

March 3, 1999

Index to Instrument for Milwaukee Study: Wave 1

Section	Content	Pages	Questions
0	Identifying Information	2	Q1-Q6
1	Demographics	3-4	Q7-Q19
2	Household Composition	5-14	Q20-Q104
3	Non-Resident Family Children	15-19	Q105-Q136
4	Employment	20-39	Q137-Q268
5	Child Care	41-49	Q273-Q335
6	Education and Training	50-51	Q336-Q346
7	Housing	52-60	Q347-Q405
8	Government Program Participation	61-64	Q406-Q433
9	W-2 Experience and Participation	65-68	Q434-Q460
10	Household Income	69-71	Q461-Q488
11	Parenting	72-77	Q490-Q522
12	Child Health and Development	78-86	Q523-Q584
13	Child School and Recreation	87-88	Q586-Q596
14	Child Behavior	89-102	Q598-Q703
15	Parent Health and Well-Being	103-108	Q704-Q756
16	Alcohol and Drugs	109-110	Q757-Q768
17	Contact Information	111	Q782

Q1 CASE IDENTIFICATION NUMBER _____

Q2 NAME _____

Q3 W-2 AGENCY _____

Q4 ADDRESS _____

Q5 PHONE NUMBER _____

Q6 SOCIAL SECURITY NUMBER _____

Some of the questions that I ask you may seem redundant with questions I've already asked. That is, you may think you've already answered a very similar question. Other questions may seem irrelevant to you and your family. This is because I have to ask every person the same set of questions. I hope you understand.

Section 1: Demographics

Q7 **Telephone Interview: Ask respondent “Are you male or female?”**
In-Person Interview: Record respondent’s gender

Female.....01
Male.....02

Q8 What is your date of birth?

____ | ____ | ____
Month Day Year

Refused.....-999
Don’t Know.....-888

Q9 Were you born in the United States?

Yes.....01 **Go to Q12**

No.....02 **Go to Q10**

Refused.....-999
Don’t Know.....-888

Q10 In what country were you born? _____

Refused.....-999
Don’t Know.....-888

Q11 When did you come to live in the United States?

____ | ____
Month Year

Go to Q15

Refused.....-999
Don’t Know.....-888

Q12 Were you born in Wisconsin?

Yes.....01 **Go to Q15**

No.....02 **Go to Q13**

Refused.....-999
Don’t Know.....-888

Q13 When did you move to Wisconsin?

____ | ____
Month Year

Refused.....-999
Don’t Know.....-888

Q14 What state did you move from?

State _____

Refused.....-999
Don’t Know.....-888

Q15 What language is usually spoken in your home?

English.....01
Spanish.....02

Hmong.....03
 Other.....04
 Specify _____
 Refused.....-999
 Don't Know.....-888

Q16 What is your current marital status?
[Select the choice that best matches respondent's answer]
 Married.....01
 Divorced.....02
 Separated.....03
 Widowed.....04
 Single/Never married.....05
 Living with a partner.....06
 Refused.....-999
 Don't Know.....-888

Q17 What is your race?
 Hispanic/Latino.....01 **Go to Q20**

 Asian/Pacific Islander.....02 **Go to Q19**

 White/Caucasian.....03 **Go to Q18**
 Black/African-American.....04
 Native American/American Indian.....05
 Bi-racial/Multi-racial.....06
 Other.....07
 Specify _____
 Refused.....-999
 Don't Know.....-888

Q18 Are you Hispanic/Latino?
 Yes.....01 **Go to Q20**
 No.....02
 Refused.....-999
 Don't Know.....-888

Q19 Are you Hmong?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888

Section 2: Household Composition

Q20 Counting yourself, how many people are currently living in your household? By household, I mean all of the adults and children who usually live with you.

Number of Persons _____
 Refused.....-999
 Don't Know.....-888

Q21 How many of the people who live with you are adults? By adults, I mean anyone 18 years of age or older. Please include both family members and non-family members as well as any adult children who may still be living with you. And, again, be sure to include yourself.

Number of Adults _____ **If Q21 = 1 Go to Q23; Otherwise Go to Q22**
 Refused.....-999
 Don't Know.....-888

Q22 Are any of these adults your spouse or partner?

Yes, spouse.....01
 Yes, partner.....02
 No.....03
 Refused.....-999
 Don't Know.....-888

Q23 How many of the people you live with are children? By children, I mean anyone **under the age of 18**. Please include both your children and any other children who may be in the household.

