



california  
health  
interview  
survey

# CHIS 2009 Child Questionnaire Version 5.1 September 18, 2010

(Children Ages 0-11 Answered by Adult Proxy Respondent)

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OMB Approval Number: 0925-0598

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NOTE: Each question in the CHIS questionnaires (adult, child, and adolescent) has a unique, sequential question number by section that follows the administration of the survey. In addition, the variable name (in the CHIS data file) associated with a question, appears in a box beneath the question number. Please consult the CHIS 2009 Data Dictionaries for additional information on variables, the population universe answering a specific question, and data file content.

**Section A – Demographics Part I, Health Conditions**

**PROGRAMMING NOTE QC09\_A1:**  
**SET CADATE = CURRENT DATE (YYYYMMDD);**  
**IF AR = MKA AND GENDER OF CHILD IS KNOWN, SKIP TO QC09\_A2;**  
**ELSE CONTINUE WITH QC09\_A1**

**QC09\_A1** Some of the questions are based on (CHILD's) personal traits, like his or her age. So I will first ask you a few brief background questions.

Is (CHILD) male or female?

**CA1**

MALE ..... 1  
 FEMALE ..... 2  
 REFUSED ..... -7

**QC09\_A2** What is {his/her} date of birth?

**CA2MON**

\_\_\_\_\_ MONTH [HR: 1-12]

- |             |              |
|-------------|--------------|
| 1. JANUARY  | 7. JULY      |
| 2. FEBRUARY | 8. AUGUST    |
| 3. MARCH    | 9. SEPTEMBER |
| 4. APRIL    | 10. OCTOBER  |
| 5. MAY      | 11. NOVEMBER |
| 6. JUNE     | 12. DECEMBER |

**CA2DAY**

\_\_\_\_\_ DAY [HR: 1-31]

**CA2YR**

\_\_\_\_\_ YEAR [SR: 1995-2007]

REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_A3:**  
**IF QC09\_A2 = -7 or -8 (REFUSED/DON'T KNOW) CONTINUE WITH QC09\_A3;**  
**ELSE SKIP TO QC09\_A4**

**QC09\_A3** How old is {he/she}?

**CA3**

**[INTERVIEWER NOTE: FOR AGES ABOVE 4 YRS OR 48 MO, DO NOT RECORD MONTHS OR PARTIAL YRS]**

\_\_\_\_\_ YEARS  
 \_\_\_\_\_ MONTHS

REFUSED ..... -7  
 DON'T KNOW ..... -8

**QC09\_A4** How much did {he/she} weigh at birth?

**CA13P/CA13O**

\_\_\_\_\_ POUNDS \_\_\_\_\_ OUNCES

**CA13K/CA13G**

\_\_\_\_\_ KILOGRAMS \_\_\_\_\_ GRAMS

**CAFMT**

POUNDS/OUNCES ..... 1  
 KILOGRAMS/GRAMS ..... 2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QC09\_A5** About how tall is (CHILD) now without shoes?

**[IF NEEDED, SAY: "Your best guess is fine."]**

**CA4F/CA4I**

\_\_\_\_\_ FEET \_\_\_\_\_ INCHES

**CA4M/CA4C**

\_\_\_\_\_ METERS \_\_\_\_\_ CENTIMETERS

**CA4FMT**

FEET/INCHES ..... 1  
 METERS/CENTIMETERS ..... 2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QC09\_A6** About how much does (CHILD) weigh now without shoes?

**[IF NEEDED, SAY: "Your best guess is fine."]**

**CA5P**

\_\_\_\_\_ POUNDS

**CA5K**

\_\_\_\_\_ KILOGRAMS

**CA5FMT**

POUNDS ..... 1  
 KILOGRAMS ..... 2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_A7:**  
**IF CAGE < 5 YEARS GO TO QC09\_A9;**  
**ELSE CONTINUE WITH QC09\_A7 AND IF CAGE = 5 YRS DISPLAY “Not including pre-school or nursery school,”**

**QC09\_A7** {Not including pre-school or nursery school,} Did (CHILD) attend school last week?

- |             |                     |    |                        |
|-------------|---------------------|----|------------------------|
| <b>CA42</b> | YES .....           | 1  | <b>[GO TO QC09_A9]</b> |
|             | NO .....            | 2  |                        |
|             | ON VACATION .....   | 3  |                        |
|             | HOME SCHOOLED ..... | 4  | <b>[GO TO QC09_A9]</b> |
|             | REFUSED .....       | -7 |                        |
|             | DON'T KNOW .....    | -8 |                        |

**PROGRAMMING NOTE QC09\_A8:**  
**IF CAGE = 5 YRS DISPLAY “Not including pre-school or nursery school,”**

**QC09\_A8** {Not including pre-school or nursery school,} Did (CHILD) attend school during the last school year?

- |             |                  |    |  |
|-------------|------------------|----|--|
| <b>CA43</b> | YES .....        | 1  |  |
|             | NO .....         | 2  |  |
|             | REFUSED .....    | -7 |  |
|             | DON'T KNOW ..... | -8 |  |

**QC09\_A9** In general, would you say (CHILD)'s health is excellent, very good, good, fair or poor?

- |            |                  |    |  |
|------------|------------------|----|--|
| <b>CA6</b> | EXCELLENT .....  | 1  |  |
|            | VERY GOOD .....  | 2  |  |
|            | GOOD .....       | 3  |  |
|            | FAIR .....       | 4  |  |
|            | POOR .....       | 5  |  |
|            | REFUSED .....    | -7 |  |
|            | DON'T KNOW ..... | -8 |  |

**QC09\_A10** Has a doctor ever told you that (CHILD) has asthma?

- |             |                  |    |                         |
|-------------|------------------|----|-------------------------|
| <b>CA12</b> | YES .....        | 1  |                         |
|             | NO .....         | 2  | <b>[GO TO QC09_A26]</b> |
|             | REFUSED .....    | -7 | <b>[GO TO QC09_A26]</b> |
|             | DON'T KNOW ..... | -8 | <b>[GO TO QC09_A26]</b> |

**QC09\_A11** Does {he/she} still have asthma?

**CA31**

- YES ..... 1
- NO ..... 2
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_A12** During the past 12 months, has {he/she} had an episode of asthma or an asthma attack?

**CA32**

- YES ..... 1
- NO ..... 2
- REFUSED ..... -7
- DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_A13:**  
**IF QC09\_A11 = 2, -7, OR -8 (NO, REFUSED, DON'T KNOW) AND QC09\_A12 = 2, -7, OR -8 (NO, REFUSED, DON'T KNOW) GO TO QC09\_A17;**  
**ELSE CONTINUE WITH QC09\_A13**

**QC09\_A13** During the past 12 months, how often has (CHILD) had asthma symptoms such as coughing, wheezing, shortness of breath, chest tightness, or phlegm? Would you say:

**CA12B**

- Not at all, ..... 1
- Less than every month, ..... 2
- Every month, ..... 3
- Every week, or ..... 4
- Every day? ..... 5
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_A14** During the past 12 months, has (CHILD) had to visit an emergency room because of {his/her} asthma?

**CA33**

- YES ..... 1
- NO ..... 2 **[GO TO QC09\_A16]**
- REFUSED ..... -7 **[GO TO QC09\_A16]**
- DON'T KNOW ..... -8 **[GO TO QC09\_A16]**

**QC09\_A15** Did you take (CHILD) to an emergency room for {his/her} asthma because you were unable to see {his/her} doctor?

**CA48**

**[ENTER 3 ONLY IF R VOLUNTEERS THAT HE/SHE DOESN'T HAVE A DOCTOR. DO NOT PROBE.]**

- YES ..... 1
- NO ..... 2
- DOESN'T HAVE DOCTOR ..... 3
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_A16** During the past 12 months, was {he/she} admitted to the hospital overnight or longer for {his/her} asthma?

**CA44**

- YES ..... 1
- NO ..... 2
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_A17** Is (CHILD) now taking a daily medication to control {his/her} asthma that was prescribed or given to you by a doctor?

**CA12A**

**[IF NEEDED, SAY: "This includes both oral medicine and inhalers. This is different from inhalers used for quick relief."]**

- YES ..... 1
- NO ..... 2
- REFUSED ..... -7
- DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_A18:**  
**IF QC09\_A11 = 1 (YES, STILL HAS ASTHMA) OR QC09\_A12 = 1 (YES, EPISODE IN LAST 12 MOS), GO TO QC09\_A22;**  
**ELSE CONTINUE WITH QC09\_A18**

**QC09\_A18** During the past 12 months, how often has (CHILD) had asthma symptoms such as coughing, wheezing, shortness of breath, chest tightness, or phlegm? Would you say:

**CA40**

- Not at all, ..... 1
- Less than every month, ..... 2
- Every month, ..... 3
- Every week, or ..... 4
- Every day? ..... 5
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_A19** During the past 12 months, has (CHILD) had to visit an emergency room because of {his/her} asthma?

**CA41**

- YES ..... 1
- NO ..... 2 **[GO TO QC09\_A21]**
- REFUSED ..... -7 **[GO TO QC09\_A21]**
- DON'T KNOW ..... -8 **[GO TO QC09\_A21]**

**QC09\_A20** Did you take (CHILD) to an emergency room for {his/her} asthma because you were unable to see {his/her} doctor?

**CA49**

**[ENTER 3 ONLY IF R VOLUNTEERS THAT HE/SHE DOESN'T HAVE A DOCTOR. DO NOT PROBE.]**

- YES ..... 1
- NO ..... 2
- DOESN'T HAVE DOCTOR ..... 3
- REFUSED ..... -7
- DON'T KNOW ..... -8



**QC09\_A21** During the past 12 months, was {he/she} admitted to the hospital overnight or longer for {his/her} asthma?

**CA45**

- YES ..... 1
- NO ..... 2
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_A22** During the past 12 months, how many days of day care or school did (CHILD) miss due to asthma?

**CA34**

- \_\_\_\_\_ NUMBER OF DAYS
- CHILD NOT IN DAYCARE OR SCHOOL ..... 93
  - REFUSED ..... -7
  - DON'T KNOW ..... -8

**QC09\_A23** Have (CHILD'S) doctors or other medical providers worked with you to develop a plan so that you know how to take care of {his/her} asthma?

