATE IN AE27 IS BEFORE [STARTDATE] (GO TO AE30)
5. DATE IN AE27 IS AFTER [STARTDATE]

AE29. CONTINUE TO ASK AE21 THRU AE27 UNTIL AE25=1 or AE28=1 OR 12 LOOPS COMPLETED

THIS SECTION COLLECTS INFORMATION ON RELATIONSHIPS AFTER MOST RECENT MARRIAGE ENDED

AE30. CAPI CHECK:

1. R IS CURRENTLY MARRIED (GO TO AE62)
2. R IS CURRENTLY DIVORCED, SEPARATED OR WIDOWED

AE31. (Just to verify what you said) Since [you were separated / you were divorced / your [wife / husband] died], have you lived with anyone in a relationship without being married?

1. YES
5. NO (GO TO AE62)

AE32. (Just to verify what you said) Are you currently living with someone in a relationship?

1. YES
5. NO (GO TO AE36)

AE33. When did you start living with this person?

___ MONTH ___ YEAR

AE34. CAPI CHECK:

1. DATE IN AE33 IS BEFORE STARTDATE (GO TO AE62)
5. DATE IN AE33 IS AFTER STARTDATE

AE35. Since [you were separated / you were divorced / your [wife / husband] died], have you lived with anyone else in a relationship without being married?

1. YES
5. NO (GO TO AE62)

LOOP BEGIN

AE36. Let's start with the [previous time / most recent time] you lived with someone. When did you start living with [this / that] person?

___ MONTH ___ YEAR

AE37. When did you stop living with this person?

___ MONTH ___ YEAR

AE38. CAPI CHECK:

1. DATE IN AE36 IS BEFORE [STARTDATE] (GO TO AE62)
5. DATE IN AE36 IS AFTER [STARTDATE]

AE39. Was there anyone else you lived with in a relationship since your marriage ended?

1. YES
5. NO (GO TO AE62)

AE40. LOOP END. CONTINUE TO ASK AE36 TO AE39 UNTIL AE38=1 OR 10 LOOPS COMPLETED

GO TO AE62

SECTION FOR THOSE WHO HAVE NEVER BEEN LEGALLY MARRIED

AE41. Are you currently living with someone in a relationship without being married?

- 1. YES
- 5. NO (GO TO AE53)

AE42. When did you and this person begin living together?

___ MONTH ___ YEAR

AE43. CAPI CHECK:

- 1. DATE IN AE42 IS BEFORE [STARTDATE] (GO TO AE63)
- 5. DATE IN AE42 IS AFTER [STARTDATE]

AE44. Have you ever lived with someone else in a relationship without being married?

- 1. YES
- 5. NO (GO TO AE63)

AE45. Think of the person you lived with most recently before your current relationship. When did you start living with that person?

___ MONTH ___ YEAR

AE46. When did you stop living with that person?

___ MONTH ___ YEAR

AE47. CAPI CHECK:

- 1. DATE IN AE45 IS BEFORE [STARTDATE] (GO TO AE63)
- 5. DATE IN AE45 IS AFTER [STARTDATE]

LOOP BEGIN

AE48. Did you live with someone else in a relationship without being married before that?

- 1. YES
- 5. NO (GO TO AE63)

AE49. When did you start living with that person?

___ MONTH ___ YEAR

AE50. When did you stop living with that person?

___ MONTH ___ YEAR

AE51. CAPI CHECK:

- 1. DATE IN AE49 IS BEFORE [STARTDATE] (GO TO AE63)
- 5. DATE IN AE49 IS AFTER [STARTDATE]

AE52. LOOP END. GO TO AE48 AND ASK AE48 TO AE50 UNTIL AE51=1 OR 10 LOOPS COMPLETED

THIS SECTION FOR NEVER MARRIED AND NOT COHABITING

AE53. Have you ever lived with someone in a relationship without being married?

- 1. YES
- 5. NO (GO TO AE63)

AE54. Think of the person you lived with most recently in a relationship. When did you start living with this person?

___ MONTH ___ YEAR

AE55. When did you stop living with that person?

___ MONTH ___ YEAR

AE56. CAPI CHECK:

1. DATE IN AE54 IS BEFORE [STARTDATE] (GO TO AE63)
5. DATE IN AE54 IS AFTER [STARTDATE]

LOOP BEGIN

AE57. Have you ever lived with someone else in a relationship without being married?

1. YES
5. NO (GO TO AE63)

AE58. Think of the [next to last person / previous person] you lived with in a relationship. When did you start living with this person?

___ MONTH ___ YEAR

AE59. When did you stop living with this person?

___ MONTH ___ YEAR

AE60. CAPI CHECK:

1. DATE IN AE58 IS BEFORE [STARTDATE] (GO TO AE63)
5. DATE IN AE58 IS AFTER [STARTDATE]

AE61. LOOP END. CONTINUE WITH AE57 AND ASK AE57 THRU AE59 UNTIL AE60=1 OR 10 LOOPS COMPLETED

AE62. [Including your current marriage, how many / How many] times have you been married in total?

___ NO. OF TIMES MARRIED (RANGE 1–10, VERIFY AT 6)

AE63. INTERVIEWER CHECK: IS R CURRENTLY MARRIED OR COHABITATING, BUT NO SPOUSE / PARTNER IN HH?

1. YES, CURRENTLY MARRIED, BUT NO SPOUSE IN HH [(A4=5 AND AE1=1) OR AE1=2]
2. YES, COHABITATING, BUT NO PARTNER IN HH [A4=5 AND (AE32=1 OR AE41=1)]
3. ALL OTHERS (GO TO AE67)

AE64. I've recorded that you are [married / living together with someone in a relationship], but your [wife / husband / partner] is not living here now. Why is that?

INTERVIEWER: DO NOT READ ANSWERS. CODE R'S RESPONSE(S). CODE ALL THAT APPLY.

1. BECAUSE OF WORK / SCHOOL / MILITARY SERVICE / HOSPITALIZATION / JAIL OR PRISON
2. PREFER TO MAINTAIN SEPARATE HOUSEHOLDS
3. LIVES WITH SOMEONE ELSE (GIRLFRIEND / BOYFRIEND, ANOTHER WOMAN / MAN, PARTNER)
4. MARITAL PROBLEMS
5. NO LONGER ROMANTICALLY INVOLVED

6. OTHER, SPECIFY: _____
7. SPOUSE / PARTNER ACTUALLY IS LIVING HERE (GO TO AE67)
12. LEFT USA / LIVES IN OR RETURNED TO HOME COUNTRY

AE65. Where does your [wife / husband / partner] live or stay? Can you give me the city and state?

_____ CITY _____ STATE _____ COUNTRY

AE67. INTERVIEWER: IS RESPONDENT CURRENTLY MARRIED OR COHABITING?

1. CURRENTLY MARRIED
2. COHABITING OR SEPARATED
3. NEITHER MARRIED NOR COHABITING (GO TO AE68A)

AE68. Taking things all together, how would you describe your [marriage / relationship] with your [wife / husband / partner]? Please use a scale from 1 to 10 where 1 is extremely unhappy and 10 is extremely happy.

___ (NUMBER FROM 1 TO 10) (GO TO AE68M)

AE68A. CAPI CHECK:

1. RESPONDENT IS <26 YEARS OLD
2. RESPONDENT IS ≥ 26 YEARS OLD (GO TO AE68M)

AE68B. CAPI CHECK:

1. AE1=5 AND AE41=5 AND AE53=5
2. OTHERWISE (GO TO AE68M)

IF RESPONDENT HAS COMPLETED THE SELF-ADMINISTERED QUESTIONNAIRE (SAQ) TUTORIAL PREVIOUSLY, NO NEED TO GO THROUGH IT AGAIN. IF RESPONDENT HAS NOT PREVIOUS COMPLETED SAQ TUTORIAL, IT WILL BE DISPLAYED HERE AND INTERVIEWER WITH GO THROUGH IT WITH RESPONDENTS.

AE68INTRO. Now I have a few questions in which I would like **you** to type your answers directly into the computer. Please give the computer back to me when you are instructed to do so.

INTERVIEWER: PRESS '1' TO CONTINUE THEN HAND COMPUTER OVER TO RESPONDENT TO BEGIN THE SELF-ADMINISTERED SECTION

AE68C. Have you ever had a girlfriend or boyfriend or gone out with someone for a while?

1. Yes
5. No (GO TO AE68E)

AE68D. Do you have a girlfriend or boyfriend now?

1. YES
5. NO

AE68E. Have you ever had sexual intercourse, that is, made love, had sex, or gone all the way with a person of the opposite sex?

1. Yes
5. No (GO TO AE69)

AE68F. Have you had intercourse more than once?

1. Yes
5. No (GO TO AE68M)

AE68G. How many DIFFERENT PEOPLE have you had sexual intercourse with in the last 12 months, that is, since [CURRENT MONTH] last year?

_____ partners (IF NONE, ENTER ZERO)

AE68H. When was the last time you had sexual intercourse?

1. Today
2. Yesterday
3. ___ days ago
4. ___ weeks ago
5. ___ months ago
6. ___ years ago

AE68H_day. PROBE (IF NECESSARY): How many days has it been since you last had sexual intercourse?

AE68H_week. PROBE (IF NECESSARY): How many weeks has it been since you last had sexual intercourse?

AE68H_month. PROBE (IF NECESSARY): How many months has it been since you last had sexual intercourse?

AE68H_year. PROBE (IF NECESSARY): How many years has it been since you last had sexual intercourse?

AE68I. Did you or your partner use something to prevent pregnancy or disease when you had sexual intercourse most recently?

1. Yes
5. No (GO TO AE68K)

AE68J. Which method or methods did you or your partner use?

MARK ALL THAT APPLY

1. Condom (rubber)
2. Foam, jelly, creme, sponge, suppositories
3. Withdrawal (pulling out)
4. Diaphragm (with or without jelly)
5. Rhythm (safe time, avoiding sex at certain times of the month)
6. Birth control pills
7. IUD (intrauterine device)
8. Norplant, depo-provera or injectables
9. Operation
10. Other, Specify _____

AE68K. CAPI CHECK B68G: NUMBER OF SEXUAL PARTNERS THAT RESPONDENT HAS HAD IN THE LAST 12 MONTHS

1. ZERO (GO TO AE68M)
2. ONE OR MORE

AE68L. Think about all the times that you have had sexual intercourse in the last 12 months. About what percent of the time from 0 to 100, have you or your sexual partner or partners used a condom?

_____ Percent of the time (IF NEVER, ENTER ZERO, IF ALL THE TIME, ENTER 100)

ALL RESPONDENTS COME HERE (EXCEPT THOSE <26 WHO SAY THEY NEVER HAD SEX)

AE68M. Now, think about the [first] time you [ever] had sexual intercourse [with anyone]. How old were you?

PROBE: If you don't know exactly, just give me your best guess.

_____ Years old
777. Never had sex (GO TO AE69)

AE68N. Did you or your partner use something to prevent pregnancy or disease when you had intercourse for the first time?

1. Yes
5. No (GO TO AE69)

AE68P. Which method or methods did you or your partner use?

1. Condom (rubber)
2. Foam, jelly, creme, sponge, suppositories
3. Withdrawal (pulling out)
4. Diaphragm (with or without jelly)
5. Rhythm (safe time, avoiding sex at certain times of the month)
6. Birth control pills
7. IUD (intrauterine device)
8. Norplant, depo-provera or injectables
9. Operation
10. Other, specify _____

AE68POST. Thank you for your time. You have reached the end of this portion of the interview. Please turn the computer back to the interviewer, and he or she will tell you what you'll do next.

AE69. Now I want to ask you about something else. Have you ever legally adopted a child?

1. YES
5. NO (GO TO AE79)

AE70. How many children have you legally adopted?

___ CHILDREN (RANGE 1–20, VERIFY AT 8)

SEQUENCE OF QUESTIONS AE71 THRU AE78 IS REPEATED FOR EACH ADOPTED CHILD (I.E., SAME NUMBER OF TIMES AS AE70 RESPONSE)

LOOP START

AE71. IF LOOP 1: Here are a few questions about your adopted [child / children]. [Let's start with the first child you adopted / Now I'd like to ask you about your next adopted child.] What is this child's first name?

_____ (VERBATIM – LIMITED)

AE71A. Is [AE71 CHILDNAME] male or female?

1. MALE
2. FEMALE

AE72. How old is [AE71 CHILDNAME]?

1. ___ MONTHS (INTERVIEWER: USE ONLY IF CHILD LESS THAN 1 YEAR OLD) (RANGE 1–11)
2. ___ YEARS (RANGE 1–99)
3. CHILD NO LONGER ALIVE (GO TO LOOP END BELOW AE78)

AE73. Does [AE71 CHILDNAME] live in this household?

1. YES
5. NO (GO TO AE74)

AE73_ID. CAPI CHECK: BRING UP LIST OF W2 ROSTER MEMBERS AND FILL IN THE W2 ROSTER ID OF THIS CHILD (GO TO LOOP END BELOW AE78)

AE74. Where does [AE71 CHILDNAME] live? What city and state?

CITY _____ STATE _____ COUNTRY _____

IF AE74=D OR R, GO TO AE77

AE77. CAPI CHECK: IS CHILD 17 OR YOUNGER?

1. YES
5. NO (GO TO LOOP END BELOW AE78)

AE78. Who is [AE71 CHILDNAME] currently living with?

INTERVIEWER: DO NOT READ ANSWERS. CODE R'S RESPONSES(S)

CODE ALL THAT APPLY

1. BIOLOGICAL MOTHER
2. BIOLOGICAL FATHER
3. ADOPTIVE MOTHER
4. ADOPTIVE FATHER
5. STEPMOTHER
6. STEPFATHER
7. MOTHER'S BOYFRIEND / PARTNER
8. FATHER'S GIRLFRIEND / PARTNER
9. GRANDMOTHER
10. GRANDFATHER
11. AUNT
12. UNCLE
13. SISTER (INCLUDING HALF SISTER, STEP SISTER)
14. BROTHER (INCLUDING HALF BROTHER, STEP BROTHER)
15. HUSBAND / WIFE
16. OTHER RELATIVES
17. FOSTER PARENTS, FOSTER FAMILY, FOSTER CARE
18. FRIENDS
19. WITH HIS / HER BOYFRIEND / GIRLFRIEND
20. LIVING BY HIMSELF / HERSELF
21. LIVING IN A SCHOOL DORMITORY
22. IN JAIL, PRISON, OR JUVENILE DETENTION CENTER
23. SOMEWHERE ELSE, SPECIFY LIMITED

AE78_S. Who else is [AE71 CHILDNAME] currently living with?

LOOP END

IF AE72=3 CONTINUE. IF AE72 NE 3 RETURN TO AE71 FOR NEXT KID, ELSE GO TO AE79.

AE78A. When did [AE71 CHILDNAME] die?

___ MONTH ___ YEAR

RETURN TO AE71 FOR NEXT KID, ELSE GO TO AE79

AE79. My next questions are about children you may have [fathered / given birth to], even if the children are no longer living. Have you ever [fathered / given birth to] a child?

1. YES
5. NO (GO TO AE90)

IF AE79=D OR R, GO TO AE90

AE80. How many children have you ever [fathered / given birth to]?

IF MALE R UNSURE: Please think of the children you do know about.

___ BIRTHS (RANGE 1–20, VERIFY AT 15)

SEQUENCE OF QUESTIONS AE81 THRU AE89 IS REPEATED FOR EACH CHILD (I.E., SAME NUMBER OF TIMES AS AE80 RESPONSE)

LOOP START

AE81. IF LOOP 1: Here are a few questions about the [child / children] you have [fathered / given birth to]. Let's start with your first child. What is this child's first name?

ELSE: Now I'd like to ask about your next child. What is this child's first name?

RECORD VERBATIM: _____

AE81A. Is [AE81 CHILDNAME] male or female?

1. MALE
2. FEMALE

AE82. When was [AE81 CHILDNAME] born? What month and year?

___ MONTH ___ YEAR

AE83. Does [AE81 CHILDNAME] live in this household?

1. YES
2. NO (GO TO AE84)
3. CHILD IS NO LONGER ALIVE (GO TO AE89)

AE83_ID. CAPI CHECK: BRING UP LIST OF W2 ROSTER MEMBERS AND FILL IN THE W2 ROSTER ID OF THIS CHILD (GO TO LOOP END BELOW AE89)

AE84. Where does [AE81 CHILDNAME] live? What city and state?

CITY _____ STATE _____ COUNTRY _____

IF AE84=D OR R, GO TO AE87

AE87. INTERVIEWER CHECK: IS CHILD 17 OR YOUNGER?

1. YES
5. NO (GO TO LOOP END BELOW AE89)

E88. Who is [AE81 CHILDNAME] currently living with?

INTERVIEWER: DO NOT READ ANSWERS. CODE R'S RESPONSES(S). CODE ALL THAT APPLY.

1. BIOLOGICAL MOTHER
2. BIOLOGICAL FATHER
3. ADOPTIVE MOTHER
4. ADOPTIVE FATHER
5. STEPMOTHER
6. STEPFATHER
7. MOTHER'S BOYFRIEND / PARTNER
8. FATHER'S GIRLFRIEND / PARTNER
9. GRANDMOTHER
10. GRANDFATHER
11. AUNT
12. UNCLE
13. SISTER (INCLUDING HALF SISTER, STEP SISTER)
14. BROTHER (INCLUDING HALF BROTHER, STEP BROTHER)
15. HUSBAND / WIFE
16. OTHER RELATIVES
17. FOSTER PARENTS, FOSTER FAMILY, FOSTER CARE
18. FRIENDS
19. WITH HIS / HER BOYFRIEND / GIRLFRIEND
20. LIVING BY HIMSELF / HERSELF
21. LIVING IN A SCHOOL DORMITORY
22. IN JAIL, PRISON, OR JUVENILE DETENTION CENTER
23. SOMEWHERE ELSE, SPECIFY LIMITED

ALL GO TO LOOP END BELOW E89

AE88_S. Who else is [AE81 CHILDNAME] currently living with?

ONLY FOR KIDS WHO HAVE DIED

AE89. When did [AE81 CHILDNAME] die?

___ MONTH ___ YEAR

LOOP END. RETURN TO AE81 FOR NEXT KID, ELSE CONTINUE TO AE90.

AE90. CAPI CHECK:

1. RESPONDENT <26 AND HAS NEVER HAD SEX (I.E., AE68E=5 OR AE68M=777) (GO TO SECTION F)
2. OTHERWISE, CONTINUE

AE90A. Next I'd like to ask you about anything you may be doing to delay or prevent pregnancy. Are you and your [wife / husband / partner] currently using any of these types of contraception or any method of preventing pregnancy? This includes having an operation to avoid becoming pregnant.

1. YES
2. NO (GO TO END OF SECTION E)
3. [IF VOLUNTEERED] NOT CURRENTLY SEXUALLY ACTIVE, NO CONTRACEPTION NEEDED (GO TO END OF SECTION E)

AE91. Please look at this card and tell me what method or methods are you using?

CODE ALL THAT APPLY

1. CONDOM (RUBBER)
2. FOAM, JELLY, CREAM, SPONGE, SUPPOSITORIES
3. WITHDRAWAL (PULLING OUT)

4. DIAPHRAGM (WITH OR WITHOUT JELLY)
5. RHYTHM (SAFE TIME, AVOIDING SEX AT CERTAIN TIMES OF THE MONTH)
6. BIRTH CONTROL PILLS
7. IUD (INTRAUTERINE DEVICE)
8. NORPLANT, DEPO-PROVERA OR INJECTABLES
9. R OR PARTNER / SPOUSE HAS HAD OPERATION / VASECTOMY / TUBES TIED / STERILIZATION
10. METHOD NOT LISTED ABOVE, SPECIFY: _____

GO TO SECTION F

SECTION FOR WAVE 1 PANEL RESPONDENTS. FIRST CONFIRM MARITAL STATUS AT W1

AE100. CAPI CHECK:

1. AT W1 R WAS **LEGALLY MARRIED** (I.E., PMARSTAT=1)
2. AT W1 R WAS **DIVORCED, SEPARATED, WIDOWED** (I.E., PMARSTAT=2, 3, OR 4) (GO TO AE117)
3. AT W1 R WAS **SINGLE AND NOT COHABITING** (I.E., PMARSTAT=5) (GO TO AE123)
4. AT W1 R WAS **COHABITING** (I.E., PMARSTAT=6)

SET UPDATE_MARSTAT=PMARSTAT
 IF PMARSTAT=1 OR PMARSTAT=6, SET UPDATE_SPN=W1 SPOUSE / PARTNER'S NAME
 ELSE UPDATE_SPN=[BLANK]

SECTION FOR THOSE MARRIED OR LIVING TOGETHER AT W1

AE101. When we last interviewed you in [W1 INTERVIEW MONTH AND YEAR] you were [legally married to NAME / living together in a relationship with NAME]. Is that correct?

1. Yes (GO TO AE140)
5. No

AE102. Which part is not correct?

1. Living with [W1 SPOUSE / PARTNER'S NAME] but not legally married (GO TO AE112)
2. Was legally married to [W1 SPOUSE / PARTNER'S NAME] and not living together in an unmarried relationship with him / her (GO TO AE112)
3. Same person, but the name is not entirely correct
4. Living with someone else – not [W1 SPOUSE / PARTNER'S NAME]
5. Married to someone else – not [W1 SPOUSE / PARTNER'S NAME]
6. Not married to or living with anyone at that time (GO TO AE112)

AE103. What is the [correct] full name of the person you were [married to / living with] in [W1 INTERVIEW MONTH AND YEAR]?

First name(s) _____ Last name(s) _____

SET UPDATE_SPN=NAME IN AE103
 IF AE102=3 SET UPDATE_MARSTAT=PMARSTAT
 IF AE102=4 SET UPDATE_MARSTAT=6
 IF AE102=5 SET UPDATE_MARSTAT=1
 IF AE102=3 GO TO AE140; ELSE CONTINUE

AE104. INTERVIEWER CHECK W1 ROSTER NAMES AGAINST NAME IN AE103:

1. NAME IN AE103 IS IN W1 ROSTER (ENTER W1 ROSTER ID NUMBER _____ AND GO TO AE111)
2. NAME IN AE103 IS SIMILAR TO ONE IN W1 ROSTER
3. NAME IN AE103 IS NOT IN W1 ROSTER (GO TO AE106)

AE105. My computer tells me that there was someone named _____ living in your household at that time. Is that the same person?

1. Yes (ENTER W1 ROSTER ID NUMBER _____ AND GO TO AE111)
5. No

AE106. Was [AE103 NAME] living with you in [W1 INTERVIEW MONTH AND YEAR]?

1. YES
5. NO (GO TO AE112)

AE108. Is there another name that [he / she] could have used in [W1 INTERVIEW MONTH AND YEAR]?

PROBE: What name or names?

1. First name(s) _____ Last name(s) _____
2. First name(s) _____ Last name(s) _____
3. First name(s) _____ Last name(s) _____
5. No other name (SET W1 ROSTER ID=[BLANK] AND GO TO AE111)

AE109. INTERVIEWER CHECK W1 ROSTER NAMES AGAINST NAME(S) IN AE108:

1. A NAME MENTIONED IN AE108 IS IN W1 ROSTER (ENTER W1 ROSTER ID NUMBER _____ AND GO TO AE111)
2. NAME MENTIONED IN AE108 IS SIMILAR TO ONE IN W1 ROSTER
3. NAME MENTIONED IN AE108 IS NOT IN W1 ROSTER (SET W1 ROSTER ID=[BLANK] AND GO TO AE111)

AE110. My computer tells me that there was someone named _____ living in your household at that time. Is that the same person?

1. Yes (ENTER W1 ROSTER ID NUMBER _____)
5. No

AE111. CAPI CHECK:

1. (IF AE104=1 OR AE105=1 OR AE109=1 OR AE110=1) AND RECORDED ID IN AE104 OR AE105 OR AE109 OR AE110 EQUALS ID OF RESPONDENT'S SPOUSE / PARTNER IN W1 ROSTER (GO TO AE140)
2. OTHER

AE112. When we talked to you in [W1 INTERVIEW MONTH AND YEAR] the interviewer recorded that you and [W1 SPOUSE / PARTNER'S NAME] [were married / began living together] in [W1 MARRIAGE / COHABIT MONTH AND YEAR] and that you were still [married to / living together with] [W1 SPOUSE / PARTNER'S NAME] at that time. But you are now saying that you were [living together with [W1 SPOUSE / PARTNER'S NAME] but not married / legally married to [W1 SPOUSE / PARTNER'S NAME] / living with [UPDATE_SPN] / married to [UPDATE_SPN] / not married or living with anyone in a relationship] at that time. Can you help me understand why the information that you gave us in [W1 INTERVIEW YEAR] is different from what you are telling me today?

RECORD VERBATIM: _____

AE113. Just to make sure my information is correct. In [W1 INTERVIEW MONTH AND YEAR] you were [living with [W1 SPOUSE / PARTNER'S NAME] / married to [W1 SPOUSE / PARTNER'S NAME] / living with [UPDATE_SPN] / married to [UPDATE_SPN] / not married and not living with anyone in a relationship]. Is that correct?

1. YES
5. NO

IF AE113=1 AND AE102=1 SET UPDATE_SPN=W1 SPOUSE / PARTNER'S NAME, SET UPDATE_MARSTAT=6 AND GO TO AE140
IF AE113=1 AND AE102=2 SET UPDATE_SPN=W1 SPOUSE / PARTNER'S NAME, SET UPDATE_MARSTAT=1 AND GO TO AE140
IF AE113=1 AND AE102=4 OR AE102=5 GO TO AE140
IF AE113=1 AND AE102=6 SET UPDATE_SPN=[BLANK], SET UPDATE_MARSTAT=5 AND GO TO AE140
ELSE CONTINUE

AE114. What was your marital status at that time?

1. Married (GO TO AE116)
2. Separated
3. Widowed
4. Divorced
5. Single (never married)
6. [IF VOLUNTEERED] Living with someone (GO TO AE116)

AE115. Were you living together in a relationship with someone without being married at that time?

1. YES
5. NO

IF AE115=5 AND AE114=2, SET UPDATE_MARSTAT=2, SET UPDATE_SPN=[BLANK], AND GO TO AE140
IF AE115=5 AND AE114=3, SET UPDATE_MARSTAT=3, SET UPDATE_SPN=[BLANK], AND GO TO AE140
IF AE115=5 AND AE114=4, SET UPDATE_MARSTAT=4, SET UPDATE_SPN=[BLANK], AND GO TO AE140
IF AE115=5 AND AE114=5, SET UPDATE_MARSTAT=5, SET UPDATE_SPN=[BLANK], AND GO TO AE140
ELSE IF AE115=1, CONTINUE

AE116. What was the name of your [spouse / partner] at that time?

First name(s) _____ Last name(s) _____

SET UPDATE_SPN=NAME IN AE116
IF AE114=1 SET UPDATE_MARSTAT=1
ELSE IF AE115=1 OR IF AE114=6 SET UPDATE_MARSTAT=6
ELSE UPDATE_MARSTAT=AE114
GO TO AE140

DIVORCED, SEPARATED, OR WIDOWED AT W1

AE117. When we last interviewed you in [W1 INTERVIEW MONTH AND YEAR] you were [separated from your spouse / widowed / divorced] and not living in a relationship with anyone. Is that correct?

1. YES (SET UPDATE_MARSTAT=PMARSTAT AND GO TO AE140)
5. NO

AE118. Which part is not correct?

1. Was living with someone in a relationship
2. Was married
3. Spouse was still alive and respondent was living with him / her at that time
4. Other, specify _____
5. Married to someone else—not who he/she was separated from

AE119. When we talked to you in [W1 INTERVIEW YEAR], the interviewer recorded that you were [separated from your spouse / widowed / divorced] at that time and that [you had stopped living with your spouse in [MONTH AND YEAR LAST LIVED WITH SPOUSE IN REPORTED IN W1] / your spouse had died in [MONTH AND YEAR OF SPOUSE'S DEATH REPORTED IN W1]. Can you help me understand why the information that you gave us in [W1 INTERVIEW YEAR] is different from what you are telling me today?

RECORD VERBATIM: _____

AE120. Just to make sure my information is correct, what was your marital status at that time?

PROBE: I mean in [W1 INTERVIEW MONTH AND YEAR]

1. Married (GO TO AE122)
2. Separated
3. Widowed
4. Divorced
5. Single (never married)
6. [IF VOLUNTEERED] Living with someone (GO TO AE122)
7. Previously married but marriage was annulled

AE121. Were you living together in a relationship with someone without being married at that time?

1. YES
5. NO

IF AE121=5 AND AE120=2, SET UPDATE_MARSTAT=2, SET UPDATE_SPN=[BLANK], AND GO TO AE140
IF AE121=5 AND AE120=3, SET UPDATE_MARSTAT=3, SET UPDATE_SPN=[BLANK], AND GO TO AE140
IF AE121=5 AND AE120=4, SET UPDATE_MARSTAT=4, SET UPDATE_SPN=[BLANK], AND GO TO AE140
IF AE121=5 AND AE120=5, SET UPDATE_MARSTAT=5, SET UPDATE_SPN=[BLANK], AND GO TO AE140
ELSE IF AE121=1, CONTINUE

AE122. What was the name of your [spouse / partner] at that time?

First name(s) _____ Last name(s) _____

SET UPDATE_SPN=NAME IN AE122
IF AE120=1 SET UPDATE_MARSTAT=1
ELSE IF AE121=1 OR AE120=6 SET UPDATE_MARSTAT=6
ELSE UPDATE_MARSTAT=AE120

AE123. INTERVIEWER CHECK W1 ROSTER NAMES AGAINST NAME IN AE122:

1. NAME IN AE122 IS IN W1 ROSTER (ENTER W1 ROSTER ID NUMBER _____ AND GO TO AE140)
2. NAME IN AE122 IS SIMILAR TO ONE IN W1 ROSTER
3. NAME IN AE122 IS NOT IN W1 ROSTER (GO TO AE125)

AE124. My computer tells me that there was someone named _____ living in your household at that time. Is that the same person?

1. YES (ENTER W1 ROSTER ID NUMBER _____ AND GO TO AE140)
5. NO

AE125. Was [NAME IN AE122] living with you in [[W1 INTERVIEW MONTH AND YEAR]]?

1. YES
5. NO (GO TO AE140)

AE126. Is there another name that this person could have used in [W1 INTERVIEW MONTH AND YEAR]?

1. YES
5. NO

AE126_FN. What first or given name or names could this person have used?

AE126_LN. What last or family name or names could this person have used?

1. First name(s) _____ Last name(s) _____
2. First name(s) _____ Last name(s) _____
3. First name(s) _____ Last name(s) _____
5. No other name (SET W1 ROSTER ID=[BLANK] AND GO TO AE140)

AE127. INTERVIEWER CHECK W1 ROSTER NAMES AGAINST NAME(S) IN AE126:

1. A NAME MENTIONED IN AE126 IS IN W1 ROSTER (ENTER W1 ROSTER ID NUMBER AND GO TO AE140)
2. NAME MENTIONED IN AE126 IS SIMILAR TO ONE IN W1 ROSTER
3. NAME MENTIONED IN AE126 IS NOT IN W1 ROSTER (GO TO AE140)

AE128. My computer tells me that there was someone named _____ living in your household at that time. Is that the same person?

1. YES (ENTER W1 ROSTER ID NUMBER _____) (GO TO AE140)
5. NO (SET W1 ROSTER ID=[BLANK]) (GO TO AE140)

REPORTED SINGLE AND NOT COHABITING IN W1

AE129. When we last interviewed you in [W1 INTERVIEW MONTH AND YEAR] you had were single and not living in a relationship with anyone. Is that correct?

1. YES (SET UPDATE_MARSTAT=PMARSTAT, SET UPDATE_SPN=[BLANK], AND GO TO AE140)
5. NO

AE130. Which part is not correct?

1. Was married (GO TO AE126)
2. Was separated (GO TO AE139)
3. Was widowed (GO TO AE139)
4. Was divorced (GO TO AE139)
6. Was living with someone in a relationship (GO TO AE126)
7. Other, specify _____

AE131. INTERVIEWER: ON THE BASIS OF THE OTHER, SPECIFY RESPONSE TO AE124, CODE RESPONDENT'S MARITAL / RELATIONSHIP STATUS AT WAVE 1:

1. MARRIED
2. SEPARATED (GO TO AE139)
3. WIDOWED (GO TO AE139)
4. DIVORCED (GO TO AE139)
5. SINGLE AND NOT LIVING WITH SOMEONE IN A RELATIONSHIP (SET UPDATE_MARSTAT=PMARSTAT AND GO TO AE140)
6. LIVING WITH SOMEONE IN A RELATIONSHIP / COHABITING

AE132. What was the name of your [spouse / partner] at that time?

First name(s) _____ Last name(s) _____

SET UPDATE_SPN=NAME IN AE132

AE133. INTERVIEWER CHECK W1 ROSTER NAMES AGAINST NAME IN AE132:

1. NAME IN AE132 IS IN W1 ROSTER (ENTER W1 ROSTER ID NUMBER _____ AND GO TO AE139)
2. NAME IN AE132 IS SIMILAR TO ONE IN W1 ROSTER
3. NAME IN AE132 IS NOT IN W1 ROSTER (GO TO AE135)

AE134. My computer tells me that there was someone named _____ living in your household at that time. Is that the same person?

1. YES (ENTER W1 ROSTER ID NUMBER _____ AND GO TO AE139)
5. NO

AE135. Was [AE132 NAME] living with you in [W1 INTERVIEW MONTH AND YEAR]?

1. YES
5. NO (GO TO AE139)

AE136. Is there another name that this person could have used in [W1 INTERVIEW MONTH AND YEAR]?

PROBE: What name or names?

1. First name(s) _____ Last name(s) _____
2. First name(s) _____ Last name(s) _____
3. First name(s) _____ Last name(s) _____
5. No other name

AE137. INTERVIEWER CHECK W1 ROSTER NAMES AGAINST NAME(S) IN AE136:

1. A NAME MENTIONED IN AE136 IS IN W1 ROSTER (ENTER W1 ROSTER ID NUMBER _____ AND GO TO AE139)
2. NAME MENTIONED IN AE136 IS SIMILAR TO ONE IN W1 ROSTER
3. NAME MENTIONED IN AE136 IS NOT IN W1 ROSTER (GO TO AE139)

AE138. My computer tells me that there was someone named _____ living in your household at that time. Is that the same person?

1. YES (ENTER W1 ROSTER ID NUMBER _____)
5. NO

AE139. When we talked to you in [W1 INTERVIEW YEAR], the interviewer recorded that you had never been married and that you were not living in a relationship with anyone at that time. Can you help me understand why the information that you gave us in [W1 INTERVIEW YEAR] is different from what you are telling me today?

RECORD VERBATIM _____

IF AE130 NE 7 THEN UPDATE_MARSTAT=AE130. IF AE130=7 THEN UPDATE_MARSTAT=AE131.

COLLECTING INFORMATION ON RELATIONSHIPS SINCE WAVE 1

AE140. CAPI CHECK UPDATE_MARSTAT. AT TIME OF WAVE 1, RESPONDENT WAS:

1. MARRIED
2. SEPARATED (GO TO AE155)
3. WIDOWED (GO TO AE154)
4. DIVORCED (GO TO AE154)
5. SINGLE, NEVER MARRIED, AND NOT COHABITING (SET UPDATE_MARSTAT=5 AND GO TO AE164)
6. COHABITING (GO TO AE149)

FOR THOSE MARRIED AT W1

AE141. Are you still married to [UPDATE_SPN]?

1. YES (SET UPDATE_MARSTAT=1 AND SET CUR_MARSTAT=1 AND CONTINUE)
5. NO (GO TO AE146)

AE142. CAPI CHECK W2 ROSTER:

1. W2 ROSTER SHOWS THAT [UPDATE_SPN] LIVES IN THIS HOUSEHOLD (GO TO **AE180**)
2. [UPDATE_SPN] NOT ON W2 ROSTER

AE143. According to my records, your [wife / husband] is not living here now. Why is that?

INTERVIEWER: DO NOT READ ANSWERS. CODE R'S RESPONSE(S). CODE ALL THAT APPLY

1. BECAUSE OF WORK / SCHOOL / MILITARY SERVICE / HOSPITALIZATION / JAIL OR PRISON
2. PREFER TO MAINTAIN SEPARATE HOUSEHOLDS
3. LIVES WITH SOMEONE ELSE (GIRLFRIEND / BOYFRIEND, ANOTHER WOMAN / MAN, PARTNER)
4. MARITAL PROBLEMS
5. NO LONGER ROMANTICALLY INVOLVED
6. OTHER, SPECIFY _____
7. SPOUSE / PARTNER ACTUALLY IS LIVING HERE (GO TO AE180)
12. LEFT USA / LIVES IN OR RETURNED TO HOME COUNTRY

AE144. Where does your [wife / husband] live or stay? Can you give me the city and state?

_____ CITY _____ STATE _____ COUNTRY

AE146. When did you and [UPDATE_SPN] stop living together? What month and year?

_____ Month _____ Year

AE147. How did your marriage to [UPDATE_SPN] end?

1. SEPARATION BUT HAVE NOT DIVORCED (GO TO AE164)
2. DIVORCE
3. HUSBAND / WIFE DIED
4. MARRIAGE WAS ANNULLED

IF AE147=1 THEN UPDATE_MARSTAT=2
IF AE147=2 THEN UPDATE_MARSTAT=4
IF AE147=3 THEN UPDATE_MARSTAT=3
IF AE147=4 THEN UPDATE_MARSTAT=7

AE148. When [was your divorce finalized / did your wife or husband die / was your marriage annulled]? What was the date?

_____ Month _____ Year (GO TO AE164)

SECTION FOR THOSE COHABITING AT W1

AE149. Are you still living with [UPDATE_SPN] in a relationship?

1. Yes
5. No

AE150. Did you and [UPDATE_SPN] get married [before you stopped living together?]

1. Yes (SET UPDATE_MARSTAT=1 AND CONTINUE)
5. No (GO TO AE152)

AE151. When did you and [UPDATE_SPN] get married? What was the date?

_____ Month _____ Year

AE152. CAPI CHECK:

1. AE149=1 AND AE150=1 (SET CUR_MARSTAT=1 AND GO TO AE152A)
2. AE149=1 AND AE150=5 (SET CUR_MARSTAT=6 AND GO TO AE152A)
3. AE149=5 (GO TO AE153A)

AE152A. CAPI CHECK W2 ROSTER:

1. W2 ROSTER SHOWS THAT [UPDATE_SPN] LIVES IN THIS HOUSEHOLD (GO TO AE180)
2. [UPDATE_SPN] NOT ON W2 ROSTER

AE152B. According to my records, your [wife / husband / partner] is not living here now. Why is that?

INTERVIEWER: DO NOT READ ANSWERS. CODE R'S RESPONSE(S). CODE ALL THAT APPLY

1. BECAUSE OF WORK / SCHOOL / MILITARY SERVICE / HOSPITALIZATION / JAIL OR PRISON
2. PREFER TO MAINTAIN SEPARATE HOUSEHOLDS
3. LIVES WITH SOMEONE ELSE (GIRLFRIEND / BOYFRIEND, ANOTHER WOMAN / MAN, PARTNER)
4. MARITAL PROBLEMS
5. NO LONGER ROMANTICALLY INVOLVED
6. OTHER, SPECIFY: _____
7. SPOUSE / PARTNER ACTUALLY IS LIVING HERE (GO TO AE180)
12. LEFT USA / LIVES IN OR RETURNED TO HOME COUNTRY

AE152C. Where does your [wife / husband / partner] live or stay? Can you give me the city and state?

_____ CITY _____ STATE _____ COUNTRY (ALL GO TO AE180)

AE153A. When did you and [UPDATE_SPN] stop living together? What month and year?

_____ Month _____ Year

AE153B1. How did your marriage with [UPDATE_SPN] end?

IF AE150=1, FILL THESE RESPONSE CATEGORIES:

1. SEPARATION (BUT HAVE NOT DIVORCED)
2. DIVORCE
3. HUSBAND / WIFE / PARTNER DIED
4. MARRIAGE WAS ANNULLED

IF AE150=2, FILL THESE RESPONSE CATEGORIES:

AE153B2. How did your relationship with [UPDATE_SPN] end?

1. SEPARATION, BROKE UP, SPLIT UP, STOPPED SEEING EACH OTHER
3. PARTNER DIED

IF AE153B1=1 THEN UPDATE_MARSTAT=2

IF AE153B1=2 THEN UPDATE_MARSTAT=4

IF AE153B1=3 THEN UPDATE_MARSTAT=3

IF AE153B1=4 THEN UPDATE_MARSTAT=7

IF AE153B1=1 GO TO AE164. ELSE CONTINUE

AE153C. When [was your divorce finalized / did [UPDATE_SPN] die / was your marriage annulled]? What was the date?

_____ Month _____ Year (GO TO AE164)

SECTION FOR THOSE WIDOWED AND DIVORCED AT W1

AE154. When we interviewed you in [W1 INTERVIEW MONTH AND YEAR] you were [widowed / divorced] and not living with anyone in a relationship. To avoid confusion, please give me the name of your [ex-wife / ex-husband / your wife who had died / your husband who had died]?

First name(s) _____ Last name(s) _____

SET UPDATE_SPN=NAME IN AE154
GO TO AE164

SECTION FOR THOSE SEPARATED AT W1

AE155. When we interviewed you in [W1 INTERVIEW MONTH AND YEAR] you were separated from your [husband / wife] and not living with anyone in a relationship. To avoid confusion, please give me the name of your [husband / wife] who you were separated from at that time.

INTERVIEWER: ENTER FIRST NAME(S) ON THIS SCREEN AND LAST NAME(S) ON THE FOLLOWING SCREEN.

First name(s) _____ Last name(s) _____

SET UPDATE_SPN=NAME IN AE155

AE156. Did you and [UPDATE_SPN] ever get back together?

- 1. YES (SET UPDATE_MARSTAT=1 AND GO TO AE159)
- 5. NO

AE157. Did you and [UPDATE_SPN] ever get divorced?

- 1. YES (SET UPDATE_MARSTAT=4 AND CONTINUE)
- 5. NO (GO TO AE164)

AE158. When did you get divorced? What was the date?

_____ Month _____ Year (GO TO AE164)

AE159. When did you and [UPDATE_SPN] start living together again? In what month and year?

_____ Month _____ Year

AE160. Are you still married to [UPDATE_SPN]?

- 1. YES (GO TO AE160A)
- 5. NO (GO TO AE161)

AE160A. CAPI CHECK W2 ROSTER:

- 1. W2 ROSTER SHOWS THAT [UPDATE_SPN] LIVES IN THIS HOUSEHOLD (GO TO AE180)
- 2. [UPDATE_SPN] NOT ON W2 ROSTER

AE160B. According to my records, your [husband / wife] is not living here now. Why is that?

INTERVIEWER: DO NOT READ ANSWERS. CODE ALL THAT APPLY.

- 1. BECAUSE OF WORK / SCHOOL / MILITARY SERVICE / HOSPITALIZATION / JAIL OR PRISON
- 2. PREFER TO MAINTAIN SEPARATE HOUSEHOLDS
- 3. LIVES WITH SOMEONE ELSE (GIRLFRIEND / BOYFRIEND, ANOTHER WOMAN / MAN, PARTNER)

4. MARITAL PROBLEMS
5. NO LONGER ROMANTICALLY INVOLVED
6. OTHER, SPECIFY: _____
7. SPOUSE / PARTNER ACTUALLY IS LIVING HERE (GO TO AE180)
12. LEFT USA / LIVES IN OR RETURNED TO HOME COUNTRY

AE160C. Where does your [husband / wife] live or stay? Can you give me the city and state?

_____ CITY _____ STATE _____ COUNTRY (GO TO AE180)

AE161. When did you and [UPDATE_SPN] stop living together again?

_____ Month _____ Year

AE162. How did your marriage to [UPDATE_SPN] end?

1. SEPARATION (BUT HAVE NOT DIVORCED)
2. DIVORCE
3. HUSBAND / WIFE DIED
4. MARRIAGE WAS ANNULLED

IF AE162=1 SET UPDATE_MARSTAT=2
 IF AE162=2 SET UPDATE_MARSTAT=4
 IF AE162=3 SET UPDATE_MARSTAT=3
 IF AE162=4 SET UPDATE_MARSTAT=7
 IF AE162=1, GO TO AE164

AE163. When [was your divorce finalized / did [UPDATE_SPN] die / was your marriage annulled]? What was the date?

_____ Month _____ Year (GO TO AE164)

BEGIN LOOP FOR RELATIONSHIPS SINCE W1 HERE

AE164. Since [you stopped living with [UPDATE_SPN] / [UPDATE_SPN] died / W1 INTERVIEW MONTH AND YEAR], have you ever been married to someone [else] or have you ever lived together with someone [else] in a relationship without being married?

1. YES (GO TO AE167)
5. NO

AE165. [IF THIS IS THE FIRST TIME THROUGH THE LOOP, ASK:] Just to make sure my information is correct, are you currently living with someone in a relationship without being married?

1. YES
5. NO

IF AE165=5 SET CUR_MARSTAT=UPDATE_MARSTAT. IF AE165=5 GO TO AE180. ELSE CONTINUE.

AE166. Is this the first person who you have lived with in a relationship after [you and [UPDATE_SPN] stopped living together / [UPDATE_SPN] died]?

1. YES
5. NO

AE167. Let me ask you about the first person you married or lived with in a relationship after [you and [UPDATE_SPN] stopped living together / [UPDATE_SPN] died]. Did you and this person get married or did you live together without being married?

1. MARRIED
2. LIVED TOGETHER WITHOUT BEING MARRIED (GO TO AE170)
3. [IF VOLUNTEERED] LIVE TOGETHER AND THEN MARRIED

IF AE167=1 SET UPDATE_MARSTAT=1
 IF AE167=2 SET UPDATE_MARSTAT=6
 IF AE167=3 SET UPDATE_MARSTAT=1

AE168. When were you married? What month and year?

___ MONTH ___ YEAR

AE169. Before that marriage, [did you live with your / you lived with your [wife / husband]] without being married. [Correct?]

1. YES
5. NO (GO TO AE171)

AE170. When did you begin living together with your [wife / husband / partner] in a relationship?

___ MONTH ___ YEAR

AE171. Are you still [married to / living together in a relationship with] this [wife / husband / partner]?

1. YES
5. NO (GO TO AE174)

AE172. So this [wife / husband / partner] is [CUR_SPN]. Is that correct?

1. YES
5. NO

AE173. INTERVIEWER CHECK:

1. AE172=1 AND CURRENT ROSTER SHOWS THAT [CUR_SPN] LIVES IN THIS HOUSEHOLD
2. AE172=1 AND CURRENT ROSTER SHOWS THAT [CUR_SPN] DOES NOT LIVE IN THIS HH

IF (AE167=1 OR 3) AND AE171=1, SET CUR_MARSTAT=1 (GO TO AE174)
 IF AE167=2 AND AE156=1, SET CUR_MARSTAT=6 (GO TO AE174)
 IF AE173=1 GO TO AE180
 IF AE173=2 GO TO AE173A

AE173A. According to my records, your [wife / husband / partner] is not living here now. Why is that?

INTERVIEWER: DO NOT READ ANSWERS. CODE R'S RESPONSE(S). CODE ALL THAT APPLY

1. BECAUSE OF WORK / SCHOOL / MILITARY SERVICE / HOSPITALIZATION / JAIL OR PRISON
2. PREFER TO MAINTAIN SEPARATE HOUSEHOLDS
3. LIVES WITH SOMEONE ELSE (GIRLFRIEND / BOYFRIEND, ANOTHER WOMAN / MAN, PARTNER)
4. MARITAL PROBLEMS
5. NO LONGER ROMANTICALLY INVOLVED
6. OTHER, SPECIFY: _____
7. SPOUSE / PARTNER ACTUALLY IS LIVING HERE (GO TO **AE180**)
12. LEFT USA / LIVES IN OR RETURNED TO HOME COUNTRY

AE173B. Where does your [wife / husband / partner] live or stay? Can you give me the city and state?

_____ CITY _____ STATE _____ COUNTRY

ALL GO TO AE180

AE174. To avoid confusion, can you give me this [wife / husband / partner]'s name?

First name _____ Last name(s) _____

SET UPDATE_SPN=NAME IN AE174

AE175. When did you and [UPDATE_SPN] stop living together?

___ MONTH ___ YEAR

AE176. How did your [marriage to / relationship with] [UPDATE_SPN] end?

IF AE167=1 OR 3, FILL THESE RESPONSE CATEGORIES:

1. SEPARATION (BUT HAVE NOT DIVORCED)
2. DIVORCE
3. HUSBAND / WIFE / PARTNER DIED
4. MARRIAGE WAS ANNULLED

IF AE167=2, FILL THESE RESPONSE CATEGORIES:

1. SEPARATION, BROKE UP, SPLIT UP, STOPPED SEEING EACH OTHER
3. PARTNER DIED

IF AE176=1 THEN UPDATE_MARSTAT=2

IF AE176=2 THEN UPDATE_MARSTAT=4

IF AE176=3 THEN UPDATE_MARSTAT=3

IF AE176=4 THEN UPDATE_MARSTAT=7

AE177. CAPI CHECK:

1. AE176=1 (GO TO END OF LOOP)
2. AE176=2, 3, OR 4

AE178. When [was your divorce finalized / did your [wife / husband / partner] die / was your marriage annulled]? What was the date?

_____ Month _____ Year

END OF LOOP FOR RELATIONSHIPS SINCE W1. ASK QS AE164 TO AE178 UNTIL EVERYONE SKIPS OUT. MAXIMUM LOOPS=15.

AE180. CAPI CHECK: UPDATE_MARSTAT

1. CURRENTLY MARRIED
2. COHABITING OR SEPARATED
3. NEITHER MARRIED NOR COHABITING (GO TO AE182)

AE181. Taking things all together, how would you describe your [marriage / relationship] with your [wife / husband / partner]? Please use a scale from 1 to 10 where 1 is extremely unhappy and 10 is extremely happy.

___ (NUMBER FROM 1 TO 10) (GO TO AE194)

AE182. CAPI CHECK:

1. RESPONDENT IS <26 YEARS OLD
2. RESPONDENT IS ≥ 26 YEARS OLD (GO TO AE194)

AE183. CAPI CHECK:

1. UPDATE_MARSTAT=5
2. OTHERWISE (GO TO AE194)

IF RESPONDENT HAS COMPLETED THE SELF-ADMINISTERED QUESTIONNAIRE (SAQ) TUTORIAL PREVIOUSLY, NO NEED TO GO THROUGH IT AGAIN. IF RESPONDENT HAS NOT PREVIOUSLY COMPLETED SAQ TUTORIAL, IT WILL BE DISPLAYED HERE AND INTERVIEWER WILL GO THROUGH IT WITH RESPONDENTS.

AE184INTRO. Now I have a few questions in which I would like **you** to type your answers directly into the computer. Please give the computer back to me when you are instructed to do so.

INTERVIEWER: PRESS '1' TO CONTINUE THEN HAND COMPUTER OVER TO RESPONDENT TO BEGIN THE SELF-ADMINISTERED SECTION" / "ADULT SAQ INTRO"

AE184. Have you ever had a girlfriend or boyfriend or gone out with someone for a while?

1. YES
5. NO (GO TO AE186)

AE185. Do you have a girlfriend or boyfriend now?

1. YES
5. NO

AE186. Have you ever had sexual intercourse, that is, made love, had sex, or gone all the way with a person of the opposite sex?

1. YES
5. NO (GO TO AE200)

AE187. Have you had intercourse more than once?

1. YES
5. NO

AE188. How many DIFFERENT PEOPLE have you had sexual intercourse with in the last 12 months, that is, since [FILL CURRENT MONTH] last year?

_____ partners (IF NONE, ENTER ZERO)

AE189. When was the last time you had sexual intercourse?

1. Today
2. Yesterday
3. ___ days ago
4. ___ weeks ago
5. ___ months ago
6. ___ years ago

AE189_day. PROBE (IF NECESSARY): How many days has it been since you last had sexual intercourse?

AE189_week. PROBE (IF NECESSARY): How many weeks has it been since you last had sexual intercourse?

AE189_month. PROBE (IF NECESSARY): How many months has it been since you last had sexual intercourse?

AE189_year. PROBE (IF NECESSARY): How many years has it been since you last had sexual intercourse?

AE190. Did you or your partner use something to prevent pregnancy or disease when you had sexual intercourse most recently?

1. YES
5. NO (GO TO AE192)

AE191. Which method or methods did you or your partner use?

1. Condom (rubber)
2. Foam, jelly, creme, sponge, suppositories
3. Withdrawal (pulling out)
4. Diaphragm (with or without jelly)
5. Rhythm (safe time, avoiding sex at certain times of the month)
6. Birth control pills
7. IUD (intrauterine device)
8. Norplant, depo-provera or injectables
9. Operation
10. Other, Specify _____

AE192. CAPI CHECK AE188: NUMBER OF SEXUAL PARTNERS THAT RESPONDENT HAS HAD IN THE LAST 12 MONTHS

1. ZERO (GO TO AE194)
2. ONE OR MORE

AE193. Think about all the times that you have had sexual intercourse in the last 12 months. About what percent of the time from 0 to 100, have you or your sexual partner or partners used a condom?

_____ Percent of the time (IF NEVER, ENTER ZERO)

ALL RESPONDENTS COME HERE (EXCEPT THOSE <26 WHO SAY THEY NEVER HAD SEX)

AE194. Now, think about the [first] time you [ever] had sexual intercourse [with anyone]. How old were you?

PROBE: Just give me your best guess.

_____ years old
777. Never had sex (GO TO AE200)

AE195. Did you or your partner use something to prevent pregnancy or disease when you had intercourse for the first time?

1. YES
5. NO (GO TO AE200)

AE196. Which method or methods did you or your partner use?

INTERVIEWER: CODE ALL THAT APPLY

1. Condom (rubber)
2. Foam, jelly, creme, sponge, suppositories
3. Withdrawal (pulling out)
4. Diaphragm (with or without jelly)
5. Rhythm (safe time, avoiding sex at certain times of the month)
6. Birth control pills
7. IUD (intrauterine device)
8. Norplant, depo-provera or injectables
9. Operation
10. Other, specify _____

AE196POST. Thank you for your time. You have reached the end of this portion of the interview. Please turn the computer back to the interviewer, and he or she will tell you what you'll do next.

END OF SAQ PORTION

SECTION FOR WAVE 1 RESPONDENTS ON CURRENT STATUS OF CHILD R HAD AT THE TIME OF W1

AE200. CAPI CHECK PRELOAD:

1. W1_N_CHD=0 (GO TO AE210)
2. W1_N_CHD>0

AE201. CAPI CHECK PRELOAD:

1. W1_CHD_NOTHERE≥1
2. W1_CHD_NOTHERE=0 (GO TO AE210)

AE202Intro. Now I want to ask you about your children. Let's start with children who you had [given birth to / fathered] and children you had adopted before [W1 INTERVIEW MONTH AND YEAR]. I'll ask you only about children who live outside this household.

LOOP BEGINS HERE. ASK AE202 TO AE207 FOR EACH CHILD ON W1_CHD_NOTHERE LIST

AE202. How old is [CHILD] now?

PROBE: Just give me your best guess.

_____ Years old
77. Child is no longer alive (GO TO AE208)

AE203 Does [CHILD] live here with you now?

1. YES, CHILD LIVES IN CURRENT HOUSEHOLD
2. [IF VOLUNTEERED] CHILD LIVES HERE PART OF THE TIME
5. NO, CHILD LIVES ELSEWHERE
7. CHILD IS NO LONGER ALIVE (GO TO AE208)

INTERVIEWER: IF AE203=5, CLARIFY THE SITUATION, ENTER A COMMENT, CHECK W2 ROSTER WITH R AND RECORD ID OF CHILD IN COMMENT IF CHILD IS IN W1 ROSTER, AND GO TO END OF LOOP

AE204. Where does [CHILD] live [the rest of the time]? What city and state?

_____ City _____ State _____ Country
77. Child is no longer alive (GO TO AE208)

ASK ONLY FOR CHILDREN <18 TO BE CONSISTENT WITH SUBSEQUENT QUESTIONS

AE207. Who is [CHILD] currently living with?

INTERVIEWER: DO NOT READ ANSWERS. CODE R'S RESPONSES(S). CODE ALL THAT APPLY.

1. BIOLOGICAL MOTHER
2. BIOLOGICAL FATHER
3. ADOPTIVE MOTHER
4. ADOPTIVE FATHER
5. STEPMOTHER
6. STEPFATHER
7. MOTHER'S BOYFRIEND / PARTNER
8. FATHER'S GIRLFRIEND / PARTNER

9. GRANDMOTHER
10. GRANDFATHER
11. AUNT
12. UNCLE
13. SISTER (INCLUDING HALF SISTER, STEP SISTER)
14. BROTHER (INCLUDING HALF BROTHER, STEP BROTHER)
15. HUSBAND / WIFE
16. OTHER RELATIVES
17. FOSTER PARENTS, FOSTER FAMILY, FOSTER CARE
18. FRIENDS
19. WITH HIS / HER BOYFRIEND / GIRLFRIEND
20. LIVING BY HIMSELF / HERSELF
21. LIVING IN A SCHOOL DORMITORY
22. IN JAIL, PRISON, OR JUVENILE DETENTION CENTER
23. SOMEWHERE ELSE, SPECIFY LIMITED

AE207_S. Who else is [CHILD] currently living with?

GO TO END OF LOOP BELOW

AE208. When did [AE202 CHILDNAME] die?

___ MONTH ___ YEAR

END OF LOOP. ASK AE202 TO AE207 FOR EACH CHILD ON W1_CHD_NOTHERE

AE210. Now let me ask you about children you may have [given birth to / fathered] or adopted since [W1 INTERVIEW MONTH AND YEAR] Since [W1 INTERVIEW MONTH AND YEAR] have you ever legally adopted a child?

1. YES
5. NO (GO TO AE220)

AE211. How many children have you legally adopted since [W1 INTERVIEW MONTH AND YEAR]?

___ CHILDREN (RANGE 1–10, VERIFY AT 8)

LOOP START

AE212. IF LOOP 1: Here are a few questions about your adopted [child / children]. Let's start with the first child you adopted. What is this child's first name?

ELSE: Now I'd like to ask you about your next adopted child. What is this child's first name?

_____ (VERBATIM – LIMITED)

AE212A. Is [AE212 CHILDNAME] male or female?

1. MALE
2. FEMALE

AE213. How old is [AE212 CHILDNAME]?

1. ___ MONTHS (INTERVIEWER: USE ONLY IF CHILD LESS THAN 1 YEAR OLD) (RANGE 1–11)
2. ___ YEARS (RANGE 1–99)
3. CHILD NO LONGER ALIVE (GO TO LOOP END)

AE214. Does [AE212 CHILDNAME] live in this household?

1. YES
5. NO (GO TO AE215)

AE214_ID. CAPI CHECK: BRING UP LIST OF W2 ROSTER MEMBERS AND FILL IN THE W2 ROSTER ID OF THIS CHILD (GO TO LOOP END)

AE215. Where does [AE212 CHILDNAME] live? What city and state?

_____ CITY _____ STATE _____ COUNTRY

AE218. CAPI CHECK: IS CHILD 17 OR YOUNGER?

1. YES
5. NO (GO TO LOOP END)

AE219. Who is [AE212 CHILDNAME] currently living with?

INTERVIEWER: DO NOT READ ANSWERS. CODE R'S RESPONSES(S). CODE ALL THAT APPLY.

1. BIOLOGICAL MOTHER
2. BIOLOGICAL FATHER
3. ADOPTIVE MOTHER
4. ADOPTIVE FATHER
5. STEPMOTHER
6. STEPFATHER
7. MOTHER'S BOYFRIEND / PARTNER
8. FATHER'S GIRLFRIEND / PARTNER
9. GRANDMOTHER
10. GRANDFATHER
11. AUNT
12. UNCLE
13. SISTER (INCLUDING HALF SISTER, STEP SISTER)
14. BROTHER (INCLUDING HALF BROTHER, STEP BROTHER)
15. HUSBAND / WIFE
16. OTHER RELATIVES
17. FOSTER PARENTS, FOSTER FAMILY, FOSTER CARE
18. FRIENDS
19. WITH HIS / HER BOYFRIEND / GIRLFRIEND
20. LIVING BY HIMSELF / HERSELF
21. LIVING IN A SCHOOL DORMITORY
22. IN JAIL, PRISON, OR JUVENILE DETENTION CENTER
23. SOMEWHERE ELSE, SPECIFY LIMITED

AE219_S. Who else is [AE212 CHILDNAME] currently living with?

LOOP END

IF AE213=3 CONTINUE. IF AE213 NE 3 RETURN TO AE212 FOR NEXT KID, ELSE GO TO AE220

AE219A. When did [AE212 CHILDNAME] die?

___ MONTH ___ YEAR

RETURN TO AE212 FOR NEXT KID, ELSE CONTINUE

AE220. My next questions are about children you may have [fathered / given birth to] since [W1 INTERVIEW MONTH AND YEAR], even if the children are no longer living. Have you [fathered / given birth to] a child since [W1 INTERVIEW MONTH AND YEAR]?

1. YES
5. NO (GO TO AE231)

AE221. How many children have you [fathered / given birth to] since [W1 INTERVIEW MONTH AND YEAR]?

INTERVIEWER: IF MALE R UNSURE: Please think of the children you do know about.

___ BIRTHS (RANGE 1–20, VERIFY AT 15)

SEQUENCE OF QUESTIONS AE222 THRU AE230 IS REPEATED FOR EACH CHILD (I.E., SAME NUMBER OF TIMES AS AE221 RESPONSE)

LOOP START

AE222. IF LOOP 1: Here are a few questions about the [child / children] you have [fathered / given birth to]. Let's start with your first child. What is this child's first name?

ELSE: Now I'd like to ask about your next child. What is this child's first name?

_____ (VERBATIM – LIMITED)

AE222A. Is [AE222 CHILDNAME] male or female?

1. MALE
2. FEMALE

AE223. When was [AE222 CHILDNAME] born? What month and year?

___ MONTH ___ YEAR

AE224. Does [AE222 CHILDNAME] live in this household?

1. YES
2. NO (GO TO AE225)
3. CHILD IS NO LONGER ALIVE (GO TO AE230)

AE224_ID. CAPI CHECK: BRING UP LIST OF W2 ROSTER MEMBERS AND FILL IN THE W2 ROSTER ID OF THIS CHILD (GO TO LOOP END)

AE225. Where does [AE222 CHILDNAME] live? What city and state?

_____ CITY _____ STATE _____ COUNTRY

AE228. INTERVIEWER CHECK: IS CHILD 17 OR YOUNGER?

1. YES
5. NO (GO TO LOOP END)

AE229. Who is [AE222 CHILDNAME] currently living with?

INTERVIEWER: DO NOT READ ANSWERS. CODE R'S RESPONSES(S). CODE ALL THAT APPLY.

1. BIOLOGICAL MOTHER
2. BIOLOGICAL FATHER
3. ADOPTIVE MOTHER
4. ADOPTIVE FATHER
5. STEPMOTHER
6. STEPFATHER
7. MOTHER'S BOYFRIEND / PARTNER

8. FATHER'S GIRLFRIEND / PARTNER
9. GRANDMOTHER
10. GRANDFATHER
11. AUNT
12. UNCLE
13. SISTER (INCLUDING HALF SISTER, STEP SISTER)
14. BROTHER (INCLUDING HALF BROTHER, STEP BROTHER)
15. HUSBAND / WIFE
16. OTHER RELATIVES
17. FOSTER PARENTS, FOSTER FAMILY, FOSTER CARE
18. FRIENDS
19. WITH HIS / HER BOYFRIEND / GIRLFRIEND
20. LIVING BY HIMSELF / HERSELF
21. LIVING IN A SCHOOL DORMITORY
22. IN JAIL, PRISON, OR JUVENILE DETENTION CENTER
23. SOMEWHERE ELSE, SPECIFY LIMITED

ALL GO TO LOOP END BELOW AE230

AE229_S. Who else is [AE222 CHILDNAME] currently living with?

ONLY FOR KIDS WHO HAVE DIED

AE230. When did [AE222 CHILDNAME] die?

___ MONTH ___ YEAR

LOOP END. RETURN TO AE222 FOR NEXT KID, ELSE CONTINUE.

AE231. CAPI CHECK:

1. RESPONDENT is <26 AND HAS NEVER HAD SEX (I.E., AE186=5 OR AE194=777) (GO TO SECTION F)
2. OTHERWISE, CONTINUE

AE232. Next I'd like to ask you about anything you may be doing to delay or prevent pregnancy. Are you and your [wife / husband / partner] currently using any of these types of contraception or any method of preventing pregnancy? This includes having an operation to avoid becoming pregnant.