Number of Children _____
 Refused.....-999
 Don't Know.....-888

I would like to talk about the children living with you now. I am going to ask you for each child's first name, date of birth, and gender. I would also like to know if the child is yours by birth or adoption, and if not, how the child is related to you. If more than one child is living with you, please start with the youngest child.

Q24 What is the first child's name?

[If respondent does not want to give the child's name, ask for the child's initials.]

First Name or Initials of Child #1 _____
 Refused.....-999

Q25 What is that child's date of birth?

____ | ____ | ____
 Month Day Year
 Refused.....-999
 Don't Know.....-888

Q26 Is that child male or female?

Male.....01
 Female.....02
 Refused.....-999

Q27 Is that child yours by birth or adoption?

Yes.....01 **If Q23 > 1 Go to Q31; Otherwise Go to Q94**

- No..... 02 **Go to Q28**
- Refused.....-999 **If Q23 > 1 Go to Q31; Otherwise Go to Q94**
-
- Q28 How is that child related to you?
- You are the child's foster parent.....01 **If Q23 > 1 Go to Q31; Otherwise Go to Q94**
- You are the child's grandparent.....02 **Go to Q29**
- You are the child's great-grandparent.....03
- You are the child's aunt or uncle.....04
- Other.....05
- Specify _____
- Refused.....-999
-
- Q29 Does that child's parent live with you?
- Yes.....01 **If Q23 > 1 Go to Q31; Otherwise Go to Q94**
- No.....02 **Go to Q30**
- Refused.....-999
-
- Q30 Does the county send you a check each month to help you care for that child?
- Yes.....01 **If Q23 > 1 Go to Q31; Otherwise Go to Q94**
- No.....02
- Refused.....-999
- Don't Know.....-888
-
- Q31 What is the second child's name?
- [If respondent does not want to give the child's name, ask for the child's initials.]**
- First Name or Initials of Child #2 _____
- Refused.....-999
-
- Q32 What is that child's date of birth?
- ____ | ____ | ____
- Month Day Year
- Refused.....-999
- Don't Know.....-888
-
- Q33 Is that child male or female?
- Male.....01
- Female.....02
- Refused.....-999
-
- Q34 Is that child yours by birth or adoption?
- Yes.....01 **If Q23 > 2 Go to Q38; Otherwise Go to Q94**
- No..... 02 **Go to Q35**

- Refused.....-999 **If Q23 > 2 Go to Q38; Otherwise Go to Q94**
- Q35 How is that child related to you?
 You are the child's foster parent.....01 **If Q23 > 2 Go to Q38; Otherwise Go to Q94**
- You are the child's grandparent.....02 **Go to Q36**
 You are the child's great-grandparent.....03
 You are the child's aunt or uncle.....04
 Other.....05
 Specify _____
 Refused.....-999
- Q36 Does that child's parent live with you?
 Yes.....01 **If Q23 > 2 Go to Q38; Otherwise Go to Q94**
- No.....02 **Go to Q37**
 Refused.....-999
- Q37 Does the county send you a check each month to help you care for that child?
 Yes.....01 **If Q23 > 2 Go to Q38; Otherwise Go to Q94**
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q38 What is the third child's name?
[If respondent does not want to give the child's name, ask for the child's initials.]
 First Name or Initials of Child #3 _____
 Refused.....-999
- Q39 What is that child's date of birth?
 ____ | ____ | ____
 Month Day Year
 Refused.....-999
 Don't Know.....-888
- Q40 Is that child male or female?
 Male.....01
 Female.....02
 Refused.....-999
- Q41 Is that child yours by birth or adoption?
 Yes.....01 **If Q23 > 3 Go to Q45; Otherwise Go to Q94**
- No..... 02 **Go to Q42**
- Refused.....-999 **If Q23 > 3 Go to Q45; Otherwise Go to Q94**
- Q42 How is that child related to you?