**CA35**

- YES ..... 1
  - NO ..... 2
  - REFUSED ..... -7
  - DON'T KNOW ..... -8
- [GO TO QC09\_A25]**  
**[GO TO QC09\_A25]**  
**[GO TO QC09\_A25]**

**QC09\_A24** Do you have a written or printed copy of this plan?

**CA50**

**[IF NEEDED, SAY: "This can be an electronic or hard copy."]**

- YES ..... 1
- NO ..... 2
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_A25** How confident are you that you can control and manage (CHILD's) asthma? Would you say you are very confident, somewhat confident, not too confident, or not at all confident?

**CA51**

- VERY CONFIDENT ..... 1
- SOMEWHAT CONFIDENT ..... 2
- NOT TOO CONFIDENT ..... 3
- NOT AT ALL CONFIDENT ..... 4
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_A26** Does (CHILD) currently have any physical, behavioral, or mental conditions that limit or prevent {him/her} from doing childhood activities usual for {his/her} age?

**CA7**

- YES ..... 1
- NO ..... 2 **[GO TO QC09\_B1]**
- REFUSED ..... -7 **[GO TO QC09\_B1]**
- DON'T KNOW ..... -8 **[GO TO QC09\_B1]**

**QC09\_A27** What condition does (CHILD) have?

**CA10A**

**[CODE ALL THAT APPLY ]**

**[PROBE: "Any others?"]**

- ADD/ADHD ..... 1
- ASPERGER'S SYNDROME ..... 2
- AUTISM ..... 3
- CEREBRAL PALSY ..... 4
- CONGENITAL HEART DISEASE ..... 5
- CYSTIC FIBROSIS ..... 6
- DIABETES ..... 7
- DOWN'S SYNDROME ..... 8
- EPILEPSY ..... 9
- DEAFNESS OR OTHER HEARING PROBLEM ..... 10
- MENTAL RETARDATION, OTHER THAN DOWN'S ..... 11
- MUSCULAR DYSTROPHY ..... 12
- NEUROMUSCULAR DISORDER ..... 13
- ORTHOPEDIC PROBLEM (BONES OR JOINTS) ..... 14
- SICKLE CELL ANEMIA ..... 15
- BLINDNESS OR OTHER VISION PROBLEM ..... 16
- OTHER (SPECIFY: \_\_\_\_\_) ..... 91
- REFUSED ..... -7
- DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_A28:**

**IF QC09\_A27 = 4 OR 5 OR 6 OR 7 OR 8 OR 9 OR 10 OR 11 OR 12 OR 13 OR 14 OR 15 OR 16 OR 91, CONTINUE WITH QC09\_A28;  
ELSE IF QC09\_A27 = 1 OR 2 OR 3 ONLY, SKIP TO QC09\_A31**

**QC09\_A28** During the past 12 months, has (CHILD) had to visit an emergency room because of {his/her} (INSERT CONDITION(S) 4-91 FROM QC09\_A27)?

**CA52**

- YES ..... 1
- NO ..... 2 **[GO TO QC09\_A30]**
- REFUSED ..... -7 **[GO TO QC09\_A30]**
- DON'T KNOW ..... -8 **[GO TO QC09\_A30]**

**QC09\_A29** Did you take (CHILD) to an emergency room for {his/her} (INSERT CONDITION(S) 4-91 FROM QC09\_A27) because you were unable to see {his/her} doctor?

**CA53**

**[ENTER 3 ONLY IF R VOLUNTEERS THAT HE/SHE DOESN'T HAVE A DOCTOR. DO NOT PROBE.]**

- YES ..... 1
- NO ..... 2
- DOESN'T HAVE DOCTOR ..... 3
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_A30** During the past 12 months, was {he/she} admitted to the hospital overnight or longer for {his/her} (INSERT CONDITION(S) 4-91 FROM QC09\_A27)?

**CA54**

- YES ..... 1
- NO ..... 2
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_A31** Have (CHILD's) doctors or other medical providers worked with you to develop a plan so that you know how to take care of {his/her} (INSERT CONDITION(S) FROM QC09\_A27)?

**CA55**

- YES ..... 1
- NO ..... 2 **[GO TO QC09\_A33]**
- REFUSED ..... -7 **[GO TO QC09\_A33]**
- DON'T KNOW ..... -8 **[GO TO QC09\_A33]**

**QC09\_A32** Do you have a written or printed copy of this plan?

**CA56**

**[IF NEEDED, SAY: "This can be an electronic or hard copy."]**

- YES ..... 1
- NO ..... 2
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_A33** How confident are you that you can control and manage (CHILD's) (INSERT CONDITION(S) FROM QC09\_A27)? Would you say you are very confident, somewhat confident, not too confident, or not at all confident?

**CA57**

- VERY CONFIDENT ..... 1
- SOMEWHAT CONFIDENT ..... 2
- NOT TOO CONFIDENT ..... 3
- NOT AT ALL CONFIDENT ..... 4
- REFUSED ..... -7
- DON'T KNOW ..... -8

### Section B – Dental Health

**PROGRAMMING NOTE QC09\_B1:**  
**IF CAGE < 1 YEAR, GO TO SECTION C;**  
**IF CAGE > 2 YEARS, GO TO QC09\_B2 AND DISPLAY “Now I’m going to ask about (CHILD)’s dental health”;**  
**ELSE CONTINUE WITH QC09\_B1**

**QC09\_B1** These questions are about (CHILD)’s dental health. Does (CHILD) have any teeth yet?

**CC1**

- YES ..... 1
- NO ..... 2 **[GO TO SECTION C]**
- REFUSED ..... -7 **[GO TO SECTION C]**
- DON’T KNOW ..... -8 **[GO TO SECTION C]**

**QC09\_B2** {Now I’m going to ask about (CHILD)’s dental health.}

About how long has it been since your child last visited a dentist or dental clinic? Include dental hygienists and all types of dental specialists.

**CC5**

- HAS NEVER VISITED ..... 0
- 6 MONTHS AGO OR LESS ..... 1 **[GO TO QC09\_C1]**
- MORE THAN 6 MONTHS UP TO 1YEAR AGO ..... 2 **[GO TO QC09\_C1]**
- MORE THAN 1 YEAR UP TO 2 YEARS AGO ..... 3
- MORE THAN 2 YEARS UP TO 5 YEARS AGO ..... 4
- MORE THAN 5 YEARS AGO ..... 5
- REFUSED ..... -7
- DON’T KNOW ..... -8

**PROGRAMMING NOTE QC09\_B3:**  
**IF QC09\_B2 = 0 (HAS NEVER VISITED), DISPLAY “never”;**  
**ELSE IF QC09\_B2 ≥ 3 DISPLAY “not” AND “in the past year”**

**QC09\_B3** What is the main reason your child has {never/not} visited a dentist {in the past year}?

**CB23**

- NO REASON TO GO/NO PROBLEMS ..... 1
- NOT OLD ENOUGH ..... 2
- COULD NOT AFFORD IT/TOO EXPENSIVE/NO INSURANCE. 3
- FEAR, DISLIKES GOING ..... 4
- DO NOT HAVE/KNOW A DENTIST ..... 5
- CANNOT GET TO THE OFFICE/CLINIC ..... 6
- NO DENTIST AVAILABLE/NO APPOINTMENTS AVAILABLE .. 7
- DIDN’T KNOW WHERE TO GO ..... 8
- HOURS NOT CONVENIENT ..... 9
- SPEAK A DIFFERENT LANGUAGE ..... 10
- OTHER..... 91
- REFUSED ..... -7
- DON’T KNOW ..... -8

**Section C – Diet, Physical Activity, Park Use**

**PROGRAMMING NOTE QC09\_C1:  
IF CAGE < 2 YEARS, GO TO QC09\_C13;  
ELSE CONTINUE WITH QC09\_C1**

**QC09\_C1** Now I'm going to ask you about the foods your child ate yesterday, including meals and snacks. Yesterday, how many glasses or boxes of 100% fruit juice, such as orange or apple juice, did (CHILD) drink?

**CC10**

**[IF NEEDED, SAY: "Only include 100% fruit juices."]**

**[PART OF A GLASS COUNTS AS 1 GLASS. ASK R TO ESTIMATE NUMBER OF GLASSES IF DRINKING FROM A BOTTLE, CAN, OR CARTON.]**

\_\_\_\_\_ GLASSES [HR: 0-20; SR 0-9]

REFUSED ..... -7

DON'T KNOW ..... -8

**QC09\_C2** Yesterday, how many servings of fruit, such as an apple or a banana, did {he/she} eat?

**CC13**

**[IF NEEDED, SAY: "Servings are self-defined. A serving is the child's regular portion of this food."]**

\_\_\_\_\_ SERVINGS [HR: 0-20; SR 0-9]

REFUSED ..... -7

DON'T KNOW ..... -8

**QC09\_C3** Yesterday, how many servings of French fries, home fries, or hash browns did (CHILD) eat?

**CC14**

**[IF RESPONDENT ASKS, SAY: "Do not include potato chips."]**

\_\_\_\_\_ SERVINGS [HR: 0-20; SR 0-9]

REFUSED ..... -7

DON'T KNOW ..... -8

**QC09\_C4** Yesterday, how many servings of other vegetables like green salad, green beans, or potatoes did {he/she} have? Do not include fried potatoes.

**CC31**

\_\_\_\_\_ SERVINGS [HR: 0-20; SR 0-4]

REFUSED ..... -7

DON'T KNOW ..... -8

QC09\_C5

Yesterday, how many glasses or cans of soda, such as Coke, or other sweetened drinks, such as fruit punch or sports drinks did {he/she} drink? Do not count diet drinks.

CC12

**[THIS ALSO INCLUDES ANY DRINKS WITH ADDED SUGAR, SUCH AS SUNNY DELIGHT, ICED TEA DRINKS, TAMPICO, HAWAIIAN PUNCH, CRANBERRY COCKTAIL, HI-C, SNAPPLE, SUGAR CANE JUICE, GATORADE, SWEETENED WATER DRINKS, AND ENERGY DRINKS.]**

\_\_\_\_\_ GLASSES, CANS, OR BOTTLES [HR: 0-20; SR 0-9]

REFUSED ..... -7

DON'T KNOW ..... -8

QC09\_C6

Yesterday, how many servings of sweets such as cookies, candy, doughnuts, pastries, cake, or popsicles did {he/she} have?