1. YES
2. NO (GO TO END OF SECTION F)
3. [IF VOLUNTEERED] NOT CURRENTLY SEXUALLY ACTIVE, NO CONTRACEPTION NEEDED (GO TO END OF SECTION F)

AE233. (SHOW CARD #5) Please look at this card and tell me what method or methods are you using? You can just give me the number.

CODE ALL THAT APPLY

1. CONDOM (RUBBER)
2. FOAM, JELLY, CREAM, SPONGE, SUPPOSITORIES
3. WITHDRAWAL (PULLING OUT)
4. DIAPHRAGM (WITH OR WITHOUT JELLY)
5. RHYTHM (SAFE TIME, AVOIDING SEX AT CERTAIN TIMES OF THE MONTH)
6. BIRTH CONTROL PILLS
7. IUD (INTRAUTERINE DEVICE)
8. NORPLANT, DEPO-PROVERA OR INJECTABLES
9. R OR PARTNER / SPOUSE HAS HAD OPERATION / VASECTOMY / TUBES TIED / STERILIZATION
10. METHOD NOT LISTED ABOVE, SPECIFY

SECTION F. SPOUSE / PARTNER PROXY QUESTIONS

AF1. CAPI CHECK:

1. RESPONDENT HAS A SPOUSE / PARTNER WHO IS LIVING IN THE HOUSEHOLD (GO TO AF2A)
2. RESPONDENT HAS A SPOUSE / PARTNER WHO IS NOT LIVING IN THE HOUSEHOLD (CONTINUE)
5. RESPONDENT HAS NO SPOUSE / PARTNER (GO TO SECTION G).

AF2a. (SHOW CARD #3) Please look at this list and tell me what group or groups describe your [wife / husband / partner]'s race or ethnic origin.

CODE ALL THAT APPLY

1. BLACK / AFRICAN-AMERICAN
2. WHITE
3. LATINO / HISPANIC / LATIN AMERICAN
4. ASIAN INDIAN / SOUTH ASIAN
5. CHINESE
6. FILIPINO
7. JAPANESE
8. KOREAN
9. VIETNAMESE
10. OTHER ASIAN
11. NATIVE AMERICAN / AMERICAN INDIAN
12. INUIT / ESKIMO / ALEUT
13. HAWAIIAN
14. PACIFIC ISLANDER
15. OTHER, SPECIFY
16. MIDDLE EASTERN (ARAB, PERSIAN, NORTH AFRICAN)

AF2b. CHECK AF2a:

1. ONLY ONE GROUP IS CIRCLED (GO TO AF3a)
2. 2 OR MORE: NUMBER OF GROUPS CIRCLED (GO TO AF3a)

AF3. Which one group on that card best describes your [wife / husband / partner]'s race or ethnic origin?

CODE ONLY ONE

1. BLACK / AFRICAN AMERICAN
2. WHITE
3. LATINO / HISPANIC / LATIN AMERICAN
4. ASIAN INDIAN / SOUTH ASIAN
5. CHINESE
6. FILIPINO
7. JAPANESE
8. KOREAN
9. VIETNAMESE
10. OTHER ASIAN
11. NATIVE AMERICAN / AMERICAN INDIAN
12. INUIT / ESKIMO / ALEUT
13. HAWAIIAN
14. PACIFIC ISLANDER
15. OTHER, SPECIFY
16. MIDDLE EASTERN (ARAB, PERSIAN, NORTH AFRICAN)

AF3a. Is your [wife / husband / partner] currently working, looking for work, retired, keeping house, a student, at home with your children or something else?

INTERVIEWER: DO NOT READ ANSWERS. CODE R'S RESPONSE

1. WORKING NOW
2. TEMPORARILY LAID OFF, SICK LEAVE, MATERNITY LEAVE
3. LOOKING FOR WORK, UNEMPLOYED
4. RETIRED
5. DISABLED (PERMANENTLY OR TEMPORARILY)
6. KEEPING HOUSE, RAISING CHILDREN (GO TO AF11)
7. STUDENT (GO TO AF11)
8. OTHER, SPECIFY – LIMITED (GO TO AF11)

AF4. Next I have some questions about your [wife / husband / partner]'s [current / most recent] job. What kind of work [is / was] your [wife / husband / partner] doing? (For example: electrical engineer, stock clerk, typist, farmer)

PROBE: If your [wife / husband / partner] [has / had] more than one job, please think about your [wife / husband / partner]'s main job.

_____ (VERBATIM – LIMITED)

AF5. What [are / were] your [wife / husband / partner] most important activities or duties at this job? (For example: typing, keeping account books, filing, selling cars, operating printing press, finishing concrete)

_____ (VERBATIM – LIMITED)

AF6. What kind of business or industry [is / was] this? (For example: TV and radio manufacturing, retail shoe store, State Labor Dept.)

_____ (VERBATIM – LIMITED)

AF7. [Is / Was] your [wife / husband / partner]...

1. An employee of a private company, business, or individual for wages, salary or commission?
2. A FEDERAL government employee?
3. A STATE government employee?
4. A COUNTY OR LOCAL government employee?
5. Self-employed in own business, profession, practice or farm?
6. Working without pay in a family business or farm?

IF AF7=5, CONTINUE. ELSE GO TO AF8

AF7a. [Is / was] your [wife / husband / partner]'s own business incorporated or not incorporated?

1. Incorporated
2. Not incorporated

AF8. CHECK AF3a:

1. SPOUSE / PARTNER IS CURRENTLY EMPLOYED (i.e., AF3a=1 OR 2) (CONTINUE)
2. SPOUSE / PARTNER IS NOT CURRENTLY EMPLOYED (GO TO AF11)

AF9. About how many hours a week on average does your [wife / husband / partner] work at this job when your [wife / husband / partner] is working?

___ AVERAGE HOURS PER WEEK (RANGE 1–120 VERIFY AT 80)

AF9a. CAPI CHECK:

1. AF7=5 (GO TO AF10A)
5. OTHERWISE (CONTINUE)

AF10_1. How much is your [wife / husband / partner] paid, on average, at this job, before taxes are taken out, including any tips or commissions when your [wife / husband / partner] is working?

PROBE: Just give me your best guess

_____ DOLLARS

CODE UNIT

1. PER HOUR
2. PER DAY
3. PER WEEK
4. PER MONTH
5. PER YEAR
6. EVERY TWO WEEKS

AF10_2. Is that “per hour,” “per day,” “per week,” “per month,” or “per year”?

GO TO AF11

AF10A. What were your [wife / husband / partner] profits / losses from [his / her] business plus any salary [he / she] took from your business during the past 12 months?

PROBE: Just give me your best guess.

\$ _____ .00

AF11. Would you say your [wife / husband / partner]’s health in general is excellent, very good, good, fair or poor?

1. EXCELLENT
2. VERY GOOD
3. GOOD
4. FAIR
5. POOR

AF12. Does your [wife / husband / partner] have any physical or psychological condition that limits the type of work or the amount of work your [wife / husband / partner] can do?

1. YES
5. NO (GO TO AF13)

AF13. Does your [wife / husband / partner] smoke cigarettes?

1. YES
5. NO

AF14. How old is your [wife / husband / partner]?

_____ Years

AF15. What country was your [wife / husband / partner] born in?

_____ Country

AF16. CAPI CHECK AF15:

1. SPOUSE / PARTNER BORN IN US (GO TO SECTION G)
2. SPOUSE / PARTNER BORN OUTSIDE US

AF18. Is your [wife / husband / partner] a citizen of the United States?

1. YES (GO TO SECTION G)
5. NO

AF19. Does [he / she] currently have a permanent residence card or a green card?

1. YES (GO TO SECTION G)
5. NO

AF20. Has [he / she] been granted asylum, refugee status, or temporary protected immigrant status, TPS in the United States?

1. YES (GO TO SECTION G)
5. NO

AF21. Does [he / she] have a tourist visa, a student visa, a work visa or permit, or another document which permits you to stay in the US for a limited time?

1. YES
5. NO

GO TO SECTION G

AF22. Is this visa or document still valid or has it expired?

1. STILL VALID
2. HAS EXPIRED

SECTION G. SOCIAL TIES AND EXPERIENCES OF DISCRIMINATION

AG1. Now I have some questions about other family members. First let me ask you are both of your biological parents alive?

AG1_aa. FATHER

1. ALIVE
2. DIED
3. DON'T KNOW

AG1_bb. MOTHER

1. ALIVE
2. DIED
3. DON'T KNOW

IF AG1_bb=1 THEN CONTINUE. ELSE IF AG1_aa=2 GO TO AG1d. ELSE GO TO AG1g.

AG1a. How old was your mother when she died?

PROBE: Just give me your best guess

_____ Years old

ASK ONLY IF AG1A=DK OR REF

AG1b. How old were you when she died?

1. MOTHER DIED WHEN R WAS BORN
2. R WAS _____ MONTHS OLD
3. R WAS _____ YEARS OLD
4. OTHER, SPECIFY _____

AG1c. What did your mother die from?

MARK ALL THAT APPLY

1. HEART DISEASE
2. CANCER, SPECIFY TYPE _____
3. STROKE, BRAIN HEMORRHAGE
4. KILLED IN ACCIDENT, HOMICIDE, SUICIDE
5. PNEUMONIA, INFLUENZA, FLU
6. LUNG DISEASE (OTHER THAN LUNG CANCER, PNEUMONIA, INFLUENZA)
7. DIABETES
8. LIVER OR KIDNEY DISEASE
10. OTHER, SPECIFY _____

IF AG1_aa=2 THEN CONTINUE. ELSE GO TO AG1g

AG1D. How old was your father when he died?

PROBE: Just give me your best guess

_____ Years old

ASK ONLY IF AG1D=DK OR REF

AG1E. How old were you when he died?

1. FATHER DIED BEFORE R WAS BORN
2. R WAS _____ MONTHS OLD
3. R WAS _____ YEARS OLD
4. OTHER, SPECIFY _____

AG1f. What did your father die from?

MARK ALL THAT APPLY

1. HEART DISEASE
2. CANCER, SPECIFY TYPE _____
3. STROKE, BRAIN HEMORRHAGE
4. KILLED IN ACCIDENT, HOMICIDE, SUICIDE
5. PNEUMONIA, INFLUENZA, FLU
6. LUNG DISEASE (OTHER THAN LUNG CANCER, PNEUMONIA, INFLUENZA)
7. DIABETES
8. LIVER OR KIDNEY DISEASE
10. OTHER, SPECIFY _____

THIS SECTION ONLY FOR RSA_P, RSA_NE, RSC-PA AND SIB-PA

AG1g. INTERVIEWER CHECK:

1. THIS R THE RSA ONLY
2. THIS R THE RSA AND PCG
3. THIS IS RSC-P OR SIB-P
4. THIS R THE PCG ONLY (GO TO SECTION H)

AG2. Do you have a stepmother or a stepfather?

1. STEPMOTHER
2. STEPFATHER
3. BOTH
4. NEITHER (GO TO AG3)

AG2a. [Is your stepmother / Is your stepfather / Are your stepmother and stepfather] still alive?

AG2a_aa. STEPFATHER

1. ALIVE
2. DIED
3. DON'T KNOW

AG2a_bb. STEPMOTHER

1. ALIVE
2. DIED
3. DON'T KNOW

ASK QUESTIONS AG3 TO AG6 FIRST FOR FATHER AND MOTHER AND THEN FOR STEPFATHER AND STEPMOTHER. SKIP FATHER AND MOTHER IF R SAYS THEY HAVE DIED OR THEIR STATUS IS UNKNOWN IN AG1. SKIP STEPFATHER AND STEPMOTHER LOOPS IF DOES NOT HAVE A STEPMOTHER OR A STEPFATHER OR IF STEPFATHER OR STEPMOTHER IS DEAD.

LOOP BEGIN

AG3. CAPI CHECK PRELOAD:

1. R'S [FATHER / MOTHER / STEPFATHER / STEPMOTHER] IS ALIVE
2. R'S [FATHER / MOTHER / STEPFATHER / STEPMOTHER] IS NOT ALIVE (GO TO AG3B)

AG3. CAPI CHECK PRELOAD: FROM ROSTER:

AG3A. Does your [father / mother / stepfather / stepmother] live in this household?

1. YES (GO TO END OF LOOP AFTER AG6)
5. NO

AG3B. During the past 12 months, about how often have you seen your [father / mother / stepfather / stepmother]?

1. [IF RESPONDENT VOLUNTEERS] LIVES IN THIS HOUSEHOLD (GO TO LOOP END AFTER AG6)
2. EVERYDAY [BUT PARENT / STEPPARENT DOES NOT LIVE IN HH]
3. ___ TIMES PER (UNIT BELOW) (RANGE 0–20)

AG3D. CAPI CHECK PRELOAD:

1. THIS RESPONDENT COMPLETED SECTION G OF ADULT QX IN W1
2. THIS RESPONDENT DID NOT COMPLETE SECTION G OF ADULT QX IN W1 (GO TO AG4)

AG3E. In [W1 INTERVIEW YEAR] your [father / mother / stepfather / stepmother] was living at [MOMDAD ADDRESS]. Does [he / she] still live there?

INTERVIEWER: PLEASE ASK ABOUT PARENTS IN THE FOLLOWING ORDER – FATHER, MOTHER, STEPFATHER, AND STEPMOTHER

1. YES (GO TO END OF LOOP AFTER AG6)

5. NO

AG4. Where does your [father / mother / stepfather / stepmother] live? What city and state?

INTERVIEWER: MARK "SAME PLACE" ONLY IF GIVEN PARENT LIVES WITH THAT OTHER PARENT. IF BOTH PARENTS LIVE IN SAME CITY BUT AT DIFFERENT ADDRESSES, THEN CITY / STATE / COUNTRY ARE ASKED FOR BOTH.

1. GIVE CITY AND STATE
2. SAME PLACE AS MOTHER
3. SAME PLACE AS FATHER
4. SAME PLACE AS STEPMOTHER
5. SAME PLACE AS STEPFATHER

AG5. QUESTION ELIMINATED

AG6B. CAPI CHECK PRELOAD:

1. THIS RESPONDENT COMPLETED SECTION G OF ADULT QX IN W1
2. THIS RESPONDENT DID NOT COMPLETE SECTION G OF ADULT QX IN W1 (GO TO AG7)

AG6C. Now I have some questions about your brothers and sisters. In [W1 INTERVIEW MONTH AND YEAR] you said that you [did not have any full brothers or sisters / had one brother or sister / had a total of [W1 FULL SIB COUNT] full brothers and sisters], [including any who were no longer alive.] Since then have you had any new brothers or sisters? Please include only brothers and sisters who have the same mother and the same father as you.

1. YES
5. NO

IF AG6C=5 AND [W1 FULL SIB COUNT]=0 GO TO AG19

AG6D. So counting these new brothers and sisters, how many full brothers and sisters have you had in total, including any who may no longer be living?

INTERVIEWER: FULL BROTHERS AND SISTERS HAVE THE SAME BIOLOGICAL OR ADOPTIVE MOTHER AND FATHER

1. ___ TOTAL NUMBER OF FULL BROTHERS AND SISTERS (GO TO AG8)

AG7. Now I have some questions about your brothers and sisters. How many full brothers and sisters have you had in total, including any who may no longer be living?

INTERVIEWER: FULL BROTHERS AND SISTERS HAVE THE SAME BIOLOGICAL OR ADOPTIVE MOTHER AND FATHER

1. ___ TOTAL NUMBER OF FULL BROTHERS AND SISTERS (IF ZERO, GO TO AG19) (RANGE 1–20, VERIFY AT 14)

AG8. [Is your brother or sister still living? / Are all your full brothers and sisters still living?]

1. YES
5. NO

IF AG8=1, D, R GO TO AG9, ELSE CONTINUE

AG8a. How many are no longer living?

___ (RANGE 1–20) (AMOUNT CANNOT BE MORE THAN AG7)

AG9. INTERVIEWER CHECK:

1. R HAS NO FULL BROTHERS AND SISTERS STILL ALIVE (GO TO AG19)
2. R HAS ONE BROTHER OR SISTER STILL ALIVE
3. R HAS MORE THAN ONE BROTHER OR SISTER STILL ALIVE (GO TO AG13A)

AG10. Do you have a brother or a sister?

1. BROTHER
2. SISTER

AG10A. CAPI CHECK:

1. THIS RESPONDENT COMPLETED SECTION G OF ADULT MODULE IN W1 AND (RESPONDENT HAD ONE OR MORE SIBLINGS AT W1) (GO TO AG13)
5. THIS RESPONDENT DID NOT COMPLETE SECTION G OF ADULT MODULE IN W1 OR (RESPONDENT HAD ZERO SIBLINGS AT W1, BUT AG6C=1)

AG11. How old is your [brother / sister]?

1. ___ MONTHS (USE ONLY IF AGE LESS THAN 1 YEAR) (RANGE 1–11)
2. ___ YEAR (RANGE 1–120)

AG12. How much school did your [brother / sister] complete?

INTERVIEWER: DO NOT READ ANSWERS. CODE R'S RESPONSE

0. NONE
- 1–11. GRADE (GRADES 1 THROUGH 11)
12. HIGH SCHOOL GRADUATE OR COMPLETED GED
13. SOME VOCATIONAL SCHOOL
14. COMPLETED VOCATIONAL SCHOOL
15. SOME COLLEGE
16. ASSOCIATES' DEGREE (AA)
17. BACHELORS' DEGREE (BA, BS)
18. SOME GRADUATE OR PROFESSIONAL SCHOOL (AFTER COMPLETING COLLEGE)
19. COMPLETED GRADUATE / PROFESSIONAL DEGREE

AG13. Does this [brother / sister] live in Southern California?

1. YES (GO TO AG19)
5. NO (GO TO AG19)

AG13A. CAPI CHECK:

1. THIS RESPONDENT COMPLETED SECTION G OF ADULT MODULE IN W1 AND (RESPONDENT HAD ONE OR MORE SIBLINGS AT W1) (GO TO AG17)
5. THIS RESPONDENT DID NOT COMPLETE SECTION G OF ADULT MODULE IN W1 OR (RESPONDENT HAD ZERO SIBLINGS AT W1, BUT AG6C=1)

AG14. Think of your brother or sister who is closest to you in age. How much school did he or she complete?

INTERVIEWER: DO NOT READ ANSWERS. CODE R'S RESPONSE

0. NONE
1. to 11. ___ GRADE (GRADES 1 THROUGH 11)
12. HIGH SCHOOL GRADUATE OR COMPLETED GED
13. SOME VOCATIONAL SCHOOL
14. COMPLETED VOCATIONAL SCHOOL

- 15. SOME COLLEGE
- 16. ASSOCIATES' DEGREE (AA)
- 17. BACHELORS' DEGREE (BA, BS)
- 18. SOME GRADUATE OR PROFESSIONAL SCHOOL (AFTER COMPLETING COLLEGE)
- 19. COMPLETED GRADUATE / PROFESSIONAL DEGREE

AG15. Is this person who is closest to you in age, a brother or a sister?

- 1. BROTHER
- 2. SISTER

AG16. How old is this [brother / sister]?

- 1. ___ MONTHS (USE ONLY IF AGE LESS THAN 1 YEAR) (RANGE 1–11)
- 2. ___ YEARS (RANGE 1–120)

AG17. Do any of your full brothers and sisters live in Southern California?

INTERVIEWER NOTE: INCLUDES BROTHERS AND SISTERS LIVING IN THE SAME HOUSEHOLD AS RESPONDENT. FULL BROTHERS AND SISTERS HAVE BOTH THE SAME MOTHER AND THE SAME FATHER

- 1. YES
- 5. NO (GO TO AG19)

AG18. How many of your full brothers and sisters live in Southern California?

___ NUMBER IN SOUTHERN CALIFORNIA (RANGE 1–20)

AG19. How many half- and step-brothers and sisters do you have?

INTERVIEWER: HALF-BROTHERS AND SISTERS HAVE THE ONE PARENT WHO IS THE SAME AND ONE WHO IS DIFFERENT. STEP-SIBLINGS HAVE DIFFERENT PARENTS, BUT ARE RELATED BECAUSE THEIR PARENTS MARRIED EACH OTHER.

- 1. ___ TOTAL NUMBER OF HALF- AND STEP- BROTHERS AND SISTERS (IF ZERO, GO TO AG21)

AG20. How many of your half and step brothers and sisters live in Southern California?

INTERVIEWER NOTE: THIS INCLUDES SIBLINGS LIVING IN THE SAME HOUSEHOLD AS R

___ TOTAL NUMBER OF HALF- AND STEP- SIBS IN SO. CAL.

AG21. Now let me ask you about unfair treatment that you may or may not have experienced. Please tell me whether or not any of these things happened to you in the past five years, that is since [MONTH AND YEAR FIVE YEARS AGO].

AG21.A. In the past five years, have you ever been unfairly fired from a job or denied a promotion?

- 1. YES
- 5. NO
- 7. NEVER HAD A JOB

AG21.B. Have you ever not been hired for a job, for unfair reasons?

- 1. YES
- 5. NO
- 7. NEVER APPLIED FOR A JOB

AG21.C. Have you ever been unfairly stopped, searched, questioned, physically threatened or verbally abused by the police?

1. YES
5. NO

AG21.D. Has a landlord, home owner, or a realtor refused to sell or rent you a house or apartment for unfair reasons?

1. YES
5. NO
7. NEVER TRIED TO RENT APARTMENT OR BUY HOUSE

AG22. Now let me ask about experiences you may or may not have had where you got special preference or better treatment than other people during the past five years.

AG22.A. [IF AG21A=7 AND AG21B=7 CODE THIS ITEM "7" AND GO TO AG22B; ELSE CONTINUE] Did you ever get special preference for a job or a promotion over other people for unfair reasons?

PROBE: In other words, you got the job or promotion rather than other people, for unfair reasons.

1. YES
5. NO
7. NEVER APPLIED FOR OR HAD A JOB

AG22.B. [IF AG21D=7 CODE THIS ITEM "7" AND GO TO AG23A; ELSE CONTINUE] Did anyone rent or sell you an apartment or house instead of other people, for unfair reasons?

PROBE: In other words, you got the apartment or house, but someone else really should have gotten it if they were treated fairly.

1. YES
5. NO
7. NEVER TRIED TO RENT OR BUY APARTMENT OR HOUSE

AG23A. CAPI CHECK:

1. AG21A=1
5. OTHERWISE (GO TO AG24A)

AG23B. Think about the job you were unfairly fired from or denied a promotion. What was the main reason?

INTERVIEWER: IF RESPONDENT SAYS THERE WAS MORE THAN ONE UNFAIR INCIDENT, ASK FOR THE MOST RECENT ONE.

INTERVIEWER: DO NOT READ THE RESPONSES. CODE WHAT RESPONDENT SAYS. CODE ALL THAT APPLY.

1. Gender (male, female)
2. Age (too old, too young)
3. Ethnicity, race
4. Immigrant status
5. Country of origin
6. Religion
7. Too tall or too short
8. Weigh too much or too little
9. Physical appearance (for example, attractiveness, body shape, etc.)
10. A physical disability
11. Physical or mental health

12. Sexual orientation
13. Low income level or social class, poverty, not well-educated
14. Didn't like me personally
15. Other, SPECIFY _____

AG24A. CAPI CHECK:

1. AG21B=1
5. OTHERWISE (GO TO AG25A)

AG24B. Think about the job which you were not hired for, for unfair reasons. What was the main reason?

INTERVIEWER: IF RESPONDENT SAYS THERE WAS MORE THAN ONE UNFAIR INCIDENT, ASK FOR THE MOST RECENT ONE.

INTERVIEWER: DO NOT READ THE RESPONSES. CODE WHAT RESPONDENT SAYS. CODE ALL THAT APPLY.

1. Gender (male, female)
2. Age (too old, too young)
3. Ethnicity, race
4. Immigrant status
5. Country of origin
6. Religion
7. Too tall or too short
8. Weigh too much or too little
9. Physical appearance (for example, attractiveness, body shape, etc.)
10. A physical disability
11. Physical or mental health
12. Sexual orientation
13. Low income level or social class, poverty, not well-educated
14. Didn't like me personally
15. Other, SPECIFY _____

AG25A. CAPI CHECK:

1. AG21C=1
5. OTHERWISE (GO TO AG26A)

AG25B. Think about the time you were unfairly stopped, searched, questioned, physically threatened or verbally abused by the police. What was the main reason?

INTERVIEWER: IF RESPONDENT SAYS THERE WAS MORE THAN ONE UNFAIR INCIDENT, ASK FOR THE MOST RECENT ONE.

INTERVIEWER: DO NOT READ THE RESPONSES. CODE WHAT RESPONDENT SAYS. CODE ALL THAT APPLY.

1. Gender (male, female)
2. Age (too old, too young)
3. Ethnicity, race
4. Immigrant status
5. Country of origin
6. Religion
7. Too tall or too short
8. Weigh too much or too little
9. Physical appearance (for example, attractiveness, body shape, etc.)
10. A physical disability
11. Physical or mental health

12. Sexual orientation
13. Low income level or social class, poverty, not well-educated
14. Didn't like me personally
15. Other, SPECIFY _____

AG26A. CAPI CHECK:

1. AG21D=1
5. OTHERWISE (GO TO AG27A)

AG26B. Think about the time a landlord, home owner, or a realtor refused to sell or rent you a house or apartment for unfair reasons. What was the main reason?

INTERVIEWER: IF RESPONDENT SAYS THERE WAS MORE THAN ONE UNFAIR INCIDENT, ASK FOR THE MOST RECENT ONE.

INTERVIEWER: DO NOT READ THE RESPONSES. CODE WHAT RESPONDENT SAYS. CODE ALL THAT APPLY.

1. Gender (male, female)
2. Age (too old, too young)
3. Ethnicity, race
4. Immigrant status
5. Country of origin
6. Religion
7. Too tall or too short
8. Weigh too much or too little
9. Physical appearance (for example, attractiveness, body shape, etc.)
10. A physical disability
11. Physical or mental health
12. Sexual orientation
13. Low income level or social class, poverty, not well-educated
14. Didn't like me personally
15. Other, SPECIFY _____

AG27A. CAPI CHECK:

1. AG22A=1
5. OTHERWISE (GO TO AG27C)

AG27B. Think about the time you got special preference for a job or a promotion over other people for unfair reasons?

PROBE: In other words, you got the job or promotion rather than other people, for unfair reasons.

What was the main reason?

INTERVIEWER: IF RESPONDENT SAYS THERE WAS MORE THAN ONE UNFAIR INCIDENT, ASK FOR THE MOST RECENT ONE.

INTERVIEWER: DO NOT READ THE RESPONSES. CODE WHAT RESPONDENT SAYS. CODE ALL THAT APPLY.

1. Gender (male, female)
2. Age
3. Ethnicity, race
4. Immigrant status

5. Country of origin
6. Religion
7. Height
8. Weight
9. Physical appearance (for example, attractiveness, body shape, etc.)
10. Lack of a physical disability
11. Physical or mental health
12. Sexual orientation
13. Income level or social class or education
14. Liked me personally
15. Other, SPECIFY _____

AG27C. CAPI CHECK:

1. AG22B=1
5. OTHERWISE (GO TO AG28)

AG27D. Think about the time that someone rented or sold you an apartment or house rather than other people, for unfair reasons?

PROBE: In other words, you got the apartment or house, but someone else really should have gotten it if they were treated fairly.

What was the main reason?

INTERVIEWER: IF RESPONDENT SAYS THERE WAS MORE THAN ONE UNFAIR INCIDENT, ASK FOR THE MOST RECENT ONE.

INTERVIEWER: DO NOT READ THE RESPONSES. CODE WHAT RESPONDENT SAYS. CODE ALL THAT APPLY.

1. Gender (male, female)
2. Age
3. Ethnicity, race
4. Immigrant status
5. Country of origin
6. Religion
7. Height
8. Weight
9. Physical appearance (for example, attractiveness, body shape, etc.)
10. Lack of a physical disability
11. Physical or mental health
12. Sexual orientation
13. Income level or social class or education
14. Liked me personally
15. Other, SPECIFY _____

AG28. In your day-to-day life how often have any of the following things happened to you? Would you say almost every day, at least once a week, a few times a month, a few times a year, less than once a year, or never?

SHOW CARD WITH RESPONSE CATEGORIES

AG28.a. You are treated with less courtesy than other people

1. Almost every day
2. At least once a week
3. A few times a month
4. A few times a year

5. Less than once a year
6. Never

AG28.b. You are treated with less respect than other people.

1. Almost every day
2. At least once a week
3. A few times a month
4. A few times a year
5. Less than once a year
6. Never

AG28.c. You receive poorer service than other people at restaurants or stores

1. Almost every day
2. At least once a week
3. A few times a month
4. A few times a year
5. Less than once a year
6. Never

AG28.d. People act as if they think you are not smart.

1. Almost every day
2. At least once a week
3. A few times a month
4. A few times a year
5. Less than once a year
6. Never

AG28.e. People act as if they are afraid of you.

1. Almost every day
2. At least once a week
3. A few times a month
4. A few times a year
5. Less than once a year
6. Never

AG28.f. People act as if they think you are dishonest.

1. Almost every day
2. At least once a week
3. A few times a month
4. A few times a year
5. Less than once a year
6. Never

AG28.g. You are called names or insulted.

1. Almost every day
2. At least once a week
3. A few times a month
4. A few times a year
5. Less than once a year
6. Never

AG28.h. You are threatened or harassed.

1. Almost every day
2. At least once a week
3. A few times a month
4. A few times a year
5. Less than once a year
6. Never

AG29. People are different in their sexual attraction to other people. Please look at the answers on this card. Tell me which number best describes your feelings? Just give me the number.

1. Only attracted to males
2. Mostly attracted to males
3. Equally attracted to females and males
4. Mostly attracted to females
5. Only attracted to females
8. Not sure

_____ NUMBER (RANGE: NUMBER CAN BE BETWEEN 1 AND 5 OR NUMBER 8)

SECTION HA. PREPARATION FOR EHC

AHA2. CAPI CHECK:

1. AA7=5 AND (AA8=4 OR 5)
5. OTHERWISE (GO TO AHA5)

AHA3. You told me earlier that you did not live at [this address / W1 ADDRESS] in [W1 INTERVIEW MONTH AND YEAR]. Where did you live?

INTERVIEWER: GET A COMPLETE ADDRESS

1. RESPONDENT GIVES EXACT STREET ADDRESS

_____ (Number) _____ (Street name) _____ (Apt.)
 _____ (City) _____ (State / Province / Territory) _____ (Zip Code) _____ (Country)

2. R GAVE CLOSEST INTERSECTION OR CROSS-STREET

99. NOW SAYS THAT HE / SHE DID LIVE AT THIS ADDRESS / W1 ADDRESS

AHA4. Can you help me understand why my computer says that you lived at [this address / W1 ADDRESS] in [W1 INTERVIEW MONTH AND YEAR] but you say you lived at [HA3 ADDRESS] at that time?

RECORD VERBATIM _____

NOTE: EVENT HISTORY CALENDAR IS ADMINISTERED AT THIS POINT IN THE INTERVIEW.

INFORMATION FROM SECTION HA AND EARLIER PARTS OF THE ADULT MODULE ARE PRELOADED INTO EHC AND, ONCE THE EHC IS COMPLETE, THE PROGRAM OUTPUTS INFORMATION INTO SECTION HB OF THE ADULT MODULE BELOW.

SECTION HB. FOLLOW-UP TO THE EHC

AHB1. CAPI CHECK:

1. RESPONDENT COMPLETED ALL OF EHC MODULE
5. OTHERWISE (DO NOT GO ON, FINISH EHC MODULE BEFORE GOING ON TO REST OF ADULT MODULE)

Before we go on, I'd like to confirm some information we just covered.

AHB2. You [IF EHC SAYS R MOVED IN LAST 6 YEARS, FILL “have lived in a residence other than this one in the past 6 years” ELSE FILL “have not moved in the last 6 years”]. Is that correct?

1. YES
5. NO (CHECK EHC ADDRESS CALENDAR WITH RESPONDENT AND CORRECT AS NECESSARY)

AHB3. You [IF EHC SAYS R IS CURRENTLY WORKING, FILL “are” ELSE FILL “are not”] currently working. Correct?

1. YES
5. NO (CHECK EHC CURRENT EMPLOYMENT CALENDAR WITH RESPONDENT AND CORRECT AS NECESSARY)

AHB4. CAPI CHECK:

1. RESPONDENT CURRENTLY WORKING (GO TO HB6)
2. RESPONDENT NOT CURRENTLY WORKING

AHB5. [IF EHC SAYS R HAD A JOB IN LAST 6 YEARS, FILL “You have worked some time in the last 6 years” ELSE FILL “You have not worked at all in the last 6 years”]. Is that correct?

1. YES
5. NO (CHECK EHC EMPLOYMENT CALENDAR WITH RESPONDENT AND CORRECT AS NECESSARY)

GO TO HB7

AHB6. You currently work at [IF NUMBER OF CURRENT JOBS=1, FILL “one” ELSE FILL “more than one”] job. Correct?

1. YES
5. NO (CHECK EHC EMPLOYMENT CALENDAR WITH RESPONDENT AND CORRECT AS NECESSARY)

AHB7. You [IF EHC SAYS R IS CURRENTLY RECEIVING CALWORKS / TANF / AFDC, FILL “are” ELSE FILL “are not”] currently receiving public assistance through CalWorks / TANF / AFDC. Correct?

1. YES
5. NO (CHECK EHC PUBLIC ASSISTANCE CALENDAR WITH RESPONDENT AND CORRECT AS NECESSARY)

AHB8. CAPI CHECK:

1. RESPONDENT CURRENTLY RECEIVING CALWORKS / TANF / AFDC (GO TO END OF SECTION HB)
2. RESPONDENT NOT CURRENTLY RECEIVING CALWORKS / TANF / AFDC

AHB9. You [IF EHC SAYS R GOT CALWORKS / TANF / AFDC IN LAST 6 YEARS, FILL “have” ELSE FILL “have not”] received assistance from CALWORKS / TANF / AFDC in the last 6 years. Correct?

1. YES
5. NO (CHECK EHC PUBLIC ASSISTANCE CALENDAR WITH RESPONDENT AND CORRECT AS NECESSARY)

SECTION I. INTENTIONALLY MISSING

SECTION J. RESIDENTIAL HISTORY FOLLOW-UP

AJ1. Question Deleted

AJ1a. CAPI CHECK TYPE OF RESPONDENT:

1. RESPONDENT COMPLETED SECTION J OF ADULT QUESTIONNAIRE IN WAVE 1 (GO TO J10)
2. OTHER

SECTION FOR NEW RESPONDENTS

AJ2. CAPI CHECK CALENDAR RESPONSES: DID R MOVE SINCE [CALENDAR START DATE]?

1. YES (GO TO J7)
5. NO

QUESTION ASKED ONLY FOR THOSE WHO DID NOT MOVE IN DURING EHC PERIOD

AJ3. What was your previous address before the place you now live?

_____ STREET ADDRESS _____ CITY _____ STATE _____ COUNTRY

AJ3_getc. Do you know the closest cross-streets or intersection?

AJ7. Now let me ask you about your move to this address. Please look at this other card and tell me why you chose this neighborhood?

PROBE: Any other reason?

CODE ALL THAT APPLY

1. QUIET, CLEAN NEIGHBORHOOD
2. LOW CRIME NEIGHBORHOOD
3. CENTRALLY LOCATED NEIGHBORHOOD / CLOSE TO STORES, ETC.
4. CLOSE TO MOUNTAINS OR BEACH
5. NEIGHBORHOOD HAS FAMILIES WITH KIDS
6. GOOD NEIGHBORHOOD TO RAISE CHILDREN
7. CLOSE TO YOUR WORK OR SCHOOL
8. CLOSE TO SPOUSE / PARTNER'S WORK OR SCHOOL
9. CLOSE TO KIDS' SCHOOL
10. SCHOOLS ARE GOOD
11. CLOSE TO FAMILY OR FRIENDS
12. MOVED HERE TO LIVE WITH PARENTS OR OTHER FAMILY
13. MOVED HERE TO LIVE WITH SPOUSE OR PARTNER
14. GOOD TRANSPORTATION
15. ETHNICITY / NATIONALITY OF NEIGHBORHOOD
16. LIVED HERE BEFORE / ALREADY KNOW THE NEIGHBORHOOD
17. RENTS OR HOUSING PRICES ARE REASONABLE
18. LIKED THIS PARTICULAR HOUSE OR APARTMENT
19. THERE WAS AN APARTMENT OR HOUSE AVAILABLE HERE
20. EASY TO FIND A HOUSE OR APARTMENT
21. OTHER, SPECIFY – LIMITED

GO TO AJ15

AJ10. CAPI CHECK PRELOAD AND CALENDAR:

1. RESPONDENT LIVED AT CURRENT ADDRESS IN W1 AND HAS NOT CHANGED RESIDENCE SINCE THEN (GO TO J15)
2. RESPONDENT LIVED AT CURRENT ADDRESS IN W1 BUT HAD CHANGED ADDRESSES BETWEEN W1 AND W2
3. RESPONDENT CURRENTLY LIVES AT A DIFFERENT ADDRESS THAN IN W1

AJ12. Now let me ask you about your move [back] to this address [in [MONTH AND YEAR MOVED BACK]]. Please look at this other card and tell me why did you choose [to return to] this neighborhood?

PROBE: Any other reason?

CODE ALL THAT APPLY

1. QUIET, CLEAN NEIGHBORHOOD
2. LOW CRIME NEIGHBORHOOD
3. CENTRALLY LOCATED NEIGHBORHOOD / CLOSE TO STORES, ETC.
4. CLOSE TO MOUNTAINS OR BEACH
5. NEIGHBORHOOD HAS FAMILIES WITH KIDS
6. GOOD NEIGHBORHOOD TO RAISE CHILDREN
7. CLOSE TO YOUR WORK OR SCHOOL
8. CLOSE TO SPOUSE / PARTNER'S WORK OR SCHOOL
9. CLOSE TO KIDS' SCHOOL
10. SCHOOLS ARE GOOD
11. CLOSE TO FAMILY OR FRIENDS
12. MOVED HERE TO LIVE WITH PARENTS OR OTHER FAMILY
13. MOVED HERE TO LIVE WITH SPOUSE OR PARTNER
14. GOOD TRANSPORTATION
15. ETHNICITY / NATIONALITY OF NEIGHBORHOOD
16. LIVED HERE BEFORE / ALREADY KNOW THE NEIGHBORHOOD
17. RENTS OR HOUSING PRICES ARE REASONABLE
18. LIKED THIS PARTICULAR HOUSE OR APARTMENT
19. THERE WAS AN APARTMENT OR HOUSE AVAILABLE HERE
20. EASY TO FIND A HOUSE OR APARTMENT
21. OTHER, SPECIFY – LIMITED

AJ15. CAPI CHECK:

1. R IS <26 YEARS OLD
2. R IS ≥ 26 YEARS OLD (GO TO END OF SECTION J)

AJ16. CAPI CHECK:

1. R IS CURRENTLY LIVING WITH AT LEAST ONE PARENT (GO TO END OF SECTION J)
2. R IS NOT LIVING WITH ANY PARENTS

AJ17. Think about the last time you lived with either or both of your parents. What was the month and year you moved out of your parents' home the last time?

1. _____ Month _____ Year (GO TO END OF SECTION J)
- 1. Don't know (CONTINUE)

AJ18. How old were you when you moved out of your parents' home?

_____ Years old

SECTION K. EHC EMPLOYMENT FOLLOWUP

AK1. CAPI: CHECK CALENDAR INFORMATION FOR WHETHER R IS CURRENTLY WORKING?

1. YES (GO TO AK8)
5. NO

AK2. CHECK: WAS ANY SPELL OF EMPLOYMENT RECORDED IN THE CALENDAR?

1. YES (GO TO AK6)
5. NO

FOR RESPONDENTS WHO DID NOT WORK AT ANY TIME DURING THE EHC

AK3. When was the last time you were working for pay, full time or part time?

1. ___ MONTH ___ YEAR
5. NEVER WORKED FOR PAY (GO TO AK16)

AK3a. CAPI CHECK PRELOAD:

1. RESPONDENT COMPLETED SECTION K OF ADULT QX IN W1 (GO TO AK16)
2. OTHER

AK4. Think about the last time you worked for pay. What kind of work were you doing? (For example: electrical engineer, stock clerk, typist, farmer)

_____ (VERBATIM – LIMITED)

AK5. What were your most important activities or duties at this job? (For example: typing, keeping account books, filing, selling cars, operating printing press, finishing concrete)

_____ (VERBATIM – LIMITED)

**RESPONDENTS NOT CURRENTLY WORKING BUT WHO REPORTED WORKING SOMETIME IN THE EHC
COME HERE**

AK6. [Think about the last time you worked for pay.] What kind of business or industry was this? (For example: TV and radio manufacturing, retail shoe store, State Labor Dept.)

_____ (VERBATIM – LIMITED)

AK7. Were you....

1. An employee of a private company, business, or individual for wages, salary or commission?
2. A FEDERAL government employee?
3. A STATE government employee?
4. A COUNTY OR LOCAL government employee?
5. Self-employed in own business, profession, practice or farm?
6. Working without pay in a family business or farm?

IF AK7=5, CONTINUE. ELSE GO TO SECTION L

AK7a. Was your own business incorporated or not incorporated?

1. Incorporated (GO TO SECTION L)
2. Not incorporated (GO TO SECTION L)

SECTION FOR THOSE CURRENTLY EMPLOYED

AK8INTRO. I have a few more questions about your current job.

AK8. CAPI CHECK CALENDAR:

1. R CURRENTLY HAS 1 JOB (GO TO AK10)
2. R CURRENTLY HAS MORE THAN 1 JOB

AK9. You told me that you have two or more jobs currently. Which one would you say is your main job? What is the name of the employer at that job?

LIST ALL CURRENT EMPLOYER NAMES FROM CALENDAR

AK10. What kind of business or industry is this? (For example: TV and radio manufacturing, retail shoe store, State Labor Dept.)

_____ (VERBATIM – LIMITED)

AK11. Are you....

1. An employee of a private company, business, or individual for wages, salary or commission?
2. A FEDERAL government employee?
3. A STATE government employee?
4. A COUNTY OR LOCAL government employee?
5. Self-employed in own business, profession, practice or farm?
6. Working without pay in a family business or farm?

IF AK11=5, CONTINUE. ELSE GO TO AK12

AK11a. Is your own business incorporated or not incorporated?

1. Incorporated
2. Not incorporated

AK12. For this job, do you usually work at one location, two different locations, or three or more different locations?

1. ONE LOCATION
2. TWO LOCATIONS
3. THREE OR MORE LOCATIONS

AK13. Is your employer's address that you gave me before the same place where you work most of the time?

1. YES (GO TO AK15)
5. NO

AK14. What is the address of the place you actually work most of the time? What street is it on? What is closest intersection or cross-street? What city and state?

1. RESPONDENT GIVES EXACT STREET ADDRESS
_____ (STREET) _____ (CITY) _____ (STATE AND COUNTRY)
2. RESPONDENT GIVES EXACT STREET
_____ (STREET)
3. THERE IS NO MAIN PLACE R WORKS
4. RESPONDENT GIVES CITY BUT NO ADDRESS
_____ (CITY)

AK15. How do you usually get to work at this job: by driving your own car, by riding in someone else's car, by bus, by Metrorail, subway or train, or some other way?

INTERVIEWER: DO NOT READ ANSWERS. CODE R'S RESPONSE. CODE ONE.

1. OWN CAR
2. SOMEONE ELSE DRIVES
3. CARPOOL / VANPOOL
4. BUS
5. METRORAIL / SUBWAY / TRAIN

6. BICYCLE
7. WALK
8. WORKS AT HOME
9. OTHER, SPECIFY – LIMITED
10. DRIVES COMPANY VEHICLE

AK16. CAPI CHECK C23, C24, AND C25

1. IF C24=ONLY ONE GROUP, THEN ETH_GRP=C23
2. IF C24=2 OR MORE GROUPS, THEN ETH_GRP=C24

RECODE:

```
IF ETH_GRP=1 THEN ETH_GRP2=1
IF ETH_GRP=2 THEN ETH_GRP2=2
IF ETH_GRP=3 THEN ETH_GRP2=3
IF ETH_GRP=4, 5, 6, 7, 8, 9, 10 THEN ETH_GRP2=4
IF ETH_GRP=11 OR 12 THEN ETH_GRP2=5
IF ETH_GRP=13 OR 14 THEN ETH_GRP2=6
IF ETH_GRP=16 THEN ETH_GRP2=7
```

```
IF ETH_GRP2=1 THEN ETH="black"
IF ETH_GRP2=2 THEN ETH="white"
IF ETH_GRP2=3 THEN ETH="Latino"
IF ETH_GRP2=4 THEN ETH="Asian"
IF ETH_GRP2=5 THEN ETH="Native Americans"
IF ETH_GRP2=6 THEN ETH="Pacific Islanders"
IF ETH_GRP2=7 THEN ETH="Middle Easterners"
IF AC24=ONLY ONE GROUP AND ETH_GRP=15 THEN ETH="FROM YOUR ETHNIC GROUP"
IF AC24=2 OR MORE GROUPS AND ETH_GRP=15 THEN ETH="YOUR ETHNIC GROUP"}
```

IF AK1=5 GO TO AK18, ELSE CONTINUE

AK17. Now I want to ask you about the people you work and socialize with. Are the people you work with all [ETH], more [ETH] than non-[ETH], about half and half, more non-[ETH] than [ETH], or all non-[ETH]?

1. All [ETH]
2. More [ETH] than non-[ETH]
3. About half [ETH] and half non-[ETH]
4. More non-[ETH] than [ETH]
5. All non-[ETH]
7. Do not work, do not work with anyone else

AK18. [Now I want to ask you about the people you socialize with.] Are your close friends all [ETH], more [ETH] than non-[ETH], about half and half, more non-[ETH] than [ETH], or all non-[ETH]?

1. All [ETH]
2. More [ETH] than not-[ETH]
3. About half [ETH] and half not-[ETH]
4. More not-[ETH] than [ETH]
5. All not-[ETH]

SECTION L. EHC WELFARE FOLLOW-UP

AL1. CHECK CALENDAR INFORMATION:

1. R HAS NOT RECEIVED TANF / CALWORKS DURING THE EHC AND HAS CHILDREN AGE 0–17
2. R HAS NOT RECEIVED TANF / CALWORKS DURING THE EHC AND HAS NO CHILDREN AGE 0–17
(GO TO END OF SECTION)

3. R IS CURRENTLY RECEIVING TANF / CALWORKS (GO TO L9)
4. R IS NOT CURRENTLY RECEIVING TANF / CALWORKS, BUT HAS RECEIVED SOMETIME DURING EHC PERIOD (GO TO AL11)

SECTION FOR THOSE WHO DID NOT GET CaWORKS IN LAST SIX YEARS BUT DO HAVE KIDS

AL2. Have you ever received AFDC, CalWORKS, TANF, or cash assistance for yourself and for your children?

1. YES
5. NO (GO TO SECTION AYA)

AL3. When was the last time you received AFDC, CalWORKS, TANF, or cash assistance?

___ MONTH ___ YEAR (GO TO SECTION AYA)

SECTION FOR THOSE CURRENTLY RECEIVING CaWORKS

AL9INTRO. Now I have a few questions about public assistance.

AL9. Is there a time limit on how long you and your children can stay on welfare?

1. YES
5. NO (GO TO AL13)

IF AL9=D OR R, CONTINUE

AL10. How much time do you have left before you reach this time limit?

___ MONTHS ___ YEARS (GO TO AL13)

SECTION FOR THOSE WHO WERE ON WELFARE DURING PAST 2 YEARS BUT NOT CURRENTLY

AL11INTRO. Now I have a few questions about public assistance.

AL11. If you went back on welfare, would there be a limit to the time you or your children could be on welfare?

1. YES
5. NO (GO TO YA)

IF AL11=D OR R, CONTINUE

AL12. How much time would you have left before you reach this time limit?

___ MONTHS ___ YEARS

SECTION YA. SECTION FOR YOUNG ADULTS

NEW SECTION IN L.A.FANS-2. THIS SECTION IS SELF-ADMINISTERED

AYA1. CAPI CHECK:

1. R IS <26 YEARS OLD
2. R IS ≥ 26 YEARS OLD (GO TO SECTION AM)

AYA2INTRO. INTERVIEWER: PRESS '1' TO CONTINUE THEN HAND COMPUTER OVER TO RESPONDENT TO BEGIN THE SELF-ADMINISTERED SECTION

AYA2. Now I have some questions about experiences you may have had. Have you ever been arrested by the police?

- 1. YES
- 5. NO (GO TO AYA6)

AYA3. In total, how many times have you been arrested?

_____ Times

AYA4. Did any of the following ever happen to you...

AYA4.a. You were found delinquent of any charges?

- 1. YES
- 5. NO (GO TO AYA6)

AYA4.b. You plead guilty to any charges?

- 1. YES
- 5. NO (GO TO AYA6)

AYA4.c. You were convicted of any charges?

- 1. YES
- 5. NO (GO TO AYA6)

IF AYA4=ALL ARE NO, GO TO AYA11

IF AYA4=ANY YES, CONTINUE

IF AYA4=DK OR REF, CONTINUE

AYA5. Did you ever spend time in any of the following...

AYA5.1. Jail?

- 1. YES
- 5. NO

AYA5.2. Juvenile hall or other juvenile corrections institution?

- 1. YES
- 5. NO

AYA5.3. Reform school or training school?

- 1. YES
- 5. NO

AYA5.4. Prison or adult corrections institution?

- 1. YES
- 5. NO

AYA5.5. Performing community service because of delinquency?

- 1. YES
- 5. NO

AYA5.6. Other corrections program or institution?

1. YES
5. NO

AYA6. Have you ever belonged to a gang?

1. YES
5. NO

AYA7. Are any of your family or friends members of a gang?

1. YES
5. NO

AYA8a. Have you ever used marijuana, that is, grass or pot?

1. YES
5. NO

AYA8b. How old were you when you first used marijuana?

_____ Years old

AYA8B_check2. You may have made a typing mistake since you just entered that you were [AYA8B] years old the first time you used marijuana but you are only [AGEYR] years old. Which is correct?"

1. You were [AYA8B] years old first time you used marijuana (you will be asked to correct the age you gave earlier)
2. You are currently [AGEYR] years old (you will be asked to correct the age when you first used marijuana).

AYA8B_up2. How old are you?

AYA8B_up3. How old were you when you first used marijuana?

AYA8c. In the past 30 days, on how many days have you used marijuana?

_____ Days during the past 30 days

ENTER 0 IF YOU HAVE NOT USED MARIJUANA AT ALL DURING THE LAST 30 DAYS

AYA9. In the past 30 days, how often have you used drugs other than marijuana?

0. Not at all
1. Once or twice
2. 3–5 times
3. 6–10 times
4. 11–19 times
5. 20+ times

AYA11. In the past 30 days, have you had at least one drink of any alcoholic beverage such as beer, wine, wine coolers, or liquor?

1. YES
5. NO (GO TO AYA14a)

IF AYA11=D, GO TO AYA12. IF YA11=R, GO TO AYA14a.

AYA12. In the past 30 days, how many days did you drink any alcoholic beverage?

___ DAYS IN THE LAST 30 DAYS (RANGE 1–30)

IF AYA12=0, ASK **AYA12VER**: You told me in the last question that you did have at least one drink of alcohol in the last 30 days, but here you say you have not. Which one is correct?

1. Had at least 1 drink of alcohol (you'll be taken back to AYA12)
5. Have not had a drink in last 30 days (you'll be taken back to AYA11)

IF AYA12=D, GO TO AYA13. IF AYA12=R, GO TO AYA14a.

AYA13. On the days you drank alcohol, about how many drinks did you have on average? A drink is 1 can or bottle of beer, 1 glass of wine, 1 can or bottle of wine cooler, 1 cocktail, or 1 shot of liquor.

___ DRINKS (RANGE 1–30)
FOR A RESPONSE OTHER THAN DRINKS PER DAY, ENTER 99 AND RECORD RESPONSE.

IF AYA13=D, GO TO AYA14. IF AYA13=R, GO TO AYA14a.

AYA13_A_check. You said that you usually had [AYA13_A] drinks on the days you drank alcohol, is this correct?

1. YES
5. NO

DATA USER NOTE: It appears that this prompt (AYA13_A_check) was not included in the Spanish version of the CAPI code. Either the prompt was not used at all for those respondents answering in Spanish or the English version of the question was used.

AYA13_A_up. On the days you drank alcohol, about how many drinks did you usually have? By a drink we mean a can or bottle of beer, a glass of wine, a mixed drink, or a shot of hard liquor. Do not include sips that you might have had from someone else's drink.

ENTER THE NUMBER OF DRINKS PER DAY. TO GIVE A RESPONSE OTHER THAN NUMBER PER DAY, ENTER 99 AND RECORD YOUR ANSWER.

DATA USER NOTE: It appears that the data entry instructions shown above in CAPs were not included in the Spanish version of the CAPI code. The English version of the instructions was used instead.

_____ DRINKS PER DAY

AYA14. In the past 30 days, how many times did you have 5 or more drinks on one occasion?

___ NUMBERS OF TIMES (RANGE 0–60)

AYA14a. In the past 12 months, how many times did you have 5 or more drinks on one occasion?

___ NUMBERS OF TIMES (RANGE 0–365)

AYA14POST. Thank you for your time. You have reached the end of this portion of the interview. Please turn the computer back to the interviewer, and he or she will tell you what you'll do next.

SECTION M. HEALTH STATUS

AM1. Now I have a few questions about your health. Would you say your health in general is excellent, very good, good, fair or poor?

1. EXCELLENT
2. VERY GOOD
3. GOOD

4. FAIR
5. POOR

AM2. Think about your health while you were growing up, from birth to age 14. Would you say that your health during that time was excellent, very good, good, fair, or poor?

1. EXCELLENT
2. VERY GOOD
3. GOOD
4. FAIR
5. POOR

AM2b. Think about your health in [IF R ANSWERED ADULT QX IN W1, FILL "[W1 INTERVIEW MONTH AND YEAR]" ELSE, FILL "[MONTH AND YEAR SEVEN YEARS AGO]"]. At that time, how was your health in general. Would you say that your health at that time was excellent, very good, good, fair, or poor?

1. EXCELLENT
2. VERY GOOD
3. GOOD
4. FAIR
5. POOR

AM4. Has a doctor ever told you that you have...

AM4.a. High blood pressure or hypertension?

1. YES
5. NO

AM4.b. Diabetes or high blood sugar?

1. YES
5. NO

AM4.c. Cancer or a malignant tumor, not including skin cancer?

1. YES
5. NO

AM4.d. Chronic lung disease such as chronic bronchitis or emphysema?

1. YES
5. NO

AM4.e. A heart attack?

1. YES
5. NO

AM4.f. Coronary heart disease, angina, congestive heart failure or other heart problems?

1. YES
5. NO

AM4.g. Any emotional, nervous, or psychiatric problems?

1. YES
5. NO

AM4.h. Arthritis or rheumatism?

1. YES
5. NO

AM4.i. Asthma?

1. YES
5. NO

AM4.j. Permanent loss of memory or loss of mental ability?

1. YES
5. NO

AM4.k. A learning disorder?

1. YES
5. NO

AM4.l. Excess weight? That you need to lose weight?

1. YES
5. NO

AM4.m. Major depression?

1. YES
5. NO

AM4.n. Another major health problem that I have not mentioned?

Specify _____

AM4b1. CAPI CHECK: IS DIABETES CHECKED YES IN AM4?

1. YES
5. NO (GO TO AM4AM1)

AM4b2. How do you currently manage or control your diabetes?

MARK ALL THAT APPLY

1. Diet
2. Exercise
3. Pills
4. Injected Insulin
6. Other SPECIFY: _____
9. Don't do anything

IF AM4-B=4 OR 5, CONTINUE. ELSE GO TO AM4-e

AM4b3. How many times per day do you usually take your [insulin / pills]?

1. Times per Day _____ (GO TO AM4-e)
2. Between ___ and ___ times per day (GO TO AM4-e)
6. Does not take insulin or pills daily

AM4b4. How many times per week do you usually take your [insulin / pills]?

1. Exact number of times per week _____
2. Between ____ and ____ times per week.
6. Does not take insulin every week

AM4b5. When was your diabetes first diagnosed? What month and year?

1. _____ (Month) _____ (Years) (GO TO AM4b5_1)

AM4b6. How old were you when it was first diagnosed?

_____ Years old

AM4AM1. CAPI CHECK: IS MAJOR DEPRESSION CHECKED YES IN AM4?

1. YES
5. NO (GO TO AM4a1)

AM4AM2. Do you currently take antidepressant medication?

1. YES
5. NO

AM4AM3. When was your depression first diagnosed? What month and year?

1. _____ (Month) _____ (Years) (GO TO AM4a1)

AM4AM4. How old were you when it was first diagnosed?

_____ Years old

AM4a1. CAPI CHECK: IS HIGH BLOOD PRESSURE OR HYPERTENSION (A) CHECKED IN AM4?

1. YES
2. NO (GO TO AM4h1)

AM4a2. How do you currently manage or control your high blood pressure or hypertension?

MARK ALL THAT APPLY

1. Diet
2. Exercise
3. Medication
4. Other SPECIFY: _____
9. Don't do anything

AM4a3. When was your high blood pressure or hypertension first diagnosed? What month and year?

1. _____ Month _____ Years (GO TO AM4h1)

AM4a4. How old were you when it was first diagnosed?

_____ Years old

AM4h1. CAPI CHECK: IS ARTHRITIS CHECKED IN AM4?

1. YES
5. NO (GO TO AM4i1)

AM4h2. How do you currently manage or control your arthritis?

MARK ALL THAT APPLY

1. Diet
2. Exercise
3. Regular medication
4. Occasional medication when it gets worse
5. Acupuncture, massage, chiropractic
6. Other SPECIFY: _____
9. Don't do anything

AM4h3. When was your arthritis first diagnosed? What month and year?

1. _____ Month _____ Years (GO TO AM4i1)

AM4h4. How old were you when it was first diagnosed?

_____ Years old

AM4i1. CAPI CHECK: IS ASTHMA CHECKED IN AM4?

1. YES
2. NO (GO TO AM5)

AM4i2. How do you currently manage or control your asthma?

MARK ALL THAT APPLY

1. Diet
2. Exercise
3. Regular medication
4. Occasional medication when R has a problem
5. Other SPECIFY: _____
9. Don't do anything

AM4i3. When was your asthma first diagnosed? What month and year?

1. _____ Month _____ Year (GO TO AM5)

AM4i4. How old were you when it was first diagnosed?

_____ Years old

AM5. Do you smoke cigarettes?

1. YES
5. NO (GO TO AM7A)

AM6_1. On the average, how many cigarettes per day do you usually smoke?

___ __ NUMBER PER DAY

AM6_2. Is that the number of packs or the number of cigarettes?

CODE UNIT

1. PACKS
2. CIGARETTES

AM6a. CAPI CHECK:

1. RESPONDENT COMPLETED SECTION AM OF W1 ADULT QX AND REPORTED THAT HE / SHE HAD EVER SMOKED (GO TO AM11)
2. OTHERWISE (CONTINUE)

AM7. How old were you when you first smoked cigarettes regularly?

___ __ YEARS OLD (GO TO AM11)

AM7A. CAPI CHECK:

1. RESPONDENT COMPLETED SECTION M OF W1 ADULT QX AND REPORTED THAT HE / SHE HAD EVER SMOKED (GO TO AM10A)
2. OTHERWISE (CONTINUE)

AM8. Did you ever smoke cigarettes?

1. YES
5. NO (GO TO AM11)

AM9_1. On the average, how many cigarettes per day did you usually smoke?

___ __ __ NUMBER PER DAY

AM9_2. Is that the number of packs or the number of cigarettes?

CODE UNIT

1. PACKS
2. CIGARETTES

AM10. How old were you when you first smoked cigarettes regularly?

___ __ YEARS OLD

AM10a. CAPI CHECK:

1. (AM5=5 AND AM8=1) OR (AM5=5 AND AM7A=1) CONTINUE
5. OTHERWISE (GO TO AM11)

AM10B. How old were you when you quit smoking?

___ __ Years old

AM10C. CHECK RESPONDENT'S AGE:

1. R IS <26 YEARS OLD (GO TO AM15)
2. R IS ≥ 26 YEARS OLD

AM11. In the past 30 days, have you had at least one drink of any alcoholic beverage such as beer, wine, wine coolers, or liquor?

1. YES
5. NO (GO TO AM14a)

IF AM11=D, GO TO AM12. IF AM11=R, GO TO AM14a

AM12. In the past 30 days, how many days did you drink any alcoholic beverage?

___ __ Days on the last 30 days (RANGE 1–30)

IF AM12=0, ASK **AM12VER**: You told me in the last question that you did have at least one drink of alcohol in the last 30 days, but here you say you have not. Which one is correct?

1. Had at least 1 drink of alcohol (you'll be taken back to AM12)
5. Have not had a drink in last 30 days (you'll be taken back to AM11)

IF AM12=D, GO TO AM13. IF AM12=R, GO TO AM14a

AM13_A. On the days you drank alcohol, about how many drinks did you have on average? A drink is 1 can or bottle of beer, 1 glass of wine, 1 can or bottle of wine cooler, 1 cocktail, or 1 shot of liquor.

___ DRINKS (RANGE 1–30) OR ___ TO ___ DRINKS (RANGE 1–30)

IF AM13=D, GO TO AM14. IF AM13=R, GO TO AM14a

AM14. In the past 30 days, how many times did you have 5 or more drinks on one occasion?

___ NUMBERS OF TIMES (RANGE 0–60)

AM14a. In the past 12 months, how many times did you have 5 or more drinks on one occasion?

___ NUMBERS OF TIMES (RANGE 0–365)

AM14b. Have you ever used marijuana, that is, grass or pot?

1. YES
5. NO (GO TO AM15)

AM14c. How old were you when you first used marijuana?

_____ Years old

AM14d. In the past 30 days, on how many days have you used marijuana?

_____ Days during the past 30 days
99. Not at all during the last 30 days

AM15_1. Now let me ask about another topic. About how much do you weigh?

___ AMOUNT

AM15_2. Is that your weight in pounds or kilograms?

CODE UNIT

1. POUNDS
2. KILOS

AM16_A. How tall are you?

___ FEET ___ INCHES OR ___ CENTIMETERS

AM17INTRO. The next questions are about health care.

AM17. Is there a place that you usually go to when you are sick or need advice about your health?

INTERVIEWER: IF YES, ASK "Do you have one place, or more than one place?"

1. YES, ONE PLACE
2. YES, MORE THAN ONE PLACE
3. NO (GO TO AM22)

AM18. What kind of place [is it / do you go to most often]? Is it a...

1. Clinic, health center or HMO,
2. Doctor's office,
3. Hospital emergency room,
4. Hospital outpatient department, or
5. Some other place? SPECIFY: _____
- 2. REFUSED (GO TO AM21)

AM19. What is the name of this place?

_____ (VERBATIM – LIMITED)

AM20_street. Where is this place located? What street is it on? What is the nearest intersection or cross-street? What city is it in?

ON _____ (STREET) AT CORNER OF _____ (CROSS-STREET) IN _____ (CITY) _____ (STATE)

AM21. Is that the same place you usually go when you need routine or preventive care, such as physical examination or check up?

1. YES (GO TO AM25)
2. NO

AM22. What kind of place do you go to when you need routine preventive care, such as a physical examination or check-up? Is it a...

1. Clinic, health center or HMO
2. Doctor's office
3. Hospital emergency room
4. Hospital outpatient department
5. Some other place? SPECIFY: _____
6. DOESN'T GET PREVENTIVE CARE ANYWHERE (GO TO AM25)
- 2. REFUSED (GO TO AM25)

AM23. What is the name of this place?

_____ (VERBATIM – LIMITED)

AM23A. Is this place at the same address you just gave me? That is [AM20 ADDRESS]?

1. YES (GO TO AM28_1)
5. NO

AM24_street. Where is this place located? What street is it on? What is the nearest intersection or cross-street? What city is it in?

ON _____ (STREET) AT CORNER OF _____ (CROSS-STREET) IN _____ (CITY) _____ (STATE)

AM28_1. When was the last time you saw a doctor, nurse or other health care professional for illness or injury?

1. _____ MONTH _____ YEAR (GO TO AM29)
5. NEVER (GO TO AM32)
- 1. DON'T KNOW (CONTINUE)

DATA USER NOTE: This question and AM29B were supposed to be asked of all respondents. However, respondents answering “never” to this question were incorrectly skipped out of AM29B. The skip patterns marked above reflect the actual CAPI code.

AM28A. How long ago did you see a doctor, nurse or other health care professional for illness or injury?

INTERVIEWER PROBE AS NECESSARY: How many months or years ago?

_____ MONTHS AGO OR _____ YEARS AGO

AM29_1. For what illness or injury did you see the doctor, nurse, or other health care professional?