- You are the child's foster parent.....01 **If Q23 > 3 Go to Q45; Otherwise Go to Q94**
- You are the child's grandparent.....02 **Go to Q43**
- You are the child's great-grandparent.....03
- You are the child's aunt or uncle.....04
- Other.....05
- Specify _____
- Refused.....-999
- Q43 Does that child's parent live with you?
- Yes.....01 **If Q23 > 3 Go to Q45; Otherwise Go to Q94**
- No.....02 **Go to Q44**
- Refused.....-999
- Q44 Does the county send you a check each month to help you care for that child?
- Yes.....01 **If Q23 > 3 Go to Q45; Otherwise Go to Q94**
- No.....02
- Refused.....-999
- Don't Know.....-888
- Q45 What is the fourth child's name?
- [If respondent does not want to give the child's name, ask for the child's initials.]**
- First Name or Initials of Child #4 _____
- Refused.....-999
- Q46 What is that child's date of birth?
- ____ | ____ | ____
- Month Day Year
- Refused.....-999
- Don't Know.....-888
- Q47 Is that child male or female?
- Male.....01
- Female.....02
- Refused.....-999
- Q48 Is that child yours by birth or adoption?
- Yes.....01 **If Q23 > 4 Go to Q52; Otherwise Go to Q94**
- No..... 02 **Go to Q49**
- Refused.....-999 **If Q23 > 4 Go to Q52; Otherwise Go to Q94**
- Q49 How is that child related to you?
- You are the child's foster parent.....01 **If Q23 > 4 Go to Q52; Otherwise Go to Q94**
- You are the child's grandparent.....02 **Go to Q50**
- You are the child's great-grandparent.....03
- You are the child's aunt or uncle.....04
- Other.....05

Specify _____
Refused.....-999

Q50 Does that child's parent live with you?
Yes.....01 **If Q23 > 4 Go to Q52; Otherwise Go to Q94**
No.....02 **Go to Q51**
Refused.....-999

Q51 Does the county send you a check each month to help you care for that child?
Yes.....01 **If Q23 > 4 Go to Q52; Otherwise Go to Q94**
No.....02
Refused.....-999
Don't Know.....-888

Q52 What is the fifth child's name?
[If respondent does not want to give the child's name, ask for the child's initials.]
First Name or Initials of Child #5 _____
Refused.....-999

Q53 What is that child's date of birth?
____ | ____ | ____
Month Day Year
Refused.....-999
Don't Know.....-888

- Q54 Is that child male or female?
 Male.....01
 Female.....02
 Refused.....-999
- Q55 Is that child yours by birth or adoption?
 Yes.....01 **If Q23 > 5 Go to Q59; Otherwise Go to Q94**
 No..... 02 **Go to Q56**
 Refused.....-999 **If Q23 > 5 Go to Q59; Otherwise Go to Q94**
- Q56 How is that child related to you?
 You are the child's foster parent.....01 **If Q23 > 5 Go to Q59; Otherwise Go to Q94**
 You are the child's grandparent.....02 **Go to Q57**
 You are the child's great-grandparent.....03
 You are the child's aunt or uncle.....04
 Other.....05
 Specify _____
 Refused.....-999
- Q57 Does that child's parent live with you?
 Yes.....01 **If Q23 > 5 Go to Q59; Otherwise Go to Q94**
 No.....02 **Go to Q58**
 Refused.....-999
- Q58 Does the county send you a check each month to help you care for that child?
 Yes.....01 **If Q23 > 5 Go to Q59; Otherwise Go to Q94**
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q59 What is the sixth child's name?
[If respondent does not want to give the child's name, ask for the child's initials.]
 First Name or Initials of Child #6 _____
 Refused.....-999
- Q60 What is that child's date of birth?
 ____ | ____ | ____
 Month Day Year
 Refused.....-999
 Don't Know.....-888
- Q61 Is that child male or female?
 Male.....01
 Female.....02
 Refused.....-999

- Q62 Is that child yours by birth or adoption?
 Yes.....01 **If Q23 > 6 Go to Q66; Otherwise Go to Q94**
 No..... 02 **Go to Q63**
 Refused.....-999 **If Q23 > 6 Go to Q66; Otherwise Go to Q94**
- Q63 How is that child related to you?
 You are the child's foster parent.....01 **If Q23 > 6 Go to Q66; Otherwise Go to Q94**
 You are the child's grandparent.....02 **Go to Q64**
 You are the child's great-grandparent.....03
 You are the child's aunt or uncle.....04
 Other.....05
 Specify _____
 Refused.....-999
- Q64 Does that child's parent live with you?
 Yes.....01 **If Q23 > 6 Go to Q66; Otherwise Go to Q94**
 No.....02 **Go to Q65**
 Refused.....-999
- Q65 Does the county send you a check each month to help you care for that child?
 Yes.....01 **If Q23 > 6 Go to Q66; Otherwise Go to Q94**
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q66 What is the seventh child's name?
[If respondent does not want to give the child's name, ask for the child's initials.]
 First Name or Initials of Child #7 _____
 Refused.....-999
- Q67 What is that child's date of birth?
 ____ | ____ | ____
 Month Day Year
 Refused.....-999
 Don't Know.....-888
- Q68 Is that child male or female?
 Male.....01
 Female.....02
 Refused.....-999
- Q69 Is that child yours by birth or adoption?
 Yes.....01 **If Q23 > 7 Go to 73 Otherwise Go to Q94**
 No..... 02 **Go to Q70**