CC24

**[IF NEEDED, SAY: "Include pies and ice cream. Do not include sugar-free kinds but include low-fat kinds."]**

\_\_\_\_\_ SERVINGS [HR: 0-20; SR 0-9]

REFUSED ..... -7

DON'T KNOW ..... -8

QC09\_C7

Now think about the *past week*. In the past 7 days, how many times did {he/she} eat fast food? Include fast food meals eaten at school or at home, or at fast food restaurants, carryout, or drive thru.

CC32

**[IF NEEDED, SAY: "Such as food you get at McDonald's, KFC, Panda Express or Taco Bell."]**

\_\_\_\_\_ TIMES [HR: 0-20; SR 0-4]

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_C8:**  
 IF QC09\_A7 = 1 (ATTENDED SCHOOL LAST WEEK), CONTINUE WITH QC09\_C8 AND DISPLAY “How many days in the past week”;  
 IF QC09\_A8 = 1 (ATTENDED SCHOOL LAST YEAR), CONTINUE WITH QC09\_C8 AND DISPLAY “During the school year, on how many days during a typical week”;  
 ELSE GO TO PROGRAMMING NOTE QC09\_C12

Now I’m going to ask you about physical activity.

**QC09\_C8** {How many days in the past week/During the school year, on how many days during a typical week} did (CHILD) walk, bicycle, or skateboard home from school?

**CC29**

**[INTERVIEWER NOTE: THIS INCLUDES KIDS WHO RIDE ROLLERBLADES, ROLLERSHOES OR NON-MOTORIZED SCOOTERS HOME FROM SCHOOL.]**

**[IF CHILD DOES NOT GO DIRECTLY HOME FROM SCHOOL, INCLUDE # OF DAYS WALKED, ETC. TO CHILDCARE, RELATIVE’S HOME, AFTER-SCHOOL PROGRAM, ETC.]**

\_\_\_\_\_ DAYS

REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_C9:**  
 IF QC09\_C8 = 0 (DAYS), -7, OR -8, GO TO QC09\_C10;  
 ELSE IF QC09\_C8 > 0 (DAYS) CONTINUE WITH QC09\_C9;  
 IF QC09\_A7 = 1 (ATTENDED SCHOOL LAST WEEK) DISPLAY “does”;  
 IF QC09\_A8 = 1 (ATTENDED SCHOOL LAST YEAR) DISPLAY “did”

**QC09\_C9** About how many minutes {did/does} it take {him/her} without any stops?

**CC30**

\_\_\_\_\_ MINUTES **[GO TO QC09\_C11]**

REFUSED ..... -7 **[GO TO QC09\_C11]**  
 DON'T KNOW ..... -8 **[GO TO QC09\_C11]**

**QC09\_C10** Could {he/she} walk or bike home from school in 30 minutes or less?

**CC33**

YES ..... 1  
 NO ..... 2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_C11:**  
**If QC09\_A7 = 1 (ATTENDED SCHOOL LAST WEEK) OR QC09\_A8 = 1 (ATTENDED SCHOOL LAST YEAR) THEN CONTINUE WITH QC09\_C11;**  
**ELSE SKIP TO QC09\_C12**

**QC09\_C11** What is the name of the school (CHILD) goes to or last attended?

**CB22**

**[INTERVIEWER NOTE: RECORD VERBATIM, ASK FOR SPELLING IF NECESSARY]**

\_\_\_\_\_ NAME OF SCHOOL

- CHILD NOT IN SCHOOL ..... 0
- PRE-SCHOOL/DAYCARE ..... 1
- KINDERGARTEN ..... 2
- ELEMENTARY ..... 3
- INTERMEDIATE ..... 4
- JUNIOR HIGH ..... 5
- MIDDLE SCHOOL ..... 6
- CHARTER ..... 7
- OTHER SPECIFY: \_\_\_\_\_ ..... 91
- REFUSED ..... -7
- DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_C12:**  
**IF CAGE < 5, SKIP TO QC09\_C13;**  
**ELSE CONTINUE WITH QC09\_C12**

**QC09\_C12** Not including school PE, on how many days of the past 7 days was (CHILD) physically active for at least 60 minutes total?

**CC35**

\_\_\_\_\_ DAYS [HR: 0-7]

- REFUSED ..... -7
- DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_C13:**  
**IF CAGE < 1 GO TO QC09\_D1;**  
**ELSE CONTINUE WITH QC09\_C13**

**QC09\_C13** Has (CHILD) been to a park in the past 30 days?

**CC37**

- YES ..... 1
- NO ..... 2
- REFUSED ..... -7
- DON'T KNOW ..... -8



**QC09\_C14** Is there a park, playground, or open space within walking distance of your home?

**CC36**

- YES ..... 1
- NO ..... 2
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_C15** Do you strongly agree, agree, disagree, or strongly disagree with the following statement?

The park or playground closest to where I live is safe during the day.

**CC39**

- STRONGLY AGREE ..... 1
- AGREE ..... 2
- DISAGREE ..... 3
- STRONGLY DISAGREE ..... 4
- DON'T KNOW ..... -7
- REFUSED ..... -8

**PROGRAMMING NOTE QC09\_C16:**  
**IF CAGE ≤ 1 YEAR GO TO QC09\_D1;**  
**ELSE IF CAGE > 1 YEAR, CONTINUE WITH QC09\_C16**

**QC09\_C16** Thinking just about SATURDAYs AND SUNDAYs, about how many hours does (CHILD) usually watch TV or play video games (such as Playstation)?

**CG10**

**[IF > 1 HOUR, VERIFY: "That's {xx} hours PER DAY?"]**

**[IF > 0, BUT < 1, ENTER 94]**

\_\_\_\_\_ HOURS

- DOESN'T HAVE TV ..... 93
- MORE THAN ZERO, LESS THAN 1 HOUR ..... 94
- REFUSED ..... -7
- DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_C17:**  
**IF CAGE < 3 YEARS, GO TO QC09\_D1;**  
**ELSE IF CAGE ≥ 3 YEARS CONTINUE WITH QC09\_C17**

**QC09\_C17** About how many hours per day on a typical SATURDAY OR SUNDAY does (CHILD) use a computer for fun, not schoolwork?

**CG11**

**[IF > 0, BUT < 1, ENTER 94]**

\_\_\_\_\_ HOURS

- DOESN'T HAVE ACCESS TO A PC ..... 93
- MORE THAN ZERO, LESS THAN 1 HOUR ..... 94
- REFUSED ..... -7
- DON'T KNOW ..... -8

**Section D – Health Care Access and Utilization**

**QC09\_D1** The next questions are about where (CHILD) goes for health care.

Is there a place you usually take {him/her} to when {he/she} is sick or you need advice about {his/her} health?

**CD1**

- YES ..... 1
- NO ..... 2 **[GO TO QC09\_D3]**
- DOCTOR/(HIS/HER) DOCTOR ..... 3
- KAISER ..... 4
- MORE THAN ONE PLACE ..... 5
- REFUSED ..... -7
- DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_D2:**  
 IF QC09\_D1 = 1, 5, -7, OR -8, DISPLAY “What kind of place do you take {him/her} to most often—a medical”;  
 ELSE IF QC09\_D1 = 3 DISPLAY “Is {his/her} doctor in a private”;  
 ELSE IF QC09\_D1 = 4, FILL QC09\_D2 = 1 AND GO TO PN QC09\_D3

**QC09\_D2** {What kind of place do you take {him/her} to most often—a medical/Is {his/her} doctor a private} doctor’s office, a clinic or hospital clinic, an emergency room, or some other place?

**CD3**

- DOCTOR’S OFFICE/KAISER/OTHER HMO ..... 1
- CLINIC/HEALTH CENTER/HOSPITAL CLINIC ..... 2
- EMERGENCY ROOM ..... 3
- SOME OTHER PLACE (SPECIFY: \_\_\_\_\_) ... 91
- NO ONE PLACE ..... 94
- REFUSED ..... -7
- DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_D3:**  
 IF QC09\_A14 = 1 (YES WENT TO ER PAST 12 MONTHS FOR ASTHMA) OR IF QC09\_A19 = 1 (YES WENT TO ER PAST 12 MONTHS FOR ASTHMA) OR IF QC09\_A28 = 1 (YES WENT TO ER PAST 12 MONTHS FOR OTHER CONDITION), MARK YES ON QC09\_D3 AND GO TO QC09\_D4;  
 ELSE CONTINUE WITH QC09\_D3

**QC09\_D3** During the past 12 months, did (CHILD) visit a hospital emergency room?

**CD12**

- YES ..... 1
- NO ..... 2
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_D4** During the past 12 months, how many times has (CHILD) seen any kind of medical doctor?

**CD6**

\_\_\_\_\_ TIMES

REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_D5:**  
**IF QC09\_D4 > 0, GO TO PROGRAMMING NOTE QC09\_D6;**  
**ELSE IF QC09\_D4 = 0, -7, OR -8, CONTINUE WITH QC09\_D5**

**QC09\_D5** About how long has it been since {he/she} last saw a medical doctor?

**CD7**

ONE YEAR AGO OR LESS ..... 1  
 MORE THAN 1 YEAR UP TO 2 YEARS AGO ..... 2  
 MORE THAN 2 YEARS UP TO 3 YEARS AGO ..... 3  
 MORE THAN 3 YEARS AGO ..... 4  
 NEVER ..... 5  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_D6:**  
**IF QC09\_D1 = 1 OR 3 OR 4 OR 5 AND [QC09\_A11 = 1 (STILL HAS ASTHMA) OR QC09\_A12 = 1 (EPISODE OF ASTHMA IN PAST 12 MONTHS) OR QC09\_A26 = 1 (HAS OTHER CONDITION)],**  
**CONTINUE WITH QC09\_D6;**  
**ELSE SKIP TO PN QC09\_D7**

**QC09\_D6** Does (he/she) have a personal doctor or medical provider who is {his/her} main provider?

**[IF NEEDED, SAY: "This can be a general doctor, a specialist doctor, a physician assistant, a nurse, or other health provider."]**

**CD33**

YES ..... 1  
 NO ..... 2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_D7:**  
**IF QC09\_A11 = 1 (STILL HAS ASTHMA) OR QC09\_A12 = 1 (EPISODE OF ASTHMA IN PAST 12 MONTHS) OR QC09\_A26 = 1 AND [QC09\_D4 > 0 (HAD A DOCTOR VISIT IN THE PAST 12 MONTHS) OR QC09\_D5 = 1 (SAW DOCTOR LESS THAN A YEAR AGO)], CONTINUE WITH QC09\_D7; ELSE SKIP TO QC09\_D9**

**QC09\_D7** During the past 12 months, did you phone or e-mail the doctor's office with a medical question about (CHILD)?