RECORD VERBATIM _____

AM29a_1. When was the last time you saw a doctor, nurse or other health care professional for a routine check-up or physical exam?

- 1. _____ MONTH _____ YEAR (GO TO AM30)
- 5. NEVER (GO TO AM32)
- 1. DON'T KNOW (CONTINUE)

AM29B. How long ago did you see a doctor, nurse or other health care professional for a routine check-up or physical exam ?

_____ MONTHS AGO OR _____ YEARS AGO

DATA USER NOTE: This question and AM28_1 were supposed to be asked of all respondents. However, respondents answering “never” to AM28_1 were incorrectly skipped out of AM29B. So this question was never asked of respondents who reported never going to the doctor for illness or injury. Keep in mind that some of these respondents may have seen a doctor for a check-up.

AM32. During the past 12 months, have you ever gone to see any of the following types of people about a health problem or for a check-up...

AM32.a. Dentist?

- 1. YES
- 5. NO

AM32.b. Optometrist or Ophthalmologist or Eye Doctor?

- 1. YES
- 5. NO

AM32.c. Psychiatrist, psychologist, or a counselor?

- 1. YES
- 5. NO

AM32.d. Pharmacist?

- 1. YES
- 5. NO

CIDI DEPRESSION INVENTORY

AMGA1. During the past 12 months, was there ever a time when you felt sad, blue, or depressed for two weeks or more in a row?

1. YES
5. NO IF AMGA1=5 (GO TO AMGA10)
6. R WAS ON MEDICATION / ANTI-DEPRESSANTS (GO TO AMGA10)

AMGA2. For the next few questions, please think of the two-week period during the past 12 months when these feelings were the worst. During that time, did the feelings of being sad, blue, or depressed usually last...

1. All day long,
2. Most of the day,
3. About half the day, or
4. Less than half the day? (GO TO AMGA10)

AMGA3. During these two weeks, did you feel this way...

1. Every day,
2. Almost every day,
3. Or less often? (GO TO AMGA10)

AMGA4. During these two weeks, did you...

AMGA4.a. Lose interest in most things that usually give you pleasure?

1. YES
5. NO

AMGA4.b. Feel more tired or low on energy than is usual for you?

1. YES
5. NO

AMGA4.c. Gain or lose 10 pounds or 4.5 kilos without trying?

1. YES
5. NO

AMGA4.d. Have a lot more trouble concentrating than usual?

1. YES
5. NO

AMGA4.e. Feel down on yourself or think you were worthless or no good?

1. YES
5. NO

AMGA4.f. Think a lot about death, either your own or someone else's, or about death in general?

1. YES
5. NO

AMGA5. During these two weeks, did you have more trouble falling asleep than you usually do?

1. YES
5. NO (GO TO AMGA 7)

AMGA6. Did this happen every night, nearly every night, or less often during those two weeks?

1. EVERY NIGHT
2. NEARLY EVERY NIGHT
3. LESS OFTEN

AMGA7. IF AMGA4A=yes (1) OR AMGA4B=yes (1) OR AMGA4C=yes (1) OR AMGA4D=yes (1) OR AMGA4E=yes (1) OR AMGA4F=yes (1) OR AMGA5=yes (1), set AMGA7=1, ELSE, set AMGA7=2

AMGA8. About how many weeks altogether did you feel this way during the past 12 months?

_____ # OF WEEKS CONTINUE TO M-A9
 99. VOLUNTEERS: FELT THIS WAY THE ENTIRE YEAR (GO TO AM33)

AMGA9_MO. Think about the most recent time when you had at least two weeks in a row when you felt this way.

INTERVIEWER: ENTER THE MONTH OF THE MOST RECENT TIME THE RESPONDENT FELT THIS WAY ON THIS SCREEN AND THE YEAR ON THE NEXT SCREEN

In what month and year was this?

_____ MONTH 19__ YEAR

AMGA10. During the past 12 months, was there ever a time lasting two weeks or more when you lost interest in most things, like hobbies, work, or activities that usually give you pleasure?

1. YES
5. NO IF AMGA10=5, GO TO AM33
6. R WAS ON MEDICATION / ANTI-DEPRESSANTS IF AMGA10=6, GO TO AA32
6. R WAS ON MEDICATION / ANTI-DEPRESSANTS IF AMGA10=6, GO TO AM32

AMGA11. For the next few questions, please think of the two-week period during the past 12 months when you had the most complete loss of interest in things. During that time, did this loss of interest usually last...

1. All day long,
2. Most of the day,
3. About half the day, or
4. Less than half the day? (GO TO AM32)

AMGA12. During these two weeks, did you feel this way...

1. Every day,
2. Almost every day, or
3. Less often? (GO TO AM33)

AMGA13. During these two weeks, did you...

AMGA13.a. Feel more tired or low on energy than is usual for you?

1. YES
5. NO

AMGA13.b. Gain or lose 10 pounds or 4.5 kilos without trying?

1. YES
5. NO

AMGA13.c. Have a lot more trouble concentrating than usual?

1. YES
5. NO

AMGA13.d. Feel down on yourself or think you were worthless or no good?

1. YES
5. NO

AMGA13.e. Think a lot about death, either your own or someone else's, or about death in general?

1. YES
5. NO

AMGA14. During these two weeks, did you have more trouble falling asleep than you usually do?

1. YES
5. NO (GO TO AMGA16)

AMGA15. Did this happen every night, nearly every night, or less often during those two weeks...

1. Every night
2. Nearly every night
3. Less often

AMGA16. CAPI CHECK:

IF ALL M-A13a-e=5 AND M-A14=5, GO TO AM32. OTHERWISE GO TO A17
IF ANY M-A13a-e=1 or M-A14=1, GO TO M-A17. OTHERWISE GO TO AM33

AMGA17. About how many weeks altogether did you feel this way during the past 12 months?

_____ # OF WEEKS (GO TO AM33)
99. VOLUNTEERS: FELT THIS WAY THE ENTIRE YEAR (GO TO AM33)

AMGA18_MO. Think about the most recent time when you had at least two weeks in a row when you felt this way. In what month and year was this?

_____ MONTH _____ YEAR

AM34. Now let me ask you about teenagers. Would you disapprove of teenagers doing each of the following?

INTERVIEWER: IF DISAPPROVE, ASK: Would you disapprove or strongly disapprove?

AM34.1a. Smoking cigarettes occasionally?

1. Don't Disapprove
2. Disapprove
3. Strongly Disapprove

AM34.1b. Smoking one or more packs of cigarettes per day?

1. Don't Disapprove
2. Disapprove
3. Strongly Disapprove

AM34.2. Trying marijuana once or twice?

1. Don't Disapprove
2. Disapprove
3. Strongly Disapprove

AM34.3. Smoking marijuana occasionally?

1. Don't Disapprove
2. Disapprove
3. Strongly Disapprove

AM34.4. Smoking marijuana regularly?

1. Don't Disapprove
2. Disapprove
3. Strongly Disapprove

AM34.5. Having 1–2 drinks of an alcoholic beverage occasionally, that is beer, wine or liquor?

1. Don't Disapprove
2. Disapprove
3. Strongly Disapprove

AM34.6. Having 1–2 drinks nearly every day?

1. Don't Disapprove
2. Disapprove
3. Strongly Disapprove

AM34.7a. Having five or more drinks once or twice each weekend?

1. Don't Disapprove
2. Disapprove
3. Strongly Disapprove

AM34.7b. Having 4–5 drinks nearly every day?

1. Don't Disapprove
2. Disapprove
3. Strongly Disapprove

AM35. Next, I have a few questions about your everyday life. Yesterday, how many servings of fruit did you eat? A serving is a small cup of fruit, a handful of grapes, or one piece of fruit, like an apple, orange or banana.

_____ Servings

AM36. Yesterday, how many servings of vegetables, like corn, green beans, green salad or other vegetables did you have?

_____ Servings

AM37. Yesterday, how many cans or glasses of soda (such as Coke or Sprite), sports drinks like Gatorade, or other sweetened drinks (such as Sunny Delight or fruit punch) did you drink? Do not include diet or sugar-free drinks.

_____ Servings

AM38. Yesterday, how many times did you eat fast food, such as McDonald's, Burger King, Taco Bell, or Jack in the Box? Make sure to include fast food meals you ate at fast-food restaurants, take out, drive thru, at home or at school or work.

_____ Times

AM39. Yesterday, did you eat pretty much what you normally eat or was it an unusual day in terms of eating?

1. Normal day
2. Unusual day

AM40. Now think about the past seven days, that is from [DAY OF THE WEEK SEVEN DAYS AGO] last week up to and including today. First let me ask you about vigorous leisure-time activities like exercise, sports, and physically active hobbies that cause heavy sweating or large increases in breathing or heart rate. How many times during the past seven days did you do these vigorous leisure-time activities for at least 20 minutes?

1. _____ Times in the last seven days
77. Physically unable to do this type of exercise

AM41. Now let me ask you about light or moderate leisure-time activities like exercise or sports, gardening, and casual walks that cause only light sweating or a slight to moderate increase in breathing or heart rate. How many times during the past seven days did you do these light or moderate leisure-time activities for at least 20 minutes?

- _____ Times in the last seven days
77. Physically unable to do this type of exercise

AM42. CAPI CHECK:

1. RESPONDENT IS WORKING
5. RESPONDENT IS NOT WORKING (GO TO AM45)

AM43. My next question is about vigorous activities that you do at work that cause heavy sweating or large increases in breathing or heart rate. How many times during the past seven days did you do these vigorous activities at your job for at least 20 minutes?

- _____ Times in the last seven days
77. Physically unable to do this type of work

AM44. How about light or moderate activities at work like that cause only light sweating or a slight to moderate increase in breathing or heart rate. How many times during the past seven days did you do these light or moderate activities at work for at least 20 minutes?

- _____ Times in the last seven days
77. Physically unable to do this type of work

AM45. Finally, let me ask about vigorous housework that cause heavy sweating or large increases in breathing or heart rate. How many times during the past seven days did you do this vigorous housework for at least 20 minutes?

- _____ Times in the last seven days
77. Physically unable to do this type of work

AM46. How about light or moderate housework that causes light sweating or a slight to moderate increase in breathing or heart rate. How many times during the past seven days did you do this type of housework for at least 20 minutes?

- _____ Times in the last seven days
77. Physically unable to do this type of housework

SELF-REPORTED HEALTH STATUS AND VIGNETTES. ASK ONLY OF RSAS AND PANEL RSCS & SIBS

AMBTIAM2. CAPI CHECK:

1. THIS IS THE RSA OR RSA / PCG OR THIS IS THE PANEL RSC OR SIB
2. OTHERWISE (GO TO END OF SECTION)

AM48. Next, I want to ask you to rate your own health in several areas. During the past 4 weeks, how much did health problems limit your physical activities (such as walking or climbing stairs)? Would you say not at all, very little, somewhat, a lot, or severely?

1. NOT AT ALL
2. VERY LITTLE
3. SOMEWHAT
4. A LOT
5. SEVERELY

AM49. During the past 4 weeks, how much difficulty did you have doing work, both at home and on the job, because of health or emotional problems? Would you say none at all, very little, some, a lot, or severe?

1. NOT AT ALL
2. VERY LITTLE
3. SOME
4. A LOT
5. SEVERE

AM50. During the past 4 weeks, how much did health or emotional problems limit your social activities with family or friends? Would you say not at all, very little, somewhat, a lot, or severely?

1. NOT AT ALL
2. VERY LITTLE
3. SOMEWHAT
4. A LOT
5. SEVERELY

AM51. How much physical pain did you have during the past 4 weeks? Would you say none, very mild, mild, moderate, or severe?

1. NONE
2. VERY MILD
3. MILD
4. MODERATE
5. SEVERE

AM52. During the past 4 weeks, how much energy did you have? Would you say none, a little, some, a lot, or very much?

1. NONE
2. A LITTLE
3. SOME
4. A LOT
5. VERY MUCH

AM53. During the past 4 weeks, how much have you been bothered by emotional problems (such as feeling anxious, depressed or irritable)? Would you say not at all, very mildly, mildly, moderately, or severely?

1. NOT AT ALL
2. VERY MILDLY
3. MILDLY
4. MODERATELY
5. SEVERELY

AM54A_INTRO. Next, let me read you some descriptions of people with varying levels of difficulties in different aspects of health. Following each description, I will ask you to rate the person's health.

AM54A. [NAME1] goes walking every day for half an hour, about one mile. She / He does not do any strenuous sports because she / he feels out of breath when she / he walks very quickly or runs. How much did health problems limit [NAME1]'s physical activities? Would you say not at all, very little, somewhat, a lot, or severely?

1. NOT AT ALL
2. VERY LITTLE
3. SOMEWHAT
4. A LOT
5. SEVERELY

AM55A. [NAME4] suffers from allergies every month. Because of the symptoms, she / he is unable to go to work for one or two days but has no problem catching up with her / his tasks. How much difficulty did [NAME4] have doing work because of her / his health? Would you say none at all, very little, some, a lot, or severe?

1. NOT AT ALL
2. VERY LITTLE
3. SOME
4. A LOT
5. SEVERE

AM56A. [NAME7] has a headache once a month that gets better if she / he takes a pill. When she / he has a headache, she / he can continue to do her / his normal activities. How much physical pain did [NAME7] have? Would you say none, very mild, mild, moderate, or severe?

1. NONE
2. VERY MILD
3. MILD
4. MODERATE
5. SEVERE

AM56B. [NAME8] has pain that radiates down her / his right arm and wrist when she / he is working on a computer at work. It is slightly better in the evenings when she / he does not use a computer. How much physical pain did [NAME8] have? Would you say none, very mild, mild, moderate, or severe?

1. NONE
2. VERY MILD
3. MILD
4. MODERATE
5. SEVERE

AM57B. [NAME11] is not a physically active person but enjoys a walk around the neighborhood most weekends. Whenever she / he walks a mile or more, she / he feels tired afterwards and needs to rest for an hour or so. How much energy did [NAME11] have? Would you say none, a little, some, a lot, or very much?

1. NOT AT ALL
2. VERY LITTLE
3. SOME
4. A LOT
5. SEVERE

AM57C. [NAME12] feels tired every afternoon, which makes any task that she / he does a great effort. Whenever she / he does the dishes, tidies the house, or prepares a meal for more than 10 minutes she / he needs to sit down and rest. How much energy did [NAME12] have? Would you say none, a little, some, a lot, or very much?

1. NONE

2. A LITTLE
3. SOME
4. A LOT
5. VERY MUCH

AM58A. [NAME13] is usually an outgoing and cheerful person who has many friends and enjoys going out. Three or four days a month, she / he feels sad all day so tends to avoid people. How much did health or emotional problems limit [NAME13]'s usual social activities with family or friends? Would you say not at all, very little, somewhat, a lot, or severely?

1. NOT AT ALL
2. VERY LITTLE
3. SOMEWHAT
4. A LOT
5. SEVERELY

AM59B. [NAME17] feels nervous and anxious. She / He worries and thinks negatively about the future, but feels better when she / he is not alone or when doing something that really interests her / him. When she / he is alone she / he tends to feel useless and empty. How much was [NAME17] bothered by emotional problems? Would you say not at all, very mildly, mildly, moderately, or severely?

1. NOT AT ALL
2. VERY MILDLY
3. MILDLY
4. MODERATELY
5. SEVERELY

SECTION N. INFORMATION TO RELOCATE RESPONDENTS IN THE FUTURE

AN1INTRO. That's all the survey questions I have, but now I need to get some information to help us contact you in the future. As I mentioned at the beginning, we may want to interview you again in a few years. This information, like your responses to all questions in the interview, is completely confidential.

You are very important to this study. Your experiences over the next few years will be very important in understanding how families and neighborhoods in Los Angeles are changing. We will only contact you about the survey, and you can decide if you want to participate at that time.

AN1. Is your mailing address the same as your home address?

1. YES (GO TO AN3)
5. NO

AN2. What is your mailing address?

_____ STREET ADDRESS _____ CITY ____ STATE _____ COUNTRY _____ ZIPCODE

AN3. May I have your home telephone number?

1. YES
3. NO, DOES NOT WANT TO GIVE OUT PHONE NUMBER (GO TO AN6)
5. NO, DOES NOT HAVE A PHONE (GO TO AAN7)

AN4. What is your correct telephone number, including area code?

|_|_|_| (Area Code) |_|_|_| - |_|_|_|_|

AN5. Is this telephone number listed in your name?

1. YES (GO TO AAN7)
5. NO

AN6. In whose name is the telephone number listed?

INTERVIEWER: WRITE FULL NAME VERBATIM. CHECK WITH R TO MAKE SURE YOU HAVE FULL NAME AND CORRECT SPELLING

_____ (VERBATIM – LIMITED)

AN7. Do you have an e-mail address you use at home?

1. YES
5. NO (GO TO AN9)

AN8. What is this e-mail address?

_____@_____ (END SHOULD BE .com, .edu, .gov, .net, .org)

AN9. Do you plan to move in the next year or two?

1. YES (GO TO AN12)
5. NO

IF AN9=D OR R, CONTINUE

AN11. Is there another place either inside or outside the United States where you might be living in the next few years?

1. YES
5. NO (GO TO AN14)
- 2. REFUSED (GO TO AN14)

AN12. [If you are living at another address,] What address [would / will] you be living in the next few years?

INTERVIEWER: IF RESPONDENT DOES NOT KNOW THE EXACT ADDRESS, ASK: What city, town, or state would you be living in?

_____ STREET ADDRESS _____ CITY ____ STATE _____ COUNTRY _____ ZIPCODE

AN13. When do you think you would start living at this address in [CITY NAME FROM AN12]?

___ MONTH ___ YEAR

AN14. CAPI CHECK CALENDAR: IS R CURRENTLY WORKING?

1. YES
5. NO (GO TO AN21)

AN15. If we are unable to reach you at home in the future, is it ok if we contact you at work?

PROBE: We would contact you at work only to set up an appointment for an interview.

1. YES
2. PREFER NOT TO BE CONTACTED AT WORK
3. DEFINITELY DOES NOT WANT TO BE CONTACTED AT WORK (GO TO AN21)

AN16. [Alright, we won't contact you at work unless we absolutely have to, but just in case, let me check some information.] We have recorded your employer's name and address as [EMPLOYERS NAME AND ADDRESS]. Is that the best place to contact you at work?

1. YES (GO TO AN18)
5. NO

AN17. What is the best place to contact you at work?

_____ (EMPLOYER'S NAME) _____ (STREET ADDRESS) _____ (CITY) _____ (STATE)

AN18. What is your telephone number at work?

(____) _____ - _____ EXT _____

AN19. Do you have an e-mail address at work where we can contact you?

1. YES
5. NO (GO TO AN21)

AN20. What is your e-mail address at work?

1. SAME E-MAIL AS HOME E-MAIL
2. _____@_____ (END SHOULD BE .com, .edu, .gov, .net, .org)

AN21. CAPI CHECK:

1. R IS MARRIED OR LIVING WITH A PARTNER
2. R IS NOT MARRIED AND NOT LIVING WITH A PARTNER (GO TO AN27)

AN22. If we are unable to reach you at home in the future, is it ok if we contact your [husband / wife / partner] at work?

PROBE: We would contact your [husband / wife / partner] at work only to find out how to reach you to set up an interview.

1. YES
2. PREFER SPOUSE / PARTNER NOT TO BE CONTACTED AT WORK
3. DEFINITELY DOES NOT WANT SPOUSE / PARTNER TO BE CONTACTED AT WORK (GO TO AN27)
4. SPOUSE NOT CURRENTLY EMPLOYED (GO TO AN27)

AN23. [Alright, we won't contact your [husband / wife / partner] at work unless we absolutely have to, but just in case, let me get some information.] Can you give me the name and address of your [husband / wife / partner]'s employer?

_____ (EMPLOYER'S NAME) _____ (STREET ADDRESS) _____ (CITY) _____ (STATE)

AN24. What is your [husband / wife / partner]'s telephone number at work?

(____) _____ - _____ EXT _____

AN25. Does your [husband / wife / partner] have an e-mail address at work?

1. YES
5. NO (GO TO AN27)

AN26. What is your [husband / wife / partner]'s e-mail address at work?

_____@_____ (END SHOULD BE .com, .edu, .gov, .net, .org)

AN27. In case we have difficulty getting in touch with you in the future, could you give me the name, address, and phone number of two people not currently living with you who will always know your whereabouts?

PROBE: This might be a family member or a close friend or someone else who knows where you are.

IF NECESSARY: We would only get in touch with these people if we could not reach you.

1. YES
5. NO (GO TO AN30)

NOTE: ASK AN28 AND AN29 FOR EACH OF TWO PEOPLE

AN28_pre. Is there someone else not currently living with you who will always know your whereabouts?

1. YES
5. NO

AN28_name. What is the name, address, and phone number of the person who will always know how to contact you?

_____ (NAME) _____ STREET _____ CITY _____ STATE _____ COUNTRY _____ ZIPCODE
(____) _____ - _____ EXT. _____ (PHONE NUMBER)

AN29_1. How is this person related to you?

DO NOT READ ANSWERS. CODE R'S RESPONSE.

INTERVIEWER NOTE: THIS SHOULD BE A PERSON NOT CURRENTLY LIVING WITH R

1. MOTHER
2. FATHER
3. STEPMOTHER
4. STEPFATHER
5. GRANDMOTHER
6. GRANDFATHER
7. DAUGHTER
8. SON
9. AUNT
10. UNCLE
11. SISTER (INCLUDING HALF SISTER, STEP SISTER)
12. BROTHER (INCLUDING HALF BROTHER, STEP BROTHER)
13. OTHER RELATIVES
14. FRIEND
15. GIRLFRIEND (NOT LIVING WITH R)
16. BOYFRIEND (NOT LIVING WITH R)
17. COWORKER
18. HUSBAND / WIFE (NOT LIVING WITH R)
19. EX-HUSBAND OR WIFE
20. OTHER, SPECIFY: _____

AN30. [You may have told me this already, but...] Is there any chance that you will move outside of the United States in the future?

1. YES
2. NO (GO TO AN36)
3. MAYBE, UNCERTAIN

AN31_1. If you moved outside of the United States, where would you move to?

PROBE: What country would you most likely move to?

_____ (TOWN OR CITY) _____ (COUNTRY)

AN32. CAPI CHECK: IS AN31 COUNTRY THE SAME COUNTRY THAT PERSON IN AN28 LIVES IN?

1. YES (GO TO AN36)
5. NO

AN33. Can you give me the name and address of a person in [COUNTRY IN AN31] who will always know how to contact you?

1. YES
5. NO (GO TO AN36)

AN34_name. What is the name, address, and phone number of the person in [COUNTRY IN AN31] who will always know how to contact you?

_____ (NAME) _____ STREET _____ CITY _____ STATE _____ COUNTRY _____ ZIPCODE
(_____) _____ - _____ EXT. _____ (PHONE NUMBER)

AN35. How is this person related to you?

DO NOT READ ANSWERS. CODE R'S RESPONSE.

1. MOTHER
2. FATHER
3. STEPMOTHER
4. STEPFATHER
5. GRANDMOTHER
6. GRANDFATHER
7. DAUGHTER
8. SON
9. AUNT
10. UNCLE
11. SISTER (INCLUDING HALF SISTER, STEP SISTER)
12. BROTHER (INCLUDING HALF BROTHER, STEP BROTHER)
13. OTHER RELATIVES
14. FRIEND
15. GIRLFRIEND (NOT LIVING WITH R)
16. BOYFRIEND (NOT LIVING WITH R)
17. COWORKER
18. HUSBAND / WIFE (NOT LIVING WITH R)
19. EX-HUSBAND OR WIFE
20. OTHER, SPECIFY: _____

AN36. Do you ever use a nickname or any first or last names other than [NAME OF R]? (For example, do you use both your maiden name and your married name on different occasions?)

1. YES
5. NO (GO TO AN38)

AN37. What nicknames or other names do you use?

PROBE: Any others?

_____ (VERBATIM – LIMITED)

AN38_1. May I have your Social Security number? We often find it is useful when trying to locate people for their next interview.

PROBE: We would only use your Social Security number if we couldn't contact you in any other way. Like all other information, it will be kept completely confidential.

1. YES, NUMBER IS _____-_____-_____-_____-_____-_____
2. NO, DOESN'T WANT TO PROVIDE THE SSN _____
3. NO, DOESN'T HAVE AN SSN
4. NO, DOESN'T KNOW SSN

AN39. Can you give me your driver's license number?

1. YES, IT'S _____
2. NO, DOESN'T HAVE A DRIVER'S LICENSE (GO TO END)
3. NO. DOESN'T WANT TO PROVIDE DRIVER'S LICENSE.

AN40. Which state is that from?

___ STATE

ANEND. Thank you for providing this information. You have been very helpful.

Here is a card I want to leave with you. Please hold on to it. If you move or plan to move in the next few years, please send us your new address on this card. I also have this magnet that has our phone number on it. The card and this magnet give information about how to contact us if you are moving or have questions.

Los Angeles Family and Neighborhood Survey, Wave 2

PARENT QUESTIONNAIRE

ONE QUESTIONNAIRE IS COMPLETED BY THE PCG FOR EACH SAMPLED RSC≤18 AND SIB≤18

Preloads (for main Adult Questionnaire) from W2 Roster Module and W1 data

Preloaded from Roster

1. Type of child this questionnaire is reporting on: RSC_P, SIB_P, RSC_NE, SIB_NE
2. First name of child for whom this qx is being completed
3. Is this child's (bio / adoptive) mother in HH? (RA20 on child's roster record)
4. Is this child's (bio / adoptive) father in HH? (RA24 on child's roster record)
5. Does this child have same father as RSC_P (1=yes, 0=no; if RSC_P,=7 for N/A)
 - Does this child have same father as SIB_P (1=yes, 0=no; if SIB_P,=7 for N/A)
 - Does this child have same father as RSC_NE (1=yes, 0=no; if RSC_NE,=7 for N/A)
 - Does this child have same father as SIB_NE (1=yes, 0=no; if SIB_NE,=7 for N/A)
 - Does this child have same mother as RSC_P (1=yes, 0=no; if RSC_P,=7 for N/A)
 - Does this child have same mother as SIB_P (1=yes, 0=no; if SIB_P,=7 for N/A)
 - Does this child have same mother as RSC_NE (1=yes, 0=no; if RSC_NE,=7 for N/A)
 - Does this child have same mother as SIB_NE (1=yes, 0=no; if SIB_NE,=7 for N/A)
6. What is this child's relationship with PCG (i.e., mother or other relationship code)?
7. Respondent (PCG)'s current marital status (never married, married, divorced, separated, living with someone)
8. Does CHILD have ANY brothers and sisters (i.e., people with the same mother) in the HH (List 2)
9. Roster id of bio / adopt mother (RA21ID on child's roster record)
10. Roster id of bio / adopt father (RA25ID on child's roster record)
11. Is this child's father the RSA, but not the PCG?
12. Sex of this PCG
13. Does this child have same mother as other W2 parent module child
14. Does this child have same father as other W2 parent module child
15. Name of PCG
16. Whether or not the Roster includes info on bio-parent status of PCG
17. Whether PCG is: (1) bio-mother, (2) bio-father, (3) definitely neither one, or (4) not sure
18. Number of kids under age 12 living in the household (PTOTLT12)
19. Roster id of this child
20. Relationship of this child to household head.
21. Is PCG the household head?

NOTE: USE CHILD AGE CALCULATED FROM BIRTHDATE RATHER THAN PRELOADED AGE FROM ROSTER

Preloaded from Blaise / Case management

Create FIRSTCHILD and SOURCE1–SOURCE4

Has a Parent questionnaire been completed by this PCG in Wave 2?

If no, FIRSTCHILD=1 and SOURCE1=type of child this upcoming Parent qx is for.

If yes, then check previously set SOURCE variables.

If SOURCE1 has a value and SOURCE2 is blank, then FIRSTCHILD=2 and SOURCE2=type of child this upcoming Parent qx is for. If SOURCE2 has a value and SOURCE3 is blank then FIRSTCHILD=3 and SOURCE3=type of child for upcoming Parent qx. If SOURCE3 has a value and SOURCE4 is blank, then FIRSTCHILD=4 and SOURCE4=type of child for upcoming Parent qx.

Preloaded from FIRST W2 Parent Module administered to this PCG to be used in subsequent W2 Parent module for this PCG if this child is not first W2 parent module administered to this PCG.

1. First name of child covered in 1st W2 Parent module that was administered to this PCG.
2. Age of child covered in 1st W2 parent module that was administered to this PCG.
3. Did child complete H2–H69 (that is, H15 has a value or H31 has a value or H51 has a value or H69 has a value—i.e., one of those variables is not blank)

Preloaded from SECOND W2 Parent Module administered to this PCG to be used in subsequent W2 Parent module for this PCG if this child is 3rd or 4th parent module administered to this PCG.

1. First name of child covered in 2nd W2 Parent module that was administered to this PCG.
2. Age of child covered in 2nd W2 parent module that was administered to this PCG.
3. Did child complete H2–H69 (that is, H15 has a value or H31 has a value or H51 has a value or H69 has a value—i.e., one of those variables is not blank)

Preloaded from THIRD W2 Parent Module administered to this PCG to be used in subsequent W2 Parent module for this PCG if this child is 4th parent module administered to this PCG.

1. First name of child covered in 3rd W2 Parent module that was administered to this PCG.
2. Age of child covered in 3rd W2 parent module that was administered to this PCG.
3. Did child complete H2–H69 (that is, H15 has a value or H31 has a value or H51 has a value or H69 has a value—i.e., one of those variables is not blank)

Preloaded from W1 survey

1. Birthdate of RSC_P, SIB_P
2. Interview month and year from W1 parent module for RSC_P, SIB_P
3. W1 PCG relationship to RSC_P, to SIB_P (text)
4. Address of W1 residence
5. W1 PCG first name
6. Place of birth of RSC_P, SIB_P from W1 Parent module
7. Variables PE9 and PE14 from W1 Parent module for RSC_P, SIB_P
8. Indicator that RSC_P (SIB_P) parents married after RSC_P (SIB_P) was born
9. Indicators for whether each section of W1 Parent module was completed for RSC_P, SIB_P
10. Indicator for whether RSC_P, SIB_P was born in USA
11. Indicator that PK2–PK6 were completed in W1 for this child
12. Country of birth for mother of RSC_P / SIB_P
13. Country of birth of father of RSC_P / SIB_P

Questionnaire formatting key

- **Black bold:** Question numbers
- Black normal: Interviewer to read question text
- BLACK UPPER CASE: Interviewer and programming instructions
- ***BLACK BOLD ITALIC UPPER CASE:*** Comments

SECTION A. RELATIONSHIP CHECK

PA1. Let me make sure my information is correct. You are [CHILD]'s [mother / stepmother / other relationship]. Is that correct?

1. YES (GO TO PA3)
5. NO

PA2_A. How is [CHILD] related to you?

0. HOUSEHOLD HEAD
1. HUSBAND OR WIFE
2. PARTNER (LOVER, GIRLFRIEND, BOYFRIEND)
3. BIOLOGICAL CHILD
4. STEPCHILD
5. ADOPTED CHILD
6. FOSTER CHILD
7. CHILD OF PARTNER (CHILD OF LOVER, GIRLFRIEND, BOYFRIEND)
8. SON-IN-LAW OR DAUGHTER-IN-LAW
9. PARENT
10. STEPPARENT
11. PARENT-IN-LAW
12. GRANDPARENT
13. BROTHER OR SISTER
14. STEPBROTHER OR STEPSISTER
15. HALF-BROTHER OR HALF-SISTER
16. BROTHER-IN-LAW OR SISTER-IN-LAW
17. GRANDCHILD
18. UNCLE OR AUNT
19. NEPHEW OR NIECE
20. OTHER RELATIVE, SPECIFY: _____
21. ROOMMATE
22. FRIEND
23. LIVE-IN MAID, CARE PROVIDER, SERVANT OR DOMESTIC WORKER
24. OTHER NONRELATIVE, SPECIFY
25. EX-SPOUSE
26. PARENT'S LOVER / PARTNER
27. SON OR DAUGHTER'S LOVER / PARTNER
28. COUSIN
29. GREAT GRANDPARENT

PA3. CAPI: CHECK HH ROSTER AND PA2:

1. R IS CHILD'S MOTHER, STEPMOTHER OR FOSTER MOTHER (GO TO PA6A)
2. R IS SOMEONE ELSE AND NO MOTHER STEPMOTHER OR FOSTER MOTHER IN HH (GO TO PA5)
3. R IS SOMEONE ELSE BUT THE [MOTHER / STEPMOTHER / FOSTER MOTHER] IS IN THE HH

PA4. INTERVIEWER: SELECT THE REASON THAT THE [FILL APPROPRIATE MOTHER / STEPMOTHER / FOSTER MOTHER] IS NOT THE RESPONDENT:

1. [MOTHER / STEPMOTHER / FOSTER MOTHER] IS INCAPACITATED, SPECIFY REASON: _____
2. [MOTHER / STEPMOTHER / FOSTER MOTHER] USUALLY LIVES IN THE HOUSEHOLD BUT IS AWAY FOR AN EXTENDED PERIOD
3. [MOTHER / STEPMOTHER / FOSTER MOTHER] NOT INVOLVED IN CARING FOR CHILD
4. OTHER, SPECIFY: _____

PA5. You are the person in this household who has primary responsibility for [CHILD]. Is that correct?

PROBE: Are you the person primarily responsible for [CHILD] when [he / she] stays here?

1. YES (GO TO PA6a)
5. NO

PA6. INTERVIEWER: RESOLVE WHO ACTUALLY HAS PRIMARY RESPONSIBILITY IN THIS HOUSEHOLD FOR CHILD. MAKE CORRECTIONS AND BEGIN WITH CORRECT RESPONDENT.

PA6a. CAPI CHECK ON PANEL RESPONDENT STATUS:

1. CHILD IS EITHER RSC_P OR SIB_P AND PCG IS SAME PCG INTERVIEWED FOR THIS CHILD IN W1 (SET NEWPCG=0 AND GO TO PA6B)
2. CHILD IS EITHER PSC_P OR SIB_P AND PCG IS NOT SAME PCG INTERVIEWED FOR THIS CHILD IN W1 (SET NEWPCG=1 AND GO TO PA6B)
3. CHILD IS EITHER RSC_NE OR SIB_NE AND PCG WAS INTERVIEWED IN W1 (SET NEWPCG=0 AND GO TO PA7)
4. CHILD IS EITHER RSC_NE OR SIB_NE AND PCG WAS NOT INTERVIEWED IN W1 (SET NEWPCG=1 AND GO TO PA7)

PA6B. CAPI CHECK:

1. HAVE A BIRTHDATE FROM W1 FOR THIS CHILD (GO TO PA9)
5. DO NOT HAVE A BIRTHDATE FROM W1 FOR THIS CHILD (CONTINUE)

PA7_M. When was [CHILD] born?

_____ DAY _____ MONTH _____ YEAR

PA7ck. CAPI: CALCULATE [CHILD]'S CURRENT AGE (TODAY'S INTERVIEW DATE – BIRTHDATE=AGE AT LAST BIRTHDAY. DO NOT ROUND UP.

CHECK PA7CK AGAINST ROSTER AGE OF CHILD. IF DIFFER BY MORE THAN 1 YEAR (PLUS OR MINUS), RECONFIRM DATE IN PA7 WITH R.

PA8. So this means that [CHILD] is [AGE AT LAST BIRTHDAY]years old / less than one year old]. Is that correct?

1. YES
5. NO (RETURN TO PA7 AND CORRECT YEAR OF BIRTH)

PA8A. How old is [CHILD]?

_____ MONTHS (RANGE: 0 TO 11) OR _____ YEARS (RANGE: 1 TO 18)

INTERVIEWER: IF CHILD IS LESS THAN 1 YEAR OLD, ENTER THE NUMBER OF MONTHS ON THIS SCREEN AND ZERO ON THE NEXT SCREEN.

IF CHILD IS 1 YEAR OLD OR OLDER, ENTER ZERO ON THIS SCREEN AND THE NUMBER OF YEARS ON THE NEXT SCREEN.

FOR CHILDREN REPORTED AS 12 TO 23 MONTHS OLD, ENTER ZERO MONTHS ON THIS SCREEN AND 1 YEAR ON THE NEXT SCREEN.

FOR CHILDREN REPORTED AS 24 TO 35 MONTHS OLD, ENTER ZERO MONTHS ON THIS SCREEN AND 2 YEARS ON THE NEXT SCREEN.

QUESTIONS ABOUT PANEL SAMPLED CHILDREN

PA9. In [W1 INTERVIEW MONTH AND YEAR] we interviewed [you / [CHILD]'S [W1 PCG RELATIONSHIP TO CHILD]] about [CHILD]. At that time, [you / [CHILD]'S [W1 PCG RELATIONSHIP TO CHILD]] told us that [CHILD]'s birthdate is [BIRTH DAY, MONTH, AND YEAR FROM W1]. Is that correct?

1. YES (GO TO PA12ck)

5. NO

PA11_M. When was [CHILD] born?

_____ DAY _____ MONTH _____ YEAR

PA12. Can you help me understand why [you / [CHILD]'S [W1 PCG RELATIONSHIP TO CHILD]] gave me a different birthdate for [CHILD] in [W1 INTERVIEW MONTH AND YEAR] than you are giving me now?

PA12ck. CAPI: CALCULATE [CHILD]'S CURRENT AGE (TODAY'S INTERVIEW DATE – BIRTHDATE=AGE AT LAST BIRTHDAY. DO NOT ROUND UP.

IF PA9=5, CHECK PA12CK AGAINST ROSTER AGE OF CHILD. IF DIFFER BY MORE THAN 1 YEAR (PLUS OR MINUS), RECONFIRM DATE IN PA11 WITH R.

PAGE: CAPI VARIABLE

IF PA7CK HAS NON-MISSING VALUE, PAGE=PA7CK
IF PA8A HAS NON-MISSING VALUE, PAGE=PA8A
IF PA12CK HAS NON-MISSING VALUE, PAGE=PA12CK

INTERVIEWER: IF PAGE > 18, THE SITUATION SHOULD BE CLARIFIED WITH THE RESPONDENT (AND SUPERVISOR IF NECESSARY) AND THE INTERVIEW SHOULD BE ENDED IF CHILD REALLY IS AGE 19 OR MORE.

AGEGT18. INTERVIEWER: IF CHILD IS MORE THAN 18 YEARS OLD, THE SITUATION SHOULD BE CLARIFIED WITH THE RESPONDENT (AND SUPERVISOR IF NECESSARY) AND THE INTERVIEW SHOULD BE ENDED IF CHILD REALLY IS AGE 19 OR MORE. IF THE CHILD IS DETERMINED TO BE AGE 19 OR MORE, BREAK OFF THE INTERVIEW AND ENTER CODE 361.

PA14. I have recorded that in [W1 INTERVIEW MONTH AND YEAR] when we interviewed [you / [CHILD]'S [W1 PCG RELATIONSHIP TO CHILD]] the first time, [CHILD] was living [here / at [W1 ADDRESS]] with [you / [his / her] [W1 PCG RELATIONSHIP TO CHILD], [FIRST NAME OF PCG IN W1]]. Is that correct?

1. YES (GO TO END OF SECTION A)
5. NO

PA15. What part if not correct?

MARK ALL THAT APPLY

1. [This respondent / [CHILD]'s [W1 PCG RELATIONSHIP TO CHILD]] was not interviewed in [W1 INTERVIEW MONTH AND YEAR], but interviewed at another time
2. This respondent does not remember [CHILD]'s, [W1 PCG RELATIONSHIP TO CHILD]] being interviewed or is unsure, but could have been interviewed
3. Respondent is sure that [he / she / [CHILD]'s [W1 PCG RELATIONSHIP TO CHILD]] was not interviewed in W1
4. [This respondent / [CHILD]'s [W1 PCG RELATIONSHIP TO CHILD]] was not living [here / at address shown] in [MONTH AND YEAR OF W1 INTERVIEW], but [did live there at some other time / is living here now]
5. Respondent says [he / she / [CHILD]'s [W1 PCG RELATIONSHIP TO CHILD]] never lived at W1 address
6. Respondent says [he / she / CHILD]'s [W1 PCG RELATIONSHIP TO CHILD]] did not live with [CHILD], but did live with [him / her] at another time
7. Respondent says [he / she / CHILD]'s [W1 PCG RELATIONSHIP TO CHILD]] never lived with [CHILD]
8. Other, specify _____

PA16. CAPI CHECK:

1. PA15=4, 5, 6, 7
2. PA15=ONLY 7 (IN OTHER WORDS, ONLY CODE 7 IS MARKED) (GO TO PA21)
5. OTHERWISE (GO TO SECTION END)

PA17. Where was [CHILD] living or staying in [W1 INTERVIEW MONTH AND YEAR]? What was the address?

PROBE: What street was this place on? What is the nearest intersection, corner, or cross-street? What city and state was that in?

ENTER ALL THAT R KNOWS

1. EXACT HOUSE / APT NUMBER AND STREET NAME _____
2. ON _____ STREET NEAR CORNER OF _____ STREET
IN _____ CITY _____ STATE _____ COUNTRY (IF NOT U.S.)
3. IN _____ CITY _____ STATE _____ COUNTRY (IF NOT U.S.)

PA18. INTERVIEWER: DOES [W1 ADDRESS] APPEAR TO BE THE SAME AS [ADDRESS IN PA17]? IF YOU ARE NOT SURE, ASK RESPONDENT: Is this address you just gave me the same as [W1 ADDRESS]?

1. YES (GO TO PA20)
5. NO (CONTINUE)

PA19. Can you help me understand why my records say that [CHILD] lived at [W1 STREET ADDRESS, CITY NAME, STATE NAME] in [W1 INTERVIEW MONTH AND YEAR] but you are telling me that [CHILD] lived at [ADDRESS IN PA17] at that time?

PA20. CAPI CHECK:

1. CODE 7 WAS ONE OF THE CODES MARKED IN PA15
5. OTHERWISE (GO TO PA23)

PA21. Who was [CHILD] living with in [W1 MONTH AND YEAR]?

MARK ALL THAT APPLY

1. BIOLOGICAL MOTHER
2. BIOLOGICAL FATHER
3. ADOPTIVE MOTHER
4. ADOPTIVE FATHER
5. STEPMOTHER
6. STEPFATHER
7. MOTHER'S BOYFRIEND / PARTNER
8. FATHER'S GIRLFRIEND / PARTNER
9. GRANDMOTHER
10. GRANDFATHER
11. AUNT
12. UNCLE
13. SISTER (INCLUDING HALF SISTER, STEP SISTER)
14. BROTHER (INCLUDING HALF BROTHER, STEP BROTHER)
15. HUSBAND / WIFE
16. OTHER RELATIVES
17. FOSTER PARENTS, FOSTER FAMILY, FOSTER CARE
18. FRIENDS
19. WITH HIS / HER BOYFRIEND / GIRLFRIEND
20. LIVING BY HIMSELF / HERSELF
21. LIVING IN A SCHOOL DORMITORY

22. IN JAIL, PRISON, OR JUVENILE DETENTION CENTER

23. SOMEONE ELSE, SPECIFY: _____

PA22. Can you help me understand why my records say that [CHILD] lived with [his / her] [W1 PCG RELATIONSHIP TO CHILD] but you are telling me that [CHILD] lived with [his / her] [TEXT OF CODE IN PA21] at that time?

PA23. INTERVIEWER: BASED ON RESPONSE IN PA15 THROUGH PA22, DETERMINE WHETHER THIS IS THE CORRECT RESPONDENT AND THE CORRECT PANEL CHILD. IF NOT, LOCATE AND INTERVIEW CORRECT PCG FOR THE CORRECT CHILD. IS THIS THE CORRECT RESPONDENT AND THE CORRECT PANEL CHILD?

1. YES

5. NO

PA23_1. INTERVIEWER: IF THIS IS NOT THE CORRECT RESPONDENT PLEASE BREAK OFF THE INTERVIEW AND ENTER CODE 361. ATTEMPT TO RESOLVE THE ISSUE AND RETURN TO BEGINNING WITH CORRECT RSPONDENT.

SECTION B. LIVING ARRANGEMENTS

PB1. Let me begin by asking you about [CHILD]'s current living arrangements. Some kids have two or more homes that they stay at regularly. Does [CHILD] always stay here at night, or is there another home where [he / she] regularly spends the night?

INTERVIEWER: DO NOT INCLUDE OCCASIONAL SLEEPOVERS AT FRIENDS' OR RELATIVES' HOMES

1. THIS IS THE ONLY PLACE CHILD STAYS REGULARLY AT NIGHT (GO TO SECTION C)

2. CHILD ALSO STAYS AT ANOTHER HOME REGULARLY

PB2_A. How often does [CHILD] spend the night here in this [house / apartment]?

1. _____ NIGHTS PER WEEK (RANGE 1–7, VERIFY IF UNDER 4)

2. _____ NIGHTS PER MONTH (RANGE 1–31, VERIFY IF UNDER 15)

3. _____ NIGHTS PER YEAR (RANGE 1–365, VERIFY IF UNDER 182)

PB3. How many other places does [CHILD] stay on a regular basis?

_____ NUMBER OF PLACES (VERIFY IF 5 OR MORE)

PB4. Who does [CHILD] stay with when [he / she] stays somewhere else? / Think about the place other than this household where [CHILD] spends the most time. Who does [CHILD] stay with there?

INTERVIEWER: CODE ALL THAT APPLY

1. BIOLOGICAL MOTHER

2. BIOLOGICAL FATHER

3. ADOPTIVE MOTHER

4. ADOPTIVE FATHER

5. STEPMOTHER

6. STEPFATHER

7. MOTHER'S BOYFRIEND / PARTNER

8. FATHER'S GIRLFRIEND / PARTNER

9. GRANDMOTHER

10. GRANDFATHER

11. AUNT

12. UNCLE
13. SISTER (INCLUDING HALF SISTER, STEP SISTER)
14. BROTHER (INCLUDING HALF BROTHER, STEP BROTHER)
15. HUSBAND / WIFE
16. OTHER RELATIVES
17. FOSTER PARENTS, FOSTER FAMILY, FOSTER CARE
18. FRIENDS
19. WITH HIS / HER BOYFRIEND / GIRLFRIEND
20. LIVING BY HIMSELF / HERSELF
21. LIVING IN A SCHOOL DORMITORY
22. IN JAIL, PRISON, OR JUVENILE DETENTION CENTER
23. SOMEWHERE ELSE, SPECIFY: _____

PB5. Where is the place located where [CHILD] stays part-time? / Where is the place other than this household where [CHILD] spends the most time located?

PROBE: What street is this place on? What is the nearest intersection, corner, or cross-street? What city is that in?

INTERVIEWER: ENTER ALL INFORMATION THAT RESPONDENT KNOWS

EXACT HOUSE / APT NUMBER AND STREET NAME: _____
 ON _____ STREET AT THE CORNER OF _____ STREET
 IN _____ CITY _____ STATE _____ COUNTRY (IF NOT U.S.)

SECTION C. RESIDENTIAL HISTORY

PCINTRO. Now I would like to ask where [CHILD] lived since [FILL STARTDATE].

****NOTE:** FOR NEW ENTRANTS, STARTDATE IS SIX YEARS BEFORE THE INTERVIEW DATE. FOR PANEL SAMPLED CHILDREN, STARTDATE IS THE DATE ON WHICH THE WAVE 1 PARENT QUESTIONNAIRE WAS COMPLETED FOR THIS CHILD.

CHILDREN ARE SKIPPED OUT OF THIS HISTORY SECTION IF:

1. THEY HAVE LIVED WITH PCG SINCE THE DATE THEY WERE BORN (INCLUDING BIRTHDAYS POST-STARTDATE)
2. IF THEY HAVE LIVED WITH PCG SINCE STARTDATE
3. IF FIRSTCHILD NE 1 AND THIS CHILD HAS LIVED WITH FIRSTCHILD SINCE STARTDATE

PC1. Has [CHILD] been living with you all the time since [he / she] was born? Do not include time away at summer camp, short trips [CHILD] has taken, or periods of less than one month spent with relatives.

1. YES (GO TO END OF SECTION C)
5. NO

PC2. CAPI CHECK: WAS [CHILD] BORN BEFORE [STARTDATE]?

1. YES
5. NO (GO TO PC4)

PC3. Has [CHILD] been living with you all the time since [STARTDATE]?

1. YES (GO TO END OF SECTION C)
5. NO

PC4. CAPI CHECK: IS FIRSTCHILD=1?

1. YES (GO TO PC6)
5. NO

PC4A. CAPI CHECK: DID FIRSTCHILD=1 COMPLETE SECTION C?

1. YES
5. NO (GO TO PC5A)

PC5. Has [CHILD] been living with [FIRSTCHILD] all the time since [STARTDATE / [CHILD] was born]?

1. YES (GO TO SECTION D)
5. NO

PC5A. CAPI CHECK:

1. FIRSTCHILD=2 (GO TO PC6)
5. OTHERWISE (CONTINUE)

PC5A1. CAPI CHECK: DID FIRSTCHILD=2 COMPLETE SECTION C?

1. YES
5. NO (GO TO PC5C)

PC5B. Has [CHILD] been living with [SECONDCHILD] all the time since [STARTDATE / [CHILD] was born]?

1. YES (GO TO SECTION D)
5. NO

PC5C. CAPI CHECK:

1. FIRSTCHILD=3 (GO TO PC6)
5. OTHERWISE (CONTINUE)

PC5C1. CAPI CHECK: DID FIRSTCHILD=3 COMPLETE SECTION C?

PC5D. Has [CHILD] been living with [THIRDCHILD] all the time since [STARTDATE / [CHILD] was born]?

1. YES (GO TO SECTION D)
5. NO

PC6. When did [CHILD] start living with you? What month and year?

INTERVIEWER: IF RESPONDENT SAYS HE / SHE DOES NOT KNOW THE MONTH OR YEAR, GET AN ESTIMATE OF BOTH THE MONTH AND YEAR.

IF RESPONDENT CAN ONLY GIVE YEAR, ASK: Was it around the beginning of the year, in the spring, in the summer, in the fall or around the end of the year?

1. _____ MONTH _____ YEAR (HARD CHECK AT CHILD'S BIRTHDATE IF HAVE)
2. _____ YEAR AND
 - A. BEGINNING OF YEAR
 - B. THE SPRING
 - C. THE SUMMER
 - D. THE FALL
 - E. END OF THE YEAR
3. _____ YEAR (RESPONDENT DOES NOT KNOW MONTH OR SEASON)

IF PC6=DK OR REF CONTINUE

IF PC6 IS SEASON AND YEAR OR JUST YEAR, CONTINUE

ELSE IF GAVE COMPLETE DATE, GO TO PC7

PC6A. How long ago did [CHILD] start living with you?

1. _____ MONTHS AGO (HARD CHECK AT CHILD'S AGE IF AGE < 1 YEAR)
OR
2. _____ YEARS AGO (HARD CHECK AT CHILD'S AGE IF AGE < 1 YEAR)

PC6B_mo. How old was [CHILD] when [he / she] started living with you?

INTERVIEWER: IF CHILD IS LESS THAN 1 YEAR OLD, ENTER THE NUMBER OF MONTHS ON THIS SCREEN AND ZERO ON THE NEXT SCREEN.

IF CHILD IS 1 YEAR OLD OR OLDER, ENTER ZERO MONTHS ON THIS SCREEN AND THE NUMBER OF YEARS ON THE NEXT SCREEN

FOR CHILDREN REPORTED AS 12 TO 23 MONTHS OLD, ENTER ZERO MONTHS ON THIS SCREEN AND 1 YEAR ON THE NEXT SCREEN

FOR CHILDREN REPORTED AS LESS THAN ONE MONTH OLD, ENTER ZERO MONTHS ON THIS SCREEN AND ZERO YEARS ON THE NEXT SCREEN

- _____ MONTHS (HARD CHECK AT CHILD'S CURRENT AGE) (RANGE: 0 TO 11)
OR
_____ YEARS (HARD CHECK AT CHILD'S CURRENT AGE) (RANGE: 1 TO 18)

PC6C_1. CAPI CHECK: CALCULATE APPROXIMATE YEAR AND MONTH CHILD MOVED BASED ON CHILD'S BIRTHDATE, CHILD'S CURRENT AGE, PC6, PC6A, AND PC6B. USE THE FOLLOWING RULES:

CONVERT ALL MONTHS OF AGE OR MONTHS AGO TO FRACTIONS OF YEARS. WHEN MONTHS ALONE ARE USED BELOW, THEY ARE ASSUMED TO TAKE THE VALUES 1 TO 12.

1. IF YOU HAVE YEAR AND SEASON ONLY:

IF SEASON IS BEGINNING OF THE YEAR, SET MONTH TO 1.5

IF SEASON IS SPRING, SET MONTH TO 4.5

IF SEASON IS SUMMER, SET MONTH TO 7.5

IF SEASON IS FALL, SET MONTH TO 10.5

IF SEASON IS END OF YEAR, SET MONTH TO 12

THIS GIVES YOU AN ESTIMATE OF MONTH AND YEAR. GO TO 10.

2. IF NEITHER MONTH NOR SEASON OF MOVE IS AVAILABLE:

CALCULATE ALL OF THE DATES THAT ARE POSSIBLE TO CALCULATE FROM THE RESPONSES GIVEN IN PC9, PC9A, PC9B PLUS CHILD'S AGE AT INTERVIEW (CAAI) AND CHILD'S BIRTHDATE (CBD):

DATE1=IF INTERVIEW YEAR=YEAR OF MOVE, DATE1=MOVE YEAR + TRUNCATION((INTERVIEW MONTH / 2))

ELSE DATE1=YEAR OF MOVE + SIX MONTHS (I.E., JUNE OF YEAR OF MOVE)

DATE2=INTERVIEW DATE MINUS HOW LONG AGO MOVE WAS

DATE3=INTERVIEW DATE MINUS (CHILD'S CURRENT AGE MINUS CHILD'S AGE AT MOVE)

DATE4=CHILD'S BIRTHDATE PLUS CHILD'S AGE AT MOVE PLUS SIX MONTHS

COMPARE ALL DATES THAT CAN BE CALCULATED BASED ON AVAILABLE INFORMATION AND CHOOSE THE ONE THAT IS CLOSEST TO INTERVIEW DATE.

PC7. Where did [he / she] live just before moving in with you (this time)?

PROBE: What was the street address? What city and state was that? What is the nearest intersection, corner, or cross-street?

ENTER ALL THAT R KNOWS

1. EXACT STREET NUMBER AND STREET NAME _____

OR

2. ON _____ STREET) NEAR THE CORNER OF _____ (CROSS-STREET)
_____ CITY OR TOWN _____ STATE _____ COUNTRY (IF NOT THE U.S.)

PC8. Who was [CHILD] living with when [he / she] lived at that address? PROBE: Anyone else?

CODE ALL THAT APPLY

1. BIOLOGICAL MOTHER
2. BIOLOGICAL FATHER
3. ADOPTIVE MOTHER
4. ADOPTIVE FATHER
5. STEPMOTHER
6. STEPFATHER
7. MOTHER'S BOYFRIEND / PARTNER
8. FATHER'S GIRLFRIEND / PARTNER
9. GRANDMOTHER
10. GRANDFATHER
11. AUNT
12. UNCLE
13. SISTER (INCLUDING HALF SISTER, STEP SISTER)
14. BROTHER (INCLUDING HALF BROTHER, STEP BROTHER)
15. HUSBAND / WIFE
16. OTHER RELATIVES
17. FOSTER PARENTS, FOSTER FAMILY, FOSTER CARE
18. FRIENDS
19. WITH HIS / HER BOYFRIEND / GIRLFRIEND
20. LIVING BY HIMSELF / HERSELF
21. LIVING IN A SCHOOL DORMITORY
22. IN JAIL, PRISON, OR JUVENILE DETENTION CENTER
23. SOMEWHERE ELSE, SPECIFY: _____

PC9. When did [he / she] start living at [FILL STREET ADDRESS IN PC7]? What month and year?

1. _____ MONTH _____ YEAR (HARD CHECK AT CHILD'S BIRTHDATE IF HAVE)
2. _____ YEAR AND
 - A. BEGINNING OF YEAR
 - B. THE SPRING
 - C. THE SUMMER
 - D. THE FALL
 - E. END OF THE YEAR
3. _____ YEAR (RESPONDENT DOES NOT KNOW MONTH OR SEASON)
7. [IF VOLUNTEERED] LIVED AT ADDRESS STARTING FROM BIRTH OR STARTING JUST AFTER BIRTH

GO TO SECTION D

IF DK / REF CONTINUE

ELSE IF PC9=2 OR PC9=3, CONTINUE

ELSE IF PC9=1, GO TO PC10

PC9A. How long ago did [CHILD] start living at [FILL STREET ADDRESS IN PC7]?

1. _____ MONTHS AGO (HARD CHECK AT CHILD'S AGE IF AGE < 1 YEAR)
- OR
2. _____ YEARS AGO (HARD CHECK AT CHILD'S AGE IF AGE < 1 YEAR)
 7. [IF VOLUNTEERED] LIVED AT ADDRESS STARTING JUST AFTER BIRTH (GO TO END OF LOOP BELOW PC15)

PC9B_mo. How old was [CHILD] when [he / she] started living at [FILL STREET ADDRESS IN PC7]?

____ MONTHS OLD (RANGE 0–11, HARD CHECK AT CHILD’S AGE IF AGE<1 YEAR)
OR
____ YEARS OLD (RANGE 1–18, HARD CHECK AT CHILD’S AGE IS AGE <=1 YEAR)

INTERVIEWER: IF CHILD WAS LESS THAN 1 YEAR OLD, ENTER THE NUMBER OF MONTHS ON THIS SCREEN AND ZERO ON THE NEXT SCREEN.
IF CHILD WAS 1 YEAR OLD OR OLDER, ENTER ZERO MONTHS ON THIS SCREEN AND THE NUMBER OF YEARS ON THE NEXT SCREEN
FOR CHILDREN REPORTED AS 12 TO 23 MONTHS OLD, ENTER ZERO MONTHS ON THIS SCREEN AND 1 YEAR ON THE NEXT SCREEN
FOR CHILDREN REPORTED AS LESS THAN ONE MONTH OLD, ENTER ZERO MONTHS ON THIS SCREEN AND ZERO YEARS ON THE NEXT SCREEN

PC9C_1. CAPI CHECK: CALCULATE APPROXIMATE YEAR AND MONTH CHILD MOVED BASED ON CHILD’S BIRTHDATE, CHILD’S CURRENT AGE, PC9, PC9A, AND PC9B. USE THE FOLLOWING RULES:

CONVERT ALL MONTHS OF AGE OR MONTHS AGO TO FRACTIONS OF YEARS. WHEN MONTHS ALONE ARE USED BELOW, THEY ARE ASSUMED TO TAKE THE VALUES 1 TO 12.

1. IF YOU HAVE YEAR AND SEASON ONLY:
 - IF SEASON IS BEGINNING OF THE YEAR, SET MONTH TO 1.5
 - IF SEASON IS SPRING, SET MONTH TO 4.5
 - IF SEASON IS SUMMER, SET MONTH TO 7.5
 - IF SEASON IS FALL, SET MONTH TO 10.5
 - IF SEASON IS END OF YEAR, SET MONTH TO 12THIS GIVES YOU AND ESTIMATE OF MONTH AND YEAR. GO TO 10.
2. IF NEITHER MONTH NOR SEASON OF MOVE IS AVAILABLE:
 - CALCULATE ALL OF THE DATES THAT ARE POSSIBLE TO CALCULATE FROM THE RESPONSES GIVEN IN PC9, PC9A, PC9B PLUS CHILD’S AGE AT INTERVIEW (CAAI) AND CHILD’S BIRTHDATE (CBD):
 - DATE1=IF INTERVIEW YEAR=YEAR OF MOVE, DATE1=MOVE YEAR + (TRUNCATION(INTERVIEW MONTH / 2))
 - ELSE DATE1=YEAR OF MOVE + SIX MONTHS (I.E., JUNE OF YEAR OF MOVE)
 - DATE2=INTERVIEW DATE MINUS HOW LONG AGO MOVE WAS
 - DATE3=INTERVIEW DATE MINUS (CHILD’S CURRENT AGE MINUS CHILD’S AGE AT MOVE)
 - DATE4=CHILD’S BIRTHDATE PLUS CHILD’S AGE AT MOVE PLUS SIX MONTHS
 - COMPARE ALL DATES THAT CAN BE CALCULATED BASED ON AVAILABLE INFORMATION AND CHOOSE THE ONE THAT IS CLOSEST TO INTERVIEW DATE.

PC10. CAPI: CHECK PC9. IS THIS DATE PRIOR TO [STARTDATE] OR WITHIN 1 MONTH AFTER [CHILD’S BIRTHDATE]?

1. YES (GO TO END OF SECTION C)
5. NO

START LOOP HERE

PC11. Where did [he / she] live just before moving to that place at [PREVADD]?

PROBE: What was the street address? What city and state was that? What was the nearest intersection, corner, or cross-street?

ENTER AS MUCH AS R KNOWS

1. _____ STREET ADDRESS
OR

2. ON _____ (STREET NAME) AT THE CORNER OF _____ (STREET NAME)
_____ CITY OR TOWN _____ STATE _____ COUNTRY (IF NOT THE US)

SET PREVADD=ADDRESS IN PC11

PC12. Who was [CHILD] living with when [he / she] lived at [FILL STREET ADDRESS IN PC11]?

PROBE: Anyone else?

INTERVIEWER: DO NOT READ ANSWERS. SELECT ALL THAT APPLY

0. WITH RESPONDENT
1. BIOLOGICAL MOTHER
2. BIOLOGICAL FATHER
3. ADOPTIVE MOTHER
4. ADOPTIVE FATHER
5. STEPMOTHER
6. STEPFATHER
7. MOTHER'S BOYFRIEND / PARTNER
8. FATHER'S GIRLFRIEND / PARTNER
9. GRANDMOTHER
10. GRANDFATHER
11. AUNT
12. UNCLE
13. SISTER (INCLUDING HALF SISTER, STEP SISTER)
14. BROTHER (INCLUDING HALF BROTHER, STEP BROTHER)
15. HUSBAND / WIFE
16. OTHER RELATIVES
17. FOSTER PARENTS, FOSTER FAMILY, FOSTER CARE
18. FRIENDS
19. WITH HIS / HER BOYFRIEND / GIRLFRIEND
20. LIVING BY HIMSELF / HERSELF
21. LIVING IN A SCHOOL DORMITORY
22. IN JAIL, PRISON, OR JUVENILE DETENTION CENTER
23. SOMEWHERE ELSE, SPECIFY: _____

PC13. When did [he / she] start living at [FILL ADDRESS IN PC11]?

INTERVIEWER: IF RESPONDENT SAYS HE / SHE DOES NOT KNOW THE MONTH OR YEAR, GET AN ESTIMATE OF BOTH THE MONTH AND YEAR.

IF RESPONDENT CAN ONLY GIVE YEAR, ASK: Was it around the beginning of the year, in the spring, in the summer in the fall or around the end of the year?

1. _____ MONTH _____ YEAR (HARD CHECK AT CHILD'S BIRTHDATE IF HAVE)
2. _____ YEAR AND
 - A. BEGINNING OF YEAR
 - B. THE SPRING
 - C. THE SUMMER
 - D. THE FALL
 - E. END OF THE YEAR
3. _____ YEAR (RESPONDENT DOES NOT KNOW MONTH OR SEASON)
7. [IF VOLUNTEERED] LIVED AT ADDRESS STARTING JUST AFTER BIRTH (GO TO SECTION D)

IF DK / REF CONTINUE

ELSE IF PC13=2 OR PC13=3, CONTINUE

ELSE IF PC13=1, GO TO PC14

PC13A. How long ago did [CHILD] start living at [FILL STREET ADDRESS IN PC11]?

1. _____ MONTHS AGO (HARD CHECK AT CHILD'S AGE IF AGE < 1 YEAR)
OR
2. _____ YEARS AGO (HARD CHECK AT CHILD'S AGE IF AGE < 1 YEAR)
7. [IF VOLUNTEERED] LIVED AT ADDRESS STARTING AT BIRTH OR STARTING JUST AFTER BIRTH
(GO TO SECTION D)

PC13B. How old was [CHILD] when [he / she] started living at [FILL STREET ADDRESS IN PC11]?