- Refused.....-999 **If Q23 > 7 Go to Q73; Otherwise Go to Q94**
- Q70 How is that child related to you?
 You are the child's foster parent.....01 **If Q23 > 7 Go to Q73; Otherwise Go to Q94**
- You are the child's grandparent.....02 **Go to Q71**
 You are the child's great-grandparent.....03
 You are the child's aunt or uncle.....04
 Other.....05
 Specify _____
 Refused.....-999
- Q71 Does that child's parent live with you?
 Yes.....01 **If Q23 > 7 Go to Q73; Otherwise Go to Q94**
- No.....02 **Go to Q72**
 Refused.....-999
- Q72 Does the county send you a check each month to help you care for that child?
 Yes.....01 **If Q23 > 7 Go to Q73; Otherwise Go to Q94**
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q73 What is the eighth child's name?
[If respondent does not want to give the child's name, ask for the child's initials.]
 First Name or Initials of Child #8 _____
 Refused.....-999
- Q74 What is that child's date of birth?
 ____ | ____ | ____
 Month Day Year
 Refused.....-999
 Don't Know.....-888
- Q75 Is that child male or female?
 Male.....01
 Female.....02
 Refused.....-999
- Q76 Is that child yours by birth or adoption?
 Yes.....01 **If Q23 > 8 Go to Q80; Otherwise Go to Q94**
- No..... 02 **Go to Q77**
- Refused.....-999 **If Q23 > 8 Go to Q80; Otherwise Go to Q94**
- Q77 How is that child related to you?

- You are the child's foster parent.....01 **If Q23 > 8 Go to Q80; Otherwise Go to Q94**
- You are the child's grandparent.....02 **Go to Q78**
- You are the child's great-grandparent.....03
- You are the child's aunt or uncle.....04
- Other.....05
- Specify _____
- Refused.....-999
- Q78 Does that child's parent live with you?
- Yes.....01 **If Q23 > 8 Go to Q80; Otherwise Go to Q94**
- No.....02 **Go to Q79**
- Refused.....-999
- Q79 Does the county send you a check each month to help you care for that child?
- Yes.....01 **If Q23 > 8 Go to Q80; Otherwise Go to Q94**
- No.....02
- Refused.....-999
- Don't Know.....-888
- Q80 What is the ninth child's name?
[If respondent does not want to give the child's name, ask for the child's initials.]
 First Name or Initials of Child #9 _____
- Refused.....-999
- Q81 What is that child's date of birth?
 ____ | ____ | ____
 Month Day Year
- Refused.....-999
- Don't Know.....-888
- Q82 Is that child male or female?
- Male.....01
- Female.....02
- Refused.....-999
- Q83 Is that child yours by birth or adoption?
- Yes.....01 **If Q23 > 9 Go to Q87; Otherwise Go to Q94**
- No..... 02 **Go to Q84**
- Refused.....-999 **If Q23 > 9 Go to Q87; Otherwise Go to Q94**
- Q84 How is that child related to you?
- You are the child's foster parent.....01 **If Q23 > 9 Go to Q87; Otherwise Go to Q94**
- You are the child's grandparent.....02 **Go to Q85**
- You are the child's great-grandparent.....03
- You are the child's aunt or uncle.....04
- Other.....05

- Specify _____
 Refused.....-999
- Q85 Does that child's parent live with you?
 Yes.....01 **If Q23 > 9 Go to Q87; Otherwise Go to Q94**
 No.....02 **Go to Q86**
 Refused.....-999
- Q86 Does the county send you a check each month to help you care for that child?
 Yes.....01 **If Q23 > 9 Go to 87; Otherwise Go to Q94**
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q87 What is the tenth child's name?
[If respondent does not want to give the child's name, ask for the child's initials.]
 First Name or Initials of Child #10 _____
 Refused.....-999
- Q88 What is that child's date of birth?
 ____ | ____ | ____
 Month Day Year
 Refused.....-999
 Don't Know.....-888
- Q89 Is that child male or female?
 Male.....01
 Female.....02
 Refused.....-999
- Q90 Is that child yours by birth or adoption?
 Yes.....01 **Go to Q94**
 No..... 02 **Go to Q91**
 Refused.....-999 **Go to Q94**
- Q91 How is that child related to you?
 You are the child's foster parent.....01 **Go to Q94**
 You are the child's grandparent.....02 **Go to Q92**
 You are the child's great-grandparent.....03
 You are the child's aunt or uncle.....04
 Other.....05
 Specify _____
 Refused.....-999

- Q92 Does that child's parent live with you?
 Yes.....01 **Go to Q94**
 No.....02 **Go to Q93**
 Refused.....-999
- Q93 Does the county send you a check each month to help you care for that child?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888

The next few questions refer only to the children {child} we just talked about who are yours by birth or adoption.