**CD34**

- YES ..... 1
- NO ..... 2 **[GO TO QC09\_D9]**
- REFUSED ..... -7 **[GO TO QC09\_D9]**
- DON'T KNOW ..... -8 **[GO TO QC09\_D9]**

**QC09\_D8** How often did you get an answer as soon as you needed it? Would you say...

**CD35**

- Never, ..... 1
- Sometimes, ..... 2
- Usually, or ..... 3
- Always? ..... 4
- REFUSED ..... -7
- DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_D9:**  
**IF QC09\_D1 = 1, 3, 4, OR 5 AND QC09\_D6 = 1 AND QC09\_A11 = 1 OR QC09\_A12 = 1 OR QC09\_A26 = 1, CONTINUE WITH QC09\_D9; ELSE SKIP TO QC09\_D10**

**QC09\_D9** Is there anyone at (CHILD's) doctor's office or clinic who helps coordinate {his/her} care with other doctors or services such as tests or treatments?

**CD36**

- YES ..... 1
- NO ..... 2
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_D10** During the past 12 months, did you either delay or not get a medicine that a doctor prescribed for (CHILD)?

**CE1**

- YES ..... 1
- NO ..... 2 **[GO TO QC09\_D14]**
- REFUSED ..... -7 **[GO TO QC09\_D14]**
- DON'T KNOW ..... -8 **[GO TO QC09\_D14]**

**QC09\_D11** Was cost or lack of insurance a reason why you delayed or did not get the prescription?

**CE12**

- YES ..... 1
- NO ..... 2 [GO TO QC09\_D14]
- REFUSED ..... -7 [GO TO QC09\_D14]
- DON'T KNOW ..... -8 [GO TO QC09\_D14]

**PROGRAMMING NOTE QC09\_D12:**  
**IF QC09\_A11 = 1 (STILL HAS ASTHMA) OR QC09\_A12 = 1 (EPISODE OF ASTHMA PAST 12 MONTHS), CONTINUE WITH QC09\_D12;**  
**ELSE SKIP TO QC09\_D13**

**QC09\_D12** Was this prescription for {his/her} asthma?

**CD37**

- YES ..... 1
- NO ..... 2
- REFUSED ..... -7
- DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_D13:**  
**IF QC09\_A26 = 1 (HAS OTHER CONDITION), CONTINUE WITH QC09\_D13;**  
**ELSE SKIP TO QC09\_D14**

**QC09\_D13** Was this prescription for {his/her} (INSERT CONDITION(S) FROM QC09\_A27)?

**CD38**

- YES ..... 1
- NO ..... 2
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_D14** During the past 12 months, did you delay or not get any other medical care you felt (CHILD) needed—such as seeing a doctor, a specialist, or other health professional?

**CE7**

- YES ..... 1
- NO ..... 2 [GO TO QT09\_D18]
- REFUSED ..... -7 [GO TO QT09\_D18]
- DON'T KNOW ..... -8 [GO TO QT09\_D18]

QC09\_D15 Was cost or lack of insurance a reason why you delayed or did not get the medical care you felt (he/she) needed?

**CE13**

- YES ..... 1
- NO ..... 2 [GO TO QT09\_D18]
- REFUSED ..... -7 [GO TO QT09\_D18]
- DON'T KNOW ..... -8 [GO TO QT09\_D18]

**PROGRAMMING NOTE QC09\_D16:**  
**IF QC09\_A11 = 1 (STILL HAS ASTHMA) OR QC09\_A12 = 1 (EPISODE OF ASTHMA PAST 12 MONTHS), CONTINUE WITH QC09\_D16;**  
**ELSE SKIP TO QC09\_D17**

QC09\_D16 Was this medical care for {his/her} asthma?

**CD39**

- YES ..... 1
- NO ..... 2
- REFUSED ..... -7
- DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_D17:**  
**IF QC09\_A26 = 1 (HAS OTHER CONDITION), CONTINUE WITH QC09\_D17;**  
**ELSE SKIP TO QC09\_D18**

QC09\_D17 Was this medical care for {his/her} (INSERT CONDITION(S) FROM QC09\_A27)?

**CD40**

- YES ..... 1
- NO ..... 2
- REFUSED ..... -7
- DON'T KNOW ..... -8

QC09\_D18 When (CHILD) had {his/her} last routine physical exam, did you and a doctor talk about {his/her} nutrition or healthy eating?

**CD32**

- YES ..... 1
- NO ..... 2
- REFUSED ..... -7
- DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09C\_D19:**  
**IF CAGE < 6 MONTHS, GO TO QC09\_E1;**  
**ELSE IF CAGE ≥ 6 MONTHS, CONTINUE WITH QC09\_D19**

**QC09\_D19** During the past 12 months, did (CHILD) get a flu shot or the nasal flu vaccine, called “Flumist”?

**CD30**

**[IF NEEDED, SAY: “A flu shot is usually given in the Fall and protects against influenza for the flu season.”]**

YES .....	1	
NO .....	2	<b>[GO TO QC09_E1]</b>
REFUSED .....	-7	<b>[GO TO QC09_E1]</b>
DON'T KNOW .....	-8	<b>[GO TO QC09_E1]</b>

**QC09\_D20** Did {he/she} have the flu shot or the nasal flu vaccine?

**CD41**

FLU SHOT .....	1	
NASAL/FLUMIST .....	2	
BOTH .....	3	
REFUSED .....	-7	
DON'T KNOW .....	-8	

**PROGRAMMING NOTE QC09\_D21:**  
**IF QC09\_D20 = 1 DISPLAY “flu shot”;**  
**IF QC09\_D20 = 2 DISPLAY “nasal flu vaccine”;**  
**ELSE DISPLAY “vaccine”**

**QC09\_D21** At what kind of place did {he/she} get {his/her} last {flu shot/nasal flu vaccine/vaccine}?

**CD42**

DOCTOR'S OFFICE, KAISER, OR HMO .....	1	
COMMUNITY HEALTH CENTER, HEALTH DEPT., HEALTH DEPT CLINIC, OR OTHER TYPE OF CLINIC .....	2	
A STORE .....	3	
PARENT'S WORKPLACE .....	4	
A SENIOR, RECREATION, OR COMMUNITY CENTER .....	5	
HOSPITAL OR EMERGENCY ROOM .....	6	
PLACE OF WORSHIP .....	7	
SCHOOL .....	8	
DON'T KNOW .....	-7	
REFUSED .....	-8	

### Section E – Public Programs

**PROGRAMMING NOTE SECTION E:  
 IF POVERTY = 1, 2, 3, OR 5 (INCOME LESS THAN OR EQUAL TO 300% OF POVERTY LEVEL),  
 CONTINUE WITH QC09\_E1;  
 ELSE SKIP TO QC09\_F1**

**QC09\_E1** Is (CHILD) now on TANF or CalWORKS?

**CE11**

**[IF NEEDED, SAY: "TANF means 'Temporary Assistance to Needy Families,' and CalWORKS means 'California Work Opportunities and Responsibilities to Kids.' Both replaced AFDC, California's old welfare entitlement program."]**

- YES ..... 1
- NO ..... 2
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_E2** Is (CHILD) receiving Food Stamps?

**CE11A**

**[IF NEEDED, SAY: "You may receive benefits as stamps or through an EBT card. EBT stands for Electronic Benefit Transfer card and is also known as the Golden State Advantage Card."]**

- YES ..... 1
- NO ..... 2
- REFUSED ..... -7
- DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_E3:  
 IF CAGE > 6, GO TO QC09\_F1;  
 ELSE CONTINUE WITH QC09\_E3**

**QC09\_E3** Is (CHILD) on WIC now?

**CE11C**

**[IF NEEDED, SAY: "WIC means 'Supplemental Food Program for Women, Infants and Children.'"]**

- YES ..... 1
- NO ..... 2
- REFUSED ..... -7
- DON'T KNOW ..... -8



## Section F – Parental Involvement, Concerns, Mental Health

**PROGRAMMING NOTE QC09\_F1:**  
**IF CAGE > 5 YEARS GO TO PROGRAMMING NOTE QC09\_F4 INTRO;**  
**ELSE CONTINUE WITH QC09\_F1**

**QC09\_F1** In a usual week, about how many days do you or any other family members read stories or look at picture books with (CHILD)?

**CG14**

EVERY DAY ..... 1  
 3-6 DAYS ..... 2  
 1-2 DAYS ..... 3  
 NEVER ..... 4  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QC09\_F2** [In a usual week, about how many days do you or any other family member] play music or sing songs with (CHILD)?

**CG15**

EVERY DAY ..... 1  
 3-6 DAYS ..... 2  
 1-2 DAYS ..... 3  
 NEVER ..... 4  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QC09\_F3** [In a usual week, about how many days do you or any other family member] take (CHILD) out somewhere, for example, to the park, store, or playground?