____ MONTHS OLD (RANGE 0–11, HARD CHECK AT CHILD'S AGE IF AGE<1 YEAR)
OR
____ YEARS OLD (RANGE 1–18, HARD CHECK AT CHILD'S AGE IS AGE <=1 YEAR)

INTERVIEWER: IF CHILD WAS LESS THAN 1 YEAR OLD, ENTER THE NUMBER OF MONTHS ON THIS SCREEN AND ZERO ON THE NEXT SCREEN

IF CHILD WAS 1 YEAR OLD OR OLDER, ENTER ZERO MONTHS ON THIS SCREEN AND THE NUMBER OF YEARS ON THE NEXT SCREEN

FOR CHILDREN REPORTED AS 12 TO 23 MONTHS OLD, ENTER ZERO MONTHS ON THIS SCREEN AND 1 YEAR ON THE NEXT SCREEN

FOR CHILDREN REPORTED AS LESS THAN ONE MONTH OLD, ENTER ZERO MONTHS ON THIS SCREEN AND ZERO YEARS ON THE NEXT SCREEN

PC13C. CAPI CHECK: CALCULATE APPROXIMATE YEAR AND MONTH CHILD MOVED BASED ON CHILD'S BIRTHDATE, CHILD'S CURRENT AGE, PC13, PC13A, AND PC13B. USE THE FOLLOWING RULES:

CONVERT ALL MONTHS OF AGE OR MONTHS AGO TO FRACTIONS OF YEARS. WHEN MONTHS ALONE ARE USED BELOW, THEY ARE ASSUMED TO TAKE THE VALUES 1 TO 12.

1. IF YOU HAVE YEAR AND SEASON ONLY:

IF SEASON IS BEGINNING OF THE YEAR, SET MONTH TO 1.5

IF SEASON IS SPRING, SET MONTH TO 4.5

IF SEASON IS SUMMER, SET MONTH TO 7.5

IF SEASON IS FALL, SET MONTH TO 10.5

IF SEASON IS END OF YEAR, SET MONTH TO 12

THIS GIVES YOU AN ESTIMATE OF MONTH AND YEAR. GO TO 10.

2. IF NEITHER MONTH NOR SEASON OF MOVE IS AVAILABLE:

CALCULATE ALL OF THE DATES THAT ARE POSSIBLE TO CALCULATE FROM THE RESPONSES GIVEN IN PC9, PC9A, PC9B PLUS CHILD'S AGE AT INTERVIEW (CAAI) AND CHILD'S BIRTHDATE (CBD):

DATE1=IF INTERVIEW YEAR=YEAR OF MOVE, DATE1=MOVE YEAR + (TRUNCATION((INTERVIEW MONTH / 2))

ELSE DATE1=YEAR OF MOVE + SIX MONTHS (I.E., JUNE OF YEAR OF MOVE)

DATE2=INTERVIEW DATE MINUS HOW LONG AGO MOVE WAS

DATE3=INTERVIEW DATE MINUS (CHILD'S CURRENT AGE MINUS CHILD'S AGE AT MOVE)

DATE4=CHILD'S BIRTHDATE PLUS CHILD'S AGE AT MOVE PLUS SIX MONTHS

COMPARE ALL DATES THAT CAN BE CALCULATED BASED ON AVAILABLE INFORMATION AND CHOOSE THE ONE THAT IS CLOSEST TO INTERVIEW DATE.

PC14. CAPI: CHECK PC13. IS THIS DATE PRIOR TO [STARTDATE] OR WITHIN 1 MONTH AFTER [CHILD'S BIRTHDATE]?

1. YES (GO TO END OF SECTION C)
5. NO (GO TO START OF LOOP ABOVE PC11)

LOOP END. [LOOP CONTINUES UNTIL PC14=1]

SECTION D. PLACE OF BIRTH AND IMMIGRANT STATUS

PDXA. CAPI CHECK:

1. THIS IS NOT A PANEL CHILD (CONTINUE)
2. THIS IS A PANEL CHILD AND WE HAVE A BIRTH PLACE FROM W1 (GO TO PD2 AND COMPLETE BASED ON PRELOAD)
3. THIS IS A PANEL CHILD BUT WE DO NOT HAVE A BIRTH PLACE FROM W1 (CONTINUE)

PD1. Please tell me where [CHILD] was born.

NOTE: DO NOT ENTER STREET ADDRESS

_____ CITY _____ STATE / PROVINCE / TERRITORY _____ COUNTRY (IF NOT THE U.S.)

PD2. CAPI CHECK: WAS CHILD BORN IN THE UNITED STATES?

1. YES (GO TO END OF SECTION)
5. NO

PD3_A. Is [CHILD] a U.S. citizen, a permanent resident, on a visa, or something else?

1. U.S. CITIZEN (GO TO PD4)
2. PERMANENT RESIDENT (GREEN CARD HOLDER) (GO TO PD4)
3. VISA (GO TO PD3A)
4. [IF VOLUNTEERED] DOES NOT HAVE PAPERS OR DOCUMENTS (GO TO PD4)
5. OTHER STATUS, SPECIFY _____

PD3A. What type of visa is [CHILD] on?

RECORD VERBATIM _____

PD4. CAPI CHECK:

1. STARTDATE IN SECTION C IS EARLIER THAN OR EQUAL TO CHILD'S BIRTH DATE (GO TO END OF SECTION)
2. STARTDATE IN SECTION C IS LATER THAN CHILD'S BIRTH DATE AND C1=1 (GO TO END OF SECTION)
3. OTHERWISE (CONTINUE)

PD5. In what year did [CHILD] first come to the United States to live? Please do not include short trips for shopping, vacation or family visits.

PROBE: How long ago did [CHILD] first come to the U.S. to live?

1. _____ CALENDAR YEAR (RANGE 1985–CURRENT YEAR, BUT. NOT BEFORE CHILD BORN)
2. _____ YEARS ago (HARD CHECK AT CHILD'S AGE IF AGE >=1 YEAR)
- OR
3. _____ MONTHS ago (HARD CHECK AT CHILD'S AGE IF AGE <1 YEAR)

PD6. CAPI CHECK PD5

1. PD5 IS DK OR REFUSED
2. OTHER (GO TO PD8)

PD7_mo. How old was [CHILD] when [he / she] first came to the United States to live?

INTERVIEWER: ENTER MONTHS OR YEARS BUT NOT BOTH. FOR CHILDREN REPORTED AS 12 TO 23 MONTHS OLD, ENTER 1 YEAR.

_____ MONTHS [RANGE: 0 TO 11; HARD CHECK AT R'S CURRENT AGE]
OR
_____ YEARS [RANGE: 1 TO 18; HARDCHECK AT R'S CURRENT AGE]

PD8. After [CHILD] came to the United States [in [MONTH AND YEAR IN PD5] / at age [AGE IN PD7]], did [he / she] ever return to live in [COUNTRY IN PD1] for more than two months?

1. YES
5. NO (GO TO END OF THE SECTION)

SECTION E. CHILD SUPPORT, PATERNITY, CONTACT WITH ABSENT PARENT, FATHER INVOLVEMENT

PEX1A. CAPI CHECK: CHECK PRELOAD

1. ROSTER INDICATES THAT PCG IS [CHILD]'S BIOLOGICAL MOTHER (GO TO PEX1H)
2. PCG IS LISTED IN ROSTER AS [CHILD]'S MOTHER, BUT MAY BE ADOPTIVE
3. PCG IS NOT [CHILD]'S BIOLOGICAL MOTHER, BUT WE KNOW FOR CERTAIN THAT [CHILD]'S BIOLOGICAL MOTHER LIVES IN HH (GO TO PEX1H)
4. PCG IS NOT [CHILD]'S BIOLOGICAL MOTHER, THERE IS A PERSON LISTED AS CHILD'S MOTHER IN HH, BUT NOT CERTAIN WHETHER OR NOT THAT PERSON IS CHILD'S BIOLOGICAL MOTHER
5. OTHER (GO TO PEX1C)

PEX1B. [Are you / Is [PERSON LISTED IN ROSTER AS CHILD'S MOTHER]] [CHILD]'s birth or biological mother?

PROBE: Did [you / [PERSON LISTED IN ROSTER AS CHILD'S MOTHER]] give birth to [CHILD]?

1. YES
5. NO

IF PEX1B=1 GO TO PEX1H. ELSE IF B4=1 GO TO PEX1E. ELSE CONTINUE

PEX1C. Just to make sure my information is correct, is [CHILD]'s birth or biological mother alive?

1. YES (GO TO PEX1E)
5. NO

DK OR REF (GO TO PEX1E)

PEX1D. When did [CHILD]'s birth mother die? What month and year?

PROBE: How long ago did [CHILD]'s mother die?

1. ___ MONTH ___ YEAR (HARD CHECK AT CHILD'S BIRTHDATE IF HAVE)
 2. ___ MONTHS AGO (HARD CHECK AT CHILD'S AGE IF AGE < 1 YEAR)
- OR
3. ___ YEARS AGO (HARD CHECK AT CHILD'S AGE IF AGE >=1 YEAR)

DK OR REF (CONTINUE). ELSE GO TO PEX1E.

PEX1D_1. How old was [CHILD] when [his / her] birth mother died?

- ___ MONTHS OLD (RANGE 0-11, HARD CHECK AT CHILD'S AGE IF AGE<1 YEAR)
- OR
- ___ YEARS OLD (RANGE 1-18, HARD CHECK AT CHILD'S AGE IS AGE <=1 YEAR)

PEX1E. Please look at this list and tell me what group or groups describe [CHILD]'s birth mother's race or ethnic origin.

CODE ALL THAT APPLY

1. BLACK / AFRICAN-AMERICAN
2. WHITE
3. LATINO / HISPANIC / LATIN AMERICAN
4. ASIAN INDIAN / SOUTH ASIAN
5. CHINESE
6. FILIPINO
7. JAPANESE
8. KOREAN
9. VIETNAMESE
10. OTHER ASIAN
11. NATIVE AMERICAN/AMERICAN INDIAN
12. INUIT / ESKIMO / ALEUT
13. HAWAIIAN
14. PACIFIC ISLANDER
15. OTHER, SPECIFY
16. MIDDLE EASTERN (ARAB, PERSIAN, NORTH AFRICAN)

PEX1F. CHECK PEX1E

1. ONLY ONE GROUP IS CIRCLED (GO TO PEX1H)
2. 2 OR MORE: NUMBER OF GROUPS CIRCLED

PEX1G. Which one group on that card best describes [CHILD]'s birth mother's race or ethnic origin.

CODE ONLY ONE

1. BLACK / AFRICAN-AMERICAN
2. WHITE
3. LATINO / HISPANIC / LATIN AMERICAN
4. ASIAN INDIAN / SOUTH ASIAN
5. CHINESE
6. FILIPINO
7. JAPANESE
8. KOREAN
9. VIETNAMESE
10. OTHER ASIAN
11. NATIVE AMERICAN/AMERICAN INDIAN
12. INUIT / ESKIMO / ALEUT
13. HAWAIIAN
14. PACIFIC ISLANDER
15. OTHER, SPECIFY
16. MIDDLE EASTERN (ARAB, PERSIAN, NORTH AFRICAN)

PEX1H. CAPI CHECK: CHECK PRELOAD

1. ROSTER INDICATES THAT PCG IS [CHILD]'S BIOLOGICAL FATHER (GO TO PE1)
2. PCG IS LISTED IN ROSTER AS [CHILD]'S FATHER, BUT MAY BE ADOPTIVE
3. PCG IS NOT [CHILD]'S BIOLOGICAL FATHER, BUT WE KNOW FOR CERTAIN THAT [CHILD]'S BIOLOGICAL FATHER LIVES IN HH (GO TO PE1)
4. PCG IS NOT [CHILD]'S BIOLOGICAL FATHER, THERE IS A PERSON LISTED AS CHILD'S FATHER IN HH, BUT NOT CERTAIN WHETHER OR NOT THAT PERSON IS CHILD'S BIOLOGICAL FATHER
5. OTHER (GO TO PEX1K)

PEX1J. [Are you / Is [PERSON LISTED IN ROSTER AS CHILD'S FATHER]] [CHILD]'s birth or biological father?

1. YES (GO TO PE1)
5. NO

IF PEX1J=1 GO TO PE1. ELSE IF B4=2 GO TO PEX1M. ELSE CONTINUE.

PEX1K. Just to make sure my information is correct, is [CHILD]'s birth or biological father alive?

1. YES (GO TO PEX1M)
5. NO
7. [IF VOLUNTEERED] RESPONDENT DOES NOT KNOW WHO BIO FATHER IS (IF PEX1C=1, THEN GO TO PE24A, ELSE GO TO END OF SECTION E)

DK OR REF (GO TO PEX1M)

PEX1L. When did [CHILD]'s biological father die? What month and year?

PROBE: How long ago did [CHILD]'s father die?

1. ___ MONTH ___ YEAR
 2. ___ MONTHS AGO
- OR
3. ___ YEARS AGO

DK OR REF (CONTINUE). ELSE GO TO PEX1M

PEX1L_1. How old was [CHILD] when [his / her] biological father died?

1. ___ MONTHS OLD
- OR
2. ___ YEARS OLD
 3. CHILD WAS NOT YET BORN

PEX1M. Please look at this list and tell me what group or groups describe [CHILD]'s birth father's race or ethnic origin.

CODE ALL THAT APPLY

1. BLACK / AFRICAN-AMERICAN
2. WHITE
3. LATINO / HISPANIC / LATIN AMERICAN
4. ASIAN INDIAN / SOUTH ASIAN
5. CHINESE
6. FILIPINO
7. JAPANESE
8. KOREAN
9. VIETNAMESE
10. OTHER ASIAN
11. NATIVE AMERICAN/AMERICAN INDIAN
12. INUIT / ESKIMO / ALEUT
13. HAWAIIAN
14. PACIFIC ISLANDER
15. OTHER, SPECIFY
16. MIDDLE EASTERN (ARAB, PERSIAN, NORTH AFRICAN)

DK OR REF (GO TO PE1)

PEX1N. CHECK PEX1M

1. ONLY ONE GROUP IS CIRCLED (GO TO PE1)
2. 2 OR MORE: NUMBER OF GROUPS CIRCLED

PEX1P. Which one group on that card best describes [CHILD]'s birth father's race or ethnic origin.

CODE ONLY ONE

1. BLACK / AFRICAN-AMERICAN
2. WHITE
3. LATINO / HISPANIC / LATIN AMERICAN
4. ASIAN INDIAN / SOUTH ASIAN
5. CHINESE
6. FILIPINO
7. JAPANESE
8. KOREAN
9. VIETNAMESE
10. OTHER ASIAN
11. NATIVE AMERICAN/AMERICAN INDIAN
12. INUIT / ESKIMO / ALEUT
13. HAWAIIAN
14. PACIFIC ISLANDER
15. OTHER, SPECIFY
16. MIDDLE EASTERN (ARAB, PERSIAN, NORTH AFRICAN)

BIOMOM_STAT. CREATE CAPI VARIABLE FOR STATUS OF BIO MOM AND DAD

BIOMOM_STAT:

- 1=BIOMOM IS PCG
- 2=BIOMOM IN HH BUT NOT PCG
- 3=BIOMOM NOT IN HH
- 4=BIOMOM IS DEAD

BIODAD_STAT:

- 1=BIODAD IS PCG
- 2=BIODAD IN HH BUT NOT PCG
- 3=BIODAD NOT IN HH
- 4=BIODAD IS DEAD

PE1. CAPI CHECKPOINT: CHECK HH ROSTER, PEX1B, PEX1C, PEX1J, EXIL

UNLESS OTHERWISE SPECIFIED, MOTHER / FATHER=BIOLOGICAL OR ADOPTIVE IN THIS SECTION

1. CHILD'S MOTHER AND FATHER ARE BOTH LIVING IN THIS HOUSEHOLD (GO TO PE57)
2. CHILD LIVES WITH MOTHER ONLY (NO FATHER IN HH) AND BIOLOGICAL FATHER IS NO LONGER ALIVE (GO TO PE8)
3. CHILD LIVES WITH MOTHER ONLY (NO FATHER IN HH) AND BIOLOGICAL FATHER IS ALIVE
4. CHILD LIVES WITH FATHER ONLY (NO MOTHER IN HH) AND BIOLOGICAL MOTHER IS NO LONGER ALIVE (GO TO PE8)
5. CHILD LIVES WITH FATHER ONLY (NO MOTHER IN HH) AND BIOLOGICAL MOTHER IS ALIVE
6. NEITHER MOTHER NOR FATHER LIVE IN HH (GO TO PE24)

SECTION FOR KIDS WITH ONLY MOTHERS OR ONLY FATHERS IN THE HH

PE3. CAPI CHECK:

1. FIRSTCHILD=1 (CHILD IS FIRST CHILD GIVEN PARENT QX)
2. FIRSTCHILD>=2 AND THIS CHILD AND [FIRSTCHILD] HAVE SAME [FATHER / MOTHER] AND PC1_COMP_PE4_PE7=1 (GO TO PE8)
3. FIRSTCHILD>=2 AND THIS CHILD AND [FIRSTCHILD] DO NOT HAVE SAME [FATHER / MOTHER]

DATA USER NOTE: Cases for which FIRSTCHILD = 2 with PC1_COMP_PE4_PE7 ≠ 1 and which had the same nonresident parent as FIRSTCHILD = 1 were mistakenly not assigned a value for PE3. They should have been assigned PE3 = 3 and asked PE4 and PE5. It appears that PE3 was not set for any FIRSTCHILD ≥ 2 case, even those with PC1_COMP_PE4_PE7 = 1. Therefore one will see kids with PE1 = 3 or 5 but PE3 is blank resulting in PE5 not having been asked so we do not know where the nonresident parent lives for that child.

PE4. CAPI: CHECK B4 AND B5:

1. CHILD STAYS PART OF THE TIME WITH OTHER PARENT AND WE ALREADY HAVE OTHER PARENT'S ADDRESS IN B5 (GO TO PE8)
2. OTHERWISE

PE5. Where does [CHILD]'s [father / mother] live? What city and state?

- _____ CITY OR TOWN _____ STATE _____ COUNTRY (IF NOT THE U.S.)
1. [IF VOLUNTEERED] CHILD WAS ADOPTED BY R AND HAS NO ADOPTIVE [FATHER / MOTHER] (GO TO PE57)
 2. [IF VOLUNTEERED] MOTHER DOESN'T KNOW WHO CHILD'S FATHER IS (GO TO SECTION F)
 3. ENTERED ADDRESS INFORMATION
 4. [IF VOLUNTEERED] MOTHER / FATHER IN JAIL / PRISON
 - d. DON'T KNOW (GO TO PE8)

PE8. CAPI CHECK:

1. [CHILD] IS A PANEL RESPONDENT
2. [CHILD] IS A NEW ENTRANT (GO TO PE8M)

PE8A. CAPI CHECK PRELOAD:

1. FROM W1 WE KNOW PARENTS MARRIED WHEN CHILD BORN (GO TO PE15)
2. FROM W1 WE KNOW PATERNITY STATUS WAS ESTABLISHED (GO TO PE15)
3. OTHERWISE

PE8M. CAPI: CHECK WHETHER R IS BIO PARENT OF CHILD

1. WE KNOW THAT CHILD WAS ADOPTED (GO TO PE57)
2. PCG IS BIO PARENT
3. PCG IS NOT BIO PARENT (GO TO PE11)

PE9. Were you married to [CHILD]'S [father / mother] when [CHILD] was born?

1. YES (GO TO PE15)
2. NO
3. [IF VOLUNTEERED] CHILD WAS ADOPTED BY R AND HAS NO ADOPTIVE [FATHER / MOTHER] (GO TO PE57)

PE10. Was [your name / the name of the child's father] on the child's birth certificate?

1. YES (GO TO PE12)
5. NO

PE11. A child's natural birth father can be made the child's legal father by going to a judge in a court, going to the child support office, or signing a special form in front of witnesses or a notary public. Have any of these things been done to try to make [you / the birth father] [CHILD]'s legal father, no matter what the outcome was?

1. YES (GO TO PE14)
5. NO (GO TO PE15)
3. [IF VOLUNTEERED] R DOESN'T KNOW WHO THE FATHER IS (GO TO END OF SECTION E)
4. [IF VOLUNTEERED] R SAYS FATHER'S NAME / OWN NAME WAS ON BIRTH CERTIFICATE

PE12. Aside from the birth certificate, was anything else done to make [you / the birth father] [CHILD]'s legal father?

1. YES
5. NO (GO TO PE15)

PE13_A. What was that?

1. [R / FATHER] WENT TO COURT OR SAW A JUDGE
2. [R / FATHER] WENT TO CHILD SUPPORT OFFICE
3. [R / FATHER] SIGNED A SPECIAL FORM
4. SOMETHING ELSE, SPECIFY: _____

PE14. As a result of what happened [were you / was the birth father] judged or declared to be [CHILD]'s legal father? This is sometimes referred to as establishing paternity.

1. YES
5. NO

PE15. CAPI: CHECK PE8 AND PE9

1. R HAS NEVER BEEN MARRIED [AS OF W2] (GO TO PE39)
2. R WAS MARRIED TO CHILD'S [FATHER / MOTHER] WHEN CHILD WAS BORN (PE9=1 OR PRELOAD VARIABLE (GO TO PE17)
3. R WAS NOT MARRIED TO CHILD'S [FATHER / MOTHER] WHEN CHILD WAS BORN (PE9=2 OR FROM PRELOAD) BUT CURRENT [W2] MARITAL STATUS IS MARRIED, SEPARATED, DIVORCED, WIDOWED, OR COHABITING
4. FROM W1 WE KNOW THAT PARENTS MARRIED AFTER CHILD WAS BORN (GO TO PE17)

PE16. Did you marry [CHILD]'s [father / mother] after [CHILD] was born?

1. YES
5. NO (GO TO PE39)

PE17. Are you currently divorced or separated from [CHILD]'s [father / mother]?

1. DIVORCED (GO TO PE39)
2. SEPARATED (GO TO PE39)
3. STILL MARRIED BUT [FATHER / MOTHER] LIVES ELSEWHERE
4. IF VOLUNTEERED] CHILD'S [FATHER / MOTHER] DIED WHILE MARRIED TO PCG

PE18. Why does [CHILD]'s [father / mother] live somewhere else?

1. BECAUSE OF WORK / SCHOOL / MILITARY SERVICE / HOSPITALIZATION / JAIL OR PRISON (GO TO PE39)
2. PREFER TO MAINTAIN SEPARATE HOUSEHOLDS (GO TO PE39)
3. LIVES WITH SOMEONE ELSE (GIRLFRIEND / BOYFRIEND, ANOTHER WOMAN / MAN, PARTNER)
4. MARITAL PROBLEMS
5. NO LONGER ROMANTICALLY INVOLVED
6. OTHER, SPECIFY _____

ALL GO TO PE39

SECTION FOR KIDS WITH NEITHER PARENT IN THE HH

PE24. CAPI CHECK

1. CHILD STAYS WITH MOTHER SOMEWHERE ELSE PART TIME (I.E., B4=1) AND WE HAVE HER ADDRESS (GO TO PE28)
2. CHILD'S MOTHER IS ALIVE (I.E., PEX1B=1 OR PEX1C=1) (CONTINUE)
3. CHILD'S MOTHER IS NO LONGER ALIVE (I.E., PEX1C=5 OR DK OR REF) (GO TO PE28)

PE25. Where does [CHILD]'s mother live? In what city and state?

_____ CITY AND STATE _____ COUNTRY (IF NOT U.S.)

PE27. What street does she live on? What is the nearest intersection, corner, or cross-street?

1. EXACT HOUSE / APT NUMBER AND STREET NAME _____
2. ON _____ STREET AT THE CORNER OF _____ CROSS-STREET

PE28. CAPI: CHECK B4 AND B5:

1. CHILD STAYS WITH FATHER SOMEWHERE ELSE PART TIME (I.E. B4=2) AND WE HAVE HIS ADDRESS (GO TO PE33)
2. CHILD'S FATHER IS ALIVE (I.E., PEX1J=1 OR PEX1K=1) (CONTINUE)
3. CHILD'S FATHER IS NO LONGER ALIVE (I.E., PEX1K=5 OR 7 OR DK OR REF) (GO TO PE33)

PE30. Where does [CHILD]'s father live? In what city and state?

1. _____ CITY AND STATE _____ COUNTRY
2. SAME PLACE AS CHILD'S MOTHER (GO TO PE33)
- 1. DON'T KNOW (GO TO PE33)

PE33. CAPI CHECK PE24A AND PE28

1. NEITHER PARENT IS ALIVE (GO TO END OF SECTION)
2. MOTHER IS ALIVE BUT BIO FATHER IS NOT ALIVE OR PCG DOES NOT KNOW WHO BIO FATHER IS
3. FATHER IS ALIVE BUT BIO MOTHER IS NOT ALIVE
4. BOTH MOTHER AND FATHER ARE ALIVE

PE33B. CAPI CHECK

1. CHILD LIVES WITH AN ADOPTIVE MOTHER AND / OR AN ADOPTIVE FATHER (GO TO PE39)
2. OTHERWISE (CONTINUE)

PE34. Why is [CHILD] living here with you rather than with [his / her] [other / father / parents]?

SELECT ALL THAT APPLY

1. CLOSER TO CHILD'S SCHOOL OR JOB
2. CHILD LIVING HERE TO HELP R OR ANOTHER PERSON IN HH
3. PARENT IN PRISON OR JAIL
4. PARENT (PHYSICALLY) ILL
5. PARENT MENTAL ILLNESS
6. PARENT DRUG OR ALCOHOL USE
7. PARENT BEAT, ABUSED OR NEGLECTED CHILD
8. PARENT AND CHILD CAN'T GET ALONG
9. PARENT FINANCIAL PROBLEMS
10. PARENT HAS LEFT THE COUNTRY (VOLUNTARILY, DEPORTED, OTHER)
11. PARENT MOVED AWAY FOR WORK / SCHOOL
12. PARENT TRAVELS FOR WORK
13. FOSTER CARE
14. OTHER, SPECIFY: _____
15. CUSTODY GIVEN TO RESP. BY COURT / SOCIAL SERVICES
18. PARENT ABANDONED CHILD
19. PARENT WORK SCHEDULE

PE39. CAPI CHECK HH ROSTER PRELOAD AND PE1 AND PE28:

1. [CHILD]'S FATHER IS ALIVE BUT DOES NOT LIVE IN THE HH
2. [CHILD]'S FATHER IS ALIVE AND LIVES IN HH (GO TO PE48)
3. [CHILD]'S FATHER HAS DIED (PE28=3 → GO TO PE48)

PE40. How old was [CHILD]'s father when [CHILD] was born?

PROBE: Give me your best estimate.

_____ YEARS OLD

PE41. How much school has [CHILD]'s father currently completed?

1. NONE
2. _____ (GRADES 1 THROUGH 11)
3. HIGH SCHOOL GRADUATE OR COMPLETED GED
4. SOME VOCATIONAL SCHOOL
5. COMPLETED VOCATIONAL SCHOOL
6. SOME COLLEGE
7. ASSOCIATES' DEGREE (AA)
8. BACHELORS' DEGREE (BA, BS)
9. SOME GRADUATE OR PROFESSIONAL SCHOOL (AFTER COMPLETING COLLEGE)
10. COMPLETED GRADUATE / PROFESSIONAL DEGREE

PE43. CAPI CHECK:

1. CHILD IS LESS THAN ONE YEAR OLD (GO TO PE47)
2. CHILD IS ONE YEAR OLD OR OLDER

PE44. During the past 12 months, that is since [DATE 12 MONTHS AGO], about how often did [CHILD] talk on the telephone or receive a letter from [his / her] father? Would you say not at all, about once a year, several times a year, one to three times a month, about once a week, or several times a week?

1. NOT AT ALL
2. ABOUT ONCE A YEAR
3. SEVERAL TIMES A YEAR
4. ONE TO THREE TIMES A MONTH
5. ABOUT ONCE A WEEK
6. SEVERAL TIMES A WEEK

PE47. [During the past 12 months, that is since [DATE 12 MONTHS AGO], Since [CHILD] was born], how often did [CHILD] see [his / her] father? Did [he / she] see him...

1. About once a year,
2. Several times a year,
3. One to three times a month,
4. About once a week, or
5. Several times a week?
6. Has not seen father in last 12 months

PE48. CHECK PE1 AND PE24A:

1. [CHILD]'S MOTHER IS ALIVE BUT DOES NOT LIVE IN THE HH
2. [CHILD]'S MOTHER IS ALIVE AND LIVES IN HH (GO TO PE57)
3. [CHILD]'S MOTHER HAS DIED (GO TO PE57)

PE49. How old was [CHILD]'s mother when [CHILD] was born? PROBE: Give me your best estimate.

_____ YEARS OLD

PE50. How much school has [CHILD]'s mother currently completed?

0. None
- 1 TO 11. _____ (GRADES 1 THROUGH 11)
12. HIGH SCHOOL GRADUATE OR COMPLETED GED
13. SOME VOCATIONAL SCHOOL
14. COMPLETED VOCATIONAL SCHOOL
15. SOME COLLEGE

16. ASSOCIATES' DEGREE (AA)
17. BACHELORS' DEGREE (BA, BS)
18. SOME GRADUATE OR PROFESSIONAL SCHOOL (AFTER COMPLETING COLLEGE)
19. COMPLETED GRADUATE / PROFESSIONAL DEGREE

PE52. INTERVIEWER CHECK:

1. CHILD IS LESS THAN ONE YEAR OLD (GO TO PE56)
2. CHILD IS ONE YEAR OLD OR OLDER

PE53. During the past 12 months, that is since [DATE 12 MONTHS AGO], about how often did [CHILD] talk on the telephone or receive a letter from [his / her] mother? Would you say not at all, about once a year, several times a year, one to three times a month, about once a week, or several times a week?

1. NOT AT ALL
2. ABOUT ONCE A YEAR
3. SEVERAL TIMES A YEAR
4. ONE TO THREE TIMES A MONTH
5. ABOUT ONCE A WEEK
6. SEVERAL TIMES A WEEK

PE56. [During the past 12 months, that is since [DATE 12 MONTHS AGO] / Since [CHILD] was born], how often did [CHILD] see [his / her] mother? Did [he / she] see her...

1. About once a year,
2. Several times a year,
3. One to three times a month,
4. About once a week, or
5. Several times a week?
6. Has not seen mother in last 12 months

PE57. CAPI CHECK:

1. CHILD IS SIX YEARS OLD OR OLDER
2. CHILD IS LESS THAN SIX YEARS OLD (GO TO END OF SECTION E)

PE58. CAPI CHECK PE1, PE28, PE39 AND PE47:

1. R IS CHILD'S BIO OR ADOPTIVE MOTHER OR STEPMOTHER AND FATHER LIVES IN THE HOUSEHOLD
2. R IS CHILD'S BIO OR ADOPTIVE MOTHER OR STEPMOTHER, FATHER IS ALIVE, FATHER DOES NOT LIVE IN HH, AND CHILD HAS SEEN FATHER IN LAST 12 MONTHS
3. R IS CHILD'S FATHER
4. OTHER (GO TO END OF SECTION E)

PE59. During the past 12 months, did [you / [CHILD]'s father] ever:

PE59.a. Work on homework or school projects with [CHILD]?

1. YES
5. NO

PE59.b. Look at books or read with [CHILD]?

1. YES
5. NO

PE59.c. Go to school-related events with [CHILD]?

1. YES
5. NO

PE59.d. Do activities outdoors with [CHILD] like sports, hiking, going to parks, etc.?

1. YES
5. NO

PE60. CAPI CHECK:

1. PCG IS CHILD'S MOTHER
2. PCG IS CHILD'S FATHER
3. OTHERWISE

KIDHHTYPE: CAPI CHECK

HOUSEHOLD TYPE BASED ON WHAT RSC / SIB ARE IN HOUSEHOLD

1. ONLY HAS RSC_NE AND / OR SIB_NE
2. ONLY HAS RSC_P AND / OR SIB_P WHERE NONE OF THOSE KIDS HAS W1 INFO ON PARENT BIRTHPLACE
3. ONLY HAS RSC_P AND / OR SIB_P WHERE ALL KIDS HAVE W1 INFO ON PARENT BIRTH PLACE (GO TO END OF SECTION)
4. HAS (RSC_P / SIB_P AND RSC_NE / SIB_NE) OR HAS JUST RSC_P AND SIB_P BUT ONE OF THEM IS MISSING PARENTAL BIRTH COUNTRY)

PE60A. CAPI CHECK:

1. IF KIDHHTYPE=1 OR 2 AND [FIRSTCHILD=1 OR [FIRSTCHILD>1 AND K1_MOMCTRY=EMPTY]] (GO TO PE61)
2. IF KIDHHTYPE=1 OR 2 AND FIRSTCHILD>1 AND K1_MOMCTRY≠EMPTY (GO TO PE61A)
3. IF KIDHHTYPE=4 AND FIRSTCHILD=1 AND K1_MOMCTRY=EMPTY (GO TO PE61)
4. IF KIDHHTYPE=4 AND [[FIRSTCHILD=1 AND K1_MOMCTRY≠EMPTY] OR [FIRSTCHILD=2 AND K2_MOMCTRY≠EMPTY] OR [FIRSTCHILD=3 AND K3_MOMCTRY≠EMPTY] OR [FIRSTCHILD=4 AND K4_MOMCTRY≠EMPTY]] (GO TO PE61A)
5. IF KIDHHTYPE=4 AND FIRSTCHILD=2 AND HAS SAME MOTHER AS FIRSTCHILD=1 AND K1_MOMCTRY=EMPTY (GO TO PE61)
6. IF KIDHHTYPE=4 AND FIRSTCHILD=2 AND HAS SAME MOTHER AS FIRSTCHILD=1 AND K1_MOMCTRY≠EMPTY (GO TO PE61A)
7. IF KIDHHTYPE=4 AND FIRSTCHILD=2 HAS DIFFERENT MOTHER THAN FIRSTCHILD=1 OR HAS SAME MOTHER AS FIRSTCHILD=1 AND K1_MOMCTRY=EMPTY (GO TO PE61)
8. IF KIDHHTYPE=4 AND FIRSTCHILD=3 AND [HAS SAME MOTHER AS FIRSTCHILD=1 AND K1_MOMCTRY≠EMPTY] OR [HAS SAME MOTHER AS FIRSTCHILD=2 AND K2_MOMCTRY≠EMPTY] (GO TO PE61A)
9. IF KIDHHTYPE=4 AND FIRSTCHILD=3 HAS DIFFERENT MOTHER THAN FIRSTCHILD=1 AND FIRSTCHILD=2 OR [[HAS SAME MOTHER AS FIRSTCHILD=1 AND K1_MOMCTRY=EMPTY] OR [HAS SAME MOTHER AS FIRSTCHILD=2 AND K2_MOMCTRY=EMPTY]] (GO TO PE61)
10. IF KIDHHTYPE=4 AND FIRSTCHILD=4 AND [HAS SAME MOTHER AS FIRSTCHILD=1 AND K1_MOMCTRY≠EMPTY] OR [HAS SAME MOTHER AS FIRSTCHILD=2 AND K2_MOMCTRY≠EMPTY] OR [HAS SAME MOTHER AS FIRSTCHILD=3 AND K3_MOMCTRY≠EMPTY] (GO TO PE61A)
11. IF KIDHHTYPE=4 AND FIRSTCHILD=4 HAS DIFFERENT MOTHER THAN FIRSTCHILD=1 AND FIRSTCHILD=2 AND FIRSTCHILD=3 OR [(HAS SAME MOTHER AS FIRSTCHILD=1 AND K1_MOMCTRY=EMPTY] OR [HAS SAME MOTHER AS FIRSTCHILD=2 AND K2_MOMCTRY=EMPTY] OR [HAS SAME MOTHER AS FIRSTCHILD=3 AND K3_MOMCTRY=EMPTY]] (GO TO PE61)

IF PE60A=2, SET K2_MOMCTRY=K1_MOMCTRY
 IF PE60A=6, SET K2_MOMCTRY=K1_MOMCTRY

IF PE60A=8 AND SAME MOTHER AS FIRSTCHILD=1, SET K3_MOMCTRY=K1_MOMCTRY

IF PE60A=8 AND SAME MOTHER AS FIRSTCHILD=2, SET K3_MOMCTRY=K2_MOMCTRY

IF PE60A=10 AND SAME MOTHER AS FIRSTCHILD=1, SET K4_MOMCTRY=K1_MOMCTRY

IF PE60A=10 AND SAME MOTHER AS FIRSTCHILD=2, SET K4_MOMCTRY=K2_MOMCTRY

IF PE60A=10 AND SAME MOTHER AS FIRSTCHILD=3, SET K4_MOMCTRY=K3_MOMCTRY

PE61. What country [were you / was [CHILD]'s mother] born in?

INTERVIEWER: IF RESPONDENT SAYS THIS IS AN ADOPTED CHILD, ASK ABOUT THE PARENT WHO RASIED THE CHILD DURING MOST OF HIS / HER LIFE.

_____ (COUNTRY NAME)

PE61A. CAPI CHECK

1. IF KIDHHTYPE=1 OR 2 AND [FIRSTCHILD=1 OR [FIRSTCHILD>1 AND SAME FATHER AS FIRSTCHILD=1 AND K1_DADCTRY=EMPTY] OR [FIRSTCHILD>1 AND HAS DIFFERENT FATHER THAN FIRSTCHILD=1]] (GO TO PE62)
2. IF KIDHHTYPE=1 OR 2 AND FIRSTCHILD>1 AND HAS SAME FATHER AS FIRSTCHILD=1 AND K1_DADCTRY≠EMPTY (GO TO END OF SECTION)
3. IF KIDHHTYPE=4 AND FIRSTCHILD=1 AND K1_DADCTRY=EMPTY (GO TO PE62)
4. IF KIDHHTYPE=4 AND [[FIRSTCHILD=1 AND K1_DADCTRY≠EMPTY] OR [FIRSTCHILD=2 AND K2_DADCTRY≠EMPTY] OR [FIRSTCHILD=3 AND K3_DADCTRY≠EMPTY] OR [FIRSTCHILD=4 AND K4_DADCTRY≠EMPTY]] (GO TO END OF SECTION)
5. IF KIDHHTYPE=4 AND FIRSTCHILD=2 AND HAS SAME FATHER AS FIRSTCHILD=1 AND K1_DADCTRY=EMPTY (GO TO PE62)
6. IF KIDHHTYPE=4 AND FIRSTCHILD=2 AND HAS SAME FATHER AS FIRSTCHILD=1 AND K1_DADCTRY≠EMPTY [GO TO END OF SECTION]
7. IF KIDHHTYPE=4 AND FIRSTCHILD=2 HAS DIFFERENT FATHER THAN FIRSTCHILD=1 OR HAS SAME FATHER AS FIRSTCHILD=1 AND K1_DADCTRY=EMPTY (GO TO PE62)
8. IF KIDHHTYPE=4 AND FIRSTCHILD=3 AND [HAS SAME FATHER AS FIRSTCHILD=1 AND K1_DADCTRY≠EMPTY] OR [HAS SAME FATHER AS FIRSTCHILD=2 AND K2_DADCTRY≠EMPTY] (GO TO END OF SECTION)
9. IF KIDHHTYPE=4 AND FIRSTCHILD=3 HAS DIFFERENT FATHER THAN FIRSTCHILD=1 AND FIRSTCHILD=2 OR [[HAS SAME FATHER AS FIRSTCHILD=1 AND K1_DADCTRY=EMPTY] OR [HAS SAME FATHER AS FIRSTCHILD=2 AND K2_DADCTRY=EMPTY]] (GO TO PE62)
10. IF KIDHHTYPE=4 AND FIRSTCHILD=4 AND [HAS SAME FATHER AS FIRSTCHILD=1 AND K1_DADCTRY≠EMPTY] OR [HAS SAME FATHER AS FIRSTCHILD=2 AND K2_DADCTRY≠EMPTY] OR [HAS SAME FATHER AS FIRSTCHILD=3 AND K3_DADCTRY≠EMPTY] (GO TO END OF SECTION)
11. IF KIDHHTYPE=4 AND FIRSTCHILD=4 HAS DIFFERENT FATHER THAN FIRSTCHILD=1 AND FIRSTCHILD=2 AND FIRSTCHILD=3 OR [[HAS SAME FATHER AS FIRSTCHILD=1 AND K1_DADCTRY=EMPTY] OR [HAS SAME FATHER AS FIRSTCHILD=2 AND K2_DADCTRY=EMPTY] OR [HAS SAME FATHER AS FIRSTCHILD=3 AND K3_DADCTRY=EMPTY]] (GO TO PE62)

IF PE61A=2, SET K2_DADCTRY=K1_DADCTRY

IF PE61A=6, SET K2_DADCTRY=K1_DADCTRY

IF PE60A=8 AND SAME FATHER AS FIRSTCHILD=1, SET K3_DADCTRY=K1_DADCTRY

IF PE60A=8 AND SAME FATHER AS FIRSTCHILD=2, SET K3_DADCTRY=K2_DADCTRY

IF PE60A=10 AND SAME FATHER AS FIRSTCHILD=1, SET K4_DADCTRY=K1_DADCTRY

IF PE60A=10 AND SAME FATHER AS FIRSTCHILD=2, SET K4_DADCTRY=K2_DADCTRY

IF PE60A=10 AND SAME FATHER AS FIRSTCHILD=3, SET K4_DADCTRY=K3_DADCTRY

PE62. What country was [CHILD]'s [mother / father] born in?

INTERVIEWER: IF RESPONDENT SAYS THIS IS AN ADOPTED CHILD, ASK ABOUT THE PARENT WHO RASIED THE CHILD DURING MOST OF HIS / HER LIFE

_____ (COUNTRY NAME)

SECTION F. SCHOOL

PF1. CAPI CHECK AGAINST A8: AGE OF CHILD

1. CHILD IS 3 OR YOUNGER (GO TO SECTION G)
2. CHILD IS 4 TO 6
3. CHILD IS 7 OR OLDER (GO TO PF3)

PF2. Now I have some questions about [CHILD]'s school. Has [CHILD] started kindergarten or first grade yet?

1. YES
5. NO (GO TO SECTION G)
6. IF VOLUNTEERED: HOME SCHOOLED

IF PF2=6, SET CUR_HOMESCH=1

PF3. Is [CHILD] currently in school, on summer vacation or off-track from school, or something else?

1. CURRENTLY IN SCHOOL (INCLUDING COLLEGE OR UNIVERSITY)
2. ON SUMMER VACATION
3. IN SUMMER SCHOOL OR INTERSESSION CLASSES
4. NO LONGER IN SCHOOL (GRADUATED FROM HIGH SCHOOL) (GO TO PF32)
5. NO LONGER IN SCHOOL (LEFT BEFORE GRADUATING) (GO TO PF29)
6. HOME SCHOOLED
7. OFF-TRACK FROM SCHOOL
8. NO LONGER IN SCHOOL (GRADUATED FROM COLLEGE OR UNIVERSITY) (GO TO PF32)

PF4_A. What grade [is [CHILD] attending in school / was [CHILD] attending this past spring / or grade-equivalent is [CHILD] in]?

0. KINDERGARTEN
1. – 12. _____ (GRADE OF REGULAR SCHOOL)
20. COLLEGE
30. OTHER, SPECIFY _____
31. PRESCHOOL

IF CUR_HOMESCHOOL=1 (GO TO PF7X). IF PF4=31, RECODE PF2=5 (GO TO SECTION G) ELSE CONTINUE

PF5. For this [past] school year, which school [is / was] [CHILD] attending?

INTERVIEWER: CONFIRM SCHOOL'S FULL NAME AND ADDRESS WITH R FROM THE LIST PROVIDED AND ENTER THE APPROPRIATE ONE. IF NAME OR ADDRESS IS NOT CONFIRMED WITH R, USE OVERRIDE TO TYPE IN NAME OF SCHOOL. BE SURE TO OBTAIN EXACT SCHOOL NAME, INCLUDING "ELEMENTARY", "MIDDLE", "JUNIOR HIGH", "HIGH SCHOOL", OR "SENIOR HIGH", ETC. IF RESPONDENT SAYS CHILD IS HOME SCHOOLED, ENTER 555.

_____ Name of school
555. CHILD IS HOMESCHOOLED (GO TO PF7X)

PF5A. CAPI CHECK:

1. SCHOOL IN PF5 IS ON THE LIST OF LOS ANGELES SCHOOLS (GO TO PF7A)
2. SCHOOL IN PF5 IS NOT ON LIST OF LOS ANGELES SCHOOLS

PF6_A. Is this a regular public school, a magnet program, a charter school, a private school, a religious school, or some other type of special program or school?

1. REGULAR PUBLIC SCHOOL
2. MAGNET PROGRAM OR SCHOOL
3. A CHARTER SCHOOL
4. A PRIVATE SCHOOL
5. A RELIGIOUS SCHOOL
6. [IF VOLUNTEERED] COLLEGE AND UNIVERSITY
7. OTHER SPECIAL PROGRAM OR SCHOOL, SPECIFY: _____
8. CONTINUATION SCHOOL

PF7. Where is this school located? Can you give me name of the street on which it's located? What is the nearest intersection, corner, or cross-street? What city is that?

1. EXACT STREET NUMBER AND STREET NAME _____
2. ON _____ STREET, AT THE CORNER OF _____ CROSS-STREET
3. _____ CITY _____ STATE _____ COUNTRY

GO TO PF7A

PF7X. Has [CHILD] always been homeschooled?

PROBE: Has [CHILD] never attended public or private school?

1. YES (GO TO PF12)
5. NO

DATA USER NOTE: Home schooled children (as defined by PF3=6) were supposed to be sent to this question. Because of a programming error, children for whom PF3=6 were not asked PF7X. Nor were they asked PF7a–PF22 as they should have been. One child who was identified as home schooled in response to PF5. PF7X and PF7a–PF22 were asked for that child.

PF7A. Including this [past] school year, how long in total has [CHILD] attended [SCHOOL NAME IN PF5]? / How long has [CHILD] been home schooled since [he / she] was last in public or private school?

INTERVIEWER: RESPONSE MAY BE IN YEARS AND MONTHS, OR JUST YEARS OR JUST MONTHS.

_____ Number of years and / or _____ Number of months

IF RESPONDENT SAYS CHILD ATTENDED LESS THAN 1 MONTH, CHOOSE '2' ON THIS SCREEN AND FOLLOW THE INSTRUCTIONS ON THE NEXT SCREEN.

IF RESPONDENT SAYS CHILD ATTENDED LESS THAN ONE YEAR, CHOOSE '2' ON THIS SCREEN AND FOLLOW THE INSTRUCTIONS ON THE NEXT SCREEN.

PF7B. CAPI CHECK

1. CHILD'S CURRENT AGE MINUS YEARS AND FRACTIONS OF YEARS IN PF7A \geq 5 (GO TO LOOP JUST ABOVE PF7D)
2. CHILD'S CURRENT AGE MINUS YEARS AND FRACTIONS OF YEARS IN PF7A $<$ 5

PF7C. So [SCHOOL NAME IN PF5] was the first regular school that [CHILD] attended. Is this correct? / So [CHILD] has always been home schooled. Is this correct?

1. YES (GO TO PF7L)
5. NO

BEGINNING OF LOOP (LOOP THROUGH UNTIL PF7D=2 OR 3 or PF7k=1)

PF7D. Where did [CHILD] go to school before that? Which school did [he / she] attend?

INTERVIEWER: CONFIRM SCHOOL'S FULL NAME AND ADDRESS WITH R FROM THE LIST PROVIDED AND ENTER THE APPROPRIATE ONE. IF NAME OR ADDRESS IS NOT CONFIRMED WITH R, USE OVERRIDE TO TYPE IN NAME OF SCHOOL. BE SURE TO OBTAIN EXACT SCHOOL NAME, INCLUDING "ELEMENTARY", "MIDDLE", "JUNIOR HIGH", "HIGH SCHOOL", OR "SENIOR HIGH", ETC.

1. _____ Name of school
2. HOME SCHOOLED (GO TO PF7H)
3. TOO YOUNG TO ATTEND SCHOOL BEFORE THAT (GO TO PF11)

IF PF7D=2, SET PREV_HOMESCH=1. ELSE SET PREV_HOMESCH=0. IF PF7D=2, GO TO PF7H.

PF7E. INTERVIEWER CHECK: WAS THE SCHOOL GIVEN AS THE RESPONSE TO THE LAST QUESTION ON THE LIST OF LOS ANGELES SCHOOLS PROVIDED?

1. SCHOOL IN PF7D IS ON THE LIST OF LOS ANGELES SCHOOLS (GO TO PF7H)
2. SCHOOL IN PF7D IS NOT ON LIST OF LOS ANGELES SCHOOLS

PF7F_A. Is this a regular public school, a magnet program, a charter school, a private school, a religious school, or some other type of special program?

1. REGULAR PUBLIC SCHOOL
2. MAGNET PROGRAM OR SCHOOL
3. A CHARTER SCHOOL
4. A PRIVATE SCHOOL
5. A RELIGIOUS SCHOOL
6. [IF VOLUNTEERED] COLLEGE AND UNIVERSITY
7. OTHER SPECIAL PROGRAM OR SCHOOL, SPECIFY: _____

PF7G. Where is this school located? Can you give me name of the street on which it's located? What is the nearest intersection, corner, or cross-street? What city is that?

1. EXACT STREET NUMBER AND STREET NAME _____
2. ON _____ STREET, AT THE CORNER OF _____ CROSS-STREET
3. _____ CITY _____ STATE _____ COUNTRY

PF7H. How long in total did [CHILD] attend [SCHOOL NAME IN PF7D]? / How long in total was [CHILD] home schooled that time?

_____ Number of years AND / OR _____ Number of months

PF7J. CAPI CHECK:

1. CHILD'S CURRENT AGE MINUS YEARS AND FRACTIONS OF YEARS IN PF7H \geq 5 (GO TO LOOP JUST BELOW PF7K)
2. CHILD'S CURRENT AGE MINUS YEARS AND FRACTIONS OF YEARS IN PF7H $<$ 5

PF7K. So [SCHOOL NAME IN PF7D] was the first regular school that [CHILD] attended. Is this correct? / So the first regular school [CHILD] attended was home school. Is this correct?

1. YES (GO TO PF7L)
5. NO

END OF LOOP. RETURN TO BEGINNING ABOVE PF7D

PF7L. CAPI CHECK:

1. CUR_HOMESCH=1 (GO TO PF12)
2. CUR_HOMESCH NE 1 (CONTINUE)

PF11. During the [current / past] school year did you participate in any of the following activities at [CHILD]'s school? Did you...

PF11.a. Volunteer in the classroom, school office or library?

- 1. YES
- 5. NO

PF11.b. Have a conference with [CHILD]'s teacher?

- 1. YES
- 5. NO

PF11.c. Talk to [CHILD]'s principal?

- 1. YES
- 5. NO

PF11.d. Attend a school event in which [CHILD] participated?

- 1. YES
- 5. NO

PF11.e. Attend a PTA, PTO, or other such meeting?

- 1. YES
- 5. NO

PF12. Has [CHILD] ever attended a special or advanced class or school for gifted students?

- 1. YES
- 5. NO

PF13. Has [he / she] ever been classified by the school as needing special education?

- 1. YES
- 5. NO

PF14. Does [CHILD] currently have any physical or mental condition that would limit or prevent [his / her] ability to...

PF14.a. do usual childhood activities such as play, or participate in games or sports?

- 1. YES
- 5. NO

PF14.b. attend school regularly?

- 1. YES
- 5. NO

PF14.c. do regular school work?

- 1. YES
- 5. NO

PF15. Has [CHILD] ever repeated a grade?

1. YES
5. NO (GO TO PF17)

PF16. Which grades did [he / she] repeat?

1. CHILD REPEATED ONE GRADE
2. CHILD REPEATED TWO GRADES
3. CHILD REPEATED MORE THAN TWO GRADES

PF16A. First grade that was repeated: _____

PF16B. Second grade that was repeated: _____

PF16C. Third grade that was repeated: _____

PF16A1. CHECK

1. CHILD ALWAYS HOME SCHOOLED (GO TO PF27)
2. OTHERWISE (CONTINUE)

PF17. Has [CHILD] ever been suspended or expelled from school?

1. YES
5. NO (GO TO PF20)

PF18. Has this happened more than once?

1. ONLY ONCE
2. MORE THAN ONCE

PF19. How old was [he / she] when it happened [the last time]?

_____ YEARS OLD

PF20. Please tell me whether the next two statements about [CHILD] are often true, sometimes true, or not true.

PF20.a. [He / She] is disobedient at school

1. Often True
2. Sometimes true
3. Not True

PF20.b. [He / She] has trouble getting along with teachers.

1. Often True
2. Sometimes true
3. Not True

PF20A. CAPI CHECK FOR CURRENTLY HOME SCHOOLED

1. CUR_HOMESCH=1 (GO TO PF27)
2. OTHERWISE (CONTINUE)

PF21. Is [CHILD] currently involved in any clubs, teams, programs or groups, either at school or outside of school?

PROBE: For example, clubs, sports teams, boy / girl scouts, church groups, youth centers, or volunteer activities.

1. YES

5. NO (GO TO PF37)

PF22. In what clubs, teams, groups, or other activities is [CHILD] involved?

SELECT ALL THAT APPLY

1. Sports teams or athletics (such as soccer team, swim team, baseball team)
2. Sports lessons (such as tennis, swimming, aerobics, dance, skiing, skating)
3. Piano lessons, guitar lessons, other music lessons
4. Glee Club, choir, band, music group
5. Drama Club, Art Club
6. Chess, Bridge or other game-related club
7. Student government or council
8. Hobby-related clubs (such as photography club, computer club, radio club)
9. Outdoor clubs (such as hiking club, sailing club)
10. Drill team, cheerleading
11. Girl scouts or boy scouts (or similar organization)
12. Church Youth Groups
13. Religious education groups or classes / Sunday school or equivalent
14. Girls and Boys Club
15. Police Athletic League / PAL
16. YMCA, YWCA, YMHA
17. Volunteer activities (tutoring, working in hospital, etc.)
18. Other, specify _____ (limited)
31. Lessons in art / drama / singing / dance

GO TO PF37

QUESTIONS FOR HOME SCHOOLED KIDS

PF27. Is [CHILD] currently involved in any clubs, teams, programs or groups?

PROBE: For example, clubs, sports teams, boy / girl scouts, church groups, youth centers, or volunteer activities.

1. YES
5. NO (GO TO PF37)

PF28. In what clubs, teams, groups, or other activities is [CHILD] involved?

SELECT ALL THAT APPLY

1. Sports teams or athletics (such as soccer team, swim team, baseball team)
2. Sports lessons (such as tennis, swimming, aerobics, dance, skiing, skating)
3. Piano lessons, guitar lessons, other music lessons
4. Glee Club, choir, band, music group
5. Drama Club, Art Club
6. Chess, Bridge or other game-related club
7. Student government or council
8. Hobby-related clubs (such as photography club, computer club, radio club)
9. Outdoor clubs (such as hiking club, sailing club)
10. Drill team, cheerleading
11. Girl scouts or boy scouts (or similar organization)
12. Church Youth Groups
13. Religious education groups or classes / Sunday school or equivalent
14. Girls and Boys Club
15. Police Athletic League / PAL
16. YMCA, YWCA, YMHA
17. Volunteer activities (tutoring, working in hospital, etc.)

- 18. Other, specify (limited)
- 31. Lessons in art / drama / singing / dance

GO TO PF37

FOR KIDS NOT CURRENTLY ENROLLED IN SCHOOL

PF29_A. Using this card, please tell me the number of the response that answers the following question: Why doesn't [CHILD] attend school? Choose your answer from this card.

- 1. HEALTH PROBLEMS
- 2. DROPPED OUT OF SCHOOL BECAUSE OF FINANCIAL PROBLEMS / HAD TO WORK
- 3. DROPPED OUT OF SCHOOL BECAUSE DIDN'T LIKE SCHOOL
- 4. EXPELLED OR SUSPENDED
- 5. PARENTS DECIDED TO KEEP HIM / HER OUT OF SCHOOL
- 6. PREGNANCY / CHILDBIRTH
- 7. OTHER, SPECIFY: _____
- 8. JUST MOVED TO LOS ANGELES

PF30_A. What grade was [CHILD] in when [he / she] was last in school?

- ____ GRADE (1-12)
- 30. OTHER, SPECIFY: _____

PF31_A. What was the highest grade of school that [he / she] completed?

- ____ HIGHEST GRADE COMPLETED (1-12)
- 30. OTHER, SPECIFY: _____

PF32. In what year did [CHILD] last attend school?

- ____ YEAR (1986-present)
- 5. NEVER ATTENDED SCHOOL

PF33. Do you expect that [CHILD] will go back to school sometime in the future?

- 1. YES
- 5. NO

PF34. Is [CHILD] currently involved in any clubs, teams, programs or groups?

PROBE: For example, clubs, sports teams, boy / girl scouts, church groups, youth centers, or volunteer activities.

- 1. YES
- 5. NO (GO TO PF37)

PF35. In what clubs, teams, groups, or other activities is [CHILD] involved?

SELECT ALL THAT APPLY

- 1. Sports teams or athletics (such as soccer team, swim team, baseball team)
- 2. Sports lessons (such as tennis, swimming, aerobics, dance, skiing, skating)
- 3. Piano lessons, guitar lessons, other music lessons
- 4. Glee Club, choir, band, music group
- 5. Drama Club, Art Club
- 6. Chess, Bridge or other game-related club
- 7. Student government or council
- 8. Hobby-related clubs (such as photography club, computer club, radio club)
- 9. Outdoor clubs (such as hiking club, sailing club)

10. Drill team, cheerleading
11. Girl scouts or boy scouts (or similar organization)
12. Church Youth Groups
13. Religious education groups or classes / Sunday school or equivalent
14. Girls and Boys Club
15. Police Athletic League / PAL
16. YMCA, YWCA, YMHA
17. Volunteer activities (tutoring, working in hospital, etc.)
18. Other, specify: _____

PF36. CAPI CHECK PF33:

1. R EXPECTS CHILD TO RETURN TO SCHOOL (PF33=1)
2. R DOES NOT EXPECT CHILD TO RETURN TO SCHOOL (IF PF33=5 GO TO SECTION G)

PF37_A. How much schooling do you expect that [CHILD] will complete?

0. NONE
- 1 TO 11____ (GRADES 1 THROUGH 11) (CAPI RANGE 1–11)
12. HIGH SCHOOL GRADUATE OR COMPLETED GED
13. SOME VOCATIONAL SCHOOL
14. COMPLETED VOCATIONAL SCHOOL
15. SOME COLLEGE
16. ASSOCIATES' DEGREE (AA)
17. BACHELORS' DEGREE (BA, BS)
18. SOME GRADUATE OR PROFESSIONAL SCHOOL (AFTER COMPLETING COLLEGE)
19. COMPLETED GRADUATE / PROFESSIONAL DEGREE
20. OTHER, SPECIFY: _____

SECTION G. CHILD CARE, BEFORE / AFTER SCHOOL CARE, AND EARLY CHILDHOOD EDUCATION

PG1. CAPI CHECK:

1. CHILD IS 0–6 YEARS OLD AND NOT YET IN SCHOOL, KINDERGARTEN, OR HOME SCHOOL
2. CHILD IS ENROLLED IN SCHOOL BUT HAS NOT YET COMPLETED 6TH GRADE (GO TO PG9)
3. CHILD HAS COMPLETED 6TH GRADE OR HAS DROPPED OUT OF SCHOOL (GO TO PG67)

THIS SECTION FOR KIDS NOT YET IN SCHOOL

PG2. I'd like to talk with you about all child care [CHILD] has received on a regular basis during the past 4 weeks from someone other than you [and [his / her] other parent (or guardians)]. This does not include occasional babysitting or backup care providers, but does include any nursery school, pre-school, or pre-kindergarten that [CHILD] may attend. Has [CHILD] received care from someone other than you [and (his / her) other parent (or guardians)] on a regular basis during the past 4 weeks?

1. YES (GO TO PG3)
5. NO

PG2A. Have you ever tried to find a baby-sitter, nanny, family member, or child care center to care for [CHILD] on a regular basis?

1. YES
5. NO

PG2B. Suppose you knew a well-trained and experienced child care provider who is very caring and warm, very convenient, and affordable. Someone you like and trust. How likely is it that you would have used this child care

provider to care for [CHILD] on a regular basis during the past month? Would you say you definitely would, probably would, maybe would, probably would not or definitely would not?

1. DEFINITELY WOULD
2. PROBABLY WOULD
3. MAYBE OR NOT SURE OR DON'T KNOW
4. PROBABLY WOULD NOT
5. DEFINITELY WOULD NOT

GO TO PG7

PG3. How many different regular child care arrangements have you had for [CHILD] in the past 4 weeks?

PROBE: This includes regular care from relatives, non-relatives, child care centers, Head Start and other programs.

_____ NUMBER

PG4_A. [IF MORE THAN ONE ARRANGEMENT]: Let's start with the person or center that provided the most care during the past 4 weeks. Who provided this care for [CHILD]?

LIMIT TO THE THREE MOST COMMON ARRANGEMENTS

- a.
- b.
- c.

CODES FOR PG4:

CHILD'S RELATIVES

01. MATERNAL GRANDMOTHER
02. MATERNAL GRANDFATHER
03. PATERNAL GRANDMOTHER
04. PATERNAL GRANDFATHER
05. [CHILD]'S BROTHER
06. [CHILD]'S SISTER
07. AUNT OR UNCLE
08. OTHER RELATIVE

NON-RELATIVES

11. REGULAR BABYSITTER OR DAY CARE PROVIDER
12. MAID, NANNY, AU PAIR
13. NEIGHBOR
14. FRIEND
15. OTHER, SPECIFY: _____

CENTERS OR NURSERY SCHOOLS

21. CHILD CARE CENTER, NURSERY SCHOOL, OR PRESCHOOL
22. HEAD START PROGRAM

PG5. What is the name of this person, center or program?

- a. _____ NAME
- b. _____ NAME
- c. _____ NAME

PG6. CHECK PG4:

1. HEAD START PROGRAM LISTED ABOVE (I.E., CODE 22 IN PG4) (GO TO PG13)
2. NO HEAD START PROGRAM LISTED

PG7. In the last 4 weeks, did [CHILD] attend Head Start?

1. YES
5. NO (GO TO PG13)

PG8. What is the name of this program?

_____ NAME

PG8add. CAPI INSTRUCTION: CODE PROGRAM IN PG8 AS ANOTHER PROVIDER IN THE TABLE ABOVE (PG4=22 AND PG5=NAME IN PG8) SO THAT APPROPRIATE QUESTIONS BELOW WILL BE ASKED

THIS SECTION IS FOR KIDS IN SCHOOL WHO HAVE NOT YET COMPLETED 6TH GRADE

PG9. I'd like to talk with you about all child care that [CHILD] has received during the past 4 weeks when [he / she] is not in school. I am interested only in care that [CHILD] has received during the past 4 weeks on a regular basis from someone other than you [and [his / her] other parent (or guardians)]. This includes before and after school programs, weekend care, child care during the summer, and all regular care. This does not include occasional babysitting or backup care providers. Has [CHILD] received care from someone other than you [and [his / her] other parent (or guardians)] on a regular basis during the past 4 weeks?

1. YES
5. NO (GO TO PG67)

PG10. How many different regular child care arrangements have you had for [CHILD] in the past 4 weeks?

PROBE: This includes regular care from relatives, non-relatives, child care centers, after school programs, weekend care and other programs.

_____ NUMBER

PG11_A. [IF MORE THAN ONE ARRANGEMENT]: Let's start with the person or center that provided the most care during the past 4 weeks. Who provided this care for [CHILD]?

LIMIT TO THREE MOST COMMON ARRANGEMENTS

- a.
- b.
- c.

CODES FOR PG11

CHILD'S RELATIVES

01. MATERNAL GRANDMOTHER
02. MATERNAL GRANDFATHER
03. PATERNAL GRANDMOTHER
04. PATERNAL GRANDFATHER
05. [CHILD]'S BROTHER
06. [CHILD]'S SISTER
07. AUNT OR UNCLE
08. OTHER RELATIVE

NON-RELATIVES

11. REGULAR BABYSITTER OR DAY CARE PROVIDER
12. MAID, NANNY, AU PAIR
13. NEIGHBOR

- 14. FRIEND
- 15. OTHER, SPECIFY: _____

CENTERS

- 21. CHILD CARE CENTER, NURSERY SCHOOL, OR PRESCHOOL
- 22. (NOT USED)
- 23. BEFORE / AFTER SCHOOL PROGRAM
- 24. CAMP
- 25. OTHER CENTER OR PROGRAM, SPECIFY: _____

PG12B. What is the name of this person, center or program?

- a. _____ NAME
- b. _____ NAME
- c. _____ NAME

PG13. CHECK PG4 AND PG11:

- 1. ONE OR MORE=NUMBER OF ARRANGEMENTS WITH A RELATIVE LISTED
- 0. NO ARRANGEMENTS WITH RELATIVES ARE LISTED (GO TO PG26)

THIS SECTION IS REPEATED FOR EACH RELATIVE CARE ARRANGEMENT LISTED IN PG4 OR PG11 UP TO 3 MAX

PG14. Does [CHILD]'s [[FIRST] RELATIVE TYPE FROM PG4 OR PG11 CODES], that is, [PG4 / PG11 RELATIVE'S NAME], live in this household?