- Q94 Do any of the children {Does the child} have a parent who is living somewhere other than with you?
 Yes.....01 **Go to Q95**
 No.....02 **Go to Q103**
 N/A (e.g., parent deceased).....-777
 Refused.....-999
 Don't Know.....-888
- Q95 How many of the children have a parent who is living somewhere else?
 Number of children _____
 Refused.....-999
 Don't Know.....-888
- Q96 Do any of the children {Does the child} have a parent who has been ordered to pay child support by the court?
 Yes.....01 **Go to Q97**
 No.....02 **Go to Q101**
 N/A (e.g., parent deceased).....-777
 Refused.....-999
 Don't Know.....-888
- Q97 How many different parents are you supposed to receive child support from each month?
 Number of parents _____
 Refused.....-999
 Don't Know.....-888
- Q98 How many different parents do you usually receive child support from each month?
 Number of parents _____
 Refused.....-999
 Don't Know.....-888
- Q99 How much child support are you supposed to receive in total each month?
 \$ _____
 Refused.....-999
 Don't Know.....-888

Q100 How much child support did you actually receive last month?

\$ _____

Refused.....-999

Don't Know.....-888

Q101 Do any of the children {Does the child} have a parent from whom you received any other form of support last month? By support, I mean either money that was not court-ordered or help with other things your children need {child needs} such as food, clothes, diapers, formula, etc.

Yes, both money and other things.....01 **Go to Q102**

Yes, money only.....02

Yes, other things only.....03 **Go to Q103**

No, neither.....04

Refused.....-999

Don't Know.....-888

Q102 About how much money did you receive that was not court ordered?

\$ _____

Refused.....-999

Don't Know.....-888

Q103 Have any of the children who are {Has the child who is} currently living with you ever been in foster care?

Yes.....01 **If Q23 > 1 Go to Q104; Otherwise Go to Q105**

No.....02 **Go to Q105**

Refused.....-999

Don't Know.....-888

Q104 Which child or children?

Refused.....-999

Don't Know.....-888

Section 3: Non-Resident Family Children

Q105 Do you have any children under the age of 18 who are yours by birth or adoption and who are not living with you at the present time?
 Yes.....01 **Go to Q106**
 No.....02 **Go to Q137**
 Refused.....-999

Q106 How many of your children under the age of 18 are not living with you at the present time?
 Number of Children _____
 Refused.....-999
 Don't Know.....-888

I'd like you to tell me the first name, age and gender of each child under the age of 18 who is not living with you right now. If you have more than one child who is not living with you, please start with the youngest child.

Q107 What is the first child's name?
[If respondent does not want to give the child's name, ask for the child's initials.]
 First Name or Initials of NR Child #1 _____
 Refused.....-999

Q108 What is that child's date of birth?
 ____ | ____ | ____
 Month Day Year
 Refused.....-999
 Don't Know.....-888

Q109 Is that child male or female?
 Male.....01
 Female.....02
 Refused.....-999

Q110 Where does [name of NR Child #1] live?
[Select choice that best matches respondent's answer.]
 With grandparent.....01 **Go to Q111**
 With other relative.....02
 With other parent.....03 **If Q106 > 1 Go to Q113; Otherwise Go to Q137**
 With adoptive parents.....04
 In a foster home.....05
 In a group home.....06
 Incarcerated/ juvenile detention facility.....07
 On own/independent.....08
 Child is deceased.....09
 Other.....10
 Specify _____
 Refused.....-999
 Don't know-888