**CG16**

EVERY DAY ..... 1  
 3-6 DAYS ..... 2  
 1-2 DAYS ..... 3  
 NEVER ..... 4  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_F4 INTRO:**  
**IF CAGE < 4 MONTHS, GO TO QC09\_F25;**  
**IF CAGE ≥ 6 YEARS, GO TO QC09\_F10;**  
**ELSE IF CAGE ≥ 4 MONTHS AND < 6 YEARS, CONTINUE WITH QC09\_F4 INTRO**

QUESTIONS QC09\_F4-QC09\_F14 ARE DRAWN FROM THE SURVEY EDITION OF PARENTS' EVALUATION OF DEVELOPMENTAL STATUS (PEDS) AND DO NOT HAVE AN IMMEDIATE CLINICAL APPLICATION. THESE ITEMS ARE COPYRIGHTED AND MAY NOT BE USED WITHOUT EXPRESS PERMISSION FROM THE AUTHOR (FRANCES P. [GLASGOW@VANDERBILT.EDU](mailto:GLASGOW@VANDERBILT.EDU)).

**QC09\_F4 INTRO** The next questions are about concerns you may have about your child. After each one, tell me if you are concerned a lot, a little, or not at all.

**PROGRAMMING NOTE QC09\_F4:  
 IF CAGE > 9 MONTHS GO TO QC09\_F5;  
 ELSE IF CAGE ≤ 9 MONTHS CONTINUE WITH QC09\_F4**

**QC09\_F4** How your child makes speech sounds? [Are you concerned a lot, a little, or not at all?]

**CG17**

- A LOT ..... 1 **[GO TO QC09\_F6]**
- A LITTLE ..... 2 **[GO TO QC09\_F6]**
- NOT AT ALL..... 3 **[GO TO QC09\_F6]**
- REFUSED .....-7 **[GO TO QC09\_F6]**
- DON'T KNOW .....-8 **[GO TO QC09\_F6]**

**QC09\_F5** How your child talks and makes words? [Are you concerned a lot, a little, or not at all?]

**CG17A**

- A LOT ..... 1
- A LITTLE ..... 2
- NOT AT ALL..... 3
- REFUSED .....-7
- DON'T KNOW .....-8

**PROGRAMMING NOTE QC09\_F6:  
 IF CAGE < 18 MONTHS, GO TO QC09\_F7;  
 ELSE IF CAGE ≥ 18 MONTHS CONTINUE WITH QC09\_F6**

**QC09\_F6** How well your child understands what you say? [Are you concerned a lot, a little, or not at all?]

**CG18**

- A LOT ..... 1
- A LITTLE ..... 2
- NOT AT ALL..... 3
- REFUSED .....-7
- DON'T KNOW .....-8

**QC09\_F7** How your child uses {his/her} hands and fingers to do things? [Are you concerned a lot, a little, or not at all?]

**CG19**

- A LOT ..... 1
- A LITTLE ..... 2
- NOT AT ALL..... 3
- REFUSED .....-7
- DON'T KNOW .....-8

**QC09\_F8** How well your child uses {his/her} arms and legs? [Are you concerned a lot, a little, or not at all?]

**CG20**

- A LOT ..... 1
- A LITTLE ..... 2
- NOT AT ALL..... 3
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_F9** How well your child can see or hear? [Are you concerned a lot, a little, or not at all?]

**CG21**

- A LOT ..... 1
- A LITTLE ..... 2
- NOT AT ALL..... 3
- REFUSED ..... -7
- DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_F10:**  
**IF CAGE IS ≤ 9 MONTHS, GO TO QC09\_F25;**  
**IF CAGE > 6 YEARS, GO TO QC09\_F15;**  
**ELSE IF CAGE = 10 MONTHS TO 6 YEARS, CONTINUE WITH QC09\_F10**

**QC09\_F10** How your child gets along with others? [Are you concerned a lot, a little, or not at all?]

**CG22**

- A LOT ..... 1
- A LITTLE ..... 2
- NOT AT ALL..... 3
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_F11** Your child's feelings and moods? [Are you concerned a lot, a little, or not at all?]

**CG23**

- A LOT ..... 1
- A LITTLE ..... 2
- NOT AT ALL..... 3
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_F12** How your child behaves? [Are you concerned a lot, a little, or not at all?]

**CG24**

- A LOT ..... 1
- A LITTLE ..... 2
- NOT AT ALL..... 3
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_F13** How your child is learning to do things for {himself/herself}? [Are you concerned a lot, a little, or not at all?]

**CG25**

- A LOT ..... 1
- A LITTLE ..... 2
- NOT AT ALL..... 3
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_F14** Whether your child can do what other children {his/her} age can do? [Are you concerned a lot, a little, or not at all?]

**CG26**

- A LOT ..... 1
- A LITTLE ..... 2
- NOT AT ALL..... 3
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_F15** Did a doctor or other professional ever refer {him/her} to a specialist regarding his development?

**CF46**

- YES ..... 1
- NO..... 2
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_F16** Did they ever refer {him/her} for speech, language or hearing testing?

**CF47**

- YES ..... 1
- NO..... 2
- REFUSED ..... -7
- DON'T KNOW ..... -8

THE NEXT 7 ITEMS (QC09\_F17-QC07\_F23) ARE INCLUDED IN THIS SURVEY WITH PERMISSION AS INDICATED:

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**PROGRAMMING NOTE QC09\_F17:  
IF CAGE < 4 YEARS, GO TO QC09\_F25;  
ELSE CONTINUE WITH QC09\_F17**

I am going to read a list of items that describe children. For each item, please tell me if it has been not true, somewhat true, or certainly true of (CHILD) during the past six months.

**QC09\_F17** {He/She} is generally well behaved, usually does what adults request [...during the past 6 months].

**CG28**

- NOT TRUE..... 1
- SOMEWHAT TRUE ..... 2
- CERTAINLY TRUE ..... 3
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_F18** {He/She} has many worries or often seems worried [...during the past 6 months].

**CG29**

- NOT TRUE..... 1
- SOMEWHAT TRUE ..... 2
- CERTAINLY TRUE ..... 3
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_F19** {He/She} is often unhappy, depressed or tearful [...during the past 6 months].

**CG30**

- NOT TRUE..... 1
- SOMEWHAT TRUE ..... 2
- CERTAINLY TRUE ..... 3
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_F20** {He/She} gets along better with adults than with other children [...during the past 6 months].

**CG31**

- NOT TRUE..... 1
- SOMEWHAT TRUE ..... 2
- CERTAINLY TRUE ..... 3
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_F21** {He/She} has good attention span, sees chores or homework through to the end.

**CG32**

- NOT TRUE..... 1
- SOMEWHAT TRUE..... 2
- CERTAINLY TRUE..... 3
- REFUSED.....-7
- DON'T KNOW.....-8

**QC09\_F22** Overall, do you think your child has difficulties in any of the following areas: emotions, concentration, behavior, or being able to get along with other people?

**CF30**

- YES..... 1
- NO..... 2 **[GO TO QC09\_F24]**
- REFUSED.....-7 **[GO TO QC09\_F24]**
- DON'T KNOW.....-8 **[GO TO QC09\_F24]**

**QC09\_F23** Are these difficulties minor, definite, or severe?

**CF31**

- MINOR..... 1
- DEFINITE..... 2
- SEVERE..... 3
- REFUSED.....-7
- DON'T KNOW.....-8

**QC09\_F24** During the past 12 months, did (CHILD) receive any psychological or emotional counseling?

**CF32**

- YES..... 1
- NO..... 2
- REFUSED.....-7
- DON'T KNOW.....-8

**PROGRAMMING NOTE QC09\_F25:**  
**IF QC09\_C16 = 93 (DOESN'T HAVE TV) OR CAGE < 1 YEAR, GO TO QC09\_F29;**  
**ELSE CONTINUE WITH QC09\_F25**

**QC09\_F25** The next questions are about television programming your child might watch.

Have you heard about the PBS TV show "Sid the Science Kid"?

**CF60**

- YES..... 1
- NO..... 2 **[GO TO QC09\_F29]**
- REFUSED.....-7 **[GO TO QC09\_F29]**
- DON'T KNOW.....-8 **[GO TO QC09\_F29]**

**QC09\_F26** Has (CHILD) seen the PBS TV show “Sid the Science Kid”?

**CF61**

- YES ..... 1
- NO ..... 2 [GO TO QC09\_F29]
- DOESN'T WATCH TV ..... 3 [GO TO QC09\_F29]
- REFUSED ..... -7 [GO TO QC09\_F29]
- DON'T KNOW ..... -8 [GO TO QC09\_F29]

**QC09\_F27** Tell me if you strongly agree, agree, disagree, or strongly disagree with the following statements:

**CF62**

(CHILD) is learning science from Sid.

**[IF NEEDED, SAY: “Do you strongly agree, agree, disagree, or strongly disagree?”]**

- STRONGLY AGREE ..... 1
- AGREE ..... 2
- DISAGREE ..... 3
- STRONGLY DISAGREE ..... 4
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_F28** “Sid the Science Kid” increases preschoolers’ interest in science.

**CF63**

**[IF NEEDED, SAY: “Do you strongly agree, agree, disagree, or strongly disagree?”]**

- STRONGLY AGREE ..... 1
- AGREE ..... 2
- DISAGREE ..... 3
- STRONGLY DISAGREE ..... 4
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_F29** Do you know that First 5 California, a state agency, provides a free Parent Kit to parents of young children?

**CF35**

- YES ..... 1
- NO ..... 2 [GO TO QC09\_G1]
- REFUSED ..... -7 [GO TO QC09\_G1]
- DON'T KNOW ..... -8 [GO TO QC09\_G1]

**QC09\_F30** Have you ever received this Parent Kit?

**CF36**

- YES ..... 1
- NO ..... 2 [GO TO QC09\_G1]
- REFUSED ..... -7 [GO TO QC09\_G1]
- DON'T KNOW ..... -8 [GO TO QC09\_G1]

**QC09\_F31** Did you use any of the materials from this Parent Kit?

**CF39**

- YES ..... 1
- NO ..... 2 **[GO TO QC09\_G1]**
- REFUSED ..... -7 **[GO TO QC09\_G1]**
- DON'T KNOW ..... -8 **[GO TO QC09\_G1]**

**QC09\_F32** On a scale of 1-10, with 10 being most useful and 1 the least, how useful was the Parent Kit?

**CF37**

\_\_\_\_\_RESPONDENT'S NUMBER FROM 1 (WORST) TO 10 (BEST)

- REFUSED ..... -7
- DON'T KNOW ..... -8



**Section G – Child Care, Neighborhood Cohesion**

**PROGRAMMING NOTE QC09\_G1:  
IF CAGE ≥ 7, DO NOT DISPLAY LAST SENTENCE OF FIRST PARAGRAPH**

**QC09\_G1** These next questions are about childcare. By childcare we mean any arrangement where someone other than the parents, legal guardian, or stepparents takes care of (CHILD). {This includes preschool and nursery school, but not kindergarten.}

**CG1**

Do you currently have any kind of regular childcare arrangements for (CHILD) for 10 hours or more per week?