- 1. YES
- 5. NO

PG15. Does [PG4 / PG11 RELATIVE'S NAME] care for [CHILD] in your home or another home?

- 1. OWN HOME (GO TO PG17)
- 2. OTHER HOME
- 3. BOTH / VARIES (GO TO PG17)

PG16. Where does [PG4 / PG11 RELATIVE'S NAME] care for [CHILD]? What street is it on? What is the nearest intersection, corner, or cross-street? What city is that in?

- 1. EXACT HOUSE / APT NUMBER AND STREET NAME _____
- 2. ON _____ STREET AT THE CORNER OF _____ CROSS-STREET
- 3. _____ CITY _____ STATE

PG17_A. When did [FILL PG4 OR PG11 RELATIVE'S NAME] first start taking care of [CHILD]? What month and year?

- 1. _____ MONTH _____ YEAR
- 2. SINCE BIRTH

IF DK / REF CONTINUE. ELSE GO TO PG18

PG17A. How long ago did [PG4 / PG11 RELATIVE'S NAME] first start taking care of [CHILD]?

- 1. _____ MONTHS AGO
- OR
- 2. _____ YEARS AGO

IF DK / REF CONTINUE. ELSE GO TO PG18

PG17B. How old was [CHILD] when [PG4 / PG11 RELATIVE'S NAME] first started taking care of [him / her]?

_____ YEARS OF AGE

INTERVIEWER: IF CHILD IS LESS THAN 1 YEAR OLD, ENTER THE NUMBER OF MONTHS ON THIS SCREEN AND ZERO ON THE NEXT SCREEN.

IF CHILD IS 1 YEAR OLD OR OLDER, ENTER ZERO MONTHS ON THIS SCREEN AND THE NUMBER OF YEARS ON THE NEXT SCREEN

FOR CHILDREN REPORTED AS 12 TO 23 MONTHS OLD, ENTER ZERO MONTHS ON THIS SCREEN AND 1 YEAR ON THE NEXT SCREEN

FOR CHILDREN REPORTED AS LESS THAN ONE MONTH OLD, ENTER ZERO MONTHS ON THIS SCREEN AND ZERO ON THE NEXT SCREEN.

PG18_A. In the past 4 weeks, how many days has [PG4 / PG11 RELATIVE'S NAME] taken care of [CHILD]?

1. _____ TOTAL DAYS IN THE PAST 4 WEEKS OR
2. _____ # OF DAYS PER WEEK IN THE PAST 4 WEEKS

PG19. Think about the days in the past 4 weeks when [PG4 / PG11 RELATIVE'S NAME] took care of [CHILD]. About how many hours per day, on average, did [PG4 / PG11 RELATIVE'S NAME] care for [CHILD] on these days?

1. _____ HOURS PER DAY ON DAYS CARE WAS PROVIDED

PG20. Is [PG4 / PG11 RELATIVE'S NAME] paid to take care of [CHILD]?

1. YES
5. NO (GO TO PG24)

PG21_A. How much is [PG4 / PG11 RELATIVE'S NAME] paid to take care of [CHILD]?

\$ _____ Amount

PG21_B. ENTER UNIT OF PAYMENT:

1. PER HOUR
2. PER DAY
3. PER EVERY TWO WEEKS
4. PER MONTH
5. PER YEAR
6. LUMP SUM PAYMENT (FOR ONE TIME FEE)
7. OTHER, SPECIFY: _____
8. PER WEEK
- 1. DON'T KNOW (GO TO PG24)
- 2. REFUSED (GO TO PG24)

PG21ck. CAPI PRELOAD CHECK: ARE THERE ANY OTHER CHILDREN UNDER AGE 12 LIVING IN THIS HH? (REGARDLESS OF WHETHER THESE CHILDREN ARE SIBLINGS OF [CHILD])?

1. YES
5. NO (GO TO PG24)

PG22. Is this amount for [CHILD] only, or does it include other children in your household?

1. THIS CHILD ONLY (GO TO PG24)
2. THIS CHILD AND OTHER CHILDREN
- 1. DON'T KNOW (GO TO PG24)

PG23. How many children in your household does this amount cover, including [CHILD]?

_____ TOTAL NUMBER OF CHILDREN COVERED (RANGE=2–15)

PG24. Including [CHILD], how many children in total does [PG4 / PG11 RELATIVE'S NAME] usually care for at one time?

_____ NUMBER OF CHILDREN CARED FOR (RANGE=1–50)

PG25. Does [PG4 / PG11 RELATIVE'S NAME] care for [this child / children] by (herself / himself) usually, or are there others that help?

1. PROVIDER CARES FOR CHILD(REN) HIMSELF / HERSELF (GO TO NEXT CAPI CHECK)
5. PROVIDER HAS HELP (GO TO PG25A)

PG25A. How many people usually care for [this child / these children] at a time, including [PG4 / PG11 RELATIVE'S NAME]?

___ NUMBER OF PEOPLE CARING FOR CHILDREN (INCLUDING [PG4 / PG11 RELATIVE'S NAME])

PG25ck. ASK SEQUENCE OF QUESTIONS PG14 to PG25 FOR NEXT RELATIVE CARE PROVIDER ON THE LIST UP TO 3 MAX. IF NO MORE RELATIVE CARE PROVIDERS ON THE LIST, CONTINUE WITH PG26.

PG26. CHECK PG4 AND PG11:

1. AT LEAST ONE ARRANGEMENT WITH A NON-RELATIVE IS LISTED
2. NO ARRANGEMENTS WITH NON-RELATIVES ARE LISTED (GO TO PG40)

THIS SECTION IS REPEATED FOR EACH NON-RELATIVE CARE ARRANGEMENT LISTED IN PG4 OR PG11 UP TO 3 MAX

PG27. Does [CHILD]'s [[FIRST] NONRELATIVE TYPE FROM PG4 / PG11], that is [PG4 / PG11 NONRELATIVE NAME], live in this household?

1. YES
5. NO

PG28. Does [PG4 / PG11 NONRELATIVE NAME] care for [CHILD] in your home or another home?

1. OWN HOME (GO TO PG30)
2. OTHER HOME
3. BOTH / VARIES (GO TO PG30)

PG29. Where does [PG4 / PG11 NONRELATIVE NAME] care for [CHILD]? What street is it on? What is the nearest intersection, corner, or cross-street? What city is that in?

1. EXACT HOUSE / APT NUMBER AND STREET NAME _____
2. ON _____ STREET AT THE CORNER OF _____ CROSS- STREET
3. _____ CITY _____ STATE

PG30_A. When did [PG4 / PG11 NONRELATIVE NAME] first start taking care of [CHILD]? What month and year?

1. _____ MONTH _____ YEAR
2. SINCE BIRTH

IF DK / REF CONTINUE. ELSE GO TO PG31.

PG30A. How long ago did [PG4 / PG11 NONRELATIVE NAME] first start taking care of [CHILD]?

1. _____ MONTHS AGO
- OR
2. _____ YEARS AGO

IF DK / REF CONTINUE. ELSE GO TO PG31.

PG30B_mo. How old was [CHILD] when [PG4 / PG11 NONRELATIVE NAME] first started taking care of [him / her]?

_____ YEARS OF AGE

INTERVIEWER: IF CHILD IS LESS THAN 1 YEAR OLD, ENTER THE NUMBER OF MONTHS ON THIS SCREEN AND ZERO ON THE NEXT SCREEN.

IF CHILD IS 1 YEAR OLD OR OLDER, ENTER ZERO MONTHS ON THIS SCREEN AND THE NUMBER OF YEARS ON THE NEXT SCREEN
FOR CHILDREN REPORTED AS 12 TO 23 MONTHS OLD, ENTER ZERO MONTHS ON THIS SCREEN AND 1 YEAR ON THE NEXT SCREEN
FOR CHILDREN REPORTED AS LESS THAN ONE MONTH OLD, ENTER ZERO MONTHS ON THIS SCREEN AND ZERO YEARS ON THE NEXT SCREEN.

PG31. In the past 4 weeks, how many days has [PG4 / PG11 NONRELATIVE NAME] taken care of [CHILD]?

1. _____ TOTAL DAYS IN THE PAST 4 WEEKS OR
2. _____ # OF DAYS PER WEEK IN THE PAST 4 WEEKS

PG32. Think about the days in the past 4 weeks when [PG4 / PG11 NONRELATIVE NAME] took care of [CHILD]. About how many hours per day, on average, did [PG4 / PG11 NONRELATIVE NAME] care for [CHILD] on these days?

_____ HOURS PER DAY ON DAYS CARE WAS PROVIDED

PG33. Is [PG4 / PG11 NONRELATIVE NAME] paid to take care of [CHILD]?

1. YES
5. NO (GO TO PG37)

PG34_A. How much is [PG4 / PG11 NONRELATIVE NAME] paid to take care of [CHILD]?

\$ _____ Amount

INTERVIEWER ENTER: THE TIME PERIOD OVER WHICH THE NONRELATIVE IS PAID.

1. PER HOUR
2. PER DAY
3. PER EVERY TWO WEEKS
4. PER MONTH
5. PER YEAR
6. LUMP SUM PAYMENT (FOR ONE TIME FEE)
7. OTHER, SPECIFY: _____
8. PER WEEK
- 1. DON'T KNOW (GO TO PG37)
- 2. REFUSED (GO TO PG37)

PG34ck. CAPI PRELOAD CHECK: ARE THERE ANY OTHER CHILDREN UNDER AGE 12 LIVING IN THIS HH? (REGARDLESS OF WHETHER THESE CHILDREN ARE SIBLINGS OF [CHILD])?

1. YES
5. NO (GO TO PG37)

PG35. Is this amount for [CHILD] only or does it include other children in your household?

1. THIS CHILD ONLY (GO TO PG37)
2. THIS CHILD AND OTHER CHILDREN
- 1. DON'T KNOW (GO TO PG37)

PG36. How many children in your household, including [CHILD], does this amount cover?

_____ TOTAL NUMBER OF CHILDREN COVERED (RANGE=2-15)

PG37. Including [CHILD], how many children in total does [PG4 / PG11 NONRELATIVE NAME] usually care for at one time?

_____ NUMBER OF CHILDREN CARED FOR (RANGE=1-50)

PG38. Does [PG4 / PG11 NONRELATIVE NAME] care for [this child / these children] by (herself / himself) usually? Or does someone else help?

1. PROVIDER CARES FOR CHILD(REN) HIM / HERSELF (GO TO PG39)
5. PROVIDER HAS HELP (GO TO PG25A)

PG38A. How many people usually care for [this child / these children] at a time, including [PG4 / PG11 NONRELATIVE'S NAME]?

_____ NUMBER OF PEOPLE CARING FOR CHILDREN (INCLUDING [PG4 / PG11 NONRELATIVE NAME])

PG39. Has [PG4 / PG11 NONRELATIVE NAME] ever had education or training specifically related to young children, such as early childhood education or child psychology?

1. YES
5. NO

REPEAT PG27 TO PG39 FOR NEXT NONRELATIVE CARE PROVIDER ON THE LIST UP TO 3 MAX. IF NO ADDITIONAL NONRELATIVE CARE PROVIDERS, CONTINUE WITH PG40.

PG40. CHECK PG4 AND PG11:

1. CHILD ATTENDED HEAD START IN LAST 4 WEEKS [AT LEAST ONE 22 IN PG4, OR PG7=1]
2. CHILD DID NOT ATTEND HEAD START IN LAST 4 WEEKS [NO CODES IN PG4, AND PG7 not=1] (GO TO PG52)

PG41. Where is the Head Start program located? Is it in a church or synagogue, a school, a community center, its own building, or some other place?

SELECT ALL THAT APPLY

1. R'S HOME (GO TO PG43)
2. ANOTHER HOME
3. CHURCH, SYNAGOGUE, OR OTHER PLACE OF WORSHIP
4. PUBLIC ELEMENTARY, MIDDLE, OR HIGH SCHOOL
5. PRIVATE ELEMENTARY, MIDDLE, OR HIGH SCHOOL
6. COLLEGE OR UNIVERSITY
7. A COMMUNITY CENTER
8. A PUBLIC LIBRARY
9. ITS OWN BUILDING
10. SOME OTHER PLACE, SPECIFY: _____

PG42. Where is this program located? (IF LOCATED IN MORE THAN ONE PLACE, ASK: Where is it held most of the time?) What street is it on? What is the nearest intersection, corner, or cross-street? What city is that in?

1. EXACT BLDG NUMBER AND STREET NAME _____
2. ON _____ STREET AT THE CORNER OF _____ CROSS-STREET
3. _____ CITY _____ STATE

PG43. When did [CHILD] first start attending this Head Start program? What month and year?

1. _____ MONTH _____ YEAR

IF DK / REF CONTINUE. ELSE GO TO PG44.

PG43A. How long ago did [CHILD] first start attending this Head Start program?

1. _____ MONTHS AGO (HARD CHECK AT CHILD'S AGE)
OR
2. _____ YEARS AGO (HARD CHECK AT CHILD'S AGE)

IF DK / REF CONTINUE. ELSE GO TO PG44.

PG43B_mo. How old was [CHILD] when [he / she] first started attending this Head Start Program?

_____ YEARS OF AGE

PG44_A. In the past 4 weeks, how many days did [CHILD] attend Head Start?

1. _____ TOTAL DAYS IN THE LAST 4 WEEK
2. _____ # OF DAYS PER WEEK IN THE LAST 4 WEEKS

IF ZERO DAYS (GO TO PG52)

PG45. Think about the days in the past 4 weeks when [CHILD] went to Head Start. About how many hours per day, on average, did [CHILD] spend at Head Start on these days?

_____ HOURS PER DAY

PG46. Is there a charge or fee for the Head Start program, paid either by you or someone else?

1. YES
5. NO (GO TO PG50)

PG47. How much is the fee or charge?

\$ _____ Amount

PG47_B. INTERVIEWER ENTER THE TIME PERIOD OVER WHICH THE HEADSTART FEE IS PAID

1. PER HOUR
2. PER DAY
3. PER EVERY TWO WEEKS
4. PER MONTH
5. PER YEAR
6. LUMP SUM PAYMENT (FOR ONE TIME FEE)
7. OTHER, SPECIFY: _____
8. PER WEEK
- 1. DON'T KNOW (GO TO PG50)
- 2. REFUSED (GO TO PG50)

PG47ck. CAPI PRELOAD CHECK: ARE THERE ANY OTHER CHILDREN UNDER AGE 12 LIVING IN THIS HH? (REGARDLESS OF WHETHER THESE CHILDREN ARE SIBLINGS OF [CHILD])?

1. YES
5. NO (GO TO PG50)

PG48. Is this amount for [CHILD] only, or does it include other children in your household?

1. THIS CHILD ONLY (GO TO PG50)
2. THIS CHILD AND OTHER CHILDREN
- 1. DON'T KNOW (GO TO PG50)

PG49. How many children in your household, including [CHILD], does this amount cover?

_____ TOTAL NUMBER OF CHILDREN COVERED (RANGE: 2–15)

PG50. Including [CHILD], how many children are usually in [CHILD]'s room or group, at the same time, at Head Start?

_____ NUMBER OF CHILDREN (RANGE: 1–50)

PG51. How many adults are usually in [CHILD]'s room or group, at the same time, at Head Start?

_____ NUMBER OF ADULTS (RANGE: 1–15)

PG52. CAPI CHECK PG4 AND PG11:

1. AT LEAST ONE CENTER BASED ARRANGEMENT LISTED IN PG4 OR PG11 (OTHER THAN HEAD START)
2. NO CENTER BASED ARRANGEMENTS LISTED (GO TO PG64)

THIS SECTION IS REPEATED FOR EACH CENTER BASED ARRANGEMENT LISTED IN PG4 OR PG11

PG53. Where is [CENTER NAME FROM PG5 / PG12] located? Is it in a church or synagogue, a school, a community center, its own building, or some other place?

1. R'S HOME (GO TO PG55)
2. ANOTHER HOME
3. CHURCH, SYNAGOGUE, OR OTHER PLACE OF WORSHIP
4. PUBLIC ELEMENTARY, MIDDLE, OR HIGH SCHOOL
5. PRIVATE ELEMENTARY, MIDDLE, OR HIGH SCHOOL
6. COLLEGE OR UNIVERSITY
7. A COMMUNITY CENTER
8. A PUBLIC LIBRARY
9. ITS OWN BUILDING
10. SOME OTHER PLACE, SPECIFY: _____

PG54. Where is this center located? (IF LOCATED IN MORE THAN ONE PLACE, ASK: Where is it held most of the time?) What street is it on? What is the nearest intersection, corner, or cross-street? What city is that in?

1. EXACT BLDG NUMER AND STREET NAME _____
2. ON _____ STREET AT THE CORNER OF _____ CROSS-STREET
3. _____ CITY _____ STATE

PG55. When did [CHILD] first start attending [NAME OF CENTER / PROGRAM]? In what month and year?

1. _____ MONTH _____ YEAR

IF DK / REF CONTINUE. ELSE GO TO PG56.

PG55A. How long ago did [CHILD] first start attending this Head Start program?

1. _____ MONTHS AGO
- OR
2. _____ YEARS AGO

IF DK / REF CONTINUE. ELSE GO TO PG56.

INTERVIEWER: IF RESPONDENT SAYS 12–23 MONTHS AGO, ENTER 1 YEAR AGO

IF RESPONDENT SAYS 24–35 MONTHS AGO, ENTER 2 YEARS AGO.

ONLY ENTER MONTHS AGO IF RESPONDENT SAYS 1–11 MONTHS AGO OR LESS THAN ONE MONTH AGO.

FOR LESS THAN ONE MONTH AGO, ENTER ZERO MONTHS AGO.

IF RESPONDENT SAYS LESS THAN ONE YEAR AGO, ASK THEM HOW MANY MONTHS AGO IT WAS.

PG55B. How old was [CHILD] when [he / she] first started attending this Head Start Program?

_____ YEARS OF AGE

PG56_A. In the past 4 weeks, how many days did [CHILD] attend [NAME OF CENTER / PROGRAM]?

1. _____ TOTAL DAYS IN THE LAST 4 WEEK
2. _____ # OF DAYS PER WEEK IN THE LAST 4 WEEKS

PG57. Think about the days in the past 4 weeks when [CHILD] went to [NAME OF CENTER / PROGRAM]. About how many hours per day, on average, [CHILD] spend at [NAME OF CENTER / PROGRAM] on these days?

_____ HOURS PER DAY

PG58. Is there a charge or fee for [NAME OF CENTER / PROGRAM], paid either by you or someone else?

1. YES
5. NO (GO TO PG62)

PG59_A. How much is the fee or charge?

\$ _____ Amount

PG59_B. INTERVIEWER: ENTER THE TIME PERIOD OVER WHICH THE CENTER / PROGRAM FEE IS PAID

1. PER HOUR
2. PER DAY
3. PER EVERY TWO WEEKS
4. PER MONTH
5. PER YEAR
6. LUMP SUM PAYMENT (FOR ONE TIME FEE)
7. OTHER, SPECIFY: _____
8. PER WEEK
- 1. REFUSED (GO TO PG62)
- 2. DON'T KNOW (GO TO PG62)

PG59ck. CAPI PRELOAD CHECK: ARE THERE ANY OTHER CHILDREN UNDER AGE 12 LIVING IN THIS HH? (REGARDLESS OF WHETHER THESE CHILDREN ARE SIBLINGS OF [CHILD])?

1. YES
5. NO (GO TO PG62)

PG60. Is this amount for [CHILD] only, or does it include other children in your household?

1. THIS CHILD ONLY (GO TO PG62)
2. THIS CHILD AND OTHER CHILDREN
- 1. DON'T KNOW (GO TO PG62)

PG61. How many children in your household, including [CHILD], does this amount cover?

_____ TOTAL NUMBER OF CHILDREN COVERED (RANGE: 2–15)

PG62. Including [CHILD], how many children at the same time are usually in [CHILD]'s room or group at [NAME OF CENTER / PROGRAM]?

_____ NUMBER OF CHILDREN (RANGE: 1–50)

PG63. How many adults are usually in [CHILD]'s room or group at the same time, at [NAME OF CENTER / PROGRAM]?

_____ ADULTS (RANGE: 1–15)

PG63ck. REPEAT PG53 TO PG63 FOR NEXT CENTER BASED PROVIDER ON THE LIST UP TO 3 MAX. IF NO OTHER CENTER BASED PROVIDERS, CONTINUE WITH PG64.

ALL RESPONDENTS REPORTING ANY CHILD CARE END UP HERE AFTER BEING ASKED ABOUT EACH TYPE OF CARE.

PG64. CAPI CHECK PG20, PG33, PG46, PG58 FOR ALL PROVIDERS:

1. R'S HH PAYS FOR AT LEAST ONE CHILD CARE PROVIDER
2. R'S HH DOES NOT PAY FOR ANY CHILD CARE PROVIDERS (GO TO PG67)

PG65_A. Does anyone outside your household or any organization help to pay the people, programs, or centers that care for [CHILD]?

1. NO ONE (GO TO PG67)
2. A RELATIVE OF [CHILD] OUTSIDE THE HOUSEHOLD
3. A SOCIAL SERVICE OR WELFARE AGENCY
4. AN EMPLOYER
5. SOMEONE ELSE, SPECIFY: _____

PG66. Does this [person / organization] pay for some of [CHILD]'s care or for all of it?

1. SOME OF THE CARE
2. ALL OF THE CARE
3. SOMETHING ELSE, SPECIFY: _____

PG67. CHECK PG1 AND PG4:

1. CHILD IS NOT YET IN SCHOOL AND DID NOT GO TO HEAD START IN LAST 4 WEEKS
2. CHILD NOT YET IN SCHOOL BUT DID ATTEND HEAD START IN LAST 4 WEEKS (GO TO SECTION H)
3. CHILD HAS STARTED SCHOOL

PG68. Did [CHILD] ever attend an official, government-sponsored Head Start program?

1. YES
5. NO (GO TO PG71)

PG69_mo. At what age did [CHILD] first attend a Head Start program?

_____ AGE OF CHILD

INTERVIEWER: IF CHILD IS LESS THAN 1 YEAR OLD, ENTER THE NUMBER OF MONTHS ON THIS SCREEN AND ZERO ON THE NEXT SCREEN.
IF CHILD IS 1 YEAR OLD OR OLDER, ENTER ZERO MONTHS ON THIS SCREEN AND THE NUMBER OF YEARS ON THE NEXT SCREEN
FOR CHILDREN REPORTED AS 12 TO 23 MONTHS OLD, ENTER ZERO MONTHS ON THIS SCREEN AND 1 YEAR ON THE NEXT SCREEN
FOR CHILDREN REPORTED AS LESS THAN ONE MONTH OLD, ENTER ZERO MONTHS ON THIS SCREEN AND ZERO YEARS ON THE NEXT SCREEN.

PG70_A. How many months or years in total did [CHILD] attend a Head Start program?

INTERVIEWER: ENTER RESPONSES LIKE "13 MONTHS" OR "18 MONTHS" AS YEAR AND MONTH, I.E. 1 YEAR AND 1 MONTH FOR 13 MONTHS, 1 YEAR AND 6 MONTHS FOR 18 MONTHS. ENTER 12 MONTHS AS 1 YEAR. IF R REPORTS ONLY YEARS, ENTER 0 IN MONTHS FIELD. IF R REPORTS <12 MONTHS, ENTER 0 IN THE YEARS FIELD.

1. ENTER MONTHS AND YEARS
_____ MONTHS (0-11, 0 FOR LESS THAN 1 MONTH)
_____ YEARS (0-6)
2. OTHER, SPECIFY: _____

PG71. CHECK PG67:

1. PG67 IS CODED 1 (GO TO SECTION H)
2. PG67 IS CODED 3

PG72. [Aside from Head Start], did [CHILD] ever go to a nursery school, preschool, or child care center, before [he / she] started school?

1. YES
5. NO (GO TO SECTION H)

PG73_mo. At what age did [CHILD] first attend a nursery school, preschool or child care center?

_____ AGE OF CHILD

INTERVIEWER: IF CHILD IS LESS THAN 1 YEAR OLD, ENTER THE NUMBER OF MONTHS ON THIS SCREEN AND ZERO ON THE NEXT SCREEN.
IF CHILD IS 1 YEAR OLD OR OLDER, ENTER ZERO MONTHS ON THIS SCREEN AND THE NUMBER OF YEARS ON THE NEXT SCREEN
FOR CHILDREN REPORTED AS 12 TO 23 MONTHS OLD, ENTER ZERO MONTHS ON THIS SCREEN AND 1 YEAR ON THE NEXT SCREEN
FOR CHILDREN REPORTED AS LESS THAN ONE MONTH OLD, ENTER ZERO MONTHS ON THIS SCREEN AND ZERO YEARS ON THE NEXT SCREEN.

PG74_A. How many months or years in total did [CHILD] attend all the nurseries, preschools, and child care centers that [he / she] went to?

INTERVIEWER: ENTER RESPONSES LIKE "13 MONTHS" OR "18 MONTHS" AS YEAR AND MONTH, I.E. 1 YEAR AND 1 MONTH FOR 13 MONTHS, 1 YEAR AND 6 MONTHS FOR 18 MONTHS. ENTER 12 MONTHS AS 1 YEAR. IF R REPORTS ONLY YEARS, ENTER 0 IN MONTHS FIELD. IF R REPORTS <12 MONTHS, ENTER 0 IN THE YEARS FIELD.

1. ENTER MONTHS AND YEARS
_____ MONTHS (0-11, 0 FOR LESS THAN 1 MONTH)
_____ YEARS (HARD CHECK AT CHILD'S AGE)
2. OTHER, SPECIFY _____

SECTION H. SOCIAL / BEHAVIOR DEVELOPMENT AND HOME SCALE

PH1. CHECK:

1. FIRSTCHILD=1 (CONTINUE)
2. FIRSTCHILD>=2 AND QUESTIONS IN THIS SECTION HAVE BEEN COMPLETED FOR ANOTHER CHILD OF PCG (GO TO PH70)
3. FIRSTCHILD>=2 AND QUESTIONS IN THIS SECTION HAVE **NOT** BEEN COMPLETED FOR ANOTHER CHILD OF PCG

PH1a. CHECK:

1. CHILD IS < 1 YEAR OLD (GO TO J1)
2. CHILD IS > 15 YEARS OLD (GO TO PH71)
3. CHILD IS 2–14 YEARS OLD

PH2. Now I have some questions about [CHILD] and your home.

CAPI CHECK CHILD'S AGE:

2. CHILD IS 1–2 YEARS OLD
3. CHILD IS 3–5 YEARS OLD (GO TO PH16)
4. CHILD IS 6–9 YEARS OLD (GO TO PH32)
5. CHILD IS 10–15 YEARS OLD (GO TO PH52)

THIS SECTION FOR 1–2 YEAR OLDS

PH3. Please look at this card. In the past week, about how many times have you praised [CHILD] for doing something worthwhile?

0. NEVER
1. ONCE
2. SEVERAL TIMES
3. ALMOST EVERY DAY

PH4. In the past week, have you shown [CHILD] physical affection (e.g., kisses, hugs, stroking hair, etc.)?

0. NEVER
1. ONCE
2. SEVERAL TIMES
3. ALMOST EVERY DAY

PH5. In the past week, how many times have you told another adult (for example: spouse, friend, co-worker, visitor, relative) something positive about [CHILD]?

0. NEVER
1. ONCE
2. SEVERAL TIMES
3. ALMOST EVERY DAY

PH6. Have you ever spanked [CHILD]?

1. YES
5. NO (GO TO PH9)

PH7_A. How old was [CHILD] when you first spanked [him / her]?

INTERVIEWER: IF RESPONDENT SAYS LESS THAN 1 MONTH OLD, ENTER ZERO MONTHS OLD. IF RESPONDENT SAYS LESS THAN 1 YEAR OLD, ASK RESPONDENT HOW MANY MONTHS OLD CHILD WAS.

1. _____ MONTHS OLD OR 2. _____ YEARS OLD

PH8. Please look at this card. In the past week, how many times have you had to spank [CHILD]?

- 0. NEVER
- 1. ONCE
- 2. SEVERAL TIMES
- 3. ALMOST EVERY DAY

PH9. In the past week, how many times have you put [CHILD] in [his / her] room or another room as a punishment?

- 0. NEVER
- 1. ONCE
- 2. SEVERAL TIMES
- 3. ALMOST EVERY DAY

PH10. Sometimes children get so angry at their parents that they scream and cry and throw a temper tantrum. If this happened to [CHILD], what would you do?

SELECT ALL THAT APPLY

- 1. GROUND CHILD / DON'T LET HIM / HER GO OUT OR GO OUT TO PLAY
- 2. SPANK CHILD
- 3. TALK WITH CHILD
- 4. SCOLD OR YELL AT CHILD
- 5. GIVE HIM / HER HOUSEHOLD CHORES
- 6. IGNORE IT
- 7. PUT CHILD IN ROOM / SEND CHILD TO ROOM FOR LESS THAN 1 HOUR
- 8. PUT CHILD IN ROOM / SEND CHILD TO ROOM FOR MORE THAN 1 HOUR
- 9. MAKE CHILD GO TO BED
- 10. TELL OTHER PARENT
- 11. TAKE AWAY ALLOWANCE
- 12. TAKE AWAY TV OR OTHER PRIVILEGES
- 13. GIVE CHILD A "TIME OUT"
- 14. HOLD CHILD UNTIL (HE / SHE) IS CALM
- 15. OTHER, SPECIFY: _____

PH11. About how many children's books does [CHILD] have?

- 1. NONE
- 2. 1 TO 2
- 3. 3 TO 9
- 4. 10 OR MORE

PH12. Please look at this card. How often do you get a chance to read to [CHILD]?

- 1. NEVER
- 2. SEVERAL TIMES A YEAR
- 3. SEVERAL TIMES A MONTH
- 4. ONCE A WEEK
- 5. ABOUT 3 TIMES A WEEK
- 6. EVERY DAY

PH13. How often do other family members get a chance to read to [CHILD]?

1. NEVER
2. SEVERAL TIMES A YEAR
3. SEVERAL TIMES A MONTH
4. ONCE A WEEK
5. ABOUT 3 TIMES A WEEK
6. EVERY DAY

PH14. Think for a moment about a typical weekday for your family. How much time would you say [CHILD] spends watching television or videos on a typical weekday, either in your home or somewhere else? Please do not include time spent playing or watching others play video games.

_____ HOURS PER WEEKDAY

PH15. Think for a moment about the typical weekend day for your family. How much time would you say [CHILD] spends watching television or videos on a typical weekend day, either in your home or somewhere else? Please do not include time spent playing or watching others play video games.

_____ HOURS PER WEEKEND DAY

GO TO PH70

SECTION FOR 3 TO 5 YEAR OLDS

PH16. Please look at this card. In the past week, how many times have you praised [CHILD] for doing something worthwhile?

0. NEVER
1. ONCE
2. SEVERAL TIMES
3. ALMOST EVERY DAY

PH17. In the past week, have you shown [CHILD] physical affection (e.g., kisses, hugs, stroking hair, etc.)?

0. NEVER
1. ONCE
2. SEVERAL TIMES
3. ALMOST EVERY DAY

PH18. In the past week, how many times have you told another adult (for example: spouse, friend, co-worker, visitor, relative) something positive about [CHILD]?

0. NEVER
1. ONCE
2. SEVERAL TIMES
3. ALMOST EVERY DAY

PH19. Have you ever spanked [CHILD]?

1. YES
5. NO (GO TO PH22)

PH20_A. How old was [CHILD] when you first spanked [him / her]?

ENTER MONTHS OR YEARS

1. _____ MONTHS OR 2. _____ YEARS

PH21. Please look at this card. In the past week, how many times have you had to spank [CHILD]?

0. NEVER
1. ONCE
2. SEVERAL TIMES
3. ALMOST EVERY DAY

PH22. In the past week, how many times have you taken away TV or other privileges from [CHILD]?

0. NEVER
1. ONCE
2. SEVERAL TIMES
3. ALMOST EVERY DAY

PH23. In the past week, how many times have you put or sent [CHILD] to [his / her] room or another room as a punishment?

0. NEVER
1. ONCE
2. SEVERAL TIMES
3. ALMOST EVERY DAY

PH24. Sometimes children get so angry at their parents that they scream and cry and throw a temper tantrum. If this happened to [CHILD], what would you do?

SELECT ALL THAT APPLY

1. GROUND CHILD / DON'T LET HIM / HER GO OUT OR GO OUT TO PLAY
2. SPANK CHILD
3. TALK WITH CHILD
4. SCOLD OR YELL AT CHILD
5. GIVE HIM / HER HOUSEHOLD CHORES
6. IGNORE IT
7. PUT CHILD IN ROOM / SEND CHILD TO ROOM FOR LESS THAN 1 HOUR
8. PUT CHILD IN ROOM / SEND CHILD TO ROOM FOR MORE THAN 1 HOUR
9. MAKE CHILD GO TO BED
10. TELL OTHER PARENT
11. TAKE AWAY ALLOWANCE
12. TAKE AWAY TV OR OTHER PRIVILEGES
13. GIVE CHILD A "TIME OUT"
14. HOLD CHILD UNTIL (HE / SHE) IS CALM
15. OTHER, SPECIFY: _____

PH25. About how often does [CHILD] go to the library? Would you say...

1. ONCE A YEAR OR LESS
2. A FEW TIMES A YEAR
3. ABOUT ONCE A MONTH
4. TWO OR THREE TIMES A MONTH
5. ABOUT ONCE A WEEK OR MORE

PH26. Please look at this card. When your family watches TV together, how often do you or [CHILD]'s [father / stepfather / father figure] discuss TV programs with [him / her]?

1. NEVER
2. SEVERAL TIMES A YEAR
3. SEVERAL TIMES A MONTH
4. ONCE A WEEK
5. ABOUT 3 TIMES A WEEK
6. EVERYDAY

PH27. About how many children's books does [CHILD] have?

1. NONE
2. 1 TO 2
3. 3 TO 9
4. 10 OR MORE

PH28. Please look at this card. How often do you get a chance to read to [CHILD]?

1. NEVER
2. SEVERAL TIMES A YEAR
3. SEVERAL TIMES A MONTH
4. ONCE A WEEK
5. ABOUT 3 TIMES A WEEK
6. EVERY DAY

PH29. How often do other family members get a chance to read to [CHILD]? Would you say...

1. NEVER
2. SEVERAL TIMES A YEAR
3. SEVERAL TIMES A MONTH
4. ONCE A WEEK
5. ABOUT 3 TIMES A WEEK
6. EVERY DAY

PH30. Think for a moment about a typical weekday for your family. How much time would you say [CHILD] spends watching television or videos on a typical weekday, either in your home or somewhere else? Please do not include time spent playing or watching others play video games.

_____ HOURS PER WEEKDAY

PH31. Think for a moment about the typical weekend day for your family. How much time would you say [CHILD] spends watching television or videos on a typical weekend day, either in your home or somewhere else? Please do not include time spent playing or watching others play video games.

_____ HOURS PER WEEKEND DAY

GO TO PH70

SECTION FOR 6–9 YEAR OLDS

PH32. Please look at this card. In the past week, how many times have you praised [CHILD] for doing something worthwhile?

0. NEVER
1. ONCE
2. SEVERAL TIMES
3. ALMOST EVERY DAY

PH33. In the past week, have you shown [CHILD] physical affection (e.g., kisses, hugs, stroking hair, etc.)?

0. NEVER
1. ONCE
2. SEVERAL TIMES
3. ALMOST EVERY DAY

PH34. In the past week, how many times have you told another adult (for example: spouse, friend, co-worker, visitor, relative) something positive about [CHILD]?

- 0. NEVER
- 1. ONCE
- 2. SEVERAL TIMES
- 3. ALMOST EVERY DAY

PH35. Have you ever spanked [CHILD]?

- 1. YES
- 5. NO (GO TO PH38)

PH36_A. How old was [CHILD] when you first spanked [him / her]?

INTERVIEWER: IF RESPONDENT SAYS LESS THAN 1 MONTH OLD, ENTER ZERO MONTHS OLD. IF RESPONDENT SAYS LESS THAN 1 YEAR OLD, ASK RESPONDENT HOW MANY MONTHS OLD CHILD WAS.

- 1. _____ MONTHS OR 2. _____ YEARS

PH37. Please look at this card. In the past week, how many times have you had to spank [CHILD]?

- 0. NEVER
- 1. ONCE
- 2. SEVERAL TIMES
- 3. ALMOST EVERY DAY

PH38. In the past week, how many times have you grounded [CHILD]?

- 0. NEVER
- 1. ONCE
- 2. SEVERAL TIMES
- 3. ALMOST EVERY DAY

PH39. In the past week, how many times have you taken away TV or other privileges from [CHILD]?

- 0. NEVER
- 1. ONCE
- 2. SEVERAL TIMES
- 3. ALMOST EVERY DAY

PH40. In the past week, how many times have you sent [CHILD] to [his / her] room or another room as a punishment?

- 0. NEVER
- 1. ONCE
- 2. SEVERAL TIMES
- 3. ALMOST EVERY DAY

PH41. Sometimes children get so angry at their parents that they say things like "I hate you" or swear in a temper tantrum. If this happened to [CHILD], what would you do?

SELECT ALL THAT APPLY

- 1. GROUND CHILD / DON'T LET HIM / HER GO OUT OR GO OUT TO PLAY
- 2. SPANK CHILD
- 3. TALK WITH CHILD
- 4. SCOLD OR YELL AT CHILD
- 5. GIVE HIM / HER HOUSEHOLD CHORES
- 6. IGNORE IT
- 7. PUT CHILD IN ROOM / SEND CHILD TO ROOM FOR LESS THAN 1 HOUR

8. PUT CHILD IN ROOM / SEND CHILD TO ROOM FOR MORE THAN 1 HOUR
9. MAKE CHILD GO TO BED
10. TELL OTHER PARENT
11. TAKE AWAY ALLOWANCE
12. TAKE AWAY TV OR OTHER PRIVILEGES
13. GIVE CHILD A "TIME OUT"
14. HOLD CHILD UNTIL (HE / SHE) IS CALM
15. OTHER, SPECIFY: _____

PH42. About how often does [CHILD] go to the library? Would you say...

1. ONCE A YEAR OR LESS
2. A FEW TIMES A YEAR
3. ABOUT ONCE A MONTH
4. TWO OR THREE TIMES A MONTH
5. ABOUT ONCE A WEEK OR MORE

PH43. Please look at this card. When your family watches TV together, how often do you or [CHILD]'s [father / stepfather / father figure] discuss TV programs with [him / her]?

1. NEVER
2. SEVERAL TIMES A YEAR
3. SEVERAL TIMES A MONTH
4. ONCE A WEEK
5. ABOUT 3 TIMES A WEEK
6. EVERYDAY

PH44. About how many books does [CHILD] have?

1. NONE
2. 1 TO 2
3. 3 TO 9
4. 10 OR MORE

PH45. Please look at this card. How often do you get a chance to read to [CHILD]?

1. NEVER
2. SEVERAL TIMES A YEAR
3. SEVERAL TIMES A MONTH
4. ONCE A WEEK
5. ABOUT 3 TIMES A WEEK
6. EVERY DAY

PH46. How often do other family members get a chance to read to [CHILD]? Would you say...

1. NEVER
2. SEVERAL TIMES A YEAR
3. SEVERAL TIMES A MONTH
4. ONCE A WEEK
5. ABOUT 3 TIMES A WEEK
6. EVERY DAY

PH47. About how often does [CHILD] read for enjoyment? Would you say...

1. NEVER
2. SEVERAL TIMES A YEAR
3. SEVERAL TIMES A MONTH
4. SEVERAL TIMES A WEEK
5. EVERY DAY

PH48. Think for a moment about a typical weekday for your family. How much time would you say [CHILD] spends watching television or videos on a typical weekday (either in your home or somewhere else)?

_____ HOURS PER WEEKDAY

PH49 Think for a moment about the typical weekend day for your family. How much time would you say [CHILD] spends watching television or videos on a typical weekend day, either in your home or somewhere else? Please do not include time spent playing or watching others play video games.

_____ HOURS PER WEEKEND

PH50. How often do you check to make sure [CHILD] has completed [His / her] homework?

1. Less than once a month or never
2. About once a month
3. A few times a month
4. At least a few times a week
5. Every day or every night
6. Every time child has homework assigned

PH51. Does [CHILD] have a curfew or set time to be home on school nights?

1. YES
5. NO

GO TO PH70

SECTION FOR 10–15 YEAR OLDS

PH52. Please look at this card. In the past week, how many times have you praised [CHILD] for doing something worthwhile?

0. NEVER
1. ONCE
2. SEVERAL TIMES
3. ALMOST EVERY DAY

PH53. In the past week, have you shown [CHILD] physical affection (e.g., kisses, hugs, stroking hair, etc.)?

0. NEVER
1. ONCE
2. SEVERAL TIMES
3. ALMOST EVERY DAY

PH54. In the past week, how many times have you told another adult (for example: spouse, friend, co-worker, visitor, relative) something positive about [CHILD]?

0. NEVER
1. ONCE
2. SEVERAL TIMES
3. ALMOST EVERY DAY

PH55. Have you ever spanked [CHILD]?

1. YES
5. NO (GO TO PH58)

PH56. How old was [CHILD] child when you first spanked [him / her]?

ENTER MONTHS OR YEARS

1. _____ MONTHS OLD 2. _____ YEARS OLD

PH57. Please look at this card. In the past week, how many times have you had to spank [CHILD]?

- 0. NEVER
- 1. ONCE
- 2. SEVERAL TIMES
- 3. ALMOST EVERY DAY

PH58. In the past week, how many times have you grounded [CHILD]?

- 0. NEVER
- 1. ONCE
- 2. SEVERAL TIMES
- 3. ALMOST EVERY DAY

PH59. In the past week, how many times have you taken away TV or other privileges from [CHILD]?

- 0. NEVER
- 1. ONCE
- 2. SEVERAL TIMES
- 3. ALMOST EVERY DAY

PH60. In the past week, how many times have you sent [CHILD] to [his / her] room or another room as a punishment?

- 0. NEVER
- 1. ONCE
- 2. SEVERAL TIMES
- 3. ALMOST EVERY DAY

PH61. Sometimes children get so angry at their parents that they say things like "I hate you" or swear during a temper tantrum. If this happened to [CHILD], what would you do?

SELECT ALL THAT APPLY

- 1. GROUND CHILD / DON'T LET HIM / HER GO OUT OR GO OUT TO PLAY
- 2. SPANK CHILD
- 3. TALK WITH CHILD
- 4. SCOLD OR YELL AT CHILD
- 5. GIVE HIM / HER HOUSEHOLD CHORES
- 6. IGNORE IT
- 7. PUT CHILD IN ROOM / SEND CHILD TO ROOM FOR LESS THAN 1 HOUR
- 8. PUT CHILD IN ROOM / SEND CHILD TO ROOM FOR MORE THAN 1 HOUR
- 9. MAKE CHILD GO TO BED
- 10. TELL OTHER PARENT
- 11. TAKE AWAY ALLOWANCE
- 12. TAKE AWAY TV OR OTHER PRIVILEGES
- 13. GIVE CHILD A "TIME OUT"
- 14. HOLD CHILD UNTIL (HE / SHE) IS CALM
- 15. OTHER, SPECIFY: _____

PH62. About how often does [CHILD] go to the library? Would you say...

- 1. ONCE A YEAR OR LESS
- 2. A FEW TIMES A YEAR
- 3. ABOUT ONCE A MONTH

4. TWO OR THREE TIMES A MONTH
5. ABOUT ONCE A WEEK OR MORE

PH63. Please look at this card. When your family watches TV together, how often do you or [CHILD]'s [father / stepfather / father figure] discuss TV programs with [him / her]?

1. NEVER
2. SEVERAL TIMES A YEAR
3. SEVERAL TIMES A MONTH
4. ONCE A WEEK
5. ABOUT 3 TIMES A WEEK
6. EVERYDAY

PH64. About how many books does [CHILD] have?

1. NONE
2. 1 TO 2
3. 3 TO 9
4. 10 OR MORE

PH65. About how often does [CHILD] read for enjoyment? Would you say...

1. NEVER
2. SEVERAL TIMES A YEAR
3. SEVERAL TIMES A MONTH
4. SEVERAL TIMES A WEEK
5. EVERY DAY

PH66. Think for a moment about a typical weekday for your family. How much time would you say [CHILD] spends watching television or videos on a typical weekday, either in your home or somewhere else? Please do not include time spent playing or watching others play video games.

_____ HOURS PER WEEKDAY

PH67. This for a moment about the typical weekend day for your family. How much time would you say [CHILD] spends watching television or videos on a typical weekend day, either in your home or somewhere else? Please do not include time spent playing or watching others play video games.

_____ HOURS PER WEEKEND DAY

PH68. How often do you check to make sure [CHILD] has completed [his / her] homework?

1. LESS THAN ONCE A MONTH OR NEVER
2. ABOUT ONCE A MONTH
3. A FEW TIMES A MONTH
4. AT LEAST A FEW TIMES A WEEK
5. EVERY DAY OR EVERY NIGHT
6. EVERY TIME CHILD HAS HOMEWORK ASSIGNED

PH69. Does [CHILD] have a curfew or set time to be home on school nights?

1. YES
5. NO

PH70. CAPI CHECK AGAINST PAGE: IS CHILD 3 YEARS OLD OR OLDER?

1. YES
5. NO (GO TO J1 NEXT SECTION)

PH71INTRO. Now I have some questions about [CHILD]'s behavior during the past month. These are some standard questions used to determine how children and teenagers behave. Some of these questions may seem to better apply to kids who are younger or older than [CHILD], and some may be hard to answer. Please just do your best.

INTERVIEWER: HAND RESPONDENT SHOW CARD

Please tell me whether each of these statements were often true, sometimes true, or not true of [CHILD], during the past month. Just give me the number on this card

PH71a. [He / She] has had sudden changes in mood or feeling.

1. Often True
2. Sometimes True
3. Not True

PH71b. [He / She] has felt or complained that no one loved [him / her].

1. Often True
2. Sometimes True
3. Not True

PH71c. [He / She] has been rather high strung, tense and / or nervous.

1. Often True
2. Sometimes True
3. Not True

PH71d. [He / She] has cheated or told lies.

1. Often True
2. Sometimes True
3. Not True

PH71e. [He / She] has been too fearful or anxious.

1. Often True
2. Sometimes True
3. Not True

PH71f. [He / She] has argued too much.

1. Often True
2. Sometimes True
3. Not True

PH71g. [He / She] has had difficulty concentrating, and / or has not been able to pay attention for long.

1. Often True
2. Sometimes True
3. Not True

PH71h. [He / She] has been easily confused and / or has seemed to be in a fog.

1. Often True
2. Sometimes True
3. Not True

PH71i. [He / She] has bullied or has been cruel or mean to others.

1. Often True
2. Sometimes True
3. Not True

PH71j. [He / She] has been disobedient.

1. Often True
2. Sometimes True
3. Not True

PH71k. [He / She] has not seemed to feel sorry after [he / she] has misbehaved.

1. Often True
2. Sometimes True
3. Not True

PH71l. [He / She] has had trouble getting along with other children.

1. Often True
2. Sometimes True
3. Not True

PH71m. [He / She] has been impulsive or has acted without thinking.

1. Often True
2. Sometimes True
3. Not True

PH71n. [He / She] has felt worthless or inferior.

1. Often True
2. Sometimes True
3. Not True

PH71o. [He / She] has not been liked by other children.

1. Often True
2. Sometimes True
3. Not True

PH71p. [He / She] has had a lot of difficulty getting ([His / her]) mind off certain thoughts (had obsessions).

1. Often True
2. Sometimes True
3. Not True

PH71q. [He / She] has been restless or overly active, and / or has not been able to sit still.

1. Often True
2. Sometimes True
3. Not True

PH71r. [He / She] has been stubborn, sullen, or irritable.

1. Often True
2. Sometimes True
3. Not True

PH71s. [He / She] has had a very strong temper and has lost it easily.

1. Often True
2. Sometimes True
3. Not True

PH71t. [He / She] has been unhappy, sad or depressed.

1. Often True
2. Sometimes True
3. Not True

PH71u. [He / She] has been withdrawn, and / or has not gotten involved with others.

1. Often True
2. Sometimes True
3. Not True

PH71v. [He / She] has broken things on purpose or deliberately destroyed [his / her] own or another's things.

1. Often True
2. Sometimes True
3. Not True

PH71w. [He / She] has been clinging to adults

1. Often True
2. Sometimes True
3. Not True

PH71x. [He / Sshe] has cried too much.

1. Often True
2. Sometimes True
3. Not True

PH71y. [He / She] has demanded a lot of attention.

1. Often True
2. Sometimes True
3. Not True

PH71z. [He / She] has been too dependent on others.

1. Often True
2. Sometimes True
3. Not True

PH71aa. [He / She] has felt others were out to get [him / her].

1. Often True
2. Sometimes True
3. Not True

PH71bb. [He / She] has been hanging around with kids who get into trouble.

1. Often True
2. Sometimes True
3. Not True

PH71cc. [He / She] has been secretive, and / or has kept things to [himself / herself].

1. Often True
2. Sometimes True
3. Not True

PH71dd. [He / She] has been worrying too much.

1. Often True
2. Sometimes True
3. Not True

PH71fr. Now let's talk about something different. How many close friends does [CHILD] have?

_____ NUMBER OF CLOSE FRIENDS

PH72. How many of [CHILD]'s friends' names do you know? Would you say you know all of the names of [his / her] friends, most, some or none?

1. ALL
2. MOST
3. SOME
4. NONE
5. NO FRIENDS (GO TO PH75)

PH73. How many of [CHILD]'s friends live within walking distance of your house? Would you say all, most, some or none?

1. ALL
2. MOST
3. SOME
4. NONE

PH74. Think about the parents of [CHILD]'s friends. How many of them do you know? Would you say you know all of their parents, most, some or none?

1. ALL
2. MOST
3. SOME
4. NONE

PH75. How often do you know who [CHILD] is with when [he / she] is not at home?

1. ALL THE TIME
2. MOST OF THE TIME
3. SOME OF THE TIME
4. ONLY RARELY

SECTION J. RSC'S SIBS (ONLY FOR RSC'S WHOSE MOTHER IS NOT THE RESPONDENT)

PJ1. CHECK PRELOAD:

1. THIS IS [FIRST CHILD] AND PCG IS CHILD'S MOTHER (GO TO SECTION K)
2. THIS IS NOT [FIRST CHILD] (GO TO SECTION K)
3. THIS IS [FIRST CHILD] AND PCG IS NOT CHILD'S MOTHER

PJ2. Here are a few questions about [CHILD]'s brothers and sisters. How many children in total has [CHILD]'s mother had besides [CHILD]? This includes all brothers or sisters who have the same mother as [CHILD]. Please

include brothers and sisters who live here as well as those who live elsewhere and those who may no longer be alive.

_____ # OF CHILDREN BESIDES [CHILD] (GO TO PJ4)

PJ3. You may not know about all the children [CHILD]'s mother has had. But how many children did she have that you do know about besides [CHILD]? Please include all other children you know about, even if they are no longer alive.

_____ # OF CHILDREN BESIDES [CHILD] (GO TO PJ4)

J4ck. SEQUENCE OF QUESTIONS J4 THRU J12 IS REPEATED FOR EACH SIBLING INCLUDED IN J2 OR J3 UP TO 9 MAX

PJ4. [IF MORE THAN ONE CHILD]: Let's start with [CHILD]'s mother's first child that is a sibling of [CHILD]. What is this sibling's first name?

_____ CHILDNAME

PJ5. Does [PJ4 CHILDNAME] live in this household?

1. YES (GO TO NEXT SIBLING, IF ANY, OR TO SECTION K)
5. NO
6. CHILD IS NO LONGER ALIVE (GO TO PJ13)

PJ6. When was [PJ4 CHILDNAME] born? In what month and year?

_____ MONTH _____ YEAR

PJ7. How old is [PJ4 CHILDNAME]?

_____ YEARS OLD

PJ8. Where does [PJ4 CHILDNAME] live? In what city and state?

_____ CITY _____ STATE _____ COUNTRY

PJ11. INTERVIEWER CHECK:

1. CHILD IS 17 YEARS OLD OR YOUNGER
2. CHILD IS 18 YEARS OR OLDER (GO TO NEXT SIBLING, IF ANY, OR TO SECTION K)

PJ12. Who is [PJ4 CHILDNAME] currently living with?

SELECT ALL THAT APPLY

1. BIOLOGICAL MOTHER
2. BIOLOGICAL FATHER
3. ADOPTIVE MOTHER
4. ADOPTIVE FATHER
5. STEPMOTHER
6. STEPFATHER
7. MOTHER'S BOYFRIEND / PARTNER
8. FATHER'S GIRLFRIEND / PARTNER
9. GRANDMOTHER
10. GRANDFATHER
11. AUNT
12. UNCLE
13. SISTER (INCLUDING HALF SISTER, STEP SISTER)

14. BROTHER (INCLUDING HALF BROTHER, STEP BROTHER)
15. HUSBAND / WIFE
16. OTHER RELATIVES
17. FOSTER PARENTS, FOSTER FAMILY, FOSTER CARE
18. FRIENDS
19. WITH HIS / HER BOYFRIEND / GIRLFRIEND
20. LIVING BY HIMSELF / HERSELF
21. LIVING IN A SCHOOL DORMITORY
22. IN JAIL, PRISON, OR JUVENILE DETENTION CENTER
23. SOMEWHERE ELSE, SPECIFY: _____

GO TO NEXT SIBLING, IF ANY, OR TO SECTION K

ONLY FOR KIDS WHO HAVE DIED

PJ13. When did [PJ4 CHILDNAME] die?

_____ MONTH _____ YEAR

PJ14. About how old was [PJ4 CHILDNAME] when [he / she] died?

_____ AGE

GO TO NEXT SIBLING, IF ANY, OR TO SECTION K

END OF LOOP, ALL RETURN HERE TO CHECK IF ANOTHER SIBLING

SECTION K. CHILD HEALTH

PK1. In general, would you say [CHILD]'s health is excellent, very good, good, fair, or poor?

1. EXCELLENT
2. VERY GOOD
3. GOOD
4. FAIR
5. POOR

PK1A. CAPI CHECK:

1. THIS IS PANEL CHILD
2. THIS IS NOT A PANEL CHILD (GO TO PK2)

PK1B. As you know, in [W1 INTERVIEW MONTH AND YEAR] we interviewed [you / [CHILD]'S [W1 PCG RELATIONSHIP TO CHILD]] about [CHILD]. At that time, how was [CHILD]'s health in general. Would you say that [CHILD]'s health at that time was excellent, very good, good, fair, or poor?

1. EXCELLENT
2. VERY GOOD
3. GOOD
4. FAIR
5. POOR

IF PK2, PK3, PK4, PK5, AND PK6 WERE COMPLETED IN WAVE 1 (DK AND REF ARE NOT COUNTED AS "COMPLETED"), GO TO PK7

PK2. When [CHILD] was born, was [he / she] born around [his / her] due date, early or late?

1. ON DUE DATE (GO TO PK4)
2. EARLY
3. LATE
- 1. DON'T KNOW (GO TO PK4)

PK3_A. About how many days or weeks [before / after] the due date was [CHILD] born?

CODE UNIT

1. DAYS
2. WEEKS

PK4. Was [CHILD]'s weight at birth very small, less than average, average, above average, or heavy compared to the typical baby?

1. VERY SMALL
2. LESS THAN AVERAGE
3. AVERAGE
4. ABOVE AVERAGE
5. HEAVY

PK5. How much did [CHILD] weigh at birth?

1. _____ POUNDS _____ OUNCES
2. _____ KILOS

PK6. Compared to other babies in general, would you say that [CHILD]'s health at birth was better than other babies, the same as other babies, or worse than other babies?

1. BETTER
2. SAME
3. WORSE

PK10. Has a doctor or other health professional ever told you that [CHILD] has asthma?

1. YES
5. NO (GO TO PK10B)

PK10A. How old was [CHILD] when the doctor first told you that [he / she] had asthma?

__ MONTHS OLD (0 TO 11 MONTHS OR CHILD'S CURRENT AGE IF CHILD IS <11 MONTHS)
OR
_____ YEARS OLD (RANGE: 1 TO CHILD'S CURRENT AGE)

PK10B. [During the past 12 months / Since [CHILD] was born], has your child ever had wheezing or whistling in the chest?

1. YES
5. NO (GO TO PK10E)

PK10C. Let me ask you something else about [the past 12 months / the time since [CHILD] was born]. In an average week how often has [he / she] woken up because [he / she] was wheezing? Would you say....

1. Never woken with wheezing
2. Less than one night per week
3. One or more nights per week?

PK10C_1. CHECK:

1. CHILD IS 1 YEAR OR OLDER (CONTINUE)
2. CHILD IS LESS THAN ONE YEAR (GO TO PK10E)

PK10D. During the past 12 months, has wheezing ever been severe enough to limit [CHILD]'s speech to only one or two words at a time between breaths?

1. YES
5. NO

PK10E. [During the past 12 months / Since [CHILD] was born], has [he / she] had a problem with sneezing, or a runny or blocked nose when [he / she] DID NOT have a cold or the flu?

1. YES
5. NO

PK10F. [During the past 12 months / Since [CHILD] was born], has [CHILD] used any medicines, pills, puffers or other medication for wheezing or asthma?

1. YES
5. NO

PK10G. [Do you / Does [CHILD]'s biological mother / Did [CHILD]'s biological mother] have asthma?

1. YES
5. NO

PK10H. [Do you / How about [CHILD]'s biological father? Does he / Did he] have asthma?

1. YES
5. NO

PK12. Has your doctor or health professional ever said that [CHILD] had...

PK12.a. An epileptic fit or convulsion?

1. YES
5. NO

PK12.b. Diabetes?

1. YES
5. NO

PK12.c. More than 3 ear infections in a year?

1. YES
5. NO

PK12.d. A speech impairment or delay?

1. YES
5. NO

PK12.e. Serious hearing difficulty or deafness?

1. YES
5. NO

PK12.f. Serious difficulty seeing or blindness?

- 1. YES
- 5. NO

PK12.g. Mental retardation?

- 1. YES
- 5. NO

PK12.h. A serious emotional disturbance?

- 1. YES
- 5. NO

PK12.i. Anemia or iron deficiency?

- 1. YES
- 5. NO

PK12.j. Elevated levels of lead in the blood?

- 1. YES
- 5. NO

PK12.k. Orthopedic impairment? (Problems with walking, sitting, moving, etc.)

- 1. YES
- 5. NO

PK12.l. A developmental delay?

- 1. YES
- 5. NO

PK12.m. A learning disability?

- 1. YES, SPECIFY _____
- 5. NO

PK12.n. Autism?

- 1. YES
- 5. NO

PK12.o. Hyperactivity, ADHD, or ADD?

- 1. YES
- 5. NO

PK12.q. Allergies?

- 1. YES
- 5. NO

PK12.r. A heart condition?

- 1. YES
- 5. NO

PK12.p_A. Another major health problem that I have not mentioned?

1. YES, SPECIFY _____
5. NO

PK13. The next questions are about health care. Is there a place that [CHILD] usually goes when [he / she] is sick or you need advice about [his / her] health?

INTERVIEWER: IF YES, ASK: Do you have one place, or more than one place?

1. YES, ONE PLACE
2. YES, MORE THAN ONE PLACE
3. NO (GO TO PK18)

PK14. [IF PK13=1, THEN READ:] What kind of place is it? Is it a...

[IF PK13=2, THEN READ:] What kind of place does [CHILD] go to most often? Do you go to a...

1. Clinic, health center or HMO,
2. Doctor's office,
3. Hospital emergency room,
4. Hospital outpatient department, or
5. Some other place? SPECIFY: _____
- 1. DON'T KNOW
- 2. REFUSED (GO TO PK17)

PK15. [What is / Do you know] the name of this place?

NAME _____

PK16. Where is this place located? On what street? What is the nearest intersection, corner, or cross-street? What city is it in?

EXACT STREET NUMBER AND STREET NAME _____
ON _____ STREET AT THE CORNER OF _____ CROSS-STREET
IN _____ CITY _____ STATE _____ COUNTRY

PK17. Is that the same place [CHILD] usually goes when [he / she] needs routine or preventive care, such as a physical examination or well baby / child check-up?

1. YES (GO TO PK21)
5. NO

PK18. What kind of place do you go to when [he / she] needs routine preventive care, such as a physical examination or well baby / child check-up? Do you go to a...

1. Clinic, health center or HMO,
2. Doctor's office,
3. Hospital emergency room,
4. Hospital outpatient department, or
5. Some other place? SPECIFY: _____
6. DOESN'T GET PREVENTIVE CARE ANYWHERE
- 1. DON'T KNOW
- 2. REFUSED (GO TO PK21)

IF PK18=6, GO TO PK21

PK19. [What is / Do you know] the name of this place?

_____ NAME OF PLACE

PK20A. Is this place at the same address you just gave me? Is it at [PK16 STREET 1] near [PK16 STREET 2] in [PK16 CITY AND STATE]?

1. YES
5. NO

PK20 street. Where is this place located? On what street? What is the nearest intersection, corner, or cross-street? What city is it in?

EXACT NUMBER AND STREET NAME _____
ON _____ STREET AT THE CORNER OF _____ CROSS-STREET
IN _____ CITY _____ STATE _____ COUNTRY

PK21_1. When was the last time [CHILD] as seen by a doctor, nurse or other health care professional for illness or injury?

1. ____ MONTH ____ YEAR (GO TO PK22)
5. NEVER (GO TO PK25)

DATA USER NOTE: respondents who answered "5. Never" to this question should have gone to PK22B. Unfortunately, they were skipped around the question and sent to PK25.

PK21A. How long ago did [CHILD] see a doctor, nurse or other health care professional for illness or injury?

INTERVIEWER PROBE AS NECESSARY: 'How many months or years ago?'

INTERVIEWER: IF RESPONDENT SAYS 12–23 MONTHS AGO, ENTER 1 YEAR AGO. IF RESPONDENT SAYS 24–35 MONTHS AGO, ENTER 2 YEARS AGO. ONLY ENTER MONTHS AGO IF RESPONDENT SAYS 1–11 MONTHS AGO OR LESS THAN ONE MONTH AGO. FOR LESS THAN ONE MONTH AGO, ENTER ZERO MONTHS AGO. IF RESPONDENT SAYS LESS THAN ONE YEAR AGO, ASK THEM HOW MANY MONTHS AGO IT WAS.

__ MONTHS AGO OR __ YEARS AGO

IF DK / REF CONTINUE. ELSE GO TO PK22.

PK21B_1. How old was [CHILD] when [he / she] last saw a doctor, nurse or other health care professional for illness or injury?

__ MONTHS OLD OR __ YEARS OLD

PK22. For what illness, injury or other reason did [he / she] see the doctor, nurse, or other health care professional?

RECORD VERBATIM _____

PK22B. When was the last time that [CHILD] saw a doctor, nurse or other health care professional for a routine check-up or physical exam?

1. ____ MONTH ____ YEAR (GO TO PK25)
5. NEVER (GO TO _____)
9. DON'T KNOW (CONTINUE)

DATA USER NOTE: This question should have been answered by everyone, but respondents who answered PK21_1=5 were directed around the question to PK25.

PK22C. How long ago did [CHILD] see a doctor, nurse or other health care professional for a routine check-up or physical exam?

INTERVIEWER PROBE AS NECESSARY: 'How many months or years ago?'

INTERVIEWER: IF RESPONDENT SAYS 12–23 MONTHS AGO, ENTER 1 YEAR AGO. IF RESPONDENT SAYS 24–35 MONTHS AGO, ENTER 2 YEARS AGO. ONLY ENTER MONTHS AGO IF RESPONDENT SAYS 1–11 MONTHS AGO OR LESS THAN ONE MONTH AGO. FOR LESS THAN ONE MONTH AGO, ENTER ZERO MONTHS AGO. IF RESPONDENT SAYS LESS THAN ONE YEAR AGO, ASK THEM HOW MANY MONTHS AGO IT WAS.

__ MONTHS AGO OR __ YEARS AGO

PK25. During the past 12 months, how many times has [CHILD] gone to a hospital emergency room about [his / her] health? This includes emergency room visits that resulted in a hospital admission.

0. NONE
1. 1
2. 2–3
3. 4–9
4. 10–12
5. 13 OR MORE

PK27. During the past 12 months, have you ever taken [CHILD] to see any of the following types of people about a health problem?

PK27.a. Dentist?

1. YES
5. NO

PK27.b. Optometrist or Ophthalmologist or Eye Doctor?

1. YES
5. NO

PK27.c. Psychiatrist, psychologist, or a counselor?

1. YES
5. NO

PK27.d. Pharmacist?