- Q111 Is this a formal arrangement ordered by the court like kinship foster care or an informal arrangement between you and the child's grandparent or other relative?
 Formal/Court-Ordered.....01 **If Q106 > 1 Go to Q113; Otherwise Go to Q137**
 Informal.....02 **Go to Q112**
 Refused.....-999
 Don't know-888
- Q112 Does the child's grandparent or other relative receive a check each month from the county to help care for that child?
 Yes.....01 **If Q106 > 1 Go to Q113; Otherwise Go to Q137**
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q113 What is the second child's name?
[If respondent does not want to give the child's name, ask for the child's initials.]
 First Name or Initials of NR Child #2 _____
 Refused.....-999
- Q114 What is that child's date of birth?
 ____ | ____ | ____
 Month Day Year
 Refused.....-999
 Don't Know.....-888
- Q115 Is that child male or female?
 Male.....01
 Female.....02
 Refused.....-999
- Q116 Where does [name of NR Child #2] live?
[Select choice that best matches respondent's answer.]
 With grandparent.....01 **Go to Q117**
 With other relative.....02
 With other parent.....03 **If Q106 > 2 Go to Q119; Otherwise Go to Q137**
 With adoptive parents.....04
 In a foster home.....05
 In a group home.....06
 Incarcerated/ juvenile detention facility.....07
 On own/independent.....08
 Child is deceased.....09
 Other.....10
 Specify _____
 Refused.....-999
 Don't know-888
- Q117 Is this a formal arrangement ordered by the court like kinship foster care or an informal arrangement between you

and the child's grandparent or other relative?
Formal/Court-Ordered.....01

If Q106 > 2 Go to Q119; Otherwise Go to Q137

Informal.....02
Refused.....-999
Don't know-888

Go to Q118

Q118 Does the child's grandparent or other relative receive a check each month from the county to help care for that child?

Yes.....01
No.....02
Refused.....-999
Don't Know.....-888

If Q106 > 2 Go to Q119; Otherwise Go to Q137

Q119 What is the third child's name?

[If respondent does not want to give the child's name, ask for the child's initials.]

First Name or Initials of NR Child #3 _____
Refused.....-999

Q120 What is that child's date of birth?

____ | ____ | ____
Month Day Year

Refused.....-999
Don't Know.....-888

Q121 Is that child male or female?

Male.....01
Female.....02
Refused.....-999

Q122 Where does [name of NR Child #3] live?

[Select choice that best matches respondent's answer.]

With grandparent.....01
With other relative.....02

Go to Q123

With other parent.....03
With adoptive parents.....04
In a foster home.....05
In a group home.....06
Incarcerated/ juvenile detention facility.....07
On own/independent.....08
Child is deceased.....09
Other.....10
Specify _____

If Q106 > 3 Go to Q125; Otherwise Go to Q137

Refused.....-999
Don't know-888

Q123 Is this a formal arrangement ordered by the court like kinship foster care or an informal arrangement between you

and the child's grandparent or other relative?
Formal/Court-Ordered.....01

If Q106 > 3 Go to Q125; Otherwise Go to Q137

Informal.....02
Refused.....-999
Don't know-888

Go to Q124

Q124 Does the child's grandparent or other relative receive a check each month from the county to help care for that child?

Yes.....01
No.....02
Refused.....-999
Don't Know.....-888

If Q106 > 3 Go to Q125; Otherwise Go to Q137

Q125 What is the fourth child's name?

[If respondent does not want to give the child's name, ask for the child's initials.]

First Name or Initials of NR Child #4 _____
Refused.....-999

Q126 What is that child's date of birth?

____ | ____ | ____
Month Day Year
Refused.....-999
Don't Know.....-888

Q127 Is that child male or female?

Male.....01
Female.....02
Refused.....-999

Q128 Where does [name of NR Child #4] live?

[Select choice that best matches respondent's answer.]

With grandparent.....01
With other relative.....02

Go to Q129

With other parent.....03
With adoptive parents.....04
In a foster home.....05
In a group home.....06
Incarcerated/ juvenile detention facility.....07
On own/independent.....08
Child is deceased.....09
Other.....10
Specify _____
Refused.....-999
Don't know-888

If Q106 > 4 Go to Q130; Otherwise Go to Q137

- Q129 Is this a formal arrangement ordered by the court like kinship foster care or an informal arrangement between you and the child's grandparent or other relative?
 Formal/Court-Ordered.....01 **If Q106 > 4 Go to Q131; Otherwise Go to Q137**
 Informal.....02 **Go to Q130**
 Refused.....-999
 Don't know-888
- Q130 Does the child's grandparent or other relative receive a check each month from the county to help care for that child?
 Yes.....01 **If Q106 > 4 Go to Q131; Otherwise Go to 137**
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q131 What is the fifth child's name?
[If respondent does not want to give the child's name, ask for the child's initials]
 First Name or Initials of NR Child #5 _____
 Refused.....-999
- Q132 What is that child's date of birth?
 ____ | ____ | ____
 Month Day Year
 Refused.....-999
 Don't Know.....-888
- Q133 Is that child male or female?
 Male.....01
 Female.....02
 Refused.....-999
- Q134 Where does [name of NR Child #5] live?
 With grandparent.....01 **Go to Q135**
 With other relative.....02
 With other parent.....03 **Go to Q137**
 With adoptive parents.....04
 In a foster home.....05
 In a group home.....06
 Incarcerated/ juvenile detention facility.....07
 On own/independent.....08
 Child is deceased.....09
 Other.....10
 Specify _____
 Refused.....-999
 Don't know-888

Q135 Is this a formal arrangement ordered by the court like kinship foster care or an informal arrangement between you and the child's grandparent or other relative?