- YES ..... 1
- NO ..... 2 **[GO TO QC09\_G10]**
- REFUSED ..... -7 **[GO TO QC09\_G10]**
- DON'T KNOW ..... -8 **[GO TO QC09\_G10]**

**QC09\_G2** Altogether, how many hours is (CHILD) in childcare during a typical week? Include all combinations of care arrangements.

**CG2**

\_\_\_\_\_ HOURS [SR: 10-168 HRS]

- REFUSED ..... -7 **[GO TO QC09\_G10]**
- DON'T KNOW ..... -8 **[GO TO QC09\_G10]**

**PROGRAMMING NOTE QC09\_G3:  
IF QC09\_G2 < 10 (HOURS IN CHILDCARE), GO TO QC09\_G10;  
ELSE CONTINUE WITH QC09\_G3**

**QC09\_G3** During a typical week does (CHILD) receive childcare from...a grandparent or other family member?

**CG3A**

- YES ..... 1
- NO ..... 2
- REFUSED ..... -7
- DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_G4:  
IF CAGE ≥ 7 YEARS, GO TO QC09\_G6;  
ELSE CONTINUE WITH QC09\_G4**

**QC09\_G4** [Does (CHILD) receive childcare from]...a Head Start or state preschool program?

**CG3B**

YES ..... 1  
 NO ..... 2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QC09\_G5** [Does (CHILD) receive childcare from]...some other preschool or nursery school?

**CG3C**

YES ..... 1  
 NO ..... 2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QC09\_G6** [Does (CHILD) receive childcare from]...a childcare center that is not in someone's home?

**CG3D**

YES ..... 1  
 NO ..... 2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QC09\_G7** [Does (CHILD) receive childcare from]...a non-family member who cares for (CHILD) in your home?

**CG3E**

YES ..... 1  
 NO ..... 2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QC09\_G8** [Does (CHILD) receive childcare from]...a non-family member who cares for (CHILD) in his or her home?

**CG3F**

YES ..... 1  
 NO ..... 2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_G9:**  
 IF [QC09\_G3 OR QC09\_G7 = 1 (CHILD RECEIVES CHILDCARE FROM GRANDPARENT OR NON-FAMILY MEMBER IN CHILD'S HOME)] OR IF [QC09\_G4 ≠ 1 AND QC09\_G5 ≠ 1 AND QC09\_G6 ≠ 1 AND QC09\_G8 ≠ 1 (NOT IN HEAD START, PRESCHOOL PROGRAM, OR IN CARE IN NON-FAMILY MEMBER HOME)], GO TO QC09\_G10;  
 ELSE CONTINUE WITH QC09\_G9;  
 IF ONLY ONE OF QC09\_G4, QC09\_G5, QC09\_G6, OR QC09\_G8 = 1, DISPLAY "Is this" AND "provider";  
 ELSE DISPLAY, "Are all of these" AND "providers"

**QC09\_G9** {Is this/Are all of these} child care provider{s} licensed by the state of California?

**CG3G**

- YES (ALL LICENSED) ..... 1
- NO (NONE LICENSED)..... 2
- SOME LICENSED AND SOME NOT ..... 3
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_G10** In the past 12 months, was there a time when you could not find childcare when you needed it for (CHILD) for a week or longer?

**CG5**

- YES ..... 1
- NO ..... 2 **[GO TO QC09\_G12]**
- REFUSED ..... -7 **[GO TO QC09\_G12]**
- DON'T KNOW ..... -8 **[GO TO QC09\_G12]**

**QC09\_G11** What is the main reason you were unable to find childcare for (CHILD) at that time?

**CG6**

**[IF NEEDED, SAY: "Main reason is the most important reason."]**

- COULDN'T AFFORD ANY CHILD CARE..... 1
- COULDN'T FIND A PROVIDER WITH A SPACE ..... 2
- THE HOURS AND LOCATION DIDN'T FIT MY NEEDS..... 3
- COULDN'T AFFORD THE QUALITY OF CHILDCARE I WANTED..... 4
- COULDN'T FIND THE QUALITY OF CHILDCARE I WANTED ..... 5
- OTHER REASON ..... 91
- REFUSED ..... -7
- DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_G12:  
 IF CHILD-FIRST INTERVIEW AND NO AR OR IF QC09\_G12 THROUGH QC09\_G16 NOT ANSWERED  
 IN ADULT INTERVIEW, CONTINUE WITH QC09\_G12;  
 ELSE SKIP TO QC09\_G17**

**QC09\_G12** These next questions are about your neighborhood.

**CG39**

Tell me if you strongly agree, agree, disagree or strongly disagree with the following statements:

People in my neighborhood are willing to help each other.

**[IF NEEDED, SAY: “Do you strongly agree, agree, disagree, or strongly disagree?”]**

- STRONGLY AGREE..... 1
- AGREE..... 2
- DISAGREE..... 3
- STRONGLY DISAGREE..... 4
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_G13** People in my neighborhood do not get along with each other.

**CG40**

**[IF NEEDED, SAY: “Do you strongly agree, agree, disagree, or strongly disagree?”]**

- STRONGLY AGREE..... 1
- AGREE..... 2
- DISAGREE..... 3
- STRONGLY DISAGREE..... 4
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_G14** People in this neighborhood can be trusted.

**CG41**

**[IF NEEDED, SAY: “Do you strongly agree, agree, disagree, or strongly disagree?”]**

- STRONGLY AGREE..... 1
- AGREE..... 2
- DISAGREE..... 3
- STRONGLY DISAGREE..... 4
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_G15** You can count on adults in this neighborhood to watch out that children are safe and don't get into trouble.

**CG34**

**[IF NEEDED, SAY: "Do you strongly agree, agree, disagree, or strongly disagree?"]**

- STRONGLY AGREE..... 1
- AGREE..... 2
- DISAGREE..... 3
- STRONGLY DISAGREE..... 4
- REFUSED.....-7
- DON'T KNOW.....-8

**QC09\_G16** Do you feel safe in your neighborhood all of the time, most of the time, some of the time, or none of the time?

**CG42**

- ALL OF THE TIME..... 1
- MOST OF THE TIME..... 2
- SOME OF THE TIME..... 3
- NONE OF THE TIME..... 4
- REFUSED.....-7
- DON'T KNOW.....-8

**PROGRAMMING NOTE QC09\_G17:  
IF NOT ANSWERED IN ADULT (AM36) CONTINUE WITH QC09\_G17;  
ELSE GO TO SECTION H**

**QC09\_G17** In the past 12 months, have you done any volunteer work or community service that you have not been paid for?

**CG43**

- YES..... 1
- NO..... 2
- REFUSED.....-7
- DON'T KNOW.....-8

## Section H – Demographics, Part II

So we can be sure we have included children of all races and ethnic groups in California, I need to ask a few questions about (CHILD)'s background.

**QC09\_H1** Is (CHILD) Latino or Hispanic?

**CH1**

**[IF NEEDED, SAY: “Such as Mexican or Central or South American?”]**

- |                  |    |                        |
|------------------|----|------------------------|
| YES .....        | 1  |                        |
| NO .....         | 2  | <b>[GO TO QC09_H3]</b> |
| REFUSED .....    | -7 | <b>[GO TO QC09_H3]</b> |
| DON'T KNOW ..... | -8 | <b>[GO TO QC09_H3]</b> |

**QC09\_H2** And what is {his/her} Latino or Hispanic ancestry or origin? – such as Mexican, Salvadorian, Cuban, Honduran – and if {he/she} has more than one, tell me all of them.

**CH2**

**[IF NECESSARY GIVE MORE EXAMPLES] [CODE ALL THAT APPLY]**

- |  |    |
|--|----|
| MEXICAN/MEXICAN AMERICAN/CHICANO ..... | 1  |
| SALVADORAN.....                        | 4  |
| GUATEMALAN .....                       | 5  |
| COSTA RICAN.....                       | 6  |
| HONDURAN .....                         | 7  |
| NICARAGUAN .....                       | 8  |
| PANAMANIAN .....                       | 9  |
| PUERTO RICAN .....                     | 10 |
| CUBAN.....                             | 11 |
| SPANISH-AMERICAN (FROM SPAIN) .....    | 12 |
| OTHER LATINO (SPECIFY: _____) ...      | 91 |
| REFUSED .....                          | -7 |
| DON'T KNOW .....                       | -8 |

**PROGRAMMING NOTE QC09\_H3:**  
**IF QC09\_H1 = 1 (YES-CHILD IS LATINO), DISPLAY, “You said your child is Latino or Hispanic. Also,”**  
**IF MORE THAN ONE RACE GIVEN, AFTER ENTERING RESPONSES FOR QC09\_H3, CONTINUE WITH PROGRAMMING NOTE QC09\_H4;**  
**ELSE FOLLOW SKIPS AS INDICATED FOR SINGLE RESPONSES**

**QC09\_H3** {You said your child is Latino or Hispanic. Also,} Please tell me which one or more of the following you would use to describe (CHILD): Would you describe {him/her} as Native Hawaiian, Other Pacific Islander, American Indian, Alaska Native, Asian, Black, African American, or White?