1. YES
5. NO

PK28. CAPI CHECK:

1. CHILD IS < 5 YEARS OLD (GO TO END OF SECTION K)
2. CHILD IS >=5 YEARS OLD

PK29. Now think about the past seven days, that is from [DAY OF THE WEEK SEVEN DAYS AGO] last week up to and including today. First let me ask you about vigorous activities like exercise, sports, and physically active hobbies that cause heavy sweating or large increases in breathing or heart rate. How many times during the past seven days did [CHILD] do these vigorous leisure-time activities for at least 20 minutes?

__ Times in the last seven days
77. Physically unable to do this type of exercise

PK30. Now let me ask you about light or moderate activities like exercise or sports, and casual walks that cause only light sweating or a slight to moderate increase in breathing or heart rate. How many times during the past seven days did [CHILD] do these light or moderate activities for at least 20 minutes?

__ Times in the last seven days
77. Physically unable to do this type of exercise

CAPI CHECK:

1. THIS WAS ONLY CHILD FOR WHOM PARENT QX NEEDS TO BE COMPLETED (COMPLETE HOUSEHOLD OBSERVATION FORM AND END MODULE)
2. THERE IS AT LEAST ONE MORE CHILD FOR WHOM PARENT QX NEEDS TO BE COMPLETED (COMPLETE HOUSEHOLD OBSERVATION FORM AND BEGIN MODULE FOR NEXT CHILD)

SECTION HOF. HOUSEHOLD OBSERVATION

THIS SECTION IS COMPLETED AT THE END OF THE PARENT MODULE (IF ONLY ONE PARENT MODULE IS COMPLETED OR BETWEEN THE FIRST AND SECOND PARENT MODULE IF MORE THAN ONE PARENT MODULE IS COMPLETED BY A PCG.

THESE QUESTIONS ARE COMPLETED BY THE INTERVIEWER BASED ON HIS/HER OBSERVATION.

HOFINTRO1. IF NECESSARY: I have a few administrative things I have to do on my computer that will take me a few minutes. Why don't we take a break until I'm finished?

HOFINTRO2. INTERVIEWER: YOU SHOULD NOW ANSWER THE HOUSEHOLD OBSERVATION MODULE.

PRESS '1' TO CONTINUE.

HOFINTRO3. INTERVIEWER: PLEASE ANSWER THESE QUESTIONS THE BEST YOU CAN. YOU SHOULD ANSWER BASED ON WHAT YOU KNOW OR HAVE SEEN SO FAR. DO NOT EXPLORE THE HOME MORE THAN YOU ALREADY HAVE IN ORDER TO ANSWER THESE QUESTIONS. DO NOT ASK THE RESPONDENT OR ANYONE ELSE IN THE HOUSEHOLD FOR HELP IN ANSWERING THESE QUESTIONS.

PRESS '1' TO CONTINUE

HOF1. INTERVIEWER: IS THE ENVIRONMENT INSIDE THE HOME UNSAFE FOR YOUNG CHILDREN? ARE THERE ONE OR MORE POTENTIALLY DANGEROUS HEALTH OR STRUCTURAL HAZARDS?

FOR EXAMPLE, ARE THERE FRAYED ELECTRICAL WIRES, MICE OR RATS, GLASS, POISONS, FALLING PLASTER, BROKEN STAIRS, PEELING PAINT, CLEANING MATERIALS LEFT OUT, FLAMES OR HEAT WITHIN REACH OF YOUNG CHILD?

INTERVIEWER: IF YOU HAVE NOT HAD A CHANCE TO OBSERVE THIS ISSUE, SELECT DK AS YOUR RESPONSE

1. YES
5. NO

HOF2. INTERVIEWER: IS THE ENVIRONMENT OUTSIDE HOME (YARD, PATIO, ENTRYWAY OR PORCH, HALLS AND STAIRS) UNSAFE FOR YOUNG CHILDREN?

FOR EXAMPLE IS THERE AN UNLIT ENTRANCE OR STAIRWAY, BROKEN STEPS, BROKEN GLASS, BROKEN TOYS, LARGE DITCHES, ALCOHOL OR DRUG PARAPHENALIA?

INTERVIEWER: IF YOU HAVE NOT HAD A CHANCE TO OBSERVE THIS ISSUE, SELECT DK AS YOUR RESPONSE

- 1. YES
- 5. NO

HOF3. INTERVIEWER: IS THE INSIDE OF THE HOME DARK?

FOR EXAMPLE, DARK ROOMS OR DRAPES.

INTERVIEWER: IF YOU HAVE NOT HAD A CHANCE TO OBSERVE THIS ISSUE, SELECT DK AS YOUR RESPONSE

- 1. YES
- 5. NO

HOF4. INTERVIEWER: DOES THE HOUSEHOLD HAVE NO DECORATION OR IS THE DECOR MONOTONOUS?

FOR EXAMPLE, ARE THERE NO PICTURES OR NICK-NACKS, NO PLANTS, NO OR VERY LITTLE FURNITURE IN THE LIVING ROOM OR DINING ROOM?

INTERVIEWER: IF YOU HAVE NOT HAD A CHANCE TO OBSERVE THIS ISSUE, SELECT DK AS YOUR RESPONSE

- 1. YES
- 5. NO

HOF5. INTERVIEWER: IS THE INSIDE OF THE HOME CROWDED?

FOR EXAMPLE, ARE THERE MANY PEOPLE LIVING IN A VERY SMALL HOUSE OR APARTMENT, IS IT DIFFICULT TO FIND A PRIVATE PLACE TO INTERVIEW RESPONDENTS, ARE THERE FREQUENT INTERRUPTIONS AND PEOPLE BUMPING INTO EACH OTHER.

INTERVIEWER: IF YOU HAVE NOT HAD A CHANCE TO OBSERVE THIS ISSUE, SELECT DK AS YOUR RESPONSE

- 1. YES
- 5. NO

HOF6. INTERVIEWER: ARE ALL VISIBLE ROOMS OF THE HOUSE / APARTMENT MINIMALLY CLUTTERED OR NOT CLUTTERED AT ALL?

FOR EXAMPLE, ARE ALL VISIBLE ROOMS NEAT OR MINIMALLY CLUTTERED WITH CLOTHES, VACUUM CLEANER, CHILDREN'S SCHOOL WORK, SHOES AND SOCKS, OTHER OBJECTS?

INTERVIEWER: IF YOU HAVE NOT HAD A CHANCE TO OBSERVE THIS ISSUE, SELECT DK AS YOUR RESPONSE

- 1. YES
- 5. NO

HOF7. INTERVIEWER: ARE ALL VISIBLE ROOMS OF THE HOUSE / APARTMENT CLEAN OR REASONABLY CLEAN?

FOR EXAMPLE, IS THERE NO TRASH STREWN AROUND, ARE THERE NO OR FEW DIRTY DISHES IN THE KITCHEN, HAVE THE FLOOR AND FURNITURE BEEN CLEANED OR DUSTED FAIRLY RECENTLY?

INTERVIEWER: IF YOU HAVE NOT HAD A CHANCE TO OBSERVE THIS ISSUE, SELECT DK AS YOUR RESPONSE

- 1. YES

5. NO

HOF8. INTERVIEWER: DID RESPONDENT [PRIMARY CARE GIVER] USE CORRECT GRAMMAR AND PRONUNCIATION MOST OF THE TIME?

- 1. YES
- 5. NO

HOF9. DID RESPONDENT SPEAK CLEARLY AND AUDIBLY TO YOU MOST OF THE TIME?

- 1. YES
- 5. NO

HOF10. DID RESPONDENT APPEAR TO UNDERSTAND THE QUESTIONS YOU ASKED?

- 1. YES
- 5. NO

HOF11. INTERVIEWER: WAS THERE A CHILD IN THE ROOM OR IN THE NEXT ROOM AT ANY TIME WHILE YOU WERE INTERVIEWING RESPONDENT?

INTERVIEWER: CHILD MUST LIVE IN THE HOUSEHOLD.

- 1. YES
- 5. NO (GO TO END OF HH OBSERVATION)

HOF12. INTERVIEWER: HOW MANY DIFFERENT CHILDREN WERE IN THE ROOM AT LEAST PART OF THE TIME?

_____ NUMBER OF CHILDREN

HOF13. INTERVIEWER: ABOUT HOW OLD WOULD YOU ESTIMATE THESE CHILDREN ARE?

MARK ALL CATEGORIES THAT APPLY

- 1. LESS THAN 1 YEAR OLD
- 2. 1 TO 2 YEARS OLD
- 3. 3 TO 5 YEARS OLD
- 4. 6 TO 10 YEARS OLD
- 5. 11 TO 14 YEARS OLD
- 6. 15 OR OLDER

HOF14. CAPI CHECK:

- 1. HOF13=1 OR HOF13=2 OR HOF13=3
- 2. OTHERWISE (GO TO END)

HOFINTRO4. PLEASE ANSWER WHETHER YOU SAW OR HEARD ANY OF THESE THINGS WHILE THE CHILD(REN) WAS IN THE ROOM OR NEAR BY.

HOF15. RESPONDENT CARESSED, KISSED OR HUGGED THE CHILD OR CHILDREN AT LEAST TWICE.

- 1. YES
- 5. NO

HOF16. INTERVIEWER: DID THE RESPONDENT TALK TO THE CHILD OR CHILDREN AT LEAST ONCE?

INTERVIEWER: THIS DOES NOT INCLUDE SCOLDING OR SUSPICIOUS COMMENTS.

- 1. YES
- 5. NO

HOF17. INTERVIEWER: DID THE RESPONDENT SLAP OR SPANK THE CHILD OR CHILDREN AT LEAST ONCE?

- 1. YES
- 5. NO

HOF18. INTERVIEWER: DID THE RESPONDENT YELL OR SCREAM AT THE CHILD OR CHILDREN AT LEAST ONCE?

- 1. YES
- 5. NO

HOF19. INTERVIEWER: DID THE RESPONDENT SAY SOMETHING TO THE CHILD OR CHILDREN IN RESPONSE TO SOMETHING A CHILD SAID, A CHILD'S ACTION, OR A NOISE MADE BY A CHILD?

- 1. YES
- 5. NO

HOF20. INTERVIEWER: DID THE RESPONDENT ANSWER THE CHILD OR CHILDREN'S QUESTIONS OR REQUESTS?

INTERVIEWER: IF YOU HAVE NOT HAD A CHANCE TO OBSERVE THIS ISSUE, SELECT DK AS YOUR RESPONSE.

- 1. YES
- 5. NO

HOF21. INTERVIEWER: DID THE RESPONDENT GIVE YOU THE SENSE THAT [HE / SHE] HAD POSITIVE FEELINGS ABOUT THE CHILD OR CHILDREN?

- 1. YES
- 5. NO

Los Angeles Family and Neighborhood Survey, Wave 2 (L.A.FANS-2)

PRIMARY CARE GIVER (PCG) QUESTIONNAIRE

QUESTIONNAIRE FOR THE PCG OF ALL SAMPLED RSCs AND SIBs ≤ 17 YEARS OLD

PRELOAD FROM HOUSEHOLD ROSTER:

- Whether PCG has a spouse or partner
- Sex of PCG's spouse or partner
- Whether PCG has children in household
- Whether PCG has only one child in household
- Whether PCG's spouse or partner (if any) has children in the household
- Whether PCG's spouse or partner (if any) has only one child in household
- Roster list 1 (all household members listed)

Questionnaire formatting key

- **Black bold:** Question numbers
- Black normal: Interviewer to read question text
- BLACK UPPER CASE: Interviewer and programming instructions
- ***BLACK BOLD ITALIC UPPER CASE:*** Comments

SECTION A. INTRODUCTION TO SELF-ADMINISTERED QUESTIONNAIRE

PCGSAQINTRO. Next, we'd like for you to answer some questions using the computer. Using the computer is easy—I'll show you how it works.

CAPI GOES TO APPROPRIATE SAQ TRAINING SECTION FOR PCG SAQ QUESTIONS

PCGSAQ1. Welcome to L.A. FANS! For the next few minutes I will show you how to answer questions on this computer. Please ask me any questions you have while we go through them.

Press 1 (one) to continue.

PCGSAQ2. A lot of the questions are answered with either "Yes" or "No". Let's try one together.

Do you like ice cream?

1. Yes
5. No

PCGSAQ3. Good! Sometimes there will be more answer choices than "Yes" and "No". Let's try a couple of those.

Which one of these animals do you like the best?

1. Birds
2. Cats
3. Dogs
4. Fish
5. Snakes

PCGSAQ4. Sometimes you will be able to give more than one answer. What types of movies do you like to watch?

Type '1' then 'Enter' for yes or '5' then 'Enter' for no for each question.

1. Action movies
2. Romantic movies
3. Thriller movies
4. Horror movies
5. Comedy movies
6. Other type of movies

PCGSAQ5. Sometimes you will be asked to type in a number or an amount for your answer. How many times have you been to the grocery store in the last 7 days?

__ _ TIMES IN THE LAST 7 DAYS

PCGSAQ5a. If you don't know the answer to a question, you can type the 'F3 key' above the letters on the keyboard. For example...How many trees are in Yosemite National Park?

PCGSAQ5b. If you decide you don't want to answer, you can type the 'F4 key' above the letters on the keyboard. For example...Do you like to drink hot tea with sugar?

PCGSAQ7. For a few questions, you may be asked to type a word or several words. If you make a mistake you can use the 'Backspace' key to fix it.

What is your first name?

Type in your name. Then press 'Enter'."

PCGSAQ8. Good job! That is the end of the examples. Now I will get the computer ready for you.

INTERVIEWER: ENTER '1' TO CONTINUE

PCGSAQ9. INTERVIEWER: IS R CAPABLE OF COMPLETING THE SAQ?

1. YES
5. NO

SECTION B. SELF-ASSESSMENT

In this part of the interview, you will be asked to answer questions about yourself and your family life. Please keep in mind that all of your answers will remain completely confidential.

TYPE '1' THEN 'ENTER' TO CONTINUE

GB1. Please select the number that indicates how much you agree with the following statements:

GB1.a. There is really no way I can solve some of the problems I have.

1. Strongly Agree
2. Agree
3. Disagree
4. Strongly Disagree

GB1.b. Sometimes I feel that I'm pushed around in life.

1. Strongly Agree
2. Agree
3. Disagree
4. Strongly Disagree

GB1.c. I have little control over the things that happen to me.

1. Strongly Agree
2. Agree
3. Disagree
4. Strongly Disagree

GB1.d. I can do just about anything I really set my mind to.

1. Strongly Agree
2. Agree
3. Disagree
4. Strongly Disagree

GB1.e. I often feel helpless in dealing with the problems of life.

1. Strongly Agree
2. Agree
3. Disagree
4. Strongly Disagree

GB1.f. What happens to me in the future mostly depends on me.

1. Strongly Agree
2. Agree

3. Disagree
4. Strongly Disagree

GB1.g. There is little I can do to change many of the important things in my life.

1. Strongly Agree
2. Agree
3. Disagree
4. Strongly Disagree

SECTION C: FAMILY ROUTINES

GC1. Next are some questions about family routines. We want to know about how many days a week you, [your husband / wife / partner], and your [child / children] do things at a regular time—that is, at about the same time each day.

TYPE '1' THEN 'ENTER' TO CONTINUE

GC1.a. About how many days a week [do your children / does your child] have breakfast at a regular time, that is at about the same time each day?

Please choose one number, ranging from 0 days per week (never) to 7 days per week (every day).

_____ # of Days per Week (RANGE=0–7)

GC1.b. About how many days a week is the evening meal served at a regular time?

_____ # of Days per Week (RANGE=0–7)

GC1.c. About how many days a week are the household chores done at a regular time?

_____ # of Days per Week (RANGE=0–7)

GC1.d. About how many days a week, [do your children / does your child] go to bed at a regular time?

_____ # of Days per Week (RANGE=0–7)

GC2. About how many days each week do you, your [husband / wife / partner] and your [children / child] all eat dinner together?

_____ # of Days per Week (RANGE=0–7)

GC3. Next are some things people sometimes feel about raising children. Thinking about [your child / your children / the child living here with you / the children living here with you], please enter the number that shows how you feel.

GC3.a. Being a parent is harder than I thought it would be.

1. Completely false
2. False
3. Sometimes true and sometimes false
4. True
5. Completely true

GC3.b. I feel trapped by my responsibilities as a parent.

1. Completely false
2. False
3. Sometimes true and sometimes false
4. True
5. Completely true

GC3.c. I find that taking care of children is much more work than pleasure

1. Completely false
2. False
3. Sometimes true and sometimes false
4. True
5. Completely true

GC3.d. I often feel tired, worn out, or exhausted from raising a family.

1. Completely false
2. False
3. Sometimes true and sometimes false
4. True
5. Completely true

GC4. About how often does your whole family get together with relatives or friends?

0. Never
1. Once a year or less
2. A few times a year
3. About once a month
4. Two or three times a month
5. About once a week or more

GC5. About how many magazines does your family get regularly?

0. None
1. 1
2. 2
3. 3
4. 4 or more

GC6. Does your family get a daily newspaper?

1. Yes
5. No

GC7. About how many books are there in the house?

0. None
1. 1 to 10
2. 11 to 20
3. More than 20

GC8. About how often do you read for enjoyment?

1. Never
2. Several times a year
3. Several times a month
4. Several times a week
5. Every day

GC9. Is there a computer in this household that your [child / children] use?

1. Yes
5. No

SECTION D. SOCIAL SUPPORT

GD1INTRO. The following questions ask about unexpected things that sometimes occur when you have children.

TYPE '1' THEN 'ENTER' TO CONTINUE"

GD1. In the past month, have you ever suddenly needed someone to look after your [child / children] for a few hours, when you didn't expect it?

1. Yes
5. No (GO TO GD3_A)

GD2. When this happened, whom did you ask for help?

CHOOSE ALL THAT APPLY

1. No one
2. Someone living here with you (husband, wife, partner, another child, other household member)
3. Former spouse or partner
4. Own mother, father
5. Mother-in-law, father-in-law
6. Own grandmother, grandfather
7. Spouse's grandmother, grandfather
8. Sister, brother
9. Aunt, uncle, cousin
10. Child's other parent (not living in this household)
11. Other relative
12. Friend
13. Neighbor
14. Counselor, minister, other clergy
15. Members of church or other organization
16. Co-workers
17. Own child
18. Other (Specify): _____
21. Babysitter

GD3_A. Suppose that you had an emergency in the middle of the night. You and your [husband / wife / partner] had to go somewhere and needed someone to look after your [child / children] for a few hours. Who would you ask?

CHOOSE ONLY ONE NUMBER

1. No one
2. Someone living here with you (husband, wife, partner, another child, other household member)
3. Former spouse or partner
4. Own mother, father
5. Mother-in-law, father-in-law
6. Own grandmother, grandfather
7. Spouse's grandmother, grandfather
8. Sister, brother
9. Aunt, uncle, cousin
10. Child's other parent (not living in this household)
11. Other relative

12. Friend
13. Neighbor
14. Counselor, minister, other clergy
15. Members of church or other organization
16. Co-workers
17. Own child
18. Other (Specify): _____
21. Babysitter
22. Nanny / regular day care person
25. Take child with me

GD4_A. What if you and your [husband / wife / partner] had to borrow enough money to cover your rent or mortgage payment for a month. You needed the money for a few weeks because of an emergency.

Who is the first person you would ask?

CHOOSE ONLY ONE NUMBER

1. No one
2. Someone living here with you (husband, wife, partner, another child, other household member)
3. Former spouse or partner
4. Own mother, father
5. Mother-in-law, father-in-law
6. Own grandmother, grandfather
7. Spouse's grandmother, grandfather
8. Sister, brother
9. Aunt, uncle, cousin
10. Child's other parent (not living in this household)
11. Other relative
12. Friend
13. Neighbor
14. Counselor, minister, other clergy
15. Members of church or other organization
16. Co-workers
17. Own child
18. Other (Specify): _____
26. Bank / Credit Union loan
28. Cash advance / credit card / withdrawal
29. Employer

SECTION E. RELATIONSHIP WITH SPOUSE OR PARTNER

GE1. CATI CHECK: IF RESPONDENT IS LIVING WITH HUSBAND / WIFE / PARTNER, CONTINUE. IF NOT, GO TO END OF SECTION E.

Here are a few questions about your relationship with your [husband / wife / partner]. Please remember that your answers are completely confidential.

TYPE '1' THEN 'ENTER' TO CONTINUE"

GE2. Thinking about your relationship with your [husband / wife / partner], how often would you say that:

GE2.a. [She / He] is fair and willing to compromise when you have a disagreement?

1. Often
2. Sometimes
3. Never

GE2.b. [She / He] expresses affection or love for you?

1. Often
2. Sometimes
3. Never

GE2.c. [She / He] insults or criticizes you or your ideas?

1. Often
2. Sometimes
3. Never

GE2.d. [She / He] encourages or helps you do things that are important to you?

1. Often
2. Sometimes
3. Never

GE2.e. [She / He] tries to keep you from seeing or talking with your friends or family?

1. Often
2. Sometimes
3. Never

GE2.f. [She/ He] tries to prevent you from going to work or school?

1. Often
2. Sometimes
3. Never

GE2.g. [She / He] withholds money, makes you ask for money, or takes your money?

1. Often
2. Sometimes
3. Never

GE2.h. [She / He] slaps or kicks you?

1. Often
2. Sometimes
3. Never

GE2.i. [She / He] hits you with a fist or an object that could hurt you?

1. Often
2. Sometimes
3. Never

GE2.j. [She / He] tries to make you have sex or do sexual things you don't want to do?

1. Often
2. Sometimes
3. Never

GE3. Were you ever cut, bruised or seriously hurt in a fight with your spouse or partner?

1. Yes
5. No

GE4. Just a reminder: If you or anyone you know ever needs help, there is a flyer in the packet that the interviewer gave you explaining how to get help for domestic violence.

TYPE '1' THEN 'ENTER' TO CONTINUE

SECTION F. CHARACTERISTICS OF THE HOME

GF1. Does anyone living here with you smoke cigarettes, cigars or a pipe?

1. Yes
5. No (GO TO GF3)

GF2. How many people who live here smoke everyday inside this [house / apartment]?

0. None
1. One
2. Two
3. Three
4. Four
5. Five
6. Six or more people

GF3. Is there a cooking stove, range or oven in this [house / apartment] that uses gas?

1. Yes
5. No (GO TO GR7)

GF4. How is the stove, range, or oven lit?

MARK ALL THAT APPLY

1. By electronic ignition which goes click, click, click before igniting
2. By continuous pilot light which goes on without a match
3. No pilot light – you have to light it with a match
4. Sometimes uses a match
5. Don't know

GF5. Think about this last week. How often did you or someone else use the gas stove, range, or oven while your [child was / children were] home? Just give your best guess. If you did not use the gas, stove, range or oven in the past week, ENTER 0.

_____ Times

GF6. Now think about an average day. How long is the gas stove, range, or oven on when your [child is / children are] at home?

- a. Less than 15 minutes per day when child / children at home
- b. 15 to 30 minutes per day when child / children at home
- c. 30 minutes to an hour per day when child / children at home
- d. One hour or more per day when child / children at home

GF7. In the last 12 months have you had any of the following pests in your home?

MARK ALL THAT APPLY

1. RATS
2. MICE
3. COCKROACHES

- 4. ANTS
- 5. SPIDERS
- 6. TERMITES
- 8. NO PROBLEMS WITH PESTS

GF8. In the last 12 months has there been mold or mildew on the walls, ceilings or floors of your home?

- 1. Yes
- 5. No

GF9. In the last 12 months has there been a moldy or musty smell in your home?

- 1. YES
- 5. NO

GF10. Do you have any pets that come inside the house or apartment at least part of the time?

- 1. Yes
- 5. No (GO TO GF12)

GF11. What kind of pets do you have?

MARK ALL THAT APPLY

- 1. Dog(s)
- 2. Cat(s)
- 3. Bird(s)
- 4. Rabbit(s)
- 5. Guinea pig(s), gerbil(s), hamster(s)
- 6. Other, specify _____

GF12. Do you have air conditioning in your [house / apartment]?

- 1. YES
- 5. NO

GF13. Last summer, that is June, July, and August of [CURRENT / LAST YEAR], about how often did you use your air conditioner when your [child was / children were] at home? If you never used your air conditioning last summer when your child / children were at home, ENTER 0.

_____ Percent of time (RANGE 0 to 100 percent)

GFTHANKS. Thank you for your time. You have reached the end of this portion of the interview. Please turn the computer back to the interviewer, and he or she will tell you what you'll do next.

INTERVIEWER: ENTER '1' TO CONTINUE

SAQ10. INTERVIEWER: DID R COMPLETE THE SELF-ADMINISTERED QUESTIONS ON HIS / HER OWN?

- 1. Yes, completed on his / her own
- 2. Yes, with some assistance
- 3. No, I asked the questions

Los Angeles Family and Neighborhood Survey, Wave 2 (L.A.FANS-2)

CHILD QUESTIONNAIRE

QUESTIONNAIRE FOR ALL SAMPLED RSCs≤18 AND SIBs ≤18

PRELOAD FROM W2 ROSTER

- Relationship description for PCG's relationship to Child (PCGREL_CHILD)
- Relationship description for Mother figure's relationship to Child (MOMFIG)
- Relationship description for Father figure's relationship to Child (DADFIG)
- Child's age (AGEYR)
- Child's sex (SEX)
- Number of Child's children in the HH (TOTCHILD).
- Name of selected Child
- Roster ID of selected Child
- Indicator of whether Child is RSC_P, SIB_P, RSC_NE or SIB_NE

Questionnaire formatting key

- **Black bold:** Question numbers
- Black normal: Interviewer to read question text
- BLACK UPPER CASE: Interviewer and programming instructions
- ***BLACK BOLD ITALIC UPPER CASE:*** Comments

INTRODUCTION

PARINF. INTERVIEWER: PLEASE FIND FORM A AND GIVE TO THE RESPONDENT'S PARENT

This sheet describes the Los Angeles Family and Neighborhood Survey Wave 2 (L.A.FANS-2) and asks you to give permission for your child [NAME] to participate in the study. Please carefully read the information below and ask any questions you have. Participation in the study is completely voluntary. Your child's participation is very important because no one else in the community is exactly like your child and we cannot use anyone else in his or her place. L.A.FANS is an on-going study, and we may contact you in the future to ask you to participate again or to participate in a separate part of the study.

By signing the attached consent form you are agreeing to let your child participate in L.A.FANS-2. Depending on the child's age, participation will take about 10 to 60 minutes. If you give permission for your child to participate, you or your child can change your mind and stop at any time.

INTERVIEWER: FIND **FORM B** AND GIVE TO THE RESPONDENT'S PARENT. KEEP ONE COPY AND GIVE ONE COPY TO THE RESPONDENT'S PARENT

PARINFC. INTERVIEWER: DID RESPONDENT'S PARENT SIGN CONSENT FORM (FORM B)?

- 1. YES
- 5. NO

INTERVIEWER: IF CHILD IS 7 TO 8 YEARS OLD READ THE FOLLOWING TO CHILD:

CHILD_78_ORAL. Your (mother/father/other guardian) said that, if you agree, you can be a part of this important study. I'm going to give you a short reading and math test that I think you will find interesting. All of your answers are private and will not be given to anyone else, not even to your parents or family. You get to decide if you want to be in the study. You can change your mind and stop at any time. If you want to be in the study, you can skip any questions you don't want to answer.

Do you have any questions for me? Would you like to participate?

- 1. YES
- 5. NO

INTERVIEWER: IF CHILD IS 9 TO 14 YEARS OLD READ THE FOLLOWING TO CHILD:

CHILD_914_ORAL. Your (mother/father/other guardian) has agreed to let you be part of this important study. If you agree, I will give you a brief reading and math test, and then I will ask you to answer some questions about your experiences with school, family, and friends. I will show you how to enter your answers directly into the computer. All of your answers will be kept private—your answers will not be given to anyone else, not even to your parents or family. You get to decide if you want to be in the study. You can change your mind and stop at any time. If you decide to participate, you can skip any questions you don't want to answer.

Do you have any questions for me? Would you like to participate?

- 1. YES
- 5. NO

INTERVIEWER: IF CHILD IS 15 TO 17 YEARS OLD READ THE FOLLOWING TO CHILD:

CHILD_1517_ORALINFO. INTERVIEWER: PLEASE GIVE RESPONDENT **FORM C** AND READ THE FOLLOWING.

Your (mother/father/other guardian) has agreed to let you be part of this important study called the Los Angeles Family and Neighborhood Survey Wave 2 (L.A.FANS-2).

If you agree, I will give you a brief reading and math test, and then I will ask you to answer some questions about your experiences with school, family, and friends. I will show you how to enter your answers directly into the computer. All of your answers will be kept private—your answers will not be given to anyone else, not even to your parents or family.

You get to decide if you want to be in the study. You can change your mind and stop at any time. If you decide to participate, you can skip any questions you don't want to answer.

Your participation is very important because no one else in the community is exactly like you and we cannot use anyone else in your place. L.A.FANS is an on-going study, and we may contact you in the future to ask you to participate again or to participate in a separate part of the study.

RAND, a non-profit research institution in Santa Monica, California, is conducting this study in collaboration with the University of California at Los Angeles (UCLA) and RTI International.

This study is being done to find out what parts of neighborhood and family life are important for health of children, adolescents, and adults.

A computer chose you and your household by chance, like with the lottery, from a list of all households in the neighborhood.

This is a chance for you to make a valuable contribution to your community. The results of this study will describe the health status of Angelinos and identify areas for improvement. You may feel slightly uncomfortable at being asked some questions, but you can skip any questions you don't want to answer.

If you agree to participate in this study, you will receive \$20 for participating in the interview and the skills test.

Do you have any questions for me? Would you like to participate?

1. YES (GO TO NOTES & EXPLAIN)
5. NO (CONTINUE)

Cch1. INTERVIEWER: WHAT WOULD YOU LIKE TO DO NOW?

1. (SHOW ONLY IF APPROPRIATE) INTERVIEW CHILD
2. SCHEDULE APPOINTMENT
3. RETURN TO MAIN MENU

IF ch1=1, CAPI GOES TO OBS QUESTIONS AND THEN TO APPROPRIATE SAQ TRAINING SECTION FOR THIS CHILD

IF ch1=2, CAPI SHOWS APPOINTMENT SCREEN

IF ch1=3, CAPI GOES BACK TO MAIN MENU

COBS. INTERVIEWER OBSERVATION: CODE WHAT RACE OR RACES YOU WOULD SAY THE RESPONDENT IS IF YOU DID NOT KNOW ANYTHING ABOUT HIM/HER

DO NOT ASK RESPONDENT FOR INFORMATION OR HELP!!

CODE ALL THAT APPLY

1. Latino
2. White
3. African-American, Black
4. Asian
5. Pacific Islander
6. Native American/American Indian

COBS2. INTERVIEWER OBSERVATION: CODE WHAT SINGLE RACE OR GROUP YOU WOULD SAY BEST DESCRIBES THE RESPONDENT IF YOU DID NOT KNOW ANYTHING ABOUT HIM/HER

DO NOT ASK RESPONDENT FOR INFORMATION OR HELP!!

CODE ONLY ONE

1. Latino
2. White
3. African-American, Black
4. Asian
5. Pacific Islander
6. Native American/American Indian

CAGEYR_check. My computer tells me that you are [AGE] years old. Is that correct?

1. YES
5. NO

CORRECT_AGE. IF NO: How old are you?

DATA USER NOTE: Child Module assumes that the child's answer to CORRECT_AGE is correct and uses this age throughout.

CORRECT_AGE_ck. Just to verify, you said that you are [AGEYR] years old. Is that correct?

1. YES
5. NO

CCHDQ1. For the next few minutes I will show you how to answer questions on this computer. Please ask me any questions you have while we go through them.

TYPE '1' THEN 'ENTER' TO CONTINUE

CCHDQ2. A lot of the questions are answered with either "Yes" or "No". Let's try one together. Do you like ice cream?

1. YES
5. NO

CCHDQ3. Good! Sometimes there will be more answer choices than "Yes" and "No". Let's try a couple of those. Which one of these animals do you like the best?

1. Birds
2. Cats
3. Dogs
4. Fish
5. Snakes

CCHDQ4. Sometimes you will be able to give more than one answer.

What types of movies do you like to watch?

Type '1' then 'Enter' for yes or '5' then 'Enter' for no for each question...

1. Action movies
2. Romantic movies
3. Thriller movie
4. Horror movies
5. Comedy movies
6. Other type of movies

CCHDQ5. Sometimes you will be asked to type in a number or an amount for your answer. How many times have you been to the grocery store in the last 7 days?

_____TIMES IN LAST 7 DAYS

CCHDQ6. If you don't know the answer to a question, you can type the 'F3 key' above the letters on the keyboard. For example...How many trees are in Yosemite National Park?

CCHDQ7. If you decide you don't want to answer, you can type the 'F4 key' above the letters on the keyboard. For example...During the past month, how many times did you forget to brush your teeth?

CCHDQ7A. For some questions, we may ask you to check the answer that you put into the computer. For example, if we asked you, "How many brothers do you have?" and you answered, "15", you might see a question like this: You indicated that you have 15 brothers, is this correct?

1. Yes
5. No

If '15' is correct just answer 'Yes' to continue. If you meant to type '5' instead of '15' answer 'No' and you will be asked to enter how many brothers you have again.

If you are not sure how to answer this question, please ask the interviewer to help you now before moving on.

CCHDQ7B. Other times, you may have to change your answer to a question before you can move to the next question. For example, if we asked you how old you were the first time you flew on an airplane, and you answered "14" but you are only 12 years old now, you would see a question like this:

You just entered that you were 14 years old the first time that you flew on an airplane, but earlier you said that you are only 12 years old now. Which is correct?

1. You are 12 years old now.
2. You were 14 years old the first time you flew on an airplane

If you entered that "You are 12 years old now" was correct, you will be asked to enter how old you were when you first flew on an airplane again.

If you entered that 'You were 14 years old the first time you flew on an airplane' was correct, you will be asked to enter your current age again.

CCHDQ8_1. Other times you will be asked a question like this: How often do you like to go to the movies?

ENTER THE NUMBER OF TIMES ON THIS SCREEN AND WHETHER THAT IS PER DAY, PER WEEK, PER MONTH, OR PER YEAR ON THE NEXT SCREEN

CCHDQ8_2. Is that per day, per week, per month, or per year?

1. Per day
2. Per week
3. Per month
4. Per year

CHDQ9. For a few questions, you may be asked to type a word or several words. If you make a mistake you can use the "Backspace" key to fix it. What is your first name?

Type in your name. Then press "Enter".

_____ Name

CCHDQ10. Good job! That is the end of the examples. Now I will get the computer ready for you.

INTERVIEWER: ENTER '1' TO CONTINUE

CAPI CHECK. [CHILD]'S AGE:

1. 9 TO 11 YEARS OLD
2. 12 TO 17 YEARS OLD (GO TO B1)

SECTION A. YOUNGER CHILDREN (9 to 11 YEARS)

CA1INTRO. First let me ask you about your neighborhood.

TYPE '1' THEN 'ENTER' TO CONTINUE

CA1. When you are talking to someone about your neighborhood, what do you mean? Is it...

1. The block or street you live on
2. Several blocks or streets in each direction
3. The area within a 15-minute walk from your house
4. An area larger than a 15-minute walk from your house

CA2. Here are some questions about your neighborhood. For these questions, "neighborhood" means both the block or street you live on and several blocks or streets in each direction. Please keep this in mind when you answer these questions. How many of the grown-ups in your neighborhood do you know? Would you say you know most, some, or none of them?

1. Most
2. Some
3. None

CA3. How many of the kids and teens in your neighborhood do you know? Would you say most, some, or none of them?

1. Most
2. Some
3. None

CA4. Now think about your best friends. Do any of them live in this neighborhood?

1. YES
5. NO

CA5. Do you feel safe in this neighborhood?

1. Yes
2. Sometimes yes and sometimes no
3. No

CA6_A. Are you. . .

1. Currently in school
2. On summer vacation
3. In summer school or intersession classes
4. No longer in school because you dropped out or left school
5. Currently in home school
6. Off-track from school

IF CA6=4 ASK: You answered that you are no longer in school (graduated high school). Is that correct?

1. Yes (CONTINUE)
5. No (RE-ASK CA6)

CA7. What grade of school [are you in currently / were you in this past year]?

2. 2nd grade
3. 3rd grade
4. 4th grade
5. 5th grade
6. 6th grade
7. 7th grade
8. 8th grade
9. Not in school this past year (SHOW ONLY IF CA6=2,3,5)

IF CA6=5 (HOMESCHOOLED), GO TO CA11.

IF CA6=3, 5 AND CA7=NOT IN SCHOOL THIS PAST YEAR, GO TO CA11.

IF CA6=2 AND CA7=NOT IN SCHOOL, ASK

CA7A. You answered that you are on summer vacation from school and were not in school this past year. Is that correct?

1. Yes (GO TO CA11)
5. No (RE-ASK CA6 AND CA7)

CA8. Now let's talk about [your school / the school you went to this past spring].

TYPE '1' THEN 'ENTER' TO CONTINUE

CA8A. Are the teachers good at this school?

1. Yes
2. Some good, some not good
3. No

CA8B. Do the teachers care about students?

1. Yes
2. Some yes, some no
3. No

CA8C. Do other students misbehave so that it is hard for you to learn?

1. Yes
2. Sometimes yes and sometimes no
3. No

CA8D. Are students mostly treated fairly when they do something wrong?

1. Yes
2. Sometimes yes and sometimes no
3. No

CA8E. Do you feel safe at this school?

1. Yes
2. Sometimes yes and sometimes no
3. No

CA9. This [past] school year, did you ever leave school early or skip school when you weren't supposed to?

1. YES
5. NO (GO TO CA11)

CA10. How often did this happen?

1. Once
2. 2–3 times
3. 4 or more times

CA11. [Outside of schoolwork,] do you like to read books, magazines, or newspapers?

1. YES
5. NO (GO TO CA13)

CA12_A. [Outside of schoolwork,] how often do you read books, magazines, newspapers? Would you say...

1. Every day
2. A few times a week
3. Once a week
4. A few times a month
5. Read only at school, never read or read very little
6. Once a month or less
7. Something else. Please type in your answer: ____

CA13. When you are with your friends, where do you usually go? Please select all that apply.

1. Your home
2. Friend's home
3. Outside close to your home
4. The mall
5. A park or playground
6. School
7. Movies
8. Parties
9. Amusement park/Theme park
10. Relative's home
11. Restaurant/Eating out
12. Church
13. Stores
14. Beach
15. Skating/bowling/swimming/sports
16. Wandering around
17. Clubs/concerts/shows
18. Library
19. Arcades
20. Other, specify. Please type in your answer: _____

CA14. Are most of the places where you go with your friends close enough to walk to?

1. YES (GO TO CA16)
5. NO

CA15. How do you go to most of these places? Do you go by . . .

1. Car
2. Bus
3. Bicycle
4. Skateboard or skates
5. Some other way

CA16TRANS. You've been doing a very good job so far.

TYPE '1' THEN 'ENTER' TO CONTINUE

CA16. Have you ever smoked a cigarette?

1. YES
5. NO (GO TO CA18)

CA17. How old were you the first time you smoked an entire cigarette?

_____ Years
ENTER 99 IF YOU HAVE NEVER SMOKED AN ENTIRE CIGARETTE

CA17_check1. You said that you were [CA17 AGE] years old the first time you smoked an entire cigarette, is this correct?

1. YES
5. NO

CA17_check2. You may have made a typing mistake since you just entered that you were [CA17 AGE] years old the first time you smoked an entire cigarette but you are only [AGEYR] years old. Which is correct?

1. You were [CA17 AGE] years old the first time you smoked an entire cigarette (you will be asked to correct the age you gave earlier)
2. You are currently [AGEYR] years old (you will be asked to correct the age when you first smoked an entire cigarette).

CA18. Does anyone in your family or any of your friends belong to a gang?

1. YES
5. NO

CA19. Have you ever belonged to a gang?

1. YES
5. NO

CA20. CAPI CHECK: DOES CHILD HAVE A MOTHER FIGURE PRELOADED?

1. YES (CONTINUE)
5. NO (GO TO A24)

CA21. Now I have some questions about your relationship with [MOTHER FIGURE], who lives here with you. Tell me whether you agree, disagree or are not sure about the following statements about [MOTHER FIGURE].

CA21.1. I think highly of her

1. Agree
2. Disagree
3. Not sure

CA21.2. She is a person I want to be like.

1. Agree
2. Disagree
3. Not sure

CA21.3. I really enjoy spending time with her.

1. Agree
2. Disagree
3. Not sure

CA22. Now I want to ask you about how often [MOTHER FIGURE] does different things.

CA22.1. How often does she say good things about you for doing well?

1. Never
2. Rarely
3. Sometimes
4. Often

CA22.2. How often does she say bad things about you or your ideas?

1. Never
2. Rarely
3. Sometimes
4. Often

CA22.3. How often does she help you with things that are important to you?

1. Never
2. Rarely
3. Sometimes
4. Often

CA22.4. How often does she know who you are with when you are not at home?

1. Never
2. Rarely
3. Sometimes
4. Often

CA23. Does [MOTHER FIGURE] know all your close friends, only some of them, or none of them?

1. All
2. Some
3. None

CA24. CAPI CHECK: DOES CHILD HAVE A FATHER FIGURE PRELOADED?

1. YES (CONTINUE)
5. NO (GO TO CA28)

CA25. Now I want to ask you about [FATHER FIGURE], who lives here with you. Tell me whether you agree, disagree or are not sure about the following statements about [FATHER FIGURE].

CA25.1. I think highly of him

1. Agree
2. Disagree
3. Not sure

CA25.2. He is a person I want to be like.

1. Agree
2. Disagree
3. Not sure

CA25.3. I really enjoy spending time with him

1. Agree
2. Disagree
3. Not sure

CA26. Now I want to ask you about how often [FATHER FIGURE] does different things.

CA26.1. How often does he say good things about you for doing well?

1. Never
2. Rarely
3. Sometimes
4. Often

CA26.2. How often does he say bad things about you or your ideas?

1. Never
2. Rarely
3. Sometimes
4. Often

CA26.3. How often does he help you with things that are important to you?

1. Never
2. Rarely
3. Sometimes
4. Often

CA26.4. How often does he know about who you are with when you are not at home?

1. Never
2. Rarely
3. Sometimes
4. Often

CA27. Does [FATHER FIGURE] know all your close friends, only some of them, or none of them?

1. All
2. Some
3. None

CA28. Next I have some statements about how you and your family get along and settle arguments. These questions are about you and your family who live here with you. For each statement, please tell me whether you think it is True, Sometimes true, or Not true.

CA28.1. People in my family fight a lot.

1. True
2. Sometimes true
3. Not true

CA28.2. People in my family hardly ever lose their tempers.

1. True
2. Sometimes true
3. Not true

CA28.3. People in my family sometimes get so angry they throw things.

1. True
2. Sometimes true
3. Not true

CA28.4. People in my family always calmly discuss problems.

1. True
2. Sometimes true
3. Not true

CA28.5. People in my family often say mean things to each other.

1. True
2. Sometimes true
3. Not true

CA28.6. People in my family sometimes hit each other.

1. True
2. Sometimes true
3. Not true

CA29TRANS. You've been doing a great job so far. I only have a few more questions.

CA29. Have you ever gone to the public library? I mean a library that is not at your school.

1. YES
5. NO (GO TO CA31)

CA30. How many times in the past two weeks did you go to the public library?

1. Not at all/ None
2. Once
3. Twice or more

CA31. Do you think you will graduate from high school?

1. Yes
2. No
3. I'm not sure

CA32. Do you think you will go to college?

1. Yes
2. No
3. I'm not sure

CA33. Are you...

CHOOSE ONE OR MORE THAN ONE

1. Latino or Hispanic?
2. White?
3. African-American or Black?
4. Asian?
5. Pacific Islander?
6. Native American/American Indian?

CA34. CAPI CHECK:

IF CA33=MORE THAN ONE RESPONSE, CONTINUE
ELSE GO TO CA36

CA35. Now, if you had to pick the one group which describes you best, is it...

1. Latino or Hispanic?
2. White?
3. African-American or Black?
4. Asian?
5. Pacific Islander?
6. Native American/American Indian?

CA36. What about your friends? Are they...

1. Mostly [GROUP PICKED IN A35 IF ANSWERED; ELSE A33]
2. Mostly not [GROUP PICKED IN A35 IF ANSWERED; ELSE A33]
3. About half [GROUP PICKED IN A35 IF ANSWERED; ELSE A33] and half not [GROUP PICKED IN A35 IF ANSWERED; ELSE A33]

GO TO END OF QUESTIONNAIRE

SECTION B. OLDER CHILDREN (12 to 17 YEARS)

CBINTRO. First let me ask you about your neighborhood.

CB1. When you are talking to someone about your neighborhood, what do you mean? Is it...

1. The block or street you live on
2. Several blocks or streets in each direction
3. The area within a 15-minute walk from your house
4. An area larger than a 15-minute walk from your house

CB2. Here are some questions about your neighborhood. For these questions, "neighborhood" means both the block or street you live on and several blocks or streets in each direction. Please keep this in mind when you answer these questions. How many of the adults or grown-ups in your neighborhood do you know? Would you say you know most, some, or none of them?

1. Most
2. Some
3. None

CB3. How many of the kids and teens in your neighborhood do you know? Would you say most, some, or none of them?

1. Most
2. Some
3. None

CB4. Now think about your best friends. Do any of them live in this neighborhood?

1. YES
5. NO

CB5. Do you feel safe in this neighborhood?

1. Yes
2. Sometimes yes and sometimes no
3. No

CB6. Are you...

1. Currently in school
2. On summer vacation
3. In summer school or intersession classes
4. No longer in school because you graduated
5. No longer in school because you dropped out or left school
6. Currently in home school
7. Off-track from school

CB7. What grade of school [are you in currently / were you in this past year]?

6. 6th grade
7. 7th grade
8. 8th grade
9. 9th grade
10. 10th grade
11. 11th grade
12. 12th grade
13. In college
14. In technical or vocational school
15. Not in school this past year (SHOW ONLY IF CB6=2,3,4,5)

IF CB6=6 (HOMESCHOOLED), GO TO CB15

IF CB6=3, 4, 5 AND CB7=NOT IN SCHOOL THIS PAST YEAR, GO TO CB15

IF CB6=2 AND CB7=NOT IN SCHOOL THIS PAST YEAR, ASK

CB7A. You answered that you are on summer vacation or off-track from school and were not in school this past year. Is this correct?

1. Yes (GO TO CB15)
5. No (RE-ASK CB6 AND CB7)

CB8. Now let's talk about [your school / the school you went to this past spring].

CB8A. Are the teachers good at this school?

1. Yes
2. Some good, some not good
3. No

CB8B. Do the teachers care about students?

1. Yes
2. Some yes, some no
3. No

CB8C. Do disruptions by other students get in the way of your learning?

1. Yes
2. Sometimes yes and sometimes no
3. No

CB8D. Are students mostly treated fairly when they do something wrong?

1. Yes
2. Sometimes yes and sometimes no
3. No

CB8E. Do you feel safe at this school most of the time?

1. Yes
2. Sometimes yes and sometimes no
3. No

CB9. Please tell me whether the next two statements about you are often true, sometimes true, or not true.

CB9.1. I misbehave at school.

1. Often true
2. Sometimes true
3. Not true

CB9.2. I have trouble getting along with teachers.

1. Often true
2. Sometimes true
3. Not true

CB10_1. About how much time do you spend on an average school night on all of your homework?

ENTER THE NUMBER OF HOURS ON THIS SCREEN AND THE NUMBER OF MINUTES ON THE FOLLOWING SCREEN.

ENTER 0 ON THIS SCREEN IF YOU SPEND LESS THAN AN HOUR ON YOUR HOMEWORK AND ENTER THE NUMBER OF MINUTES LESS THAN AN HOUR ON THE NEXT SCREEN.

ENTER 99, IF YOU DON'T SPEND ANY TIME ON HOMEWORK.

ENTER 77, IF YOU DON'T USUALLY HAVE HOMEWORK.

ENTER 88 IF YOU WOULD LIKE TO MAKE A COMMENT ABOUT THE AMOUNT OF TIME YOU SPEND ON HOMEWORK

CB10_2. ENTER THE NUMBER OF MINUTES YOU SPEND ON HOMEWORK ON AN AVERAGE NIGHT, IN ADDITION TO THE NUMBER OF HOURS YOU ENTERED ON THE PREVIOUS SCREEN.

CB10A. Where do you do your homework [when you do have it]?

1. At school
2. At home in your bedroom
3. At home in the kitchen or dining room
4. At home in another room
5. At the library
6. Somewhere else, please type in your answer _____

CB11. [This school year / The past school year], did you ever leave school early or skip school when you weren't supposed to?

1. YES
5. NO (GO TO CB13)

CB12. How often did this happen [this school year / the past school year]?

1. Once
2. 2-3 times
3. 4 or more times

CB12A. CAPI CHECK: IS RESPONDENT AT LEAST 15 YEARS OLD?

1. YES
5. NO (GO TO CB13)

CB12B. Did you ever take the Preliminary Scholastic Aptitude Test or the P-SAT?

P-SAT IS A STANDARDIZED TEST THAT STUDENTS USUALLY TAKE IN THEIR JUNIOR YEAR OF HIGH SCHOOL

- 1. YES
- 5. NO

CB12C. Did you ever take the Scholastic Aptitude Test or SAT?

SAT IS A STANDARDIZED TEST THAT STUDENTS USUALLY TAKE IN THEIR SENIOR YEAR OF HIGH SCHOOL

- 1. YES
- 5. NO

CB12D. CAPI CHECK:

- 1. IF B12B=5 AND B12C=5 (GO TO B12J)
- 2. IF B12C=1 (GO TO B12H)
- 3. IF B12B=1 AND B12C=5 (GO TO B12E)
- 4. OTHERWISE, CONTINUE

CB12E. What was your P-SAT verbal or critical reading skills score?

PROBE: Just give me your best guess.

IF YOU DON'T REMEMBER YOUR SCORE, JUST ENTER YOUR BEST GUESS.

___ __ VERBAL OR CRITICAL READING SCORE (RANGE: 20–80)

CB12F. What was your P-SAT math skills score?

PROBE: Just give me your best guess

IF YOU DON'T REMEMBER YOUR SCORE, JUST ENTER YOUR BEST GUESS.

___ __ MATH SCORE (RANGE: 20–80)

CB12G. What was your P-SAT writing skills score?

PROBE: Just give me your best guess

IF YOU DON'T REMEMBER YOUR SCORE, JUST ENTER YOUR BEST GUESS. ENTER 99, IF YOU DO NOT REMEMBER

___ __ WRITING SKILLS SCORE (RANGE: 20–99)

GO TO CB12J

CB12H. What was your SAT verbal or critical reading score?

IF YOU DON'T REMEMBER YOUR SCORE, JUST ENTER YOUR BEST GUESS. ENTER 999, IF YOU DO NOT REMEMBER.

___ __ __ VERBAL SCORE (RANGE: 200–999)

CB12I. What was your SAT math score?

IF YOU DON'T REMEMBER YOUR SCORE, JUST ENTER YOUR BEST GUESS. ENTER 999, IF YOU DO NOT REMEMBER.

___ __ MATH SCORE (RANGE: 200–999)

CB12I_1. If you took the SAT writing test, what was your SAT writing score? Please keep in mind that the SAT writing test was not given until the 2004–2005 school year.

ENTER 888, IF YOU DID NOT TAKE THE SAT WRITING TEST. IF YOU DON'T REMEMBER YOUR SCORE, JUST ENTER YOUR BEST GUESS. ENTER 999, IF YOU DO NOT REMEMBER

___ __ WRITING SCORE (RANGE: 200 TO 999)

CB12J. Have you ever talked with a teacher or guidance counselor about going to college?

1. YES
5. NO

CB13. Outside of schoolwork , do you like to read books, magazines or newspapers?

1. YES
5. NO (GO TO CB17)

CB14_A. Outside of schoolwork, how often do you read books, magazines or newspapers? Would you say it's every day, a few times a week, once a week, or something else?

1. Every day
2. A few times a week
3. Once a week
4. A few times a month
5. Read only at school, never read or read very little
6. Once a month or less
7. Other, specify. Please type in your answer: ____

SECTION FOR KIDS NOT IN SCHOOL LAST YEAR OR HOME SCHOOLED

CB15. Do you like to read books, magazines, or newspapers?

1. YES
5. NO (GO TO CB17)

CB16_A. How often do you read books, magazines, or newspapers? Would you say it's everyday, a few times a week, once a week, or what?

1. Every day
2. A few times a week
3. Once a week
4. A few times a month
5. Read only at school, never read or read very little
6. Once a month or less
7. Other, specify. Please type in your answer: ____

CB16A. CAPI CHECK: IS RESPONDENT AT LEAST 15 YEARS OLD?

1. YES
5. NO (GO TO CB17)

CB16B. Did you ever take the Preliminary Scholastic Aptitude Test or the P-SAT?

P-SAT IS A STANDARDIZED TEST THAT STUDENTS USUALLY TAKE IN THEIR JUNIOR YEAR OF HIGH SCHOOL

1. YES
5. NO

CB16C. Did you ever take the Scholastic Aptitude Test or SAT?

SAT IS A STANDARDIZED TEST THAT STUDENTS USUALLY TAKE IN THEIR SENIOR YEAR OF HIGH SCHOOL

1. YES
5. NO

CB16D. CAPI CHECK:

1. IF CB16B=5 AND CB16C=5 (GO TO CB16J)
2. IF CB16C=1 (GO TO CB16H)
3. IF CB16B=1 AND CB16C=5 (GP TO CB16E)
4. OTHERWISE, CONTINUE

CB16E. What was your P-SAT verbal or critical reading skills score?

IF YOU DON'T REMEMBER YOUR SCORE, JUST ENTER YOUR BEST GUESS. ENTER 99, IF YOU DO NOT REMEMBER.

___ VERBAL OR CRITICAL READING SCORE (RANGE: 20–99)
99. I DO NOT REMEMBER

CB16F. What was your P-SAT math skills score?

IF YOU DON'T REMEMBER YOUR SCORE, JUST ENTER YOUR BEST GUESS.

___ MATH SCORE (RANGE: 20–99)
99. DOES NOT REMEMBER

CB16G. What was your P-SAT writing skills score?

IF YOU DON'T REMEMBER YOUR SCORE, JUST ENTER YOUR BEST GUESS

___ WRITING SKILLS SCORE (RANGE: 20–99)
99. DOES NOT REMEMBER

GO TO CB16J

CB16H. What was your SAT verbal score?

IF YOU DON'T REMEMBER YOUR SCORE, JUST ENTER YOUR BEST GUESS. ENTER 999, IF YOU DO NOT REMEMBER.

___ VERBAL SCORE (RANGE: 200–800)
999. DOES NOT REMEMBER

CB16I. What was your SAT math score?

IF YOU DON'T REMEMBER YOUR SCORE, JUST ENTER YOUR BEST GUESS. ENTER 999, IF YOU DO NOT REMEMBER.

___ MATH SCORE (RANGE: 200–800)

999. DOES NOT REMEMBER

CB16I_1. If you took the SAT writing test, what was your SAT writing score? Please keep in mind that the SAT writing test was not given until the 2004–2005 school year.

ENTER 888, IF YOU DID NOT TAKE THE SAT WRITING TEST. IF YOU DON'T REMEMBER YOUR SCORE, JUST ENTER YOUR BEST GUESS.

____ WRITING SCORE (RANGE: 200 TO 800)

888. DID NOT TAKE THE SAT WRITING TEST

999. DOES NOT REMEMBER

CB16J. When you were in school, did you ever talk with a teacher or guidance counselor about going to college?

1. YES

5. NO

CB17_A. When you are with your friends, where do you usually go? Please select all that apply.

1. Your home
2. Friend's home
3. Outside close to your home
4. The mall
5. A park or playground
6. School
7. Movies
8. Parties
9. Amusement park/Theme park
10. Relative's home
11. Restaurant/Eating out
12. Church
13. Stores
14. Beach
15. Skating/bowling/swimming/sports
16. Wandering around
17. Clubs/concerts/shows
18. Library
19. Arcades
20. Other, specify. Please type in your answer: _____

CB18. Are most of the places where you go with your friends close enough to walk to?

1. YES (GO TO CB20)

5. NO

CB19. How do you get to most of these places? Do you go by...

1. Car
2. Bus
3. Bicycle
4. Skateboard or skates
5. Something else

CB20INTRO. You've been doing a great job so far.

CB20. Have you ever smoked a cigarette?

1. YES

5. NO GO TO CB24

IF CB20=DK, CONTINUE TO CB21. IF CB20=REF, GO TO BC24.

CB21. How old were you the first time you smoked an entire cigarette?

ENTER 99 IF YOU HAVE NEVER SMOKED AN ENTIRE CIGARETTE

_____ Years Old

IF CB21=99, GO TO CB24. IF CB21=DK, CONTINUE TO CB22. F CB21=REF, GO TO CB24

CB21_check1. You said that you were [CB21 AGE] years old the first time you smoked an entire cigarette, is this correct?

CB21_check2. You may have made a typing mistake since you just entered that you were [CB21 AGE] years old the first time you smoked an entire cigarette but you are only [AGEYR] years old. Which is correct?

1. You were [CB21 AGE] years old the first time you smoked an entire cigarette (you will be asked to correct the age you gave earlier)
2. You are currently [AGEYR] years old (you will be asked to correct the age when you first smoked an entire cigarette)

CB22. During the past 30 days, on how many days did you smoke a cigarette?

_____ Days during the past 30 days

ENTER 0 IF YOU HAVE NOT SMOKED AT ALL DURING THE LAST 30 DAYS

99. Not at all during the last 30 days GO TO CB24

IF CB22=REF, GO TO CB24

CB23. On the days you smoked, how many cigarettes did you usually smoke each day?

ENTER THE NUMBER OF CIGARETTES SMOKED **PER DAY**. TO GIVE A RESPONSE OTHER THAN **NUMBER PER DAY** ENTER 99 AND RECORD YOUR ANSWER

_____ Number per day

99. Other, specify. Please type in your answer: _____

CB24. Next we would like to ask you some questions about drinking alcoholic beverages, including beer, wine or liquor. Have you ever had a drink of alcohol? By a drink we mean a can or bottle of beer, a glass of wine, a mixed drink, or a shot of hard liquor. Do not include sips that you might have had from someone else's drink.

1. Yes
5. No (GO TO CB28)

IF CB24=DK, CONTINUE. IF CB24=REF, GO TO CB28.

CB25. During the past 30 days, on how many days did you have one or more alcoholic drinks? By a drink we mean a can or bottle of beer, a glass of wine, a mixed drink, or a shot of hard liquor. Do not include sips that you might have had from someone else's drink.

ENTER 0 IF YOU HAVE NOT HAD ANY ALCOHOLIC DRINKS DURING THE LAST 30 DAYS

_____ Days during the past 30 days

99. Not at all during the last 30 days GO TO CB28

IF CB25=DK, GO TO CB26. IF CB25=REF, GO TO CB28.

CB26. On the days you drank alcohol, about how many drinks did you usually have? By a drink we mean a can or bottle of beer, a glass of wine, a mixed drink, or a shot of hard liquor. Do not include sips that you might have had from someone else's drink.

ENTER THE NUMBER OF DRINKS **PER DAY**. TO GIVE A RESPONSE OTHER THAN **NUMBER PER DAY**, ENTER 99 AND RECORD YOUR ANSWER.

_____ Number per day
99. Other. Please type in your answer: _____

IF CB26=DK, CONTINUE. IF CB26=REF, GO TO CB28.

CB27. In the past 30 days, how many times did you have 5 or more drinks in a row? By a drink we mean a can or bottle of beer, a glass of wine, a mixed drink, or a shot of hard liquor. Do not include sips that you might have had from someone else's drink.

_____ Numbers of times

CB28. Have you ever used marijuana, that is, grass or pot?

- 1. YES
- 5. NO (GO TO CB31)

IF CB28=DK, GO TO CB30. IF CB28=REF, GO TO CB31.

CB29. How old were you when you first used marijuana?

_____ Years Old

IF CB29=DK, CONTINUE. IF CB29=REF, GO TO CB31.

CB30. In the past 30 days, on how many days have you used marijuana?

ENTER 0 IF YOU HAVE NOT USED MARIJUANA AT ALL DURING THE LAST 30 DAYS

_____ Days during the past 30 days
99. Not at all during the last 30 days

IF CB30=DK, GO TO CB31. IF CB30=REF, GO TO CB31.

CB31. Have you ever used drugs other than marijuana (such as crack, cocaine, speed, methamphetamines, heroin, LSD or inhalants)?

- 1. Yes
- 5. No (GO TO CB33)

IF CB31=DK, CONTINUE TO CB32. IF CB31=REF, GO TO B33.

CB32. In the past 30 days, how often have you used drugs other than marijuana?

- 0. Not at all
- 1. Once or twice
- 2. 3-5 times
- 3. 6-10 times
- 4. 11-19 times
- 5. 20 or more times

CB33. Have you ever run away, that is, left home and stayed away at least overnight without your parent's knowledge or permission?

- 1. YES
- 5. NO

CB34. In the past 30 days, did you ever carry a hand gun?

- 1. YES
- 5. NO (GO TO CB36)

CB35. In the past 30 days, did you take a hand gun to school?

- 1. YES
- 5. NO

CB36. Are there any gangs in your neighborhood or where you go to school?

- 1. YES
- 5. NO

CB37. Does anyone in your family or any of your friends belong to a gang?

- 1. YES
- 5. NO

CB38. Have you ever belonged to a gang?

- 1. YES
- 5. NO

CB39. Have you been a member of a gang in the past 12 months?

- 1. YES
- 5. NO

CB40INTRO. OK. Now some questions on a different topic.

CB40. Have you ever had a [girlfriend / boyfriend]?

- 1. YES
- 5. NO (GO TO B42)

CB41. Do you have a [girlfriend / boyfriend] now?

- 1. YES
- 5. NO

CB42. Have you ever had sexual intercourse, that is, made love, had sex, or gone all the way with a person of the opposite sex?

- 1. YES
- 5. NO (GO TO B64)

CB43. Have you had intercourse more than once?

- 1. YES
- 5. NO (GO TO CB50)

CB44. How many DIFFERENT PEOPLE have you had sexual intercourse with in the last 12 months, that is, since [FILL CURRENT MONTH] last year?

IF THE RESPONSE IS "WITH NO ONE", ENTER ZERO

_____ partners

CB45_1. When was the last time you had sexual intercourse?

1. Today
2. Yesterday
3. Less than a week ago
4. Less than a month ago
5. Less than a year ago
6. More than a year ago

CB45_1A. How many days ago did you last have sexual intercourse?

_____ Days ago

CB45_1B. How many weeks ago did you last have sexual intercourse?

_____ Weeks ago

CB45_1C. How many months ago did you last have sexual intercourse?

_____ Months ago

CB45_1D. How many years ago did you last have sexual intercourse?

_____ Years ago

CB46. Did you or your partner use something to prevent pregnancy or disease when you had sexual intercourse most recently?

1. YES
5. NO (GO TO CB48)
- 1. DON'T KNOW (GO TO CB48)
- 2. REFUSED (GO TO CB48)

CB47. Which method or methods did you or your partner use? Please select all that apply.

1. Condom (rubber)
2. Foam, jelly, creme, sponge, suppositories
3. Withdrawal (pulling out)
4. Diaphragm (with or without jelly)
5. Rhythm (safe time, avoiding sex at certain times of the month)
6. Birth control pills
7. IUD (intrauterine device)
8. Norplant, depo-provera or injectables
9. Other. Please type in your answer: _____

CB48. CAPI CHECK CB44: NUMBER OF SEXUAL PARTNERS THAT RESPONDENT HAS HAD IN THE LAST 12 MONTHS

1. ZERO (GO TO CB52)
2. ONE OR MORE (CONTINUE)

CB49. Think about all the times that you have had sexual intercourse in the last 12 months. About what percent of the time from 0 to 100, have you or your sexual partner or partners used a condom?

FOR EXAMPLE, ALL THE TIME IS 100%, THREE QUARTERS OF THE TIME IS 75%, HALF THE TIME IS 50%, ONE THIRD OF THE TIME IS 33%, NONE OF THE TIME IS 0%. IF THE ANSWER IS NEVER, ANSWER ZERO.

_____ Percent of the time

GO TO CB52

CB50. Did you or your partner use something to prevent pregnancy or disease when you had intercourse?

1. YES
5. NO (GO TO CB52)
- 1. DON'T KNOW

CB51. Which method or methods did you or your partner use? Please select all that apply.

1. Condom (rubber)
2. Foam, jelly, creme, sponge, suppositories
3. Withdrawal (pulling out)
4. Diaphragm (with or without jelly)
5. Rhythm (safe time, avoiding sex at certain times of the month)
6. Birth control pills
7. IUD (intrauterine device)
8. Norplant, depo-provera or injectables
9. Other, specify

CB52. Have you ever [FILL IF R FEMALE, been pregnant; FILL IF R MALE, gotten someone else pregnant]?