Formal/Court-Ordered.....01 **Go to Q137**

Informal.....02 **Go to Q136**

Refused.....-999

Don't know-888

Q136 Does the child's grandparent or other relative receive a check each month from the county to help care for that child?

Yes.....01

No.....02

Refused.....-999

Don't Know.....-888

Section 4: Employment

The next questions are about paid jobs you may have had.

- Q137 Are you currently employed either full-time or part-time?
Yes.....01 **Go to Q178**
No.....02 **Go to Q138**
Refused.....-999
Don't Know.....-888
- Q138 Have you ever had a full-time or part-time job for which you were paid?
Yes.....01 **Go to Q139**
No.....02 **Go to Q159**
Refused.....-999
Don't Know.....-888
- Q139 How many different full-time and/or part-time jobs have you had in the past two years?
Number of jobs _____
Refused.....-999
Don't Know.....-888
- Q140 There are many different reasons why people are not employed. What would you say are the reasons you are not employed at this time?
[Select all choices that match respondent's answers.]
[After initial response, probe with: Are there any other reasons?]
You don't have any marketable job skills.....01
You don't have enough education.....02
You can't find anyone you trust to care for your children.....03
You can't afford to pay for child care.....04
You believe it would be harmful for your children if you worked.....05
You have a disability or are ill.....06
You are needed at home to care for an elderly, ill, or disabled family member.....07
Your are pregnant or have given birth within the past 12 weeks.....08
You are attending school or a training program.....09
You don't have access to transportation to get to work.....10
You have not been able to find the kind of job you are looking for.....11
You feel you have been discriminated against by employers.....12
You prefer not to work.....13
You cannot find a job that pays enough to support your family.....14
Other.....15
Specify _____
Refused.....-999
Don't Know.....-888

If Q140 = 12 Go to Q141; Otherwise Go to Q142

- Q141 Employers have discriminated against you for what reason?
[Select choice the best matches respondent's answer]
 Because of your race/ethnicity.....01
 Because of your gender.....02
 Because of your religion.....03
 Because of your age.....04
 Because of your disability.....05
 Because of your sexual orientation.....06
 Because you are poor.....07
 Because you are a single parent.....08
 Because you are a W-2 participant.....09
 Other.....10
 Specify _____
 Refused.....-999
 Don't Know.....-888

- Q142 Have you been trying to find a job during the past two weeks?
 Yes.....01 **Go to Q143**
 No.....02 **Go to Q157**
 Refused.....-999 **Go to Q143**
 Don't Know.....-888

I am going to read you a list of things people often do when they are looking for work. For each one, please tell whether or not you have done that during the past two weeks to try to find a job.

		Yes	No	R	DK
Q143	Did you check the classified or help wanted ads?	01	02	-999	-888
Q144	Did you respond to a classified ad or help wanted sign?	01	02	-999	-888
Q145	Did you contact employers to see if they were hiring?	01	02	-999	-888
Q146	Did you send out a resume? [Prompt: A resume is a paper which describes your education, job skills and previous work experience.]	01	02	-999	-888
Q147	Did you fill out at least one job application?	01	02	-999	-888
Q148	Did you have at least one job interview?	01	02	-999	-888
Q149	Did you participate in a job club? [Prompt: A job club is a group that helps people with their job search]	01	02	-999	-888
Q150	Did you visit a job center to do a job search?	01	02	-999	-888
Q151	Did you meet with a job counselor or job coach?	01	02	-999	-888
Q152	Did you register with a temporary agency?	01	02	-999	-888

Q153 Did ask friends or relatives if they knew of any job openings? 01 02 -999 -888

Q154 Is there anything else you did during the past two weeks to find a job?
Yes.....01 **Go to Q155**
No.....02 **Go to Q156**
Refused.....-999
Don't Know.....-888

Q155 What else have you done to find a job?