**CH3**

**[IF R GIVES ANOTHER RESPONSE YOU MUST SPECIFY WHAT IT IS]**  
**[CODE ALL THAT APPLY]**

- |                                     |    |                  |   |                  |
|-------------------------------------|----|------------------|---|------------------|
| WHITE.....                          | 1  | [GO TO QC09_H10] | } | IF ONLY ONE RACE |
| BLACK OR AFRICAN AMERICAN .....     | 2  | [GO TO QC09_H10] |   |                  |
| ASIAN .....                         | 3  | [GO TO QC09_H8]  |   |                  |
| AMERICAN INDIAN, ALASKA NATIVE..... | 4  | [GO TO QC09_H4]  |   |                  |
| OTHER PACIFIC ISLANDER .....        | 5  | [GO TO QC09_H9]  |   |                  |
| NATIVE HAWAIIAN .....               | 6  | [GO TO QC09_H10] |   |                  |
| OTHER (SPECIFY: _____) .....        | 91 | [GO TO QC09_H10] |   |                  |
| REFUSED .....                       | -7 | [GO TO QC09_H10] |   |                  |
| DON'T KNOW .....                    | -8 | [GO TO QC09_H10] |   |                  |

**PROGRAMMING NOTE QC09\_H4:**  
**IF QC09\_H3 = 4 (AMERICAN INDIAN, ALASKA NATIVE) CONTINUE WITH QC09\_H4;**  
**ELSE GO TO PROGRAMMING NOTE QC09\_H8**

**QC09\_H4** You said American Indian/Alaska Native, and what is (CHILD)'s tribal heritage? If {he/she} has more than one tribe, tell me all of them.

**CH4**

**[CODE ALL THAT APPLY]**

- APACHE ..... 1
- BLACKFEET ..... 2
- CHEROKEE ..... 3
- CHOCTAW ..... 4
- MEXICAN AMERICAN INDIAN ..... 5
- NAVAJO..... 6
- POMO ..... 7
- PUEBLO ..... 8
- SIOUX ..... 9
- YAQUI ..... 10
- OTHER TRIBE [Ask for spelling] (SPECIFY: \_\_\_\_\_) ... 91
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_H5** Is (CHILD) an enrolled member in a federally or state recognized tribe?

**CH5**

- YES ..... 1
- NO ..... 2 **[GO TO QC09\_H8]**
- REFUSED ..... -7 **[GO TO QC09\_H8]**
- DON'T KNOW ..... -8 **[GO TO QC09\_H8]**

**QC09\_H6** In which Tribe is (CHILD) enrolled?

**CH6**

- APACHE**
  - MESCALERO APACHE, NM ..... 1
  - APACHE (NOT SPECIFIED) ..... 2
  - OTHER APACHE (SPECIFY: \_\_\_\_\_) ..... 91
- BLACKFEET**
  - BLACKFOOT / BLACKFEET ..... 3
- CHEROKEE**
  - WESTERN CHEROKEE ..... 4
  - CHEROKEE (NOT SPECIFIED) ..... 5
  - OTHER CHEROKEE (SPECIFY: \_\_\_\_\_) ..... 92
- CHOCTAW**
  - CHOCTAW OKLAHOMA ..... 6
  - CHOCTAW (NOT SPECIFIED) ..... 7
  - OTHER CHOCTAW (SPECIFY: \_\_\_\_\_) ..... 93
- NAVAJO**
  - NAVAJO (NOT SPECIFIED) ..... 8
- POMO**
  - HOPLAND BAND, HOPLAND RANCHERIA ..... 9
  - SHERWOOD VALLEY RANCHERIA ..... 10
  - POMO (NOT SPECIFIED) ..... 11
  - OTHER POMO (SPECIFY: \_\_\_\_\_) ..... 94
- PUEBLO**
  - HOPI ..... 12
  - YSLETA DEL SUR PUEBLO OF TEXAS ..... 13
  - PUEBLO (NOT SPECIFIED) ..... 14
  - OTHER PUEBLO (SPECIFY: \_\_\_\_\_) ..... 95
- SIOUX**
  - OGLALA/PINE RIDGE SIOUX ..... 15
  - SIOUX (NOT SPECIFIED) ..... 16
  - OTHER SIOUX (SPECIFY: \_\_\_\_\_) ..... 96
- YAQUI**
  - PASCUA YAQUI TRIBE OF ARIZONA ..... 17
  - YAQUI (NOT SPECIFIED) ..... 18
  - OTHER YAQUI (SPECIFY: \_\_\_\_\_) ..... 97
- OTHER**
  - OTHER (SPECIFY: \_\_\_\_\_) ..... 98
  - REFUSED ..... -7
  - DON'T KNOW ..... -8



**QC09\_H7** Does (CHILD) get any health care services through the Indian Health Service, a Tribal Health Program, or an Urban Indian clinic?

**CH6A**

- YES ..... 1
- NO ..... 2
- REFUSED ..... -7
- DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_H8:**  
**IF QC09\_H3 = 3 (ASIAN) CONTINUE WITH QC09\_H8;**  
**ELSE GO TO PROGRAMMING NOTE QC09\_H9**

**QC09\_H8** You said Asian, and what specific ethnic group is {he/she}, such as Chinese, Filipino, Vietnamese? If {he/she} is more than one, tell me all of them.

**CH7**

**[CODE ALL THAT APPLY]**

- BANGLADESHI ..... 1
- BURMESE ..... 2
- CAMBODIAN ..... 3
- CHINESE ..... 4
- FILIPINO ..... 5
- HMONG ..... 6
- INDIAN (INDIA) ..... 7
- INDONESIAN ..... 8
- JAPANESE ..... 9
- KOREAN ..... 10
- LAOTIAN ..... 11
- MALAYSIAN ..... 12
- PAKISTANI ..... 13
- SRI LANKAN ..... 14
- TAIWANESE ..... 15
- THAI ..... 16
- VIETNAMESE ..... 17
- OTHER ASIAN (SPECIFY: \_\_\_\_\_).. 91
- REFUSED ..... -7
- DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_H9:  
 IF QC09\_H3 = 5 (PACIFIC ISLANDER) CONTINUE WITH QC09\_H9;  
 ELSE GO TO QC09\_H10**

**QC09\_H9** You said (CHILD) is Pacific Islander. What specific ethnic group is {he/she}, such as Samoan, Tongan, or Guamanian? If {he/she} is more than one, tell me all of them.

**CH7A**

**[CODE ALL THAT APPLY]**

- SAMOAN/AMERICAN SAMOAN..... 1
- GUAMANIAN ..... 2
- TONGAN ..... 3
- FIJIAN ..... 4
- OTHER PACIFIC ISLANDER (SPECIFY: \_\_\_\_\_) ..... 91
- REFUSED ..... -7
- DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_H10:  
 IF MKA = AR AND AI56C ≠ -1 (THIS QUESTION ALREADY ASKED DURING ADULT SURVEY), SKIP  
 TO QC09\_H14;  
 ELSE CONTINUE WITH QC09\_H10**

**QC09\_H10** In what country was (CHILD) born?

**CH8**

- UNITED STATES..... 1
- AMERICAN SAMOA ..... 2
- CANADA ..... 3
- CHINA ..... 4
- EL SALVADOR ..... 5
- ENGLAND ..... 6
- FRANCE ..... 7
- GERMANY ..... 8
- GUAM ..... 9
- GUATEMALA ..... 10
- HUNGARY ..... 11
- INDIA ..... 12
- IRAN ..... 13
- IRELAND ..... 14
- ITALY ..... 15
- JAPAN ..... 16
- KOREA ..... 17
- MEXICO ..... 18
- PHILIPPINES ..... 19
- POLAND ..... 20
- PORTUGAL ..... 21
- PUERTO RICO ..... 22
- RUSSIA ..... 23
- TAIWAN ..... 24
- VIETNAM ..... 25
- VIRGIN ISLANDS ..... 26
- OTHER (SPECIFY: \_\_\_\_\_) .... 91
- REFUSED ..... -7
- DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_H11:**  
**IF QC09\_H10 = 1, 2, 9, 22, OR 26 (UNITED STATES OR ITS TERRITORIES), GO TO PROGRAMMING NOTE QC09\_H14;**  
**ELSE CONTINUE WITH QC09\_H11**

**QC09\_H11** Is (CHILD) a citizen of the United States?

**CH8A**

- YES ..... 1 **[GO TO QC09\_H13]**
- NO ..... 2
- APPLICATION PENDING ..... 3
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_H12** Is (CHILD) a permanent resident with a green card?

**CH9**

**[IF NEEDED, SAY: "People usually call this a green card but the color can also be pink, blue or white."]**

- YES ..... 1
- NO ..... 2
- APPLICATION PENDING ..... 3
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_H13** About how many years has (CHILD) lived in the United States?

**CH10**

**[FOR LESS THAN A YEAR, ENTER 1 YEAR]**

\_\_\_\_\_ NUMBER OF YEARS {OR}

**CH10YR**

\_\_\_\_\_ YEAR FIRST CAME TO LIVE IN U.S.

**CH10FMT**

- NUMBER OF YEARS ..... 1
- YEAR FIRST CAME TO LIVE IN US ..... 2
- REFUSED ..... -7
- DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_H14:**  
**IF MKA = MOTHER OF CHILD AND AH33 ≠ -1 (ALREADY ASKED IN ADULT QUESTIONNAIRE)**  
**THEN SKIP TO QC09\_H18;**  
**ELSE, CONTINUE WITH QC09\_H14 AND DISPLAY “was his mother/was her mother”**

**QC09\_H14** In what country {were you/was his mother/was her mother} born?

**CH11**

**[SELECT FROM MOST LIKELY COUNTRIES]**

**[FOR CHILDREN WHO WERE ADOPTED, QUESTION REFERS TO ADOPTIVE PARENTS]**

- UNITED STATES..... 1
- AMERICAN SAMOA ..... 2
- CANADA ..... 3
- CHINA..... 4
- EL SALVADOR ..... 5
- ENGLAND..... 6
- FRANCE ..... 7
- GERMANY..... 8
- GUAM ..... 9
- GUATEMALA..... 10
- HUNGARY ..... 11
- INDIA..... 12
- IRAN..... 13
- IRELAND..... 14
- ITALY ..... 15
- JAPAN..... 16
- KOREA..... 17
- MEXICO ..... 18
- PHILIPPINES ..... 19
- POLAND ..... 20
- PORTUGAL ..... 21
- PUERTO RICO ..... 22
- RUSSIA..... 23
- TAIWAN ..... 24
- VIETNAM ..... 25
- VIRGIN ISLANDS ..... 26
- OTHER (SPECIFY: \_\_\_\_\_) .... 91
- REFUSED..... -7
- DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_H15 AND QC09\_H16:**  
**IF QC09\_H14 = 1, 2, 9, 22, OR 26 (UNITED STATES OR ITS TERRITORIES), GO TO PROGRAMMING NOTE QC09\_H18;**  
**ELSE CONTINUE WITH QC09\_H15 AND IF RESPONDENT IS MOTHER OF CHILD DISPLAY “Are you”;**  
**ELSE DISPLAY “Is {his/her} mother”**

**QC09\_H15** {Are you/Is {his/her} mother} a citizen of the United States?

**CH11A**

**[IF R SAYS SHE IS A NATURALIZED CITIZEN, CODE YES]**

- YES ..... 1 **[GO TO QC09\_H17]**
- NO ..... 2
- APPLICATION PENDING ..... 3
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_H16** {Are you/Is {his/her} mother} a permanent resident with a green card?