1. YES
5. NO (GO TO CB64)
- 1. DON'T KNOW (GO TO CB53)
- 2. REFUSED (GO TO CB53)

CB53. How many times have you [been pregnant/ gotten someone else pregnant]?

_____ Times

CB54. How many children have you [given birth to / fathered]?

_____ Total number

IF CB54=ZERO, GO TO CB64. IF CB54=DK, GO TO CB64. IF CB54=REF, GO TO CB64.

CB55. CAPI CHECK:

1. IF CB54=1, CONTINUE TO CB56
2. IF CB54=2 OR MORE, GO TO CB61

CB56. What is this child's name?

_____ Child's name

CB57. How old is [B56 NAME]?

IF CHILD IS LESS THAN 1 YEAR OLD, ENTER 0

_____ Years old

CB58_1. Where does this child live now?

1. Here in this household with me.
2. With other parent
3. With grandparent(s)
4. With other family members
5. With adoptive parents
6. In a foster home
7. Child is no longer alive
8. Lives somewhere else. Please type in your answer: _____

CB59. THE NO. OF R'S CHILDREN IN THE CHILD QX WHO ARE IN THE HH.

NOTE: CAPTURE AND OUTPUT BOTH THE NO. OF R'S CHILDREN IN THE ROSTER WHO ARE IN THE HH AND THE NO. OF R'S CHILDREN IN THE CHILD QX WHO ARE IN THE HH.

CB60. CAPI CHECK: COMPARE ROSTER NO. OF R'S CHILDREN IN HH TO CHILD QX NO. R'S OF CHILDREN IN HH.

1. SAME (GO TO CB66)
5. DIFFERENT (CONTINUE)

CB60A. From your answers, it looks like [COUNT OF R'S CHILDREN LIVING HERE FROM CHILD QX] of your children live / your child lives] here with you. Is that correct?

1. YES (GO TO CB60E)
5. NO (GO TO CB58 & ASK AGAIN)

CB60E. My list of people who live in this home says that [COUNT OF R'S CHILDREN FROM ROSTER] of your children live here with you. But you just told me that [CB60C RESPONSE] of your children live here with you. We just want to make sure our information is correct. Can you tell me why these two answers are different? Please select all that apply.

1. My child/children only live here part time
2. My child/children were adopted by another family member
3. My family usually tells other people that my child/children belong to another family member
4. The person who gave you the list probably forgot to include my child/children
5. I didn't give you the true answer before. The true answer is _____ (please type in your answer)
6. Some other reason, please type in your answer.

CB61. Please type in the first name or names of each of your children. Please press [ENTER] after each name that you type.

ENTER 'No More' when there are no more names to enter

1. _____
2. _____
3. _____
4. _____
5. _____

ASK CB62-63 FOR EACH CHILD IN CB61

CB62. How old is [CHILD IN B61]?

IF CHILD IS LESS THAN 1 YEAR OLD, ENTER 0

_____ Years old (FOR KIDS ONE YEAR OR OLDER)

CB63. Where does [CHILD IN B61] live now?

1. Here in this household with me.
2. With other parent
3. With grandparent(s)
4. With other family members
5. With adoptive parents
6. In a foster home
7. Child is no longer alive
8. Lives somewhere else. Please type in your answer: _____

CB64. NUMBER OF R'S CHILDREN IN THE CHILD QX WHO ARE IN THE HH.

NOTE: CAPTURE AND OUTPUT BOTH THE NO. OF R'S CHILDREN IN THE ROSTER WHO ARE IN THE HH AND THE NO. OF R'S CHILDREN IN THE CHILD QX WHO ARE IN THE HH

CB65. CAPI CHECK: COMPARE ROSTER NO. OF R'S CHILDREN IN HH TO CHILD QX NO. R'S OF CHILDREN IN HH.

1. SAME OR CB54 NOT ASKED (GO TO CB66)
5. DIFFERENT (CONTINUE)

CB65A. From your answers, it looks like [COUNT OF R'S CHILDREN LIVING HERE FROM CHILD QX] of your children live / your child lives] here with you. Is that correct?

1. YES (GO TO CB65E)
5. NO (CONTINUE)

CB65C. How many of your children live here with you?

_____ Number of children

CB65D. CAPI CHECK:

1. NO. OF CHILDREN IN CB65C IS THE SAME AS NO. OF R'S CHILDREN LIVING HERE FROM ROSTER (GO TO CB66)
5. NO. IS DIFFERENT (CONTINUE)

CB65E. My list of people who live in this home says that [COUNT OF R'S CHILDREN LIVING HERE FROM ROSTER] of your children live here with you. But you just told me that [B65C RESPONSE] of your children live here with you. We just want to make sure our information is correct. Can you tell me why these two answers are different? Please select all that apply.

1. My child/children only live here part time
2. My child/children were adopted by another family member
3. My family usually tells other people that my child/children belong to another family member
4. The person who gave you the list probably forgot to include my child/children
5. I didn't give you the true answer before. The true answer is _____ (please type in your answer)
6. Some other reason, please type in your answer.

CB66. CAPI CHECK: DOES CHILD HAVE MOTHER FIGURE PRELOAD?

1. Yes (CONTINUE)
5. No (GO TO CB70)

CB67. Now I have some questions about your relationship with [MOTHER FIGURE]. Tell me whether you agree, disagree or are not sure about the following statements about [MOTHER FIGURE].

CB67.1. I think highly of her.

1. Agree

2. Disagree
3. Not sure

CB67.2. She is a person I want to be like.

1. Agree
2. Disagree
3. Not sure

CB67.3. I really enjoy spending time with her.

1. Agree
2. Disagree
3. Not sure

CB68. Now I want to ask you about how often [MOTHER FIGURE] does different things.

CB68.1. How often does she praise you for doing well?

1. Never
2. Rarely
3. Sometimes
4. Often

CB68.2. How often does she criticize you or your ideas?

1. Never
2. Rarely
3. Sometimes
4. Often

CB68.3. How often does she help you with things that are important to you?

1. Never
2. Rarely
3. Sometimes
4. Often

CB68.4. How often does she know about who you are with when you are not at home?

1. Never
2. Rarely
3. Sometimes
4. Often

CB69. Does [MOTHER FIGURE] know all your close friends, only some of them, or none of them?

1. All
2. Some
3. None

CB70. CAPI CHECK: DOES CHILD HAVE FATHER FIGURE PRELOADED?

1. Yes (CONTINUE)
5. No (GO TO CB74)

CB71. Now I have some questions about your relationship with [FATHER FIGURE]. Tell me whether you agree, disagree or are not sure about the following statements about [FATHER FIGURE]:

CB71.1. I think highly of him.

1. Agree
2. Disagree
3. Not sure

CB71.2. He is a person I want to be like.

1. Agree
2. Disagree
3. Not sure

CB71.3. I really enjoy spending time with him.

1. Agree
2. Disagree
3. Not sure

CB72. Now I want to ask you about how often [FATHER FIGURE] does different things.

CB72.1. How often does he praise you for doing well?

1. Never
2. Rarely
3. Sometimes
4. Often

CB72.2. How often does he criticize you or your ideas?

1. Never
2. Rarely
3. Sometimes
4. Often

CB72.3. How often does he help you with things that are important to you?

1. Never
2. Rarely
3. Sometimes
4. Often

CB72.4. How often does he know about who you are with when you are not at home?

1. Never
2. Rarely
3. Sometimes
4. Often

CB73. Does [FATHER FIGURE] know all your close friends, only some of them, or none of them?

1. All
2. Some
3. None

CB74. Next I have some statements about how you and your family get along and settle arguments. These questions are about you and your family who live here with you. For each statement, please tell me whether you think it is true, sometimes true or not true.

CB74.1. People in my family fight a lot.

1. True
2. Sometimes true
3. Not true

CB74.2. People in my family hardly ever lose their tempers.

1. True
2. Sometimes true
3. Not true

CB74.3. People in my family sometimes get so angry they throw things.

1. True
2. Sometimes true
3. Not true

CB74.4. People in my family always calmly discuss problems.

1. True
2. Sometimes true
3. Not true

CB74.5. People in my family often criticize each other.

1. True
2. Sometimes true
3. Not true

CB74.6. People in my family sometimes hit each other.

1. True
2. Sometimes true
3. Not true

CB75A. During the past 12 months, that is, since [MONTH/YEAR] have you ever had any of these happen to you:

CB75A.1A. Someone tried to steal something from you by force or by threatening you.

1. Yes
5. No

CB75A.2A. Something was stolen from you.

1. Yes
5. No

CB75A.3A. Someone tried to sell you drugs or did sell you drugs.

1. Yes
5. No

CB75A.4A. You saw someone get shot or shot at with a gun.

1. Yes
5. No

CB76. CAPI CHECK: IS ITEM A, B, C, OR D ABOVE CHECKED YES IN CB75?

1. YES
5. NO (GO TO CB78)

CB77. Who [tried to steal something from you / stole something from you / tried to sell you drugs or sold you drugs / got shot or got shot at with a gun] during the past 12 months? Please select all all the people who did.

1. Family member
2. Adult family friend
3. My boyfriend/girlfriend
4. A kid at school
5. Gang member
6. Other adult I know
7. Other adult who I did not know
8. Other kid I know
9. Other kid who I did not know

CB78. Have you ever been arrested by the police?

1. YES
5. NO (GO TO CB82)

CB79. In total, how many times have you been arrested?

_____ Times

CB80A. Did any of the following ever happen to you...

CB80A.1A. You were found delinquent of any charges?

1. Yes
5. No

CB80A.2A. You plead guilty to any charges?

1. Yes
5. No

CB80A.3A. You were convicted of any charges?

1. Yes
5. No

IF CB80=ALL NO, SKIP TO CB82. IF CB80=ANY YES, CONTINUE TO CB81. COUNT ANY D/R AS "YES".

CB81A. Did you ever spend time in any of the following. . .

CB81A.1A. Jail?

1. Yes
5. No

CB81A.2A. Juvenile hall or other juvenile corrections institution?

1. Yes
5. No

CB81A.3A. Reform school or training school?

1. Yes

5. No

CB81A.4A. Prison or adult corrections institution?

- 1. Yes
- 5. No

CB81A.5A. Performing community service because of delinquency?

- 1. Yes
- 5. No

CB81A.6A. Other corrections program or institution?

- 1. Yes
- 5. No

CB82. Now let's turn to another subject. Have you ever gone to the public library? I mean a library that is not at your school.

- 1. YES
- 5. NO (GO TO CB84)

CB83. How many times in the past two weeks did you go to the public library?

- 1. Not at all
- 2. Once
- 3. 2-3 times
- 4. 4 or more time

CB84. CAPI CHECK: WHAT IS RESPONDENT'S EDUCATIONAL ATTAINMENT?

- 1. IF CB7=6th-11th GRADE OR CB6=5 OR [CB6=1 OR 7 AND CB7=12TH GRADE] [NOT COMPLETED HIGH SCHOOL] (CONTINUE)
- 2. ALL OTHERS (GO TO CB86)

CB85. Do you think you will graduate from high school?

- 1. Yes
- 2. No
- 3. I'm not sure

CB86. Do you think you will graduate from college?

- 1. Yes
- 2. No
- 3. I'm not sure

CB87. About how much do you weigh, in pounds?

_____ Pounds

IF RESPONSE=DK OR REF, GO TO CB87A. ELSE GO TO CB88.

CB87A. If you know how much you weigh in kilograms, please type it in here.

_____ Kilos / Kilograms

CB88. About how tall are you?

ENTER YOUR HEIGHT IN FEET ON THIS SCREEN AND THE NUMBER OF ADDITIONAL INCHES ON THE FOLLOWING SCREEN

_____ Feet _____ Inches

IF RESPONSE=DK OR REF GO TO B88A. ELSE GO TO B89.

CB88A. If you know how tall you are in meters, please type it in here.

_____ Meters

CB89. How do you think of yourself in terms of weight?

1. About the right weight
2. Very underweight
3. Slightly underweight
4. Slightly overweight
5. Very overweight

CB90. Do you currently have a paid job or have you had a paid job during the past month?

1. YES
5. NO (GO TO CB94)

CB91. What do you do at this job? Please type in your answer. If you have more than one job, tell us about your main job.

CB92. On average, how many hours a week did you work at this job during the past month? If you have more than one job, please tell us about your main job

_____ Hours per week

CB93_amt. How much are you paid at this job? Please include wages and tips.

ENTER THE DOLLAR AMOUNT ON THIS SCREEN AND THE TIME PERIOD (HOUR, DAY, WEEK, TWO WEEKS, MONTH) OVER WHICH THE AMOUNT IS PAID ON THE FOLLOWING SCREEN

1. \$_____.____ per hour
2. \$_____.____ per day
3. \$_____.____ per week
4. \$_____.____ every two weeks
5. \$_____.____ per month
6. Other. Please type in your answer: _____

CB94. CAPI CHECK: B6 SCHOOLING

1. IF CB6=2 or 3, CONTINUE
2. IF CB6=1 OR 7,4,5,6, GO TO CB99

CB95. Did you have a job after school or on weekends last spring?

1. Yes
5. No (GO TO CB103)
3. I was not in school last spring (GO TO CB103)

CB96. What did you do at this job? Please type in your answer. If you had more than one job, please tell us about your main job.

CB97. On average, how many hours a week did you normally work at this job? If you had more than one job, please tell us about your main job.

_____ Hours per week

CB98_amt. How much were you paid at this job? Please include wages and tips.

ENTER THE DOLLAR AMOUNT ON THIS SCREEN AND THE TIME PERIOD (HOUR, DAY, WEEK, TWO WEEKS, MONTH) OVER WHICH THE AMOUNT WAS PAID ON THE FOLLOWING SCREEN

1. \$_____.____ per hour (GO TO CB103)
2. \$_____.____ per day (GO TO CB103)
3. \$_____.____ per week (GO TO CB103)
4. \$_____.____ every two weeks (GO TO CB103)
5. \$_____.____ per month (GO TO CB103)
6. Other. Please type in your answer: _____ (GO TO CB103)

CB99. Did you have a job last summer?

1. YES
5. NO (GO TO CB103)

CB100. What did you do at this job? Please type in your answer. If you had more than one job, please tell us about your main job

CB101. On average, how many hours a week did you work at this job last summer? If you had more than one job, please tell us about your main job.

_____ Hours per week

CB102_amt. How much were you paid at this job? Please include wages and tips.

ENTER THE DOLLAR AMOUNT ON THIS SCREEN AND THE TIME PERIOD (HOUR, DAY, WEEK, TWO WEEKS, MONTH) OVER WHICH THE AMOUNT WAS PAID ON THE FOLLOWING SCREEN

1. \$_____.____ per hour
2. \$_____.____ per day
3. \$_____.____ per week
4. \$_____.____ every two weeks
5. \$_____.____ per month
6. Other. Please type in your answer: _____

CB103. Are you.... (Please select all that apply.)

1. Latino or Hispanic?
2. White?
3. African-American or Black?
4. Asian?
5. Pacific Islander?
6. Native American/American Indian?

CB104. CAPI CHECK:

IF CB103=MORE THAN ONE RESPONSE, CONTINUE
ELSE GO TO CB106

CB105. Now, if you had to pick the one group which describes you best, is it....

CHOOSE ONLY ONE

1. Latino or Hispanic?
2. White?
3. African-American or Black?
4. Asian?
5. Pacific Islander?
6. Native American/American Indian?

CB106. What about your friends? Are they...

1. Mostly [GROUP PICKED IN CB105 IF ANSWERED; ELSE GROUP IN CB103]
2. Mostly not [GROUP PICKED IN CB105 IF ANSWERED; ELSE GROUP IN CB103]
3. About half [GROUP PICKED IN CB105 IF ANSWERED; ELSE GROUP IN CB103] and half not [GROUP PICKED IN CB105 IF ANSWERED; ELSE GROUP IN CB103]

CB107. How do you think your parents would feel about you smoking cigarettes once in while?

1. Neither approve nor disapprove
2. Somewhat disapprove
3. Strongly disapprove

CB107A. How do you think your parents would feel about you smoking cigarettes everyday?

1. Neither approve nor disapprove
2. Somewhat disapprove
3. Strongly disapprove

CB108. How do you think your parents would feel about you trying marijuana once or twice?

1. Neither approve nor disapprove
2. Somewhat disapprove
3. Strongly disapprove

CB108B. How do you think they would feel about you using marijuana every day or almost every day?

1. Neither approve nor disapprove
2. Somewhat disapprove
3. Strongly disapprove

CB109. How do you think your parents would feel about you having one or two drinks of an alcoholic beverage (beer, wine, an alcoholic drink) once in a while?

1. Neither approve nor disapprove
2. Somewhat disapprove
3. Strongly disapprove

CB109B. How do you think your parents would feel about you drinking five or more alcoholic drinks at a party or at home almost every weekend?

1. Neither approve nor disapprove
2. Somewhat disapprove
3. Strongly disapprove

CB110. Yesterday, how many servings of fruit did you eat? A serving is a small bowl of fruit, a handful of grapes, or one piece of fruit, like an apple, orange or banana.

_____ Servings

CB111. Yesterday, how many servings of vegetables, like corn, green beans, green salad or other vegetables did you have?

_____ Servings

CB112. Yesterday, how many cans, bottles, or glasses of soda (such as Coke or Sprite), sports drinks like Gatorade, or other sweetened drinks (such as Sunny Delight or fruit punch) did you drink? Do not include diet or sugar-free drinks.

_____ Cans, bottles, or glasses

CB113. Yesterday, how many times did you eat fast food, such as McDonald's, Burger King, Taco Bell, Jack In the Box, Wendy's, or others? Make sure to include fast food meals you ate at fast-food restaurants, take out, drive thru, at home or at school or work.

_____ Times

CB114. Yesterday, did you eat pretty much what you normally eat?

1. YES
5. NO

CB115. Now think about the past seven days, that is from [DAY OF THE WEEK SEVEN DAYS AGO] last week up to and including today. First let me ask you about vigorous activities like exercise, sports, and physically active hobbies that cause heavy sweating or large increases in breathing or heart rate. How many times during the past seven days did you do these vigorous activities for at least 20 minutes?

IF PHYSICALLY UNABLE TO DO THIS TYPE OF EXERCISE, ENTER 77

_____ Times in the last seven days

CB116. Thank you! That is the end of this interview. Please give the laptop back to the interviewer.

CCHDQ15. INTERVIEWER: DID R COMPLETE THE SELF-ADMINISTERED QUESTIONS ON HIS/HER OWN?

1. Yes, completed on his/her own
2. Yes, with some assistance
3. No, I asked the questions

Los Angeles Family and Neighborhood Survey, Wave 2 (L.A.FANS-2)

HEALTH MEASURES MODULE

Notes

Preloads for Child Health Measures Module from earlier sections include:

- Child's name
- Child's age
- Child's sex

Questionnaire formatting key

- **Black bold**: Question numbers
- Black normal: Interviewer to read question text
- BLACK UPPER CASE: Interviewer and programming instructions
- ***BLACK BOLD ITALIC UPPER CASE***: Comments

PART I. CHILD HEALTH MEASURES MODULE

INTRODUCTION

L1. CAPI: CHILD'S AGE:

1. LESS THAN 2 YEARS OLD (GO TO END)
2. 2 YEARS TO LESS THAN 3 YEARS OLD (GO TO L4)
3. 3 YEARS TO LESS THAN 5 YEARS OLD (GO TO L5A)
4. 5 YEARS OR OLDER (GO TO L6)

L4. INTERVIEWER: IS THE CHILD ABLE TO STAND UNASSISTED? IF THIS ISN'T OBVIOUS, ASK THE PARENT WHETHER THE CHILD IS ABLE TO STAND UNASSISTED.

1. CHILD IS NOT ABLE TO STAND UNASSISTED (GO TO END)
2. CHILD IS ABLE TO STAND UNASSISTED

L4A1. CAPI: INTRODUCTION FOR PARENT OF CHILD AT LEAST 2 YEARS OF AGE, BUT LESS THAN 3 YEARS OF AGE.

INTERVIEWER: FIND **FORM D** AND GIVE TO RESPONDENT'S PARENT.

This sheet describes health measures for the Los Angeles Family and Neighborhood Survey Wave 2 (L.A.FANS-2) and asks you to give permission for your child [NAME] to participate. Please carefully read the information below and ask any questions you have. Participation in the study is completely voluntary. Your child's participation is very important to the study because no one else in the community is exactly like your child and we cannot use anyone else in his or her place. L.A.FANS is an on-going study, and we may contact you in the future and ask you to participate again.

By signing the attached consent form you are agreeing to let your child participate in the health measures portion of L.A.FANS-2. It will take about 20 minutes to collect the health measures. If you give permission for your child to participate, you or your child can change your mind and stop at any time.

L4A. CAPI: INTRODUCTION FOR PARENT OF CHILD AT LEAST 2 YEARS OF AGE, BUT LESS THAN 3 YEARS OF AGE.

INTERVIEWER: GIVE **FORM E** TO RESPONDENT'S PARENT TO SIGN.

As part of the Los Angeles Family and Neighborhood Survey we would like to measure [CHILD]'s height and weight. In a few weeks you will get a letter telling you your child's height and weight and how they compare to other children of [his / her] age group. Let me review the Information Sheet and Parental Informed Consent Form with you now. Please feel free to ask me any questions you have at any point.

L5. INTERVIEWER: REVIEW INFORMATION SHEET AND PARENTAL INFORMED CONSENT FORM FOR CHILDREN AT LEAST 2 YEARS OF AGE, BUT LESS THAN 3 YEARS OF AGE

DID PARENT SIGN INFORMED CONSENT FORM AGREEING TO HAVE THEIR CHILD PARTICIPATE IN HEALTH MEASURES? MARK ONE:

1. YES (GO TO L44)
5. NO (GO TO L93A)

L5A. CAPI: INTRODUCTION FOR PARENT AND CHILD 3 YEARS TO LESS THAN 5 YEARS OF AGE

INTERVIEWER: READ THIS INTRODUCTION TO THE PARENT AND THE CHILD TOGETHER.

Now that we have completed the first portion of the Los Angeles Family and Neighborhood Survey, I would like your permission and [CHILD]'s "okay" to collect some health measurements. This requires a separate consent

form, so let me take a few moments to describe what is involved. If you agree, today I will measure [CHILD]'s height and weight. I will also ask you to collect three samples of [CHILD]'s saliva. For the saliva, I will leave instructions and a kit to collect the samples.

IF RESPONDENT IS SELECTED FOR DBS: We will then schedule a trained health technician to come to your home at a time that is convenient for you. The technician will take a small sample of blood by pricking [his / her] finger.

In a few weeks, you will receive a letter telling you [CHILD]'s height and weight and how they compare to other children of [his / her] age group. The letter will also include the results of the other health measures and advice on what they may mean.

Let's review the *Information Sheet* and *Parental Informed Consent Form* for the child health measures. Both of you should ask me any questions you have at any point.

IF RESPONDENT IS SELECTED FOR DBS: GIVE RESPONDENT'S PARENT **FORM F**.

This sheet describes the Los Angeles Family and Neighborhood Survey (L.A.FANS-2) health measures study and asks you to give permission for your child [NAME] to participate. Please carefully read the information below and ask any questions you have. Participation in the study is completely voluntary. Your child's participation is very important to the study because no one else in the community is exactly like your child and we cannot use anyone else in his or her place.

By signing the attached consent form you are agreeing to let your child participate in the **health measures** portion of L.A.FANS-2. It will take about 30 to 45 minutes to collect the health measures and another 15 minutes to explain how you should collect one additional measure. If you give permission for your child to participate, you or your child can change your mind and stop at any time.

IF RESPONDENT IS **NOT** SELECTED FOR DBS: GIVE RESPONDENT'S PARENT **FORM G**.

This sheet describes the Los Angeles Family and Neighborhood Survey (L.A.FANS-2) health measures study and asks you to give permission for your child [NAME] to participate. Please carefully read the information below and ask any questions you have. Participation in the study is completely voluntary. Your child's participation is very important to the study because no one else in the community is exactly like your child and we cannot use anyone else in his or her place.

By signing the attached consent form you are agreeing to let your child participate in the health measures portion of L.A.FANS-2. It will take about 30 to 45 minutes to collect the health measures and another 15 minutes to explain how you should collect one additional measure. If you give permission for your child to participate, you or your child can change your mind and stop at any time.

IF RESPONDENT IS SELECTED FOR DBS: IF PARENT HAS AGREED TO ALL HEALTH MEASURES GIVE PARENT **FORM H** TO SIGN. GIVE ONE COPY OF THE FORM TO THE PARENT, AND KEEP ONE YOURSELF. IF PARENT HAS ONLY AGREED TO SOME OF THE HEALTH MEASURES GIVE PARENT **FORM J** TO SIGN. GIVE ONE COPY OF THE FORM TO THE PARENT, AND KEEP ONE YOURSELF.

IF RESPONDENT IS **NOT** SELECTED FOR DBS: IF PARENT HAS AGREED TO ALL HEALTH MEASURES GIVE PARENT **FORM I** TO SIGN. GIVE ONE COPY OF THE FORM TO THE PARENT, AND KEEP ONE YOURSELF. IF PARENT HAS ONLY AGREED TO SOME OF THE HEALTH MEASURES GIVE PARENT **FORM K** TO SIGN. GIVE ONE COPY OF THE FORM TO THE PARENT, AND KEEP ONE YOURSELF.

L5B. INTERVIEWER: REVIEW *INFORMATION SHEET* AND *PARENTAL INFORMED CONSENT FORM* FOR CHILDREN 3 YEARS TO LESS THAN 5 YEARS OF AGE.

DID PARENT SIGN PARENTAL *INFORMED CONSENT FORM* AGREEING TO HAVE THEIR CHILD PARTICIPATE IN HEALTH MEASURES? MARK ONE:

1. YES (GO TO L8)
2. YES, AGREED TO SOME HEALTH MEASURES (GO TO L8)

5. NO (GO TO L93A)

L6. CAPI: INTRODUCTION FOR PARENT AND CHILD 5 YEARS OF AGE OR AGE OR OLDER

INTERVIEWER: READ THIS INTRODUCTION TO THE PARENT AND THE CHILD TOGETHER.

Now that we have completed the first portion of the Los Angeles Family and Neighborhood Survey, I would like your permission and [CHILD]'s "okay" to collect some health measurements. This requires a separate consent form, so let me take a few moments to describe what is involved. If you agree, today I will measure [CHILD]'s blood pressure, height and weight, and give [CHILD] a simple breathing test. I will also ask you to collect three samples of [CHILD]'s saliva. For the saliva, I will leave instructions and a kit to collect the samples.

FOR RESPONDENTS SELECTED FOR DBS: We will then schedule a trained health technician to come to your home at a time that is convenient for you. The technician will take a small sample of blood by pricking [his / her] finger.

In a few weeks, you will receive a letter telling you [CHILD]'s height and weight and how they compare to other children of [his / her] age group. The letter will also include the results of the other health measures and advice on what they may mean.

Let's review the *Information Sheet*, *Parental Informed Consent Form*, and [IF CHILD AGE > 6 YEARS] the *Child Assent Form* for the child health measures. Both of you should ask me any questions you have at any point.

IF RESPONDENT IS SELECTED FOR DBS: GIVE RESPONDENT'S PARENT **FORM F**.

This sheet describes the Los Angeles Family and Neighborhood Survey (L.A.FANS-2) health measures study and asks you to give permission for your child [NAME] to participate. Please carefully read the information below and ask any questions you have. Participation in the study is completely voluntary. Your child's participation is very important to the study because no one else in the community is exactly like your child and we cannot use anyone else in his or her place.

By signing the attached consent form you are agreeing to let your child participate in the **health measures** portion of L.A.FANS-2. It will take about 30 to 45 minutes to collect the health measures and another 15 minutes to explain how you should collect one additional measure. If you give permission for your child to participate, you or your child can change your mind and stop at any time.

IF RESPONDENT IS **NOT** SELECTED FOR DBS: GIVE RESPONDENT'S PARENT **FORM G**.

This sheet describes the Los Angeles Family and Neighborhood Survey (L.A.FANS-2) health measures study and asks you to give permission for your child [NAME] to participate. Please carefully read the information below and ask any questions you have. Participation in the study is completely voluntary. Your child's participation is very important to the study because no one else in the community is exactly like your child and we cannot use anyone else in his or her place.

By signing the attached consent form you are agreeing to let your child participate in the health measures portion of L.A.FANS-2. It will take about 30 to 45 minutes to collect the **health measures** and another 15 minutes to explain how you should collect one additional measure. If you give permission for your child to participate, you or your child can change your mind and stop at any time.

IF RESPONDENT IS SELECTED FOR DBS: IF PARENT HAS AGREED TO ALL HEALTH MEASURES GIVE PARENT **FORM H** TO SIGN. GIVE ONE COPY OF THE FORM TO THE PARENT, AND KEEP ONE YOURSELF. IF PARENT HAS ONLY AGREED TO SOME OF THE HEALTH MEASURES GIVE PARENT **FORM J** TO SIGN. GIVE ONE COPY OF THE FORM TO THE PARENT, AND KEEP ONE YOURSELF.

IF RESPONDENT IS NOT SELECTED FOR DBS: IF PARENT HAS AGREED TO ALL HEALTH MEASURES GIVE PARENT **FORM I** TO SIGN. GIVE ONE COPY OF THE FORM TO THE PARENT, AND KEEP ONE YOURSELF. IF PARENT HAS ONLY AGREED TO SOME OF THE HEALTH MEASURES GIVE PARENT **FORM K** TO SIGN. GIVE ONE COPY OF THE FORM TO THE PARENT, AND KEEP ONE YOURSELF

L7. INTERVIEWER: REVIEW INFORMATION SHEET, THE PARENTAL INFORMED CONSENT FORM, AND

- FOR CHILDREN 7–14 YEARS, THE HEALTH MEASURES ASSENT FOR CHILDREN
- FOR CHILDREN 15 YEARS OF AGE OR OLDER, THE HEALTH MEASURES ASSENT FOR RESPONDENTS 15 YEARS OF AGE OR OLDER.

DID PARENT SIGN INFORMED CONSENT FORM AGREEING TO HAVE THE CHILD PARTICIPATE IN HEALTH MEASURES? MARK ONE:

1. YES
2. YES, AGREED TO SOME HEALTH MEASURES
5. NO (GO TO L93A)

L6A. INTERVIEWER: GIVE RESPONDENT **FORM L. GIVE ONE COPY OF THE FORM TO THE RESPONDENT, AND KEEP ONE FOR YOURSELF.**

Your [mother / father / other guardian] said that if you agree, you can be part of this important study to understand the health of children in your neighborhood. I would like to do a few health checks on you today:

1. I'd like to weigh you and measure how tall you are.
2. I'd like to check and see how well your heart works.
3. I'd like to ask you to blow into a machine to see how well you breathe.
4. I'd like you, with the help of your [mother / father / other guardian], to collect some of your saliva (or spit) three times tomorrow.
5. And, in a day or two, I'd like to have someone prick your finger to get a few drops of blood.

You get to decide if you want to be in the study. You can tell me yes that you want to do all these things or no that you don't. If you say yes, you can change your mind and stop at any time. Do you have any questions for me? Would you like to participate?

1. YES, CHILD ASSENTED TO HEALTH MEASURES
5. NO, CHILD DID NOT ASSENT TO HEALTH MEASURES (END INTERVIEW)

L6B. INTERVIEWER: GIVE RESPONDENT **FORM M. GIVE ONE COPY OF THE FORM TO THE RESPONDENT, AND KEEP ONE FOR YOURSELF.**

Your [mother / father / other guardian] said that if you agree, you can be part of this important study to understand the health of children in your neighborhood. I would like to do a few health checks on you today:

1. I'd like to weigh you and measure how tall you are.
2. I'd like to check and see how well your heart works.
3. I'd like to ask you to blow into a machine to see how well you breathe.
4. I'd like you, with the help of your [mother / father / other guardian], to collect some of your saliva (or spit) three times tomorrow.

You get to decide if you want to be in the study. You can tell me yes that you want to do all these things or no that you don't. If you say yes, you can change your mind and stop at any time. Do you have any questions for me? Would you like to participate?

- 1 YES, CHILD ASSENTED TO HEALTH MEASURES
- 5 NO, CHILD DID NOT ASSENT TO HEALTH MEASURES (END INTERVIEW)

L6C. INTERVIEWER: GIVE RESPONDENT **FORM N GIVE ONE COPY OF THE FORM TO THE RESPONDENT, AND KEEP ONE FOR YOURSELF.**

Your [mother / father / other guardian] has agreed to let you be part of this important study to understand the lives of children and teens in your community. I would like to do a few checks on you:

1. I'd like to weigh you and measure how tall you are.
2. I'd like to check and see how well your heart works.

3. I'd like to ask you to blow into a machine to see how well you breathe.
4. I'd like you, with the help of your [mother / father / other guardian], to collect some of your saliva (or spit) three times tomorrow.
5. And, in a day or two, I'd like to have someone prick your finger to get a few drops of blood.

You get to decide if you want to be in the study. You can tell me yes that you want to do all these things or no that you don't. If you say yes, you can change your mind and stop at any time. Do you have any questions for me? Would you like to participate?

1. YES, CHILD ASSENTED TO HEALTH MEASURES
5. NO, CHILD DID NOT ASSENT TO HEALTH MEASURES (END INTERVIEW)

L6D. INTERVIEWER: GIVE RESPONDENT FORM O. GIVE ONE COPY OF THE FORM TO THE RESPONDENT, AND KEEP ONE FOR YOURSELF.

Your [mother / father / other guardian] has agreed to let you be part of this important study to understand the lives of children and teens in your community. I would like to do a few checks on you:

1. I'd like to weigh you and measure how tall you are.
2. I'd like to check and see how well your heart works.
3. I'd like to ask you to blow into a machine to see how well you breathe.
4. I'd like you, with the help of your [mother / father / other guardian], to collect some of your saliva (or spit) three times tomorrow.

You get to decide if you want to be in the study. You can tell me yes that you want to do all these things or no that you don't. If you say yes, you can change your mind and stop at any time. Do you have any questions for me? Would you like to participate?

1. YES, CHILD ASSENTED TO HEALTH MEASURES
5. NO, CHILD DID NOT ASSENT TO HEALTH MEASURES (END INTERVIEW)

L6E. INTERVIEWER: FIND AND GIVE RESPONDENT FORM P.

Your [mother / father / other guardian] has agreed to let you be part of the health measures section of this important study called the Los Angeles Family and Neighborhood Survey Wave 2 (L.A.FANS-2). If you agree, I would like to do a few health checks on you:

1. I'd like to weigh you and measure how tall you are.
2. I'd like to check your blood pressure.
3. I'd like to ask you to blow into a machine to see how well you breathe.
4. I'd like you, with the help of your [mother / father / other guardian], to collect some of your saliva (or spit) three times tomorrow.
5. And, in the next day or two, I'd like to have a health worker prick your finger to get a few drops of blood to check for risks for future health conditions.

These health measures are fast and easy to do in your home. You get to decide if you want to be in the study. You can tell me yes that you want to do all these things or no that you don't. If you say yes, you can change your mind and stop at any time. Your participation is very important because no one else in the community is exactly like you and we cannot use anyone else in your place.

INTERVIEWER: GIVE RESPONDENT FORM R TO SIGN. GIVE ONE COPY TO THE RESPONDENT, AND KEEP ONE FOR YOURSELF.

L6F. INTERVIEWER: FIND AND GIVE RESPONDENT FORM Q.

Your [mother / father / other guardian] has agreed to let you be part of the health measures section of this important study called the Los Angeles Family and Neighborhood Survey Wave 2 (L.A.FANS-2). If you agree, I would like to do a few health checks on you:

1. I'd like to weigh you and measure how tall you are.
2. I'd like to check your blood pressure.
3. I'd like to ask you to blow into a machine to see how well you breathe.
4. I'd like you, with the help of your [mother / father / other guardian], to collect some of your saliva (or spit) three times tomorrow.

These health measures are fast and easy to do in your home. You get to decide if you want to be in the study. You can tell me yes that you want to do all these things or no that you don't. If you say yes, you can change your mind and stop at any time. Your participation is very important because no one else in the community is exactly like you and we cannot use anyone else in your place.

INTERVIEWER: GIVE RESPONDENT **FORM R** TO SIGN. GIVE ONE COPY TO THE RESPONDENT, AND KEEP ONE FOR YOURSELF.

L8. INTERVIEWER: DID CHILD ASSENT TO PARTICIPATING IN THE HEALTH MEASURES? MARK ONE:

1. YES, CHILD 3–6 YEARS OF AGE PROVIDED VERBAL AGREEMENT TO ALL HEALTH MEASURES
2. YES, CHILD 3–6 YEARS OF AGE PROVIDED VERBAL AGREEMENT TO SOME HEALTH MEASURES
3. YES, CHILD 7–8 YEARS OF AGE PROVIDED VERBAL ASSENT TO ALL HEALTH MEASURES
4. YES, CHILD 7–8 YEARS OF AGE PROVIDED VERBAL ASSENT TO SOME HEALTH MEASURES
6. YES, CHILD 9 YEARS OF AGE OR OLDER SIGNED THE ASSENT FORM FOR ALL HEALTH MEASURES
7. YES, CHILD 9 YEARS OF AGE OR OLDER SIGNED THE ASSENT FORM FOR SOME HEALTH MEASURES
5. NO

GO TO L93A

L8A. INTERVIEWER: INDICATE HEALTH MEASURES PARENT OR CHILD DECLINED ON OPT-OUT CONSENT / ASSENT FORM. IF NO HEALTH MEASURES ARE DECLINED, MARK "0"; OTHERWISE, MARK ALL THAT APPLY OF ITEMS 1–6.

0. NONE—PARENT AND CHILD AGREED TO ALL HEALTH MEASURES
1. BLOOD PRESSURE (SKIP L10–L36)
2. HEIGHT (SKIP L44–L51)
3. WEIGHT (SKIP L60–L64)
4. SALIVA (SKIP L86–L93)
5. SPIROMETRY (SKIP L65–L85)
6. DRIED BLOOD SPOT (SKIP L94–L101)

L9. CAPI: CHECK CHILD'S AGE.

CHILD IS LESS THAN 5 YEARS OLD (GO TO L44)
OTHERWISE (GO TO L10)

BLOOD PRESSURE MEASUREMENT

L10. INTRODUCTION FOR CHILDREN 5 TO 17 YEARS OLD

INTERVIEWER: READ TO PARENT AND CHILD TOGETHER. AS YOU SPEAK, ADDRESS THE CHILD.

Now I will explain the procedure for measuring your blood pressure. It is important that you remain calm and relaxed and seated for the measurements, which will take about 10 minutes. We need to find a quiet location for the measurements without any disturbances or distractions.

First, I will wrap the blood pressure cuff around your arm. Then I will start the blood pressure machine. The cuff will inflate and you will feel a little pressure on your arm. The cuff will then gradually deflate. I will inflate the cuff at least three times but no more than five times. While I am measuring your blood pressure, it is best that we not

talk. If you have any questions or concerns, I will be happy to answer them for you before or after the measurements are taken.

Before we start, you should use the bathroom if you need to. Also, you should remove any outer clothing and roll up your sleeves.

L11. INTERVIEWER: IS SETTING APPROPRIATE (SUFFICIENTLY QUIET, CALM, AND RELAXED) FOR BLOOD PRESSURE MEASUREMENT?

1. YES
5. NO, SPECIFY: _____ (GO TO L31C)

L12. INTERVIEWER: OBSERVE FIRST THE RIGHT ARM, THEN THE LEFT ARM IF NEEDED, FOR CONDITIONS PREVENTING MEASUREMENT.

- DO NOT PLACE BP CUFFS ON ARMS WITH OPEN SORES, WOUNDS, GAUZE DRESSINGS OR RASHES
- DO NOT USE ARMS WITH CASTS OR SHUNTS
- DO NOT USE ARMS THAT ARE WITHERED, SWOLLEN OR PARALYZED

ARE PREVENTING CONDITIONS PRESENT IN BOTH ARMS?

1. YES, SPECIFY: _____ (GO TO L31C)
5. NO

L13. Do you know of any medical reasons, such as recent surgery, injury, or other health conditions why the blood pressure measurements should not be done?

MARK "YES" ONLY IF THE PROBLEM EXISTS IN BOTH ARMS.

1. YES, SPECIFY: _____ (GO TO L31C)
5. NO

L14. INTERVIEWER: IF OBSERVED, RECORD; OTHERWISE ASK THE CHILD: Have you had any food, coffee, caffeinated drinks, or cigarettes within the past 30 minutes?

MARK ALL THAT APPLY

1. FOOD
2. COFFEE
3. CAFFEINATED DRINKS
4. CIGARETTES
5. NONE

L15. Is [CHILD] currently taking any medication to lower [his / her] blood pressure?

1. YES
5. NO

L16. INTERVIEWER: SET UP AUTOMATIC BLOOD PRESSURE MACHINE ON A CLEAN, FLAT SURFACE CLOSE TO AN ELECTRICAL OUTLET.

CHILD SHOULD BE SITTING QUIETLY AND RELAXED FOR FIVE MINUTES BEFORE THE FIRST MEASUREMENT IN A COMFORTABLE UPRIGHT POSITION WITH LEGS UNCROSSED AND BOTH FEET ON THE FLOOR. CHILD SHOULD BE SEATED SO THAT THE UPPER PORTION OF THE SELECTED ARM IS SUPPORTED AND THE MIDPOINT OF THE ARM IS LEVEL WITH THE HEART.

SELECT THE APPROPRIATE CUFF SIZE USING THE INDICATORS ON THE BLOOD PRESSURE CUFF.

PLACE THE CUFF ON THE SELECTED ARM SO THE BOTTOM EDGE OF THE CUFF IS 2–3 CM ABOVE THE CREASE ON THE INSIDE OF THE ELBOW. THE "ARTERY" ARROW ON THE CUFF SHOULD POINT TO THE MIDLINE OF THE CREASE. CLOTHING SHOULD NOT RESTRICT THE TOP EDGE OF THE CUFF. THE CUFF SHOULD BE SNUG BUT COMFORTABLE ENOUGH TO PLACE TWO FINGERS BETWEEN THE CUFF AND ARM. THE "INDEX" MARKING ON THE EDGE OF THE CUFF MUST FALL WITHIN THE "RANGE" MARKERS ON THE INSIDE OF THE CUFF.

L17. INTERVIEWER: INDICATE CUFF SIZE SELECTED:

1. PEDIATRIC CUFF
2. SMALL ADULT CUFF
3. REGULAR ADULT CUFF
4. LARGE ADULT CUFF
5. EXTRA-LARGE ADULT CUFF

L18. INTERVIEWER: WHICH ARM SELECTED?

1. RIGHT (GO TO L20)
2. LEFT

L19. INTERVIEWER: REASON FOR SELECTING LEFT ARM?

1. INJURY OR RASH
2. CAST, DRESSING, OR BANDAGE
3. PLACEMENT OF EQUIPMENT
4. OTHER, SPECIFY: _____

L20. INTERVIEWER: HAS CHILD RESTED FOR AT LEAST FIVE MINUTES?

1. YES
5. NO

L21. INTERVIEWER: PERFORM FIRST BLOOD PRESSURE READING AND INDICATE OUTCOME.

1. READING OBTAINED
2. MISSED READING (EQUIPMENT FAILURE, INTERRUPTION, OTHER PROBLEM) (GO TO L23)
3. REFUSED (GO TO L31C)

L22. INTERVIEWER: ENTER FIRST BLOOD PRESSURE AND PULSE READING.

SYSTOLIC _____
DIASTOLIC _____
PULSE _____

L22A. INTERVIEWER: RE-ENTER FIRST BLOOD PRESSURE AND PULSE READING.

SYSTOLIC _____
DIASTOLIC _____
PULSE _____

L23. INTERVIEWER: WAIT AT LEAST 30 SECONDS SINCE LAST INFLATION OF CUFF. PERFORM SECOND BLOOD PRESSURE READING AND INDICATE OUTCOME.

1. READING OBTAINED
2. MISSED READING (EQUIPMENT FAILURE, INTERRUPTION, OTHER PROBLEM) (GO TO L25)
3. REFUSED (GO TO L31B)

L24. INTERVIEWER: ENTER SECOND BLOOD PRESSURE AND PULSE READING.

SYSTOLIC _____
DIASTOLIC _____
PULSE _____

L24A. INTERVIEWER: RE-ENTER SECOND BLOOD PRESSURE AND PULSE READING.

SYSTOLIC _____
DIASTOLIC _____
PULSE _____

L25. INTERVIEWER: WAIT AT LEAST 30 SECONDS SINCE LAST INFLATION OF CUFF. PERFORM THIRD BLOOD PRESSURE READING AND INDICATE OUTCOME.

1. READING OBTAINED
2. MISSED READING (EQUIPMENT FAILURE, INTERRUPTION, OTHER PROBLEM) (GO TO L27)
3. REFUSED (GO TO L31B)

L26. INTERVIEWER: ENTER THIRD BLOOD PRESSURE AND PULSE READING.

SYSTOLIC _____
DIASTOLIC _____
PULSE _____

L26A. INTERVIEWER: RE-ENTER THIRD BLOOD PRESSURE AND PULSE READING.

SYSTOLIC _____
DIASTOLIC _____
PULSE _____

L27. CAPI: HAVE THREE BLOOD PRESSURE READINGS BEEN SUCCESSFULLY OBTAINED?

1. YES (GO TO L31B)
5. NO

L28. INTERVIEWER: WAIT AT LEAST 30 SECONDS SINCE LAST INFLATION OF CUFF. PERFORM FOURTH BLOOD PRESSURE READING AND INDICATE OUTCOME.

1. READING OBTAINED
2. MISSED READING (EQUIPMENT FAILURE, INTERRUPTION, OTHER PROBLEM) (GO TO L29)
3. REFUSED (GO TO L31B)

L28A. INTERVIEWER: ENTER FOURTH BLOOD PRESSURE AND PULSE READING.

SYSTOLIC _____
DIASTOLIC _____
PULSE _____

L28B. INTERVIEWER: RE-ENTER FOURTH BLOOD PRESSURE AND PULSE READING.

SYSTOLIC _____
DIASTOLIC _____
PULSE _____

L29. CAPI: HAVE THREE BLOOD PRESSURE READINGS BEEN SUCCESSFULLY OBTAINED?

1. YES (GO TO L31B)
2. NO

L30. INTERVIEWER: WAIT AT LEAST 30 SECONDS SINCE LAST INFLATION OF CUFF. PERFORM FIFTH BLOOD PRESSURE READING AND INDICATE OUTCOME.

1. READING OBTAINED
2. MISSED READING (EQUIPMENT FAILURE, INTERRUPTION, OTHER PROBLEM) (GO TO L31B)
3. REFUSED (GO TO L31B)

L31. INTERVIEWER: ENTER FIFTH BLOOD PRESSURE AND PULSE READING.

SYSTOLIC _____
DIASTOLIC _____
PULSE _____

L31A. INTERVIEWER: RE-ENTER FIFTH BLOOD PRESSURE AND PULSE READING.

SYSTOLIC _____
DIASTOLIC _____
PULSE _____

L31B. CAPI: CHECK WHETHER AT LEAST ONE BLOOD PRESSURE READING OBTAINED.

1. YES (GO TO L32A)
5. NO

L31C. INTERVIEWER: REASON NO BLOOD PRESSURE MEASUREMENTS OBTAINED? MARK ALL THAT APPLY:

1. CHILD UNABLE TO HOLD STILL OR TOO AGITATED TO MEASURE
2. PARENT REFUSES TO HAVE CHILD MEASURED
3. CHILD REFUSES TO BE MEASURED
4. WITHERED ARMS, INJURY, RECENT SURGERY, DRESSING, RASH (ON BOTH ARMS)
6. FIVE FAILED ATTEMPTS TO INFLATE CUFF
7. NO APPROPRIATE SETTING FOR MEASUREMENT
8. EQUIPMENT FAILURE
5. OTHER, SPECIFY: _____

GO TO L44

L32A. CAPI: CHECK WHETHER ANY "MISSED" READINGS (RESPONSE="2") IN L21, L23, L25, L28, & L30.

1. YES
5. NO (GO TO L32C)

L32B. INTERVIEWER: INDICATE REASONS FOR MISSED READINGS. MARK ALL THAT APPLY:

1. CHILD UNABLE TO HOLD STILL OR TOO AGITATED TO MEASURE
2. INTERRUPTION
3. EQUIPMENT FAILURE
4. OTHER, SPECIFY: _____

L32C. CAPI: CHECK WHETHER ANY "REFUSED" READINGS (RESPONSE="3") IN L21, L23, L25, L28, & L30.

1. YES
5. NO (GO TO L32E)

L32D. INTERVIEWER: INDICATE REASONS FOR REFUSAL OF BLOOD PRESSURE READINGS. MARK ALL THAT APPLY:

1. CHILD UNABLE TO HOLD STILL OR TOO AGITATED TO MEASURE

2. PARENT REFUSES TO HAVE CHILD MEASURED
3. CHILD REFUSES TO BE MEASURED
4. OTHER, SPECIFY: _____

L32E. INTERVIEWER: NOTE ANY OBSERVABLE PHYSICAL CHARACTERISTICS OF CHILD THAT AFFECTED BLOOD PRESSURE MEASUREMENT.

L32F. INTERVIEWER: DESCRIBE ANY DEVIATIONS FROM THE PROTOCOL OR OTHER PROBLEMS MEASURING CHILD'S BLOOD PRESSURE.

_____ (GO TO L44)

CHILD'S HEIGHT MEASUREMENT

L44. Now I'm going to measure your height. I would like you to stand with your back against a wall and I will use a triangle and a measuring tape to see how tall you are.

INTERVIEWER: FIND A SECTION OF BLANK, FLAT WALL AGAINST WHICH THE CHILD CAN STAND. THE CHILD SHOULD NOT STAND ON RUGS OR CARPETING. BE SURE TO HAVE ADEQUATE LIGHTING OR HAVE A FLASHLIGHT HANDY.

ASK THE PARENT OR CHILD TO REMOVE CHILD'S SHOES, HAT, HAIR ORNAMENTS, AND ANY HEAVY OUTER GARMENTS. WITH PARENT'S HELP, IF NECESSARY, POSITION CHILD WITH HIS / HER BACK AGAINST THE WALL. SOME COMBINATION OF THE HEAD, SHOULDERS, BUTTOCKS, AND HEELS WILL TOUCH THE WALL DEPENDING ON THE CHILD'S AGE. MAKE SURE CHILD'S LINE OF SIGHT (FRANKFORT PLANE) IS LEVEL WITH THE GROUND. PLACE A 'POST-IT' NOTE ON THE WALL AT THE TOP OF THE CHILD'S HEAD APPROXIMATELY WHERE YOU WILL BE MARKING THE HEIGHT. ASK CHILD TO STAND TALL AND TAKE A DEEP BREATH.

PLACE THE CARPENTER'S SQUARE SO THAT THE TWO SIDES THAT FORM THE RIGHT ANGLE ARE FLAT: (1) ALONG THE WALL AND (2) RESTING ON TOP OF THE HEAD. MARK THE CHILD'S HEIGHT ON THE 'POST-IT' NOTE AND LET THE CHILD STEP AWAY.

MEASURE THE CHILD'S HEIGHT TO THE NEAREST MILLIMETER.

L45. INTERVIEWER: SUCCESSFULLY ABLE TO MEASURE CHILD'S HEIGHT?

1. YES (GO TO L47)
2. NO

L46. INTERVIEWER: SELECT ALL REASONS WHY UNABLE TO MEASURE CHILD'S HEIGHT. MARK ALL THAT APPLY.

1. CHILD REFUSES TO BE MEASURED
2. CHILD UNABLE TO HOLD STILL OR TOO AGITATED TO MEASURE
3. PARENT REFUSES TO HAVE CHILD MEASURED
4. PARENT OR OTHER ADULT UNABLE OR REFUSES TO ASSIST WITH MEASUREMENT
5. UNSUITABLE SURFACE FOR SETTING UP THE MEASURING BOARD
6. UNABLE TO POSITION CHILD ACCORDING TO PROTOCOL
7. EQUIPMENT FAILURE
8. OTHER, SPECIFY: _____

GO TO L33C

L47. INTERVIEWER: ENTER CHILD'S HEIGHT IN MILLIMETERS.

___ MM

L47A. INTERVIEWER: RE-ENTER CHILD'S HEIGHT IN MILLIMETERS.

___ ___ ___ MM

L48. INTERVIEWER: IS AN ADJUSTMENT TO THE RECORDED HEIGHT NECESSARY DUE TO CHILD'S HAIR OR SHOES?

- 1. YES
- 5. NO (GO TO L50)

L49. INTERVIEWER: USE THE MEASURING TAPE TO MEASURE THE HEIGHT OF THE CHILD'S HAIR AND / OR SHOES.

ENTER THE HEIGHT OF THE CHILD'S HAIR AND / OR SHOES IN MILLIMETERS.

___ ___ ___ MM ABOVE THE HEAD ADJUSTMENTS (SUCH AS FOR HAIR)
 ___ ___ ___ MM BELOW THE FEET ADJUSTMENTS (SUCH AS FOR SHOES)

L49A. INTERVIEWER: RE-ENTER THE HEIGHT OF THE CHILD'S HAIR AND / OR SHOES IN MILLIMETERS.

___ ___ ___ MM ABOVE THE HEAD ADJUSTMENTS (SUCH AS FOR HAIR)
 ___ ___ ___ MM BELOW THE FEET ADJUSTMENTS (SUCH AS FOR SHOES)

L49B. CAPI: CALCULATE CHILD'S ADJUSTED HEIGHT AND CHECK THAT ADJUSTED HEIGHT IS WITHIN THE APPROPRIATE RANGE SPECIFIED IN THE "HEIGHT" TABLE AT THE END OF THE DOCUMENT. IF OUTSIDE OF THE APPROPRIATE RANGE, USE A SOFT-CHECK TO INFORM THE INTERVIEWER AND HAVE THEM DOUBLE-CHECK THEIR ENTRY OF CHILD'S HEIGHT AS WELL AS THEIR ABOVE-HEAD AND BELOW-FEET ADJUSTMENTS.

L50. INTERVIEWER: NOTE ANY OBSERVABLE PHYSICAL CHARACTERISTICS OF CHILD THAT AFFECTED CHILD HEIGHT MEASUREMENT.

L51. INTERVIEWER: DESCRIBE ANY DEVIATIONS FROM THE PROTOCOL OR PROBLEMS WITH OBTAINING CHILD HEIGHT MEASUREMENT.

_____ (GO TO L33C)

ASSESSMENT OF CHILD'S BLOOD PRESSURE

L33C. CAPI: ONE OR MORE BLOOD PRESSURE READINGS OBTAINED (I.E., L31B=1)? IF NOT, GO TO L60.

USE THE FOLLOWING VALUES OF THE SYSTOLIC BLOOD PRESSURE (SBP) AND DIASTOLIC BLOOD PRESSURE (DBP) READINGS TO DETERMINE WHETHER THE CHILD'S BLOOD PRESSURE READING IS VERY HIGH.

IF **THREE** BLOOD PRESSURE READINGS WERE OBTAINED, USE THE SECOND AND THIRD MEASUREMENTS TO CALCULATE AVERAGES FOR SBP AND DBP.

$$\text{SBP AVERAGE} = (\text{SECOND SBP READING} + \text{THIRD SBP READING}) / 2$$

$$\text{DBP AVERAGE} = (\text{SECOND DBP READING} + \text{THIRD DBP READING}) / 2$$

IF **TWO** BLOOD PRESSURE READINGS WERE OBTAINED, USE THE VALUES OF SBP AND DBP FROM THE **SECOND** MEASUREMENT AS THE SBP AVERAGE AND DBP AVERAGE.

IF **ONE** BLOOD PRESSURE READING WAS OBTAINED, USE THOSE VALUES OF SBP AND DBP AS THE SBP AVERAGE AND THE DBP AVERAGE.

1. AVERAGE SBP (ASBP): ___ ___ ___

2. AVERAGE DBP (ADBP): ___ ___ ___

L33D. CAPI: OBTAIN CUT-OFF VALUE FOR VERY HIGH SBP AND VERY HIGH DBP FROM LOOK-UP TABLE BASED ON THE CHILD'S AGE, SEX, AND HEIGHT:

1. VERY HIGH SBP (VHSBP): ___ ___ ___

2. VERY HIGH DBP (VHDBP): ___ ___ ___

L33E. CAPI: DETERMINE WHETHER CHILD'S BLOOD PRESSURE READINGS ARE VERY HIGH BASED ON CHILD'S AVERAGE SBP (ASBP) AND AVERAGE DBP (ADBP) FROM L33C AND CUT-OFFS FOR VERY HIGH SBP (VHSBP) AND VERY HIGH DBP VALUES (VHDBP) FROM L33D.

1. ASBP \geq VHSBP

2. ADBP \geq VHDBP

3. ASBP < VHSBP **AND** ADBP < VHDBP (GO TO L60)

L33F. TYPE OF BLOOD PRESSURE MEASUREMENT: [AVERAGE OF 2nd AND 3rd READING / SINGLE MEASUREMENT]

THE CHILD'S BLOOD PRESSURE READING IS VERY HIGH. FOLLOW THESE STEPS:

1. STOP THE HEALTH MEASURES COLLECTION. DO NOT PERFORM ANY ADDITIONAL HEALTH MEASURES.
2. REMAIN CALM. DO NOT ALARM THE PARENT OR CHILD. TELL THE PARENT THAT THE BLOOD PRESSURE READING IS VERY HIGH.
3. COMPLETE THE REPORT OF VERY HIGH BLOOD PRESSURE FORM. READ IT ALOUD TO THE PARENT. BOTH YOU AND THE PARENT MUST SIGN THE FORM. GIVE ONE COPY TO THE PARENT.
4. IF THE CHILD DOES NOT HAVE A USUAL SOURCE OF HEALTH CARE, SHOW THE REFERRAL INFORMATION SHEET, WHICH IS IN THE PACKET OF INFORMATION YOU PROVIDED. REVIEW THE SHEET WITH THE PARENT TO HELP HIM / HER FIND THE NEAREST (A) PLACE TO GET MEDICAL CARE, (B) EMERGENCY ROOM, OR (C) URGENT CARE CLINIC. HELP THE PARENT FIGURE OUT HOW TO GET THERE.

IF THE PARENT DECIDES TO CALL 911, REMAIN WITH THE CHILD AND PARENT UNTIL MEDICAL PERSONNEL ARRIVE. DURING THAT TIME PROMOTE A CALM AND QUIET ENVIRONMENT.

INTERVIEWER: YOU MUST NOT DRIVE THE PARENT OR CHILD ANYWHERE.

YOU MUST CALL THE PARENT THE NEXT DAY TO SEE IF ANY ACTION WAS TAKEN. IF NO ACTION TAKEN, YOU SHOULD ENCOURAGE THE PARENT TO DO SO.

GO TO L93A

CHILD'S WEIGHT MEASUREMENT

L60. Now I'm going to measure [CHILD]'s weight.

INTERVIEWER: PUT SCALE ON HARD, FLAT SURFACE. SET THE SCALE TO ZERO.

ASK PARENT OR CHILD TO REMOVE CHILD'S SHOES AND ANY HEAVY OUTER GARMENTS (COAT, JACKET, SWEATER, ETC.) AND BLANKETS. ASK PARENT OR CHILD TO REMOVE ANY ITEMS FROM CHILD'S HANDS AND POCKETS. ASK CHILD TO STEP ON SCALE.

OBTAIN WEIGHT OF CHILD IN KILOGRAMS.

L61. INTERVIEWER: SUCCESSFULLY ABLE TO MEASURE CHILD'S WEIGHT?

1. YES

5. NO (GO TO L62)

L61A. INTERVIEWER: ENTER WEIGHT OF CHILD IN KILOGRAMS.

___ . ___ KG

L61B. INTERVIEWER: RE-ENTER WEIGHT OF CHILD IN KILOGRAMS.

___ . ___ KG (GO TO L63)

L62. INTERVIEWER: SELECT ALL REASONS WHY UNABLE TO MEASURE CHILD'S WEIGHT. MARK ALL THAT APPLY:

1. CHILD REFUSES TO BE WEIGHED
2. CHILD UNABLE TO HOLD STILL OR TOO AGITATED TO WEIGH
3. PARENT REFUSES TO HAVE CHILD WEIGHED
4. UNSUITABLE SURFACE FOR SETTING UP THE SCALE
5. SCALE INSUFFICIENT FOR CHILD WEIGHT
6. EQUIPMENT FAILURE
7. OTHER, SPECIFY: _____

GO TO L65

L63. INTERVIEWER: NOTE ANY OBSERVABLE PHYSICAL CHARACTERISTICS OF CHILD THAT AFFECTED WEIGHT MEASUREMENT. MARK ALL THAT APPLY:

0. NONE
1. CHILD WEARING SHOES
2. CHILD WEARING HEAVY CLOTHING
3. CHILD HAD ITEMS IN HANDS OR IN POCKETS
4. OTHER, SPECIFY: _____

L64. INTERVIEWER: DESCRIBE ANY DEVIATIONS FROM THE PROTOCOL OR PROBLEMS WITH OBTAINING WEIGHT MEASUREMENT.

SPIROMETRY MEASUREMENT

L65. CAPI: VERIFY CHILD'S AGE

1. LESS THAN 5 YEARS OLD (GO TO L86)
2. 5 YEARS OF AGE OR OLDER

L65A. CAPI: AGE AND SEX OF CHILD.

1. FEMALE, 12 YEARS OF AGE OR OLDER
2. FEMALE LESS THAN 12 YEARS OF AGE (GO TO L66)
3. MALE (GO TO L66)

L65B. INTERVIEWER: IS CHILD IS VISIBLY PREGNANT?

1. YES
5. NO (GO TO L66)

L65C. Are you in the third trimester of your pregnancy? That is, are you at least 7 months pregnant?

1. YES (GO TO L86)
5. NO

L66. Before beginning the next procedure, I have a few questions. Has [CHILD] had any surgery on [his / her] chest or abdomen in the past three weeks?

- 1. YES (GO TO L86)
- 5. NO

L67. Has [CHILD] been hospitalized for a heart problem in the past 6 weeks?

- 1. YES (GO TO L86)
- 5. NO

L68. Now I'm going to measure your lung function by having you blow into this meter. First, I will explain the procedure.

This is called a spirometer. It measures how quickly you can blow out. You do this by taking a deep breath and then blowing out through the device as hard and as fast as possible until you have no more breath left.

Before we begin, you should loosen any tight clothing. You should stand comfortably with your feet flat on the floor, back straight, and with a non-rolling chair or firm surface behind you. You should first put this clip on your nose and then take a deep breath of air as far as you can breathe in.

Without pausing, you should put the mouthpiece in your mouth and seal your lips tightly around it, with your chin slightly lifted and your neck stretched. Put the mouthpiece between your teeth and seal your mouth around the tube, not allowing any air to leak out the sides.

Then, you should blast out the air as hard and fast as you can! You should keep on blowing out the same breath of air until I say "stop."

L69. I have a few more questions before we get started. Is [CHILD] using any respiratory medications such as bronchodilators (inhaler or puffer) or steroids?

- 1. YES
- 5. NO (GO TO L71)

L70. Has [CHILD] used an inhaler or puffer in the last hour?

- 1. YES (INTERVIEWER: IF POSSIBLE, DELAY SPIROMETRY UNTIL ONE HOUR AFTER THE LAST INHALER USE)
- 5. NO

L71. Has [CHILD] eaten a heavy meal in the last hour?

- 1. YES (INTERVIEWER: IF POSSIBLE, DELAY SPIROMETRY UNTIL ONE HOUR AFTER THE LAST HEAVY MEAL)
- 5. NO

L72. Has [CHILD] had a cough, cold, or other illness in the past few days?

- 1. YES
- 5. NO

L73. Has [CHILD] had a respiratory infection (such as the flu, pneumonia, bronchitis, or a severe cold) in the past 3 weeks?

- 1. YES
- 5. NO

L74. Is [CHILD] currently being treated for tuberculosis?

1. YES
5. NO

L75. Let me now demonstrate how the breathing measurement is done using my own mouthpiece and then I'll give you a new one.

INTERVIEWER: DEMONSTRATE HOW TO USE THE MOUTHPIECE. USE YOUR OWN MOUTHPIECE, STAND STRAIGHT WITH A FIRM SURFACE BEHIND YOU, TAKE A DEEP BREATH, BLAST IT OUT, AND DO NOT LEAN.

INTERVIEWER: ALLOW CHILD TO WALK THROUGH THE PROCEDURE. OPEN A NEW MOUTHPIECE AND HAVE THE CHILD GET COMFORTABLE WITH PUTTING HIS / HER MOUTH AROUND IT. HAVE THE CHILD HOLD THE SPIROMETER (WITHOUT THE MOUTHPIECE IN IT).

L76. (INTERVIEWER: IF YOU ARE USING THE SPIROMETER FOR THE FIRST TIME TODAY, MAKE SURE TO CHECK SETTINGS AS SPECIFIED IN THE PROTOCOL.)

ENTER THE FOLLOWING INTO THE SPIROMETER:

- THE CHILD'S CASE ID NUMBER
- THE CHILD'S DATE OF BIRTH
- THE CHILD'S HEIGHT (ENTER "150" FOR ALL RESPONDENTS)

FOR ALL OTHER ITEMS, SELECT THE DEFAULT VALUES.

REVIEW THE INFORMATION YOU HAVE ENTERED TO MAKE SURE THERE ARE NO MISTAKES.

Now please stand up and, whenever you are ready, take as deep a breath as you can until it feels like you cannot get any more air into your lungs. Place your mouth around the mouthpiece with your lips tightly sealed, and then breathe out as hard, as fast, and as long as you can. I want you to make the air "BLAST" out of your lungs. Keep breathing out until I tell you to stop.

L77. INTERVIEWER: PERFORM FIRST SPIROMETERY MEASUREMENT AND MARK THE RESULT

1. SPIROMETER SAYS "DON'T HESITATE"
2. SPIROMETER SAYS "BLAST OUT FASTER"
3. SPIROMETER SAYS "BLOW OUT LONGER"
4. SPIROMETER SAYS "WAIT UNTIL BUZZ BEFORE BLOWING OUT"
5. SPIROMETER SAYS "GOOD EFFORT, DO NEXT"
6. SPIROMETER SAYS "DEEPER BREATH"
9. CHILD OR PARENT REFUSED (GO TO L83B)

L78. WAIT 1 MINUTE BEFORE NEXT MEASUREMENT.

Now for the next one. Remember, take as deep a breath as you can, place your mouth around the mouthpiece, seal your lips around it, and then breathe out as hard, as fast, and as long as you can. Make the air "BLAST" out of your lungs. Keep breathing out until I tell you to stop.

INTERVIEWER: PERFORM SECOND SPIROMETERY MEASUREMENT AND MARK THE RESULT.

1. SPIROMETER SAYS "DON'T HESITATE"
2. SPIROMETER SAYS "BLAST OUT FASTER"
3. SPIROMETER SAYS "BLOW OUT LONGER"
4. SPIROMETER SAYS "WAIT UNTIL BUZZ BEFORE BLOWING OUT"
5. SPIROMETER SAYS "GOOD EFFORT, DO NEXT"
6. SPIROMETER SAYS "DEEPER BREATH"
9. CHILD OR PARENT REFUSED (GO TO L83B)

L79. WAIT 1 MINUTE BEFORE NEXT MEASUREMENT. INTERVIEWER: PERFORM THIRD SPIROMETERY MEASUREMENT AND MARK THE RESULT.

1. SPIROMETER SAYS "DON'T HESITATE"
2. SPIROMETER SAYS "BLAST OUT FASTER"
3. SPIROMETER SAYS "BLOW OUT LONGER"
4. SPIROMETER SAYS "WAIT UNTIL BUZZ BEFORE BLOWING OUT"
5. SPIROMETER SAYS "GOOD EFFORT, DO NEXT"
6. SPIROMETER SAYS "DEEPER BREATH"
7. SPIROMETER SAYS "SESSION COMPLETE" (GO TO L84)
9. CHILD OR PARENT REFUSED (GO TO L83B)

L80. WAIT 1 MINUTE BEFORE NEXT MEASUREMENT. INTERVIEWER: PERFORM FOURTH SPIROMETERY MEASUREMENT AND MARK THE RESULT.

1. SPIROMETER SAYS "DON'T HESITATE"
2. SPIROMETER SAYS "BLAST OUT FASTER"
3. SPIROMETER SAYS "BLOW OUT LONGER"
4. SPIROMETER SAYS "WAIT UNTIL BUZZ BEFORE BLOWING OUT"
5. SPIROMETER SAYS "GOOD EFFORT, DO NEXT"
6. SPIROMETER SAYS "DEEPER BREATH"
7. SPIROMETER SAYS "SESSION COMPLETE" (GO TO L84)
9. CHILD OR PARENT REFUSED (GO TO L83B)

L81. WAIT 1 MINUTE BEFORE NEXT MEASUREMENT. INTERVIEWER: PERFORM FIFTH SPIROMETERY MEASUREMENT AND MARK THE RESULT.

1. SPIROMETER SAYS "DON'T HESITATE"
2. SPIROMETER SAYS "BLAST OUT FASTER"
3. SPIROMETER SAYS "BLOW OUT LONGER"
4. SPIROMETER SAYS "WAIT UNTIL BUZZ BEFORE BLOWING OUT"
5. SPIROMETER SAYS "GOOD EFFORT, DO NEXT"
6. SPIROMETER SAYS "DEEPER BREATH"
7. SPIROMETER SAYS "SESSION COMPLETE" (GO TO L84)
9. CHILD OR PARENT REFUSED (GO TO L83B)

L82. WAIT 1 MINUTE BEFORE NEXT MEASUREMENT. INTERVIEWER: PERFORM SIXTH SPIROMETERY MEASUREMENT AND MARK THE RESULT.

1. SPIROMETER SAYS "DON'T HESITATE"
2. SPIROMETER SAYS "BLAST OUT FASTER"
3. SPIROMETER SAYS "BLOW OUT LONGER"
4. SPIROMETER SAYS "WAIT UNTIL BUZZ BEFORE BLOWING OUT"
5. SPIROMETER SAYS "GOOD EFFORT, DO NEXT"
6. SPIROMETER SAYS "DEEPER BREATH"
7. SPIROMETER SAYS "SESSION COMPLETE" (GO TO L84)
9. CHILD OR PARENT REFUSED (GO TO L83B)

L83. WAIT 1 MINUTE BEFORE NEXT MEASUREMENT. INTERVIEWER: PERFORM SEVENTH SPIROMETERY MEASUREMENT AND MARK THE RESULT.

1. SPIROMETER SAYS "DON'T HESITATE"
2. SPIROMETER SAYS "BLAST OUT FASTER"
3. SPIROMETER SAYS "BLOW OUT LONGER"
4. SPIROMETER SAYS "WAIT UNTIL BUZZ BEFORE BLOWING OUT"
5. SPIROMETER SAYS "GOOD EFFORT, DO NEXT"
6. SPIROMETER SAYS "DEEPER BREATH"
7. SPIROMETER SAYS "SESSION COMPLETE" (GO TO L84)
9. CHILD OR PARENT REFUSED (GO TO L83B)

L83A. WAIT 1 MINUTE BEFORE NEXT MEASUREMENT. INTERVIEWER: PERFORM EIGHTH SPIROMETERY MEASUREMENT AND MARK THE RESULT.

1. SPIROMETER SAYS "DON'T HESITATE"
2. SPIROMETER SAYS "BLAST OUT FASTER"
3. SPIROMETER SAYS "BLOW OUT LONGER"
4. SPIROMETER SAYS "WAIT UNTIL BUZZ BEFORE BLOWING OUT"
5. SPIROMETER SAYS "GOOD EFFORT, DO NEXT"
6. SPIROMETER SAYS "DEEPER BREATH"
7. SPIROMETER SAYS "SESSION COMPLETE" (GO TO L84)
9. CHILD OR PARENT REFUSED (GO TO L83B)

L83B. INTERVIEWER: INDICATE REASON FOR MEASUREMENT INCOMPLETE, UNSATISFACTORY, OR NOT DONE. MARK ALL THAT APPLY:

1. CHILD UNABLE / UNWILLING TO UNDERSTAND OR FOLLOW TEST INSTRUCTIONS
2. PARENT REFUSES TO HAVE CHILD PERFORM SPIROMETRY
3. CHILD REFUSED TO PERFORM SPIROMETRY
4. EQUIPMENT FAILURE
5. COUGHS DETECTED
6. EARLY TERMINATION OF EXPIRATION, INSUFFICIENT EFFORT
7. ACUTE ILLNESS (FLU, PNEUMONIA, ETC.)
8. COPD (SEVERE BRONCHITIS, EMPHYSEMA, ASTHMA)
9. ATE HEAVY MEAL
10. INSUFFICIENT TIME AVAILABLE
11. NO APPROPRIATE SETTING FOR CONDUCTING SPIROMETRY
12. CHILD MEDICALLY EXCLUDED FOR SAFETY
13. OTHER, SPECIFY: _____

GO TO L86

L84. INTERVIEWER: NOTE ANY OBSERVABLE PHYSICAL CHARACTERISTICS OF CHILD THAT AFFECTED SPIROMETRY.

L85. INTERVIEWER: DESCRIBE ANY DEVIATIONS FROM THE PROTOCOL OR PROBLEMS PERFORMING SPIROMETRY.

TURN THE SPIROMETER OFF.

SALIVA COLLECTION GUIDELINES

L86. CAPI: CHECK CHILD'S AGE.

1. CHILD IS LESS THAN 3 YEARS OLD (GO TO L93A)
3. CHILD IS AGE 3 OR OLDER (GO TO L87)

L87. Now I will explain the procedure for collection [CHILD]'s saliva.

We would like you to collect saliva at three different times during the same day. We would like you to do this tomorrow. If this isn't possible or convenient, then you can wait until the first day when you can do all three collections on the same day.

The first collection time is as soon as [CHILD] wakes up. The second collection time is 30 minutes after you start the first one. The third collection time is at [CHILD'S] bedtime.

I am going to give you a kit with all the supplies you need to collect the saliva. The kit has [CHILD]'s name on it and includes three collection tubes. Each collection tube is labeled and contains two sponge pops like this

[INTERVIEWER: SHOW SPONGE POP]. The sponge pop will soak up saliva in the mouth. It is a thin triangular-shaped sponge fixed to the end of a stick, like a small lollipop. Two of these sponge pops should be saturated with [CHILD]'s saliva at each collection time.

I'm going to leave you information that describes the entire process in greater detail. It will explain how to write the collection time on labels, how to store samples in the refrigerator, and how to mail the saliva samples. I will also give you a phone number to call if you have any questions after I leave.

Let me review the written instructions and the Quick Reference Guide with you now. Please feel free to ask me any questions you have at any point.

L88. REVIEW THE SALIVA COLLECTION INFORMATION SHEET WITH THE PARENT.

INTERVIEWER: DID THE PARENT AGREE TO COLLECT CHILD'S SALIVA SAMPLES?

1. YES (GO TO L88A)
5. NO (GO TO L89)

L88A. INTERVIEWER: ENTER BARCODE NUMBER.

RE-ENTER BARCODE NUMBER.

L88B. INTERVIEWER: ENTER FEDERAL EXPRESS TRACKING NUMBER.
_____ (GO TO L90)

L89. INTERVIEWER: LIST ALL REASONS WHY PARENT REFUSED TO COLLECT CHILD'S SALIVA SAMPLES
_____ (GO TO L93A)

CHILD'S HEALTH STATUS AS OBSERVED BY INTERVIEWER

L93A. INTERVIEWER: BASED ON YOUR OBSERVATION OF THIS CHILD, HOW DOES [HIS / HER] HEALTH COMPARE, IN GENERAL, TO THE HEALTH STATUS OF OTHER CHILDREN OF THE SAME AGE AND SEX?

RECORD YOUR OWN OPINION BASED ON YOUR OBSERVATION

MARK SCORE ON THE FOLLOWING SCALE:

1. MUCH WORSE
- 2.
3. WORSE
- 4.
5. ABOUT THE SAME
- 6.
7. BETTER
- 8.
9. MUCH BETTER

DRIED BLOOD SPOT COLLECTION VISIT

L94. CAPI: SEE L8A TO DETERMINE IF CHILD OR PARENT OPTED-OUT OF THE DBS COLLECTION OR IS INELIGIBLE BASED ON CHILD'S AGE.

1. CHILD / PARENT OPTED-OUT OF DBS COLLECTION (GO TO L102)
2. CHILD / PARENT DID NOT OPT-OUT

INDICATE TYPE:

1. HOME
2. WORK
3. CELL PHONE

L96A. And what would be the best time to reach you at this number?

ENTER BEST TIME TO CALL THIS NUMBER: _____

L97. Is there another telephone number where you can be reached if needed?

1. YES
2. NO (GO TO L98)

L97A. What is the second telephone number?

ENTER SECOND TELEPHONE NUMBER: _____ - _____ - _____

INDICATE TYPE:

1. HOME
2. WORK
3. CELL PHONE

L97B. And what would be the best time to reach you at that number?

ENTER BEST TIME TO CALL THIS NUMBER: _____

L98. To arrange for a health technician to contact you I need to make a toll-free call.

INTERVIEWER: CALL 888-777-3674. BETWEEN 5 A.M. AND 5 P.M., MONDAY-FRIDAY, AN OPERATOR WILL ANSWER. AT ALL OTHER TIMES YOU WILL GET AN ANSWERING MACHINE. ASK TO USE THE RESPONDENT'S PHONE; OTHERWISE, USE YOUR CELL PHONE.

L99. TELL EMSI OPERATOR YOU ARE CALLING FROM L.A.FANS. PROVIDE FOLLOWING INFORMATION TO EMSI OPERATOR.

PARTICIPANT CASE ID: [CASEID]
CHILD FIRST AND LAST NAME: [CHILD FULL NAME]
CHILD'S DATE OF BIRTH: [CHILD DOB]
PARENT NAME: [PARENT'S NAME]
ADDRESS AND NEAREST CROSS-STREETS: [ADDRESS]
BEST TELEPHONE NUMBER AND TYPE: [BEST PHONE #, TYPE]
BEST TIME TO CALL THIS NUMBER: [L96A ANSWER]
SECOND TELEPHONE NUMBER AND TYPE: [SECOND PHONE #, TYPE]
BEST TIME TO CALL THIS NUMBER: [L97A1 ANSWER]
PREFERRED APPOINTMENT TIME: [L94E1 ANSWER]
IF A SPANISH SPEAKING EXAMINER IS REQUIRED

INTERVIEWER: REMEMBER TO ASK EMSI OPERATOR FOR THEIR NAME, AND TO RECORD THIS IN THE ROC ALONG WITH THE TIME THE CALL WAS PLACED TO EMSI. IF YOU ARE SCHEDULED TO RETURN TO THE HOME, ASK THE EMSI OPERATOR TO SCHEDULE A HEALTH TECHNICIAN TO COME AT THE SAME TIME YOU WILL BE THERE.

L100. The health technician who will be making the visit will soon contact you to schedule an appointment. If your home is hard to find, this would be a good time to let the health technician know how to easily find your home.

L101. INTERVIEWER: INDICATE THE STATUS OF THE BLOOD COLLECTION

1. R AGREEABLE – CALL PLACED TO EMSI
2. R AGREEABLE – NO CALL PLACED TO EMSI (NO PHONE / UNABLE TO REACH EMSI)
3. MILD RESISTANCE TO FINGER STICK (GOOD POSSIBILITY FOR CONVERSION)
4. FIRM REFUSAL TO FINGER STICK
5. R DECLINES FINGER STICK DUE TO MEDICAL CONDITION

L102. That concludes our activities for today. Thank you for participating in the health measures study (IF APPLICABLE: and agreeing to have the health technician return to collect a blood sample).

PART II. ADULT HEALTH MEASURES MODULE

INTRODUCTION

P1. Now that you've completed the interview portion of L.A.FANS, I would like your permission to collect some health measurements. This requires a separate consent form, so let me take a few moments to describe what is involved.

If you agree, today I will check your blood pressure and measure your height, weight, and the circumference of your waist and hips. I can measure your waist and hips for you or, if you prefer, I can show you how to do it yourself. I will also give you a simple breathing test.

FOR RESPONDENTS SELECTED FOR DBS: We will then schedule a trained health technician to come to your home at a time that is convenient for you. The technician will take a small sample of blood by pricking your finger.

In 4–6 weeks, you will get a letter giving you the results of the health measures and information on what they may mean.

Let's review the *Health Measures Informed Consent Form* together. Please feel free to ask me any questions you have at any point.

FOR RESPONDENTS SELECTED FOR DBS: GIVE RESPONDENT **FORM T**.

This sheet describes the Los Angeles Family and Neighborhood Survey Wave 2 (L.A.FANS-2) health measures and asks you to participate. Please carefully read the information below and ask any questions you have. Participation in the study is completely voluntary. Your participation is very important to the study because no one else in the community is exactly like you and we cannot use anyone else in your place.

By signing the attached consent form you are agreeing to participate in the L.A.FANS-2 health measures. It will take about 30 to 45 minutes to collect the health measures. If you agree to participate, you can change your mind and stop at any time.

INTERVIEWER: IF RESPONDENT AGREES TO ALL HEALTH MEASURES GIVE RESPONDENT **FORM V** TO SIGN. GIVE RESPONDENT ONE COPY OF THE FORM, AND KEEP ONE COPY FOR YOURSELF.

IF RESPONDENT ONLY AGREES TO SOME OF THE HEALTH MEASURES GIVE RESPONDENT **FORM X** TO SIGN. GIVE RESPONDENT ONE COPY OF THE FORM, AND KEEP ONE COPY FOR YOURSELF.

FOR RESPONDENTS NOT SELECTED FOR DBS: GIVE RESPONDENT **FORM U**.

This sheet describes the Los Angeles Family and Neighborhood Survey Wave 2 (L.A.FANS-2) health measures and asks you to participate. Please carefully read the information below and ask any questions you have. Participation in the study is completely voluntary. Your participation is very important to the study because no one else in the community is exactly like you and we cannot use anyone else in your place.

By signing the attached consent form you are agreeing to participate in the L.A.FANS-2 health measures. It will take about 30 to 45 minutes to collect the health measures. If you agree to participate, you can change your mind and stop at any time.

INTERVIEWER: GIVE RESPONDENT **FORM W** TO SIGN. GIVE RESPONDENT ONE COPY OF THE FORM, AND KEEP ONE COPY FOR YOURSELF.

IF RESPONDENT ONLY AGREES TO SOME OF THE HEALTH MEASURES GIVE RESPONDENT **FORM Y** TO SIGN. GIVE RESPONDENT ONE COPY OF THE FORM, AND KEEP ONE COPY FOR YOURSELF.

P2. INTERVIEWER: REVIEW HEALTH MEASURES INFORMED CONSENT FORM WITH RESPONDENT. DID RESPONDENT SIGN HEALTH MEASURES INFORMED CONSENT FORM AGREEING TO PARTICIPATE IN HEALTH MEASURES? MARK ONE:

1. YES, AGREED TO ALL HEALTH MEASURES (GO TO P3)
2. YES, AGREED TO SOME HEALTH MEASURES (GO TO P2A)
5. NO (GO TO P79)

P2A. INTERVIEWER: INDICATE HEALTH MEASURES RESPONDENT DECLINED ON OPT-OUT CONSENT FORM. MARK ALL THAT APPLY:

1. BLOOD PRESSURE (SKIP P3–P31)
2. HEIGHT (SKIP P32–P38)
3. WEIGHT (SKIP P39–P44)
4. HIP AND WAIST MEASUREMENT (SKIP P45–P58)
5. SPIROMETRY (SKIP P59–P78)
6. DRIED BLOOD SPOT (SKIP P80–P87) [DISPLAY ONLY IF SELECTED FOR DBS]

BLOOD PRESSURE MEASUREMENT

P3. Now I will explain the procedure for measuring your blood pressure. It is important that you remain calm and relaxed and seated for the measurements, which will take about 10 minutes. We need to find a quiet location for the measurements without any disturbances or distractions.

First, I will wrap the blood pressure cuff around your arm. Then I will start the automated blood pressure device. The cuff will inflate and you will feel a sensation of pressure on your arm. The cuff will then gradually deflate. I will inflate the cuff at least three times but no more than five times. I will pause about 30 seconds in between each reading. While I am measuring your blood pressure, it is best that we not have any conversation. If you have any questions or concerns, I will be happy to answer them for you before or after the measurements are taken.

Before we start, you should use the bathroom if you need to. Also, you should remove any outer clothing and roll up your sleeves.

P4. INTERVIEWER: IS RESPONDENT SETTING APPROPRIATE (SUFFICIENTLY QUIET, CALM, AND RELAXED) FOR BLOOD PRESSURE MEASUREMENT?

1. YES
5. NO, SPECIFY: _____ (GO TO P24C)

P5. INTERVIEWER: INSPECT FIRST THE RIGHT ARM, THEN THE LEFT ARM IF NEEDED, FOR CONDITIONS PREVENTING MEASUREMENT. DO NOT PLACE BP CUFFS ON ARMS WITH OPEN SORES, WOUNDS, GAUZE DRESSINGS OR RASHES. DO NOT USE ARMS WITH CASTS OR SHUNTS. DO NOT USE ARMS THAT ARE WITHERED, SWOLLEN OR PARALYZED. DO NOT USE ARM ON THE SAME SIDE AS MASTECTOMY, UNLESS RESPONDENT HAS HER PHYSICIAN'S APPROVAL

ARE PREVENTING CONDITIONS PRESENT IN BOTH ARMS?

1. YES, SPECIFY: _____ (GO TO P24C)
5. NO

P6. Do you know of any medical reasons, such as recent surgery, injury, or other health conditions why the blood pressure measurements should not be done?

MARK "YES" ONLY IF THE PROBLEM EXISTS IN BOTH ARMS.

1. YES, SPECIFY: _____ (GO TO P24C)
5. NO

P7. INTERVIEWER: IF OBSERVED, RECORD; OTHERWISE ASK: Have you had any food, coffee, caffeinated drinks, or cigarettes within the past 30 minutes?

MARK ALL THAT APPLY

1. FOOD
2. COFFEE
3. CAFFEINATED DRINKS
4. CIGARETTES
5. NONE

P8. Are you currently taking any medication to lower your blood pressure?

1. YES
5. NO

P9. INTERVIEWER: SET UP AUTOMATIC BLOOD PRESSURE MACHINE ON A CLEAN, FLAT SURFACE CLOSE TO AN ELECTRICAL OUTLET.

RESPONDENT SHOULD BE SITTING QUIETLY AND RELAXED FOR FIVE MINUTES BEFORE THE FIRST MEASUREMENT IN A COMFORTABLE UPRIGHT POSITION WITH LEGS UNCROSSED AND BOTH FEET ON THE FLOOR. RESPONDENT SHOULD BE SEATED SO THAT THE UPPER PORTION OF THE SELECTED ARM IS SUPPORTED AND THE MIDPOINT OF THE ARM IS LEVEL WITH THE HEART.

SELECT THE APPROPRIATE CUFF SIZE USING THE INDICATORS ON THE BLOOD PRESSURE CUFF.

PLACE THE CUFF ON THE SELECTED ARM SO THE BOTTOM EDGE OF THE CUFF IS 2–3 CM ABOVE THE CREASE ON THE INSIDE OF THE ELBOW. THE "ARTERY" ARROW ON THE CUFF SHOULD POINT TO THE MIDLINE OF THE CREASE. DO NOT LET CLOTHING RESTRICT THE TOP EDGE OF THE CUFF. THE CUFF SHOULD BE SNUG BUT COMFORTABLE ENOUGH TO PLACE TWO FINGERS BETWEEN THE CUFF AND ARM. THE "INDEX" MARKING ON THE EDGE OF THE CUFF MUST FALL WITHIN THE "RANGE" MARKERS ON THE INSIDE OF THE CUFF.

P10. INTERVIEWER: INDICATE CUFF SIZE SELECTED:

1. PEDIATRIC CUFF
2. SMALL ADULT CUFF
3. REGULAR ADULT CUFF
4. LARGE ADULT CUFF
5. EXTRA-LARGE ADULT CUFF

P11. WHICH ARM SELECTED?

1. RIGHT (GO TO P13)
2. LEFT

P12. INTERVIEWER: REASON FOR SELECTING LEFT ARM?

1. INJURY OR RASH
2. CAST, DRESSING, OR BANDAGE
3. PLACEMENT OF EQUIPMENT
4. OTHER, SPECIFY: _____

P13. INTERVIEWER: HAS RESPONDENT RESTED FOR AT LEAST FIVE MINUTES?

1. YES
5. NO

P14. INTERVIEWER: PERFORM FIRST BLOOD PRESSURE READING AND INDICATE OUTCOME.

1. READING OBTAINED
2. MISSED READING (EQUIPMENT FAILURE, INTERRUPTION, OTHER PROBLEM) (GO TO P16)
3. REFUSED (GO TO P24C)

P15. INTERVIEWER: ENTER FIRST BLOOD PRESSURE AND PULSE READING.

SYSTOLIC _____
DIASTOLIC _____
PULSE _____

P15A. INTERVIEWER: RE-ENTER FIRST BLOOD PRESSURE AND PULSE READING.

SYSTOLIC _____
DIASTOLIC _____
PULSE _____

P16. INTERVIEWER: WAIT AT LEAST 30 SECONDS SINCE LAST INFLATION OF CUFF. PERFORM SECOND BLOOD PRESSURE READING AND INDICATE OUTCOME.

1. READING OBTAINED
2. MISSED READING (EQUIPMENT FAILURE, INTERRUPTION, OTHER PROBLEM) (GO TO P18)
3. REFUSED (GO TO P24B)

P17. ENTER SECOND BLOOD PRESSURE AND PULSE READING.

SYSTOLIC _____
DIASTOLIC _____
PULSE _____

P17A. RE-ENTER SECOND BLOOD PRESSURE AND PULSE READING.

SYSTOLIC _____
DIASTOLIC _____
PULSE _____

P18. INTERVIEWER: WAIT AT LEAST 30 SECONDS SINCE LAST INFLATION OF CUFF. PERFORM THIRD BLOOD PRESSURE READING AND INDICATE OUTCOME.

1. READING OBTAINED
2. MISSED READING (EQUIPMENT FAILURE, INTERRUPTION, OTHER PROBLEM) (GO TO P20)
3. REFUSED (GO TO P24B)

P19. ENTER THIRD BLOOD PRESSURE AND PULSE READING.

SYSTOLIC _____
DIASTOLIC _____
PULSE _____

P19A. RE-ENTER THIRD BLOOD PRESSURE AND PULSE READING.

SYSTOLIC _____
DIASTOLIC _____
PULSE _____

P19B. CAPI: HAVE THREE BLOOD PRESSURE READINGS BEEN SUCCESSFULLY OBTAINED?

1. YES (GO TO P24B)
5. NO

P20. INTERVIEWER: WAIT AT LEAST 30 SECONDS SINCE LAST INFLATION OF CUFF. PERFORM FOURTH BLOOD PRESSURE READING AND INDICATE OUTCOME.

1. READING OBTAINED

- 2. MISSED READING (EQUIPMENT FAILURE, INTERRUPTION, OTHER PROBLEM) (GO TO P22)
- 3. REFUSED (GO TO P24B)

P21. ENTER FOURTH BLOOD PRESSURE AND PULSE READING.

SYSTOLIC _____
 DIASTOLIC _____
 PULSE _____

P21A. RE-ENTER FOURTH BLOOD PRESSURE AND PULSE READING.

SYSTOLIC _____
 DIASTOLIC _____
 PULSE _____

P22. CAPI: HAVE THREE BLOOD PRESSURE READINGS BEEN SUCCESSFULLY OBTAINED?

- 1. YES (GO TO P24B)
- 5. NO

P23. INTERVIEWER: WAIT AT LEAST 30 SECONDS SINCE LAST INFLATION OF CUFF. PERFORM FIFTH BLOOD PRESSURE READING AND INDICATE OUTCOME.

- 1. READING OBTAINED
- 2. MISSED READING (EQUIPMENT FAILURE, INTERRUPTION, OTHER PROBLEM) (GO TO P24B)
- 3. REFUSED (GO TO P24B)

P24. ENTER FIFTH BLOOD PRESSURE AND PULSE READING.

SYSTOLIC _____
 DIASTOLIC _____
 PULSE _____

P24A. RE-ENTER FIFTH BLOOD PRESSURE AND PULSE READING.

SYSTOLIC _____
 DIASTOLIC _____
 PULSE _____

P24B. CAPI: CHECK WHETHER AT LEAST ONE BLOOD PRESSURE READING OBTAINED.

- 1. YES (GO TO P24D)
- 5. NO

P24C. INTERVIEWER: REASON NO BLOOD PRESSURE MEASUREMENTS OBTAINED? MARK ALL THAT APPLY:

- 1. RESPONDENT UNABLE / UNWILLING TO UNDERSTAND AND FOLLOW INSTRUCTIONS
- 2. RESPONDENT REFUSES TO BE MEASURED
- 3. WITHERED ARMS, INJURY, RECENT SURGERY, DRESSING, RASH (ON BOTH ARMS)
- 4. FIVE FAILED ATTEMPTS TO INFLATE CUFF
- 6. NO APPROPRIATE SETTING FOR MEASUREMENT
- 7. EQUIPMENT FAILURE
- 5. OTHER, SPECIFY: _____

GO TO P32

P24D. CAPI: CHECK WHETHER ANY "MISSED" READINGS (RESPONSE="2") IN P14, P16, P18, P20, & P23.

1. YES
5. NO (GO TO P25)

P24E. INTERVIEWER: INDICATE REASONS FOR MISSED READINGS. MARK ALL THAT APPLY:

1. RESPONDENT UNABLE / UNWILLING TO UNDERSTAND & FOLLOW INSTRUCTIONS
2. INTERRUPTION
3. EQUIPMENT FAILURE
4. OTHER, SPECIFY: _____

P25. CAPI: CHECK WHETHER ANY “REFUSED” READINGS (RESPONSE=“3”) IN P14, P16, P18, P20, & P23.

1. YES
5. NO (GO TO P27)

P26. INTERVIEWER: INDICATE REASONS FOR REFUSAL OF BLOOD PRESSURE READINGS. MARK ALL THAT APPLY:

1. RESPONDENT UNABLE TO HOLD STILL OR TOO AGITATED TO MEASURE
2. RESPONDENT REFUSES TO HAVE BLOOD PRESSURE MEASURED
3. OTHER, SPECIFY: _____

P27. INTERVIEWER: NOTE ANY OBSERVABLE PHYSICAL CHARACTERISTICS OF RESPONDENT THAT AFFECTED BLOOD PRESSURE MEASUREMENT.

P28. INTERVIEWER: DESCRIBE ANY DEVIATIONS FROM THE PROTOCOL OR OTHER PROBLEMS MEASURING RESPONDENT’S BLOOD PRESSURE.

P29. CAPI: USE THE FOLLOWING VALUES OF THE SYSTOLIC BLOOD PRESSURE (SBP) AND DIASTOLIC BLOOD PRESSURE (DBP) READINGS TO DETERMINE WHETHER THE RESPONDENT’S BLOOD PRESSURE READING IS VERY HIGH.

[Programmer: Look at previous responses to P14, P16, P18, P20, and P23 and complete appropriate answer.]

IF THREE BLOOD PRESSURE READINGS WERE OBTAINED, USE THE SECOND AND THIRD MEASUREMENTS TO CALCULATE AVERAGES FOR SBP AND DBP:

$$\text{SBP AVERAGE} = (\text{SECOND SBP READING} + \text{THIRD SBP READING}) / 2$$

$$\text{DBP AVERAGE} = (\text{SECOND DBP READING} + \text{THIRD DBP READING}) / 2$$

IF TWO BLOOD PRESSURE READINGS WERE OBTAINED, USE THE VALUES OF SBP AND DBP FROM THE SECOND MEASUREMENT AS THE SBP AVERAGE AND DBP AVERAGE.

IF ONE BLOOD PRESSURE READING WAS OBTAINED, USE THOSE VALUES OF SBP AND DBP AS THE SBP AVERAGE AND THE DBP AVERAGE.

1. AVERAGE SBP (ASBP): ___ ___ ___
2. AVERAGE DBP (ADBP): ___ ___ ___

P30. CAPI: DETERMINE WHETHER RESPONDENT’S BLOOD PRESSURE READINGS ARE VERY HIGH.

1. AVERAGE SBP \geq 180
2. AVERAGE DBP \geq 110
3. AVERAGE SBP < 180 AND AVERAGE DBP < 110 (GO TO P32)

P31. INTERVIEWER: THE BLOOD PRESSURE READING IS HIGH. CAPI: INSERT THE AVERAGE SYSTOLIC AND DIASTOLIC BLOOD PRESSURE FROM P29:

AVERAGE SYSTOLIC BLOOD PRESSURE: ___ ___ ___
AVERAGE DIASTOLIC BLOOD PRESSURE: ___ ___ ___

TYPE OF BLOOD PRESSURE MEASUREMENT: [AVERAGE OF 2nd AND 3rd READING / SINGLE MEASUREMENT]

FOLLOW THESE STEPS:

1. STOP THE HEALTH MEASURES COLLECTION. DO NOT PERFORM ANY ADDITIONAL HEALTH MEASURES.
2. REMAIN CALM. DO NOT ALARM THE RESPONDENT. TELL THE RESPONDENT THAT THE BLOOD PRESSURE READING IS HIGH.
3. COMPLETE THE REPORT OF VERY HIGH BLOOD PRESSURE FORM. READ IT ALOUD TO THE RESPONDENT. BOTH YOU AND THE RESPONDENT MUST SIGN THE FORM. GIVE ONE COPY TO THE RESPONDENT.
4. IF THE RESPONDENT DOES NOT HAVE A USUAL SOURCE OF HEALTH CARE, SHOW THE REFERRAL INFORMATION SHEET, WHICH IS IN THE PACKET OF INFORMATION YOU PROVIDED. REVIEW THE SHEET WITH THE RESPONDENT TO HELP HIM / HER FIND THE NEAREST (A) PLACE TO GET MEDICAL CARE, (B) EMERGENCY ROOM, OR (C) URGENT CARE CLINIC. HELP THE RESPONDENT FIGURE OUT HOW TO GET THERE.

IF THE RESPONDENT DECIDES TO CALL 911, REMAIN WITH THE RESPONDENT UNTIL MEDICAL PERSONNEL ARRIVE. DURING THAT TIME PROMOTE A CALM AND QUIET ENVIRONMENT.

INTERVIEWER: YOU MUST NOT DRIVE THE RESPONDENT ANYWHERE. YOU MUST CALL THE RESPONDENT THE NEXT DAY TO SEE IF ANY ACTION WAS TAKEN. IF NO ACTION TAKEN, YOU SHOULD ENCOURAGE THE RESPONDENT TO DO SO.

GO TO P79

HEIGHT MEASUREMENT

P32. Now I'm going to measure your height. I will have you stand against the wall and then I will use this folding ruler and triangle to get an accurate measurement.

INTERVIEWER: FIND A SECTION OF BLANK, FLAT WALL AGAINST WHICH THE RESPONDENT CAN STAND. THE RESPONDENT SHOULD NOT STAND ON RUGS OR CARPETING. BE SURE TO HAVE ADEQUATE LIGHTING OR HAVE A FLASHLIGHT HANDY.

ASK THE RESPONDENT TO REMOVE SHOES, HAT, HAIR ORNAMENTS, AND ANY HEAVY OUTER GARMENTS. ASK THE RESPONDENT TO STAND WITH HIS / HER BACK AGAINST THE WALL. MAKE SURE RESPONDENT'S LINE OF SIGHT (FRANKFORT PLANE) IS LEVEL WITH THE GROUND. PLACE A 'POST-IT' NOTE ON THE WALL AT THE TOP OF THE RESPONDENT'S HEAD APPROXIMATELY WHERE YOU WILL BE MARKING THE HEIGHT. ASK RESPONDENT TO STAND TALL AND TAKE A DEEP BREATH.

PLACE THE CARPENTER'S SQUARE SO THAT THE TWO SIDES THAT FORM THE RIGHT ANGLE ARE FLAT: (1) ALONG THE WALL AND (2) RESTING ON TOP OF THE HEAD. MARK THE RESPONDENT'S HEIGHT ON THE 'POST-IT' NOTE AND LET THE RESPONDENT STEP AWAY.

MEASURE THE RESPONDENT'S HEIGHT TO THE NEAREST MILLIMETER.

P32A. INTERVIEWER: SUCCESSFULLY ABLE TO MEASURE RESPONDENT'S HEIGHT?

1. YES (GO TO P34)
5. NO

P33. INTERVIEWER: SELECT ALL REASONS WHY UNABLE TO MEASURE RESPONDENT'S HEIGHT. MARK ALL THAT APPLY:

1. RESPONDENT UNABLE / UNWILLING TO UNDERSTAND AND FOLLOW INSTRUCTIONS
2. RESPONDENT REFUSES TO BE MEASURED
3. RESPONDENT UNABLE TO STAND UNASSISTED
4. UNABLE TO POSITION RESPONDENT ACCORDING TO PROTOCOL
5. UNSUITABLE SURFACE - WALL OR FLOOR - FOR MEASURING
6. EQUIPMENT FAILURE
7. OTHER, SPECIFY: _____

GO TO P39

P34. INTERVIEWER: ENTER RESPONDENT'S HEIGHT IN CENTIMETERS

____ . ____ CM

P34A. INTERVIEWER: RE-ENTER RESPONDENT'S HEIGHT IN CENTIMETERS

____ . ____ CM

P35. INTERVIEWER: IS AN ADJUSTMENT TO THE RECORDED HEIGHT NECESSARY DUE TO RESPONDENT'S HAIR OR SHOES?

1. YES
5. NO (GO TO P37)

P36. INTERVIEWER: USE THE MEASURING TAPE TO MEASURE THE HEIGHT OF THE RESPONDENT'S HAIR AND / OR SHOES.

____ . ____ CM ABOVE THE HEAD ADJUSTMENTS (SUCH AS FOR HAIR)
 ____ . ____ CM BELOW THE FEET ADJUSTMENTS (SUCH AS FOR SHOES)

P36A. INTERVIEWER: RE-ENTER THE HEIGHT OF THE RESPONDENT'S HAIR AND / OR SHOES.

____ . ____ CM ABOVE THE HEAD ADJUSTMENTS (SUCH AS FOR HAIR)
 ____ . ____ CM BELOW THE FEET ADJUSTMENTS (SUCH AS FOR SHOES)

P36B. CAPI: CALCULATE RESPONDENT'S ADJUSTED HEIGHT AND CHECK THAT ADJUSTED HEIGHT:

ADJUSTED HEIGHT = P34 – P36_ABOVE – P36_BELOW

P37. INTERVIEWER: NOTE ANY OBSERVABLE PHYSICAL CHARACTERISTICS OF RESPONDENT THAT AFFECTED HEIGHT MEASUREMENT.

P38. INTERVIEWER: DESCRIBE ANY DEVIATIONS FROM THE PROTOCOL OR PROBLEMS WITH OBTAINING HEIGHT MEASUREMENT.

WEIGHT MEASUREMENT

P39. Now I'm going to measure your weight.

INTERVIEWER: PUT SCALE ON HARD, FLAT SURFACE. SET THE SCALE TO ZERO.

ASK RESPONDENT TO REMOVE SHOES AND ANY HEAVY OUTER GARMENTS (COAT, JACKET, SWEATER, ETC.). ASK RESPONDENT TO REMOVE ANY ITEMS FROM HANDS AND POCKETS. ASK RESPONDENT TO STEP ON SCALE.

READ WEIGHT OF RESPONDENT IN KILOGRAMS.

P40. INTERVIEWER: SUCCESSFULLY ABLE TO MEASURE RESPONDENT'S WEIGHT?

1. YES (GO TO P42)
5. NO

P41. INTERVIEWER: SELECT ALL REASONS WHY UNABLE TO MEASURE RESPONDENT'S WEIGHT. MARK ALL THAT APPLY:

1. RESPONDENT UNABLE / UNWILLING TO UNDERSTAND AND FOLLOW INSTRUCTIONS
2. RESPONDENT REFUSES TO BE WEIGHED
3. RESPONDENT UNABLE TO STAND UNASSISTED
4. UNSUITABLE SURFACE FOR SETTING UP THE SCALE
5. SCALE INSUFFICIENT FOR RESPONDENT WEIGHT
6. EQUIPMENT FAILURE
7. OTHER, SPECIFY: _____

GO TO P45

P42. INTERVIEWER: ENTER RESPONDENT'S WEIGHT IN KILOGRAMS:

___ . ___ KG

P42A. INTERVIEWER: RE-ENTER RESPONDENT'S WEIGHT IN KILOGRAMS:

___ . ___ KG

P43. INTERVIEWER: NOTE ANY OBSERVABLE PHYSICAL CHARACTERISTICS OF RESPONDENT THAT AFFECTED WEIGHT MEASUREMENT. MARK ALL THAT APPLY:

0. NONE
1. RESPONDENT WEARING SHOES
2. RESPONDENT WEARING HEAVY CLOTHING
3. RESPONDENT HAD ITEMS IN HANDS OR IN POCKETS
4. RESPONDENT IS PREGNANT
5. OTHER, SPECIFY: _____

P44. INTERVIEWER: DESCRIBE ANY DEVIATIONS FROM THE PROTOCOL OR PROBLEMS WITH OBTAINING WEIGHT MEASUREMENT.

HIP AND WAIST MEASUREMENT

P45. Next, I am going to measure your waist and hips.

INTERVIEWER: ALLOW RESPONDENT THE OPTION OF MEASURING HIS OR HER OWN WAIST.

WAIST MEASUREMENT INSTRUCTIONS: PLACE MEASURING TAPE NEXT TO THINLY CLOTHED SKIN. ASK THE RESPONDENT TO REMOVE ANY HEAVY OR BULKY OUTER GARMENTS, INCLUDING BELTS. DO NOT ASK RESPONDENT TO DISROBE. ASK RESPONDENT TO STAND IN A RELAXED POSTURE AND TO BREATHE NORMALLY. RESPONDENT SHOULD NOT HOLD THEIR BREATH OR ATTEMPT TO "SUCK IN" THEIR STOMACH. LOCATE THE BONY PROMINENCE OF THE RIGHT ILIAC CREST OR ASSIST THE RESPONDENT IN LOCATING IT. RUN THE MEASURING TAPE IN A COMPLETE CIRCLE JUST ABOVE THE ILIAC CRESTS. THE TAPE SHOULD REMAIN PARALLEL WITH THE FLOOR. THE TAPE SHOULD BE SNUG BUT NOT TIGHT ENOUGH TO COMPRESS THE SOFT TISSUE.

HOLD TAPE FIRMLY AND TAKE WAIST MEASUREMENT AT END OF A NORMAL EXHALATION.

P46. INTERVIEWER: SUCCESSFULLY ABLE TO OBTAIN WAIST MEASUREMENT?

1. YES (GO TO P48)
5. NO

P47. INTERVIEWER: SELECT ALL REASONS WHY UNABLE TO OBTAIN RESPONDENT'S WAIST MEASUREMENT. MARK ALL THAT APPLY:

1. RESPONDENT UNABLE / UNWILLING TO UNDERSTAND AND FOLLOW INSTRUCTIONS
2. RESPONDENT REFUSES TO BE MEASURED
3. RESPONDENT UNABLE / UNWILLING TO STAND UNASSISTED
4. UNABLE TO POSITION RESPONDENT ACCORDING TO PROTOCOL
5. MEASURING TAPE INSUFFICIENT FOR RESPONDENT'S WAIST CIRCUMFERENCE
6. RESPONDENT CHOSE SELF-MEASUREMENT BUT UNABLE TO POSITION TAPE PROPERLY
7. EQUIPMENT FAILURE
8. OTHER, SPECIFY: _____

GO TO P52

P48. INTERVIEWER: ENTER RESPONDENT'S WAIST MEASUREMENT IN CENTIMETERS:

____ . ____ CM

P48A. INTERVIEWER: RE-ENTER RESPONDENT'S WAIST MEASUREMENT IN CENTIMETERS:

____ . ____ CM

P49. INTERVIEWER: INDICATE WHO MEASURED THE RESPONDENT'S WAIST CIRCUMFERENCE.

1. RESPONDENT
2. INTERVIEWER

P50. INTERVIEWER: NOTE ANY OBSERVABLE PHYSICAL CHARACTERISTICS OF RESPONDENT THAT AFFECTED WAIST MEASUREMENT. MARK ALL THAT APPLY:

0. NONE
1. RESPONDENT WEARING THICK CLOTHING
2. RESPONDENT IS PREGNANT
3. OTHER: _____

P51. INTERVIEWER: DESCRIBE ANY DEVIATIONS FROM THE PROTOCOL OR PROBLEMS WITH OBTAINING WAIST MEASUREMENT.

P52. Next, I am going to measure your hip size.

INTERVIEWER: ALLOW RESPONDENT THE OPTION OF MEASURING HIS OR HER OWN HIPS.

HIP MEASUREMENT INSTRUCTIONS: PLACE THE MEASURING TAPE HORIZONTALLY AROUND THE BODY, ACROSS THE MAXIMUM CIRCUMFERENCE OF THE BUTTOCKS. THE TAPE SHOULD REMAIN PARALLEL WITH THE FLOOR. THE TAPE SHOULD BE SNUG BUT NOT TIGHT ENOUGH TO COMPRESS THE SOFT TISSUE.

HOLD TAPE FIRMLY AND TAKE HIP MEASUREMENT.

P53. INTERVIEWER: SUCCESSFULLY ABLE TO OBTAIN HIP MEASUREMENT?

1. YES (GO TO P55)
5. NO

P54. INTERVIEWER: SELECT ALL REASONS WHY UNABLE TO OBTAIN RESPONDENT'S HIP MEASUREMENT. MARK ALL THAT APPLY:

1. RESPONDENT UNABLE / UNWILLING TO UNDERSTAND AND FOLLOW INSTRUCTIONS
2. RESPONDENT REFUSES TO BE MEASURED
3. RESPONDENT UNABLE TO STAND UNASSISTED
4. UNABLE TO POSITION RESPONDENT ACCORDING TO PROTOCOL
5. MEASURING TAPE INSUFFICIENT FOR RESPONDENT'S HIP CIRCUMFERENCE
6. RESPONDENT CHOSE SELF-MEASUREMENT BUT UNABLE TO POSITION TAPE PROPERLY
7. EQUIPMENT FAILURE
- 8 OTHER, SPECIFY: _____

GO TO P59

P55. ENTER RESPONDENT'S HIP MEASUREMENT IN CENTIMETERS

___ . ___ CM

P55A. RE-ENTER RESPONDENT'S HIP MEASUREMENT IN CENTIMETERS

___ . ___ CM

P56. INTERVIEWER: INDICATE WHO MEASURED THE RESPONDENT'S HIP CIRCUMFERENCE.

1. RESPONDENT
2. INTERVIEWER

P57. INTERVIEWER: NOTE ANY OBSERVABLE PHYSICAL CHARACTERISTICS OF RESPONDENT THAT AFFECTED HIP MEASUREMENT. MARK ALL THAT APPLY:

0. NONE
1. RESPONDENT WEARING THICK CLOTHING
2. RESPONDENT IS PREGNANT
3. OTHER, SPECIFY: _____

P58. INTERVIEWER: DESCRIBE ANY DEVIATIONS FROM THE PROTOCOL OR PROBLEMS WITH OBTAINING HIP MEASUREMENT.

SPIROMETRY MEASUREMENT

P59. Before beginning the next procedure, I have a few questions. Have you had any surgery on your chest or abdomen in the past three weeks?

1. YES (GO TO P79)
5. NO

P60. Have you been hospitalized for a heart problem in the past 6 weeks?

1. YES (GO TO P79)
5. NO

IF RESPONDENT IS MALE GO TO P61

P60A. Are you in your third trimester of pregnancy? That is, are you at least 7 months pregnant?

1. YES (GO TO P79)
5. NO

P61. Now I'm going to measure your lung function by having you blow into this meter. First, I will explain the procedure.

This electronic device is called a spirometer. It measures how effectively and how quickly your lungs can be emptied of air. You do this by taking a deep breath and then blowing out through the device as hard and as fast as possible until you have no more breath left.

Before we begin, you should loosen any tight clothing. You should stand comfortably with your feet flat on the floor, back straight, and with a non-rolling chair behind you. You should first put this clip on your nose and then take a deep breath of air as far as you can inhale.

Without pausing, you should put the mouthpiece in your mouth and seal your lips tightly around it, with your chin slightly elevated and your neck stretched. Put the mouthpiece between your teeth and seal your mouth around the tube, not allowing any air to leak out the sides.

Then, you should blast out the air as hard and fast as you can! You should keep on blowing out the same breath of air until I say "stop."

I have a few more questions before we get started.

P62. Are you using any respiratory medications such as bronchodilators (inhaler or puffer) or steroids?

- 1. YES
- 5. NO (GO TO P64)

P63. Have you used an inhaler or puffer in the last hour?

- 1. YES (INTERVIEWER: IF POSSIBLE, DELAY SPIROMETRY UNTIL ONE HOUR AFTER THE LAST INHALER USE)
- 5. NO

P64. Have you eaten a heavy meal in the last hour?

- 1. YES (INTERVIEWER: IF POSSIBLE, DELAY SPIROMETRY UNTIL ONE HOUR AFTER THE LAST HEAVY MEAL)
- 5. NO

P65. Have you had a cough, cold, or other illness in the past few days?

- 1. YES
- 5. NO

P66. Have you had a respiratory infection (such as the flu, pneumonia, bronchitis, or a severe cold) in the past 3 weeks?

- 1. YES
- 5. NO

P67. Are you currently being treated for tuberculosis?

- 1. YES
- 5. NO

P68. Let me now demonstrate how the breathing measurement is done using my own mouthpiece and then I'll give you a new one.

INTERVIEWER: DEMONSTRATE HOW TO USE THE MOUTHPIECE. USE YOUR OWN MOUTHPIECE, STAND STRAIGHT WITH A FIRM SURFACE BEHIND YOU, TAKE A DEEP BREATH, BLAST IT OUT, AND DO NOT LEAN.

INTERVIEWER: ALLOW RESPONDENT TO WALK THROUGH THE PROCEDURE. OPEN A NEW MOUTHPIECE AND HAVE THE RESPONDENT GET COMFORTABLE WITH PUTTING HIS / HER MOUTH AROUND IT. HAVE THE RESPONDENT HOLD THE SPIROMETER (WITHOUT THE MOUTHPIECE IN IT).

P69. INTERVIEWER: IF YOU ARE USING THE SPIROMETER FOR THE FIRST TIME TODAY, MAKE SURE TO CHECK SETTINGS AS SPECIFIED IN THE PROTOCOL.

ENTER THE FOLLOWING INTO THE SPIROMETER:

- THE RESPONDENT'S CASE ID NUMBER
- THE RESPONDENT'S DATE OF BIRTH
- THE RESPONDENT'S HEIGHT (IF RESPONDENT DECLINED TO BE MEASURED OR YOU WERE UNABLE TO MEASURE HIS / HER HEIGHT, ENTER "150")

FOR ALL OTHER ITEMS, SELECT THE DEFAULT VALUES.

REVIEW THE INFORMATION YOU HAVE ENTERED TO MAKE SURE THERE ARE NO MISTAKES.

INSERT THE RESPONDENT'S MOUTHPIECE INTO THE SPIROMETER AND HAND IT BACK TO THE RESPONDENT.

Now please stand up and, whenever you are ready, take as deep a breath as you can until it feels like you cannot get any more air into your lungs. Place your mouth around the mouthpiece with your lips tightly sealed, and then breathe out as hard, as fast, and as long as you can. I want you to make the air "BLAST" out of your lungs. Keep breathing out until I tell you to stop.

P69A. INTERVIEWER: PERFORM FIRST SPIROMETERY MEASUREMENT ON RESPONDENT AND MARK THE RESULT.

1. SPIROMETER SAYS "DON'T HESITATE"
2. SPIROMETER SAYS "BLAST OUT FASTER"
3. SPIROMETER SAYS "BLOW OUT LONGER"
4. SPIROMETER SAYS "WAIT UNTIL BUZZ BEFORE BLOWING OUT"
5. SPIROMETER SAYS "GOOD EFFORT, DO NEXT"
6. SPIROMETER SAYS "DEEPER BREATH"
9. RESPONDENT REFUSED (GO TO P76)

P70. WAIT 1 MINUTE BEFORE NEXT MEASUREMENT.

Now for the next one. Remember, take as deep a breath as you can, place your mouth around the mouthpiece, seal your lips around it, and then breathe out as hard, as fast, and as long as you can. Make the air "BLAST" out of your lungs. Keep breathing out until I tell you to stop.

INTERVIEWER: PERFORM SECOND SPIROMETERY MEASUREMENT ON RESPONDENT AND MARK THE RESULT.

1. SPIROMETER SAYS "DON'T HESITATE"
2. SPIROMETER SAYS "BLAST OUT FASTER"
3. SPIROMETER SAYS "BLOW OUT LONGER"
4. SPIROMETER SAYS "WAIT UNTIL BUZZ BEFORE BLOWING OUT"
5. SPIROMETER SAYS "GOOD EFFORT, DO NEXT"
6. SPIROMETER SAYS "DEEPER BREATH"
9. RESPONDENT REFUSED (GO TO P76)

P71. WAIT 1 MINUTE BEFORE NEXT MEASUREMENT. INTERVIEWER: PERFORM THIRD SPIROMETERY MEASUREMENT ON RESPONDENT AND MARK THE RESULT.

1. SPIROMETER SAYS "DON'T HESITATE"
2. SPIROMETER SAYS "BLAST OUT FASTER"

3. SPIROMETER SAYS "BLOW OUT LONGER"
4. SPIROMETER SAYS "WAIT UNTIL BUZZ BEFORE BLOWING OUT"
5. SPIROMETER SAYS "GOOD EFFORT, DO NEXT"
6. SPIROMETER SAYS "DEEPER BREATH"
7. SPIROMETER SAYS "SESSION COMPLETE" (GO TO P77)
9. RESPONDENT REFUSED (GO TO P76)

P72. WAIT 1 MINUTE BEFORE NEXT MEASUREMENT. INTERVIEWER: PERFORM FOURTH SPIROMETERY MEASUREMENT ON RESPONDENT AND MARK THE RESULT.

1. SPIROMETER SAYS "DON'T HESITATE"
2. SPIROMETER SAYS "BLAST OUT FASTER"
3. SPIROMETER SAYS "BLOW OUT LONGER"
4. SPIROMETER SAYS "WAIT UNTIL BUZZ BEFORE BLOWING OUT"
5. SPIROMETER SAYS "GOOD EFFORT, DO NEXT"
6. SPIROMETER SAYS "DEEPER BREATH"
7. SPIROMETER SAYS "SESSION COMPLETE" (GO TO P77)
9. RESPONDENT REFUSED (GO TO P76)

P73. WAIT 1 MINUTE BEFORE NEXT MEASUREMENT. INTERVIEWER: PERFORM FIFTH SPIROMETERY MEASUREMENT ON RESPONDENT AND MARK THE RESULT.

1. SPIROMETER SAYS "DON'T HESITATE"
2. SPIROMETER SAYS "BLAST OUT FASTER"
3. SPIROMETER SAYS "BLOW OUT LONGER"
4. SPIROMETER SAYS "WAIT UNTIL BUZZ BEFORE BLOWING OUT"
5. SPIROMETER SAYS "GOOD EFFORT, DO NEXT"
6. SPIROMETER SAYS "DEEPER BREATH"
7. SPIROMETER SAYS "SESSION COMPLETE" (GO TO P77)
9. RESPONDENT REFUSED (GO TO P76)

P74. WAIT 1 MINUTE BEFORE NEXT MEASUREMENT. INTERVIEWER: PERFORM SIXTH SPIROMETERY MEASUREMENT ON RESPONDENT AND MARK THE RESULT.

1. SPIROMETER SAYS "DON'T HESITATE"
2. SPIROMETER SAYS "BLAST OUT FASTER"
3. SPIROMETER SAYS "BLOW OUT LONGER"
4. SPIROMETER SAYS "WAIT UNTIL BUZZ BEFORE BLOWING OUT"
5. SPIROMETER SAYS "GOOD EFFORT, DO NEXT"
6. SPIROMETER SAYS "DEEPER BREATH"
7. SPIROMETER SAYS "SESSION COMPLETE" (GO TO P77)
9. RESPONDENT REFUSED (GO TO P76)

P75. WAIT 1 MINUTE BEFORE NEXT MEASUREMENT. INTERVIEWER: PERFORM SEVENTH SPIROMETERY MEASUREMENT AND MARK THE RESULT.

1. SPIROMETER SAYS "DON'T HESITATE"
2. SPIROMETER SAYS "BLAST OUT FASTER"
3. SPIROMETER SAYS "BLOW OUT LONGER"
4. SPIROMETER SAYS "WAIT UNTIL BUZZ BEFORE BLOWING OUT"
5. SPIROMETER SAYS "GOOD EFFORT, DO NEXT"
6. SPIROMETER SAYS "DEEPER BREATH"
7. SPIROMETER SAYS "SESSION COMPLETE" (GO TO P77)
9. RESPONDENT REFUSED (GO TO P76)

P75A. WAIT 1 MINUTE BEFORE NEXT MEASUREMENT. INTERVIEWER: PERFORM EIGHTH SPIROMETERY MEASUREMENT ON RESPONDENT AND MARK THE RESULT.

1. SPIROMETER SAYS "DON'T HESITATE"

2. SPIROMETER SAYS "BLAST OUT FASTER"
3. SPIROMETER SAYS "BLOW OUT LONGER"
4. SPIROMETER SAYS "WAIT UNTIL BUZZ BEFORE BLOWING OUT"
5. SPIROMETER SAYS "GOOD EFFORT, DO NEXT"
6. SPIROMETER SAYS "DEEPER BREATH"
7. SPIROMETER SAYS "SESSION COMPLETE" (GO TO P77)
9. RESPONDENT REFUSED (GO TO P76)

P76. INTERVIEWER: INDICATE REASONS FOR MEASUREMENT INCOMPLETE, UNSATISFACTORY, OR NOT DONE. MARK ALL THAT APPLY:

1. RESPONDENT UNABLE / UNWILLING TO UNDERSTAND OR FOLLOW TEST INSTRUCTIONS
2. RESPONDENT REFUSES TO PERFORM SPIROMETRY
3. EQUIPMENT FAILURE
4. COUGHS DETECTED
5. EARLY TERMINATION OF EXPIRATION, INSUFFICIENT EFFORT
6. ACUTE ILLNESS (FLU, PNEUMONIA, ETC.)
7. SEVERE BRONCHITIS, EMPHYSEMA, ASTHMA
8. ATE HEAVY MEAL
9. INSUFFICIENT TIME AVAILABLE
10. NO APPROPRIATE SETTING FOR CONDUCTING SPIROMETRY
11. RESPONDENT MEDICALLY EXCLUDED FOR SAFETY
12. OTHER, SPECIFY: _____

P77. INTERVIEWER: NOTE ANY OBSERVABLE PHYSICAL CHARACTERISTICS OF RESPONDENT THAT AFFECTED SPIROMETRY.

P78. INTERVIEWER: DESCRIBE ANY DEVIATIONS FROM THE PROTOCOL OR PROBLEMS PERFORMING SPIROMETRY.

TURN THE SPIROMETER OFF.

RESPONDENT'S HEALTH STATUS AS OBSERVED BY INTERVIEWER

P79. INTERVIEWER: BASED ON YOUR OBSERVATION OF THIS RESPONDENT, HOW DOES [HIS / HER] HEALTH COMPARE, IN GENERAL, TO THE HEALTH STATUS OF OTHER PEOPLE OF THE SAME AGE AND SEX?

RECORD YOUR OWN OPINION BASED ON YOUR OBSERVATION

MARK SCORE ON THE FOLLOWING SCALE:

1. MUCH WORSE
- 2.
3. WORSE
- 4.
5. ABOUT THE SAME
- 6.
7. BETTER
- 8.
9. MUCH BETTER

DRIED BLOOD SPOT COLLECTION VISIT

P80. In addition to the health measures we have completed today, we would like to schedule a health technician to visit your home to collect a blood sample. The visit would take about 30 minutes. The health technician will prick a finger and catch drops of blood on special pieces of filter paper. Your blood will be tested for the risk of heart disease, blood sugar levels. First, I have some questions for you.

P81A. Do you have hemophilia or any other type of blood disorder that may affect your blood's ability to clot?

1. YES (GO TO P81C)
5. NO

P81B. Have you had chemotherapy treatments within the past 4 weeks?

1. YES
5. NO (GO TO P81D)

P81C. I'm sorry, but it seems you are not eligible to take part in the blood sample portion of the study.

INTERVIEWER: IF RESPONDENT HAS PARTICIPATED IN ALL OTHER PARTS OF THE HEALTH MEASURES, PAY THE \$25 INCENTIVE AND GET A SIGNED RECEIPT.

GO TO P88

P81D. Can we schedule a medical technician to come to your home?

1. YES (GO TO P8D1)
2. NO, NOT READY TO COMMIT TO BLOOD SAMPLE (GO TO P87)
3. NO, NOT INTERESTED IN BLOOD SAMPLE (GO TO P87)
4. NO, DUE TO MEDICAL CONDITION, SPECIFY: _____ (GO TO P87)

P81D1. When would be the best time to schedule an appointment for the health technician to visit your home to collect a blood sample?

DATE _____ TIME _____

P81E. To schedule the visit I need some additional information from you.

INTERVIEWER: CONFIRM FULL NAME OR ASK IF UNKNOWN: CAN I HAVE YOUR FULL NAME?

RESPONDENT'S NAME: _____
first middle last

CONFIRM FULL ADDRESS / EDIT AS NEEDED

ADDRESS: _____
Street Apt. City State ZIP

WHAT IS THE NEAREST CROSS-STREET TO YOUR ADDRESS?

ENTER CROSS-STREET: _____ AND _____

P82. What is the best telephone number for the technician to call to reach you and set up an appointment time?

ENTER BEST TELEPHONE NUMBER: _____ - _____ - _____

1. HOME
2. WORK
3. CELL PHONE

P82A. And what would be the best time to reach you at this number?

ENTER BEST TIME TO CALL THIS NUMBER: _____

P83. Is there another telephone number where you can be reached if needed?

1. YES
2. NO (GO TO P84)

P83A. What is the second telephone number?

ENTER SECOND TELEPHONE NUMBER: _____-_____-_____

1. HOME
2. WORK
3. CELL PHONE

P83 B. And what would be the best time to reach you at that number?

ENTER BEST TIME TO CALL THIS NUMBER: _____

P84. To arrange for a health technician to contact you I need to make a phone call.

INTERVIEWER: CALL 888-777-3674. BETWEEN 5 A.M. AND 5 P.M. MONDAY THROUGH FRIDAY, AN OPERATOR WILL ANSWER. AT ALL OTHER TIMES YOU WILL GET AN ANSWERING MACHINE. ASK TO USE THE RESPONDENT'S PHONE; OTHERWISE, USE YOUR CELL PHONE.

P85. TELL EMSI OPERATOR YOU ARE CALLING FROM L.A.FANS. PROVIDE FOLLOWING INFORMATION TO EMSI OPERATOR.

RESPONDENT NAME: [NAME]
PARTICIPANT CASE ID: [CASEID]
RESPONDENT'S DATE OF BIRTH: [DOB]
ADDRESS AND NEAREST CROSS-STREETS: [ADDRESS]
BEST TELEPHONE NUMBER AND TYPE: [BEST PHONE #, TYPE]
BEST TIME TO REACH RESPONDENT AT THIS NUMBER: [P83A ANSWER]
SECOND TELEPHONE NUMBER AND TYPE: [SECOND PHONE #, TYPE]
BEST TIME TO REACH RESPONDENT AT THIS NUMBER: [P83B ANSWER]
PREFERRED APPOINTMENT TIME: [P81D1 DATE AND TIME]
IF A SPANISH SPEAKING EXAMINER IS REQUIRED

INTERVIEWER: REMEMBER TO ASK EMSI OPERATOR FOR THEIR NAME, AND TO RECORD THIS IN THE ROC ALONG WITH THE TIME THE CALL WAS PLACED TO EMSI. IF YOU ARE SCHEDULED TO RETURN TO THE HOME, ASK THE EMSI OPERATOR TO SCHEDULE A HEALTH TECHNICIAN TO COME AT THE SAME TIME YOU WILL BE THERE.

P86. The health technician who will be making the visit will soon contact you to schedule an appointment. If your home is hard to find, this would be a good time to let the technician know how to easily find your home.

P87. INTERVIEWER: INDICATE THE STATUS OF THE BLOOD COLLECTION

1. R AGREEABLE – CALL PLACED TO EMSI
2. R AGREEABLE – NO CALL PLACED TO EMSI (NO PHONE / UNABLE TO REACH EMSI)
3. MILD RESISTANCE TO FINGER STICK (GOOD POSSIBILITY FOR CONVERSION)
4. FIRM REFUSAL TO FINGER STICK
5. R DECLINES FINGER STICK DUE TO MEDICAL CONDITION

P88. That concludes our activities for today. Thank you for participating in the health measures study [and agreeing to have the health technician return to collect a blood sample].