**CH12**

- YES ..... 1
- NO ..... 2
- APPLICATION PENDING ..... 3
- REFUSED ..... -7
- DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_H17:**  
**IF RESPONDENT IS MOTHER OF CHILD, CONTINUE WITH QC09\_H17 AND DISPLAY “have you”;**  
**ELSE CONTINUE WITH QC09\_H17 AND DISPLAY “has {his/her} mother”**

**QC09\_H17** About how many years {have you/has {his/her} mother} lived in the United States?

**CH13**

\_\_\_\_\_ NUMBER OF YEARS [HR: 0-AGE] {OR}

**CH13YR**

\_\_\_\_\_ YEAR FIRST CAME TO LIVE IN U.S.

**CH13FMT**

- NUMBER OF YEARS ..... 1
- YEAR FIRST CAME TO LIVE IN US ..... 2
- MOTHER DECEASED ..... 3
- NEVER LIVED IN U.S. .... 4
- REFUSED ..... -7
- DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_H18:**  
**IF MKA = FATHER OF CHILD AND AH33 ≠ -1 (ALREADY ASKED IN ADULT QUESTIONNAIRE THEN SKIP TO QC09\_H22;**  
**ELSE CONTINUE WITH QC09\_H18 AND DISPLAY, “was {his/her} father”**

**QC09\_H18** In what country {were you/was his father/was her father} born?

**CH14**

**[SELECT FROM MOST LIKELY COUNTRIES]**

**[FOR CHILDREN WHO WERE ADOPTED, QUESTION REFERS TO ADOPTIVE PARENTS]**

- UNITED STATES..... 1
- AMERICAN SAMOA ..... 2
- CANADA ..... 3
- CHINA..... 4
- EL SALVADOR ..... 5
- ENGLAND..... 6
- FRANCE ..... 7
- GERMANY..... 8
- GUAM ..... 9
- GUATEMALA..... 10
- HUNGARY ..... 11
- INDIA..... 12
- IRAN..... 13
- IRELAND..... 14
- ITALY ..... 15
- JAPAN..... 16
- KOREA..... 17
- MEXICO ..... 18
- PHILIPPINES ..... 19
- POLAND ..... 20
- PORTUGAL ..... 21
- PUERTO RICO ..... 22
- RUSSIA..... 23
- TAIWAN ..... 24
- VIETNAM ..... 25
- VIRGIN ISLANDS ..... 26
- OTHER (SPECIFY: \_\_\_\_\_) .... 91
- REFUSED..... -7
- DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_H19 AND QC09\_H20:**  
**IF QC09\_H18 = 1, 2, 9, 22, OR 26 (UNITED STATES OR ITS TERRITORIES), GO TO PROGRAMMING NOTE QC09\_H22;**  
**ELSE CONTINUE WITH QC09\_H19 AND IF RESPONDENT IS FATHER OF CHILD DISPLAY “Are you”;**  
**ELSE SAY “Is {his/her} father”**

**QC09\_H19** {Are you/Is {his/her} father} a citizen of the United States?

**CH14A**

**[IF R SAYS HE IS A NATURALIZED CITIZEN, CODE YES]**

- YES ..... 1 **[GO TO PN QC09\_H21]**
- NO ..... 2
- APPLICATION PENDING ..... 3
- REFUSED ..... -7
- DON'T KNOW ..... -8

**QC09\_H20** {Are you/Is {his/her} father} a permanent resident with a green card?

**CH15**

- YES ..... 1
- NO ..... 2
- APPLICATION PENDING ..... 3
- REFUSED ..... -7
- DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_H21:**  
**IF RESPONDENT IS FATHER OF CHILD, CONTINUE WITH QC09\_H21 AND DISPLAY “have you”;**  
**ELSE, CONTINUE WITH QC09\_H21 AND DISPLAY “has {his/her} father”**

**QC09\_H21** About how many years {have you/has {his/her} father} lived in the United States?

**CH16**

\_\_\_\_\_ NUMBER OF YEARS [HR: 0-AGE]

{OR}

**CH16YR**

\_\_\_\_\_ YEAR FIRST CAME TO LIVE IN U.S.

**CH16FMT**

- NUMBER OF YEARS ..... 1
- YEAR FIRST CAME TO LIVE IN U.S. .... 2
- FATHER DECEASED ..... 3
- NEVER LIVED IN U.S. .... 4
- REFUSED ..... -7
- DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_H22:**  
**IF RESPONDENT IS SAMPLED ADULT, GO TO PROGRAMMING NOTE QC09\_H23;**  
**ELSE IF RESPONDENT ≠ ADULT RESPONDENT, CONTINUE WITH QC09\_H22**

**QC09\_H22** In general, what languages are spoken in (CHILD)'s home?

**CH17**

[PROBE: "Any others?"]

- ENGLISH ..... 1
- SPANISH ..... 2
- CANTONESE..... 3
- VIETNAMESE ..... 4
- TAGALOG..... 5
- MANDARIN ..... 6
- KOREAN ..... 7
- ASIAN INDIAN LANGUAGES..... 8
- RUSSIAN ..... 9
- OTHER1 (SPECIFY: \_\_\_\_\_) ..... 91
- OTHER2 (SPECIFY: \_\_\_\_\_) ..... 92
- REFUSED ..... -7
- DON'T KNOW ..... -8

**PROGRAMMING NOTE QC09\_H23:**  
**IF INTERVIEW CONDUCTED IN ENGLISH AND QC09\_H22 > 1 (TWO OR MORE LANGUAGES SPOKEN AT HOME), CONTINUE WITH QC09\_H23 AND DISPLAY "Compared to the language spoken in (CHILD)'s home,";**  
**ELSE IF QC09\_H22 = 1 (ONLY SPEAKS ENGLISH), GO TO PROGRAMMING NOTE QC09\_H24**

**QC09\_H23** {Compared to other languages spoken in (CHILD)'s home,} would you say you speak English....

**CH18**

- Very well,..... 1
- Fairly well, ..... 2
- Not well, or ..... 3
- Not at all? ..... 4
- REFUSED ..... -7
- DON'T KNOW ..... -8



**PROGRAMMING NOTE QC09\_H24:**  
**IF RESPONDENT IS NOT SAMPLED ADULT, CONTINUE WITH QC09\_H24;**  
**ELSE GO TO PROGRAMMING NOTE QC09\_H26**

**QC09\_H24**      What is the highest grade of education you have completed and received credit for?

**CH22**

<b>GRADE SCHOOL</b>	
1 <sup>ST</sup> GRADE .....	1
2 <sup>ND</sup> GRADE .....	2
3 <sup>RD</sup> GRADE .....	3
4 <sup>TH</sup> GRADE .....	4
5 <sup>TH</sup> GRADE .....	5
6 <sup>TH</sup> GRADE .....	6
7 <sup>TH</sup> GRADE .....	7
8 <sup>TH</sup> GRADE .....	8
<b>HIGH SCHOOL OR EQUIVALENT</b>	
9 <sup>TH</sup> GRADE .....	9
10 <sup>TH</sup> GRADE .....	10
11 <sup>TH</sup> GRADE .....	11
12 <sup>TH</sup> GRADE .....	12
<b>4-YEAR COLLEGE OR UNIVERSITY</b>	
1 <sup>ST</sup> YEAR (FRESHMAN) .....	13
2 <sup>ND</sup> YEAR (SOPHOMORE) .....	14
3 <sup>RD</sup> YEAR (JUNIOR) .....	15
4 <sup>TH</sup> YEAR (SENIOR) .....	16
5 <sup>TH</sup> YEAR .....	17
<b>GRADUATE OR PROFESSIONAL SCHOOL</b>	
1 <sup>ST</sup> YEAR GRAD OR PROF SCHOOL .....	18
2 <sup>ND</sup> YEAR GRAD OR PROF SCHOOL (MA/MS) .....	19
3 <sup>RD</sup> YEAR GRAND OR PROF SCHOOL .....	20
MORE THAN 3 YEARS GRAD OR PROF SCHOOL (PhD) .....	21
<b>2-YEAR JUNIOR OR COMMUNITY COLLEGE</b>	
1 <sup>ST</sup> YEAR .....	22
2 <sup>ND</sup> YEAR .....	23
<b>VOCATIONAL, BUSINESS, OR TRADE SCHOOL</b>	
1 <sup>ST</sup> YEAR .....	24
2 <sup>ND</sup> YEAR .....	25
MORE THAN 2 YEARS .....	26
HAD NO FORMAL EDUCATION .....	30
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QC09\_H25:  
 IF RESPONDENT IS NOT SAMPLED ADULT, CONTINUE WITH QC09\_H25;  
 ELSE GO TO END**

**QC09\_H25**      Those are my final questions. I appreciate your patience. Finally, do you think you would be willing to do a follow-up to this survey some time in the future?

**CG38**

- YES ..... 1
- MAYBE/PROBABLY YES ..... 2
- DEFINITELY NOT ..... 3
- REFUSED ..... -7
- DON'T KNOW ..... -8

**END**              Thank you. You have helped with a very important statewide survey. If you have any questions, you can contact Dr. Brown, the Principal Investigator. Do you want that number? **[IF YES, SAY:** Dr. Brown can be reached toll-free at 1-866-275-2447. **IF NO, SAY:** Goodbye.]