Refused.....-999
Don't Know.....-888

Q156 Altogether, about how many hours have you spent looking for work during the past two weeks?
Number of hours _____ **Go to Q158**
Refused.....-999
Don't Know.....-888

Q157 There are many different reasons why people do not look for work when they are not employed. What would you say are the reasons you are not looking for work at this time?
[Select all choices that match respondent's answers.]
[After initial response, probe with: Are there any other reasons?]
You don't have any marketable job skills.....01
You don't have enough education.....02
You can't find anyone you trust to care for your children.....03
You can't afford to pay for child care.....04
You believe it would be harmful for your children if you worked.....05
You have a disability or are ill.....06
You are needed at home to care for an elderly, ill, or disabled family member.....07
Your are pregnant or have given birth within the past 12 weeks.....08
You are attending school or a training program.....09
You don't have access to transportation to get to work.....10
You have not been able to find the kind of job you are looking for.....11
You feel you have been discriminated against by employers.....12
You prefer not to work.....13
You cannot find a job that pays enough to support your family.....14
Other.....15
Specify _____
Refused.....-999
Don't Know.....-888

Q158 What is the lowest hourly wage (before taxes and other deductions) you would be willing to work for today?
\$ ____ . ____
You wouldn't work for any wage.....-666 **Go to Q226**

Refused.....	-999
Don't Know.....	-888

Q159 There are many different reasons why people are not employed. What would you say are the reasons you are not employed at this time?

[Select all choices that match respondent's answers.]

[After initial response, probe with: Are there any other reasons?]

- You don't have any marketable job skills.....01
- You don't have enough education.....02
- You can't find anyone you trust to care for your children.....03
- You can't afford to pay for child care.....04
- You believe it would be harmful for your children if you worked.....05
- You have a disability or are ill.....06
- You are needed at home to care for an elderly, ill, or disabled family member.....07
- You are pregnant or have given birth within the past 12 weeks.....08
- You are attending school or a training program.....09
- You don't have access to transportation to get to work.....10
- You have not been able to find the kind of job you are looking for.....11
- You feel you have been discriminated against by employers.....12
- You prefer not to work.....13
- You cannot find a job that pays enough to support your family.....14
- Other.....15
- Specify _____
- Refused.....-999
- Don't Know.....-888

If Q159 = 12 Go to Q160; Otherwise Go to Q161

Q160 Employers have discriminated against you for what reason?

[Select choice that best matches respondent's answer]

- Because of your race/ethnicity.....01
- Because of your gender.....02
- Because of your religion.....03
- Because of your age.....04
- Because of your disability.....05
- Because of your sexual orientation.....06
- Because you are poor.....07
- Because you are a single parent.....08
- Because you are a W-2 participant.....09
- Other.....10
- Specify _____
- Refused.....-999
- Don't Know.....-888

Q161 Have you been trying to find a job during the past two weeks?

- Yes.....01 **Go to Q162**
- No.....02 **Go to Q176**
- Refused.....-999 **Go to Q162**
- Don't Know.....-888

I am going to read you a list of things people often do when they are looking for work. For each one, please tell whether or not you have done that during the past two weeks to try to find a job.

Q176 There are many different reasons why people do not look for work when they are not employed. What would you say are the reasons you are not looking for work at this time?
[Select all choices that match respondent's answers.]
[After initial response, probe with: Are there any other reasons?]

You don't have any marketable job skills.....	01
You don't have enough education.....	02
You can't find anyone you trust to care for your children.....	03
You can't afford to pay for child care.....	04
You believe it would be harmful for your children if you worked.....	05
You have a disability or are ill.....	06
You are needed at home to care for an elderly, ill, or disabled family member....	07
Your are pregnant or have given birth within the past 12 weeks.....	08
You are attending school or a training program.....	09
You don't have access to transportation to get to work.....	10
You have not been able to find the kind of job you are looking for.....	11
You feel you have been discriminated against by employers.....	12
You prefer not to work.....	13
You cannot find a job that pays enough to support your family.....	14
Other.....	15
Specify _____	
Refused.....	-999
Don't Know.....	-888

Q177 What is the lowest hourly wage (before deductions) you would be willing to work for today?
 \$__ . __
Go to Q269

You would not work for any wage.....	-666
Refused.....	-999
Don't Know.....	-888

Interviewer: I would like to ask you some questions about your current job.
[Interviewer: If respondent has more than one job at the present time add:
Let's start with your main job, that is, the one you work more hours at.]

Q178 Who is your current employer? (Where do you currently work?)
[Interviewer: If respondent is self-employed, record "self-employed"]

Refused.....	-999
Don't Know.....	-888

Q179 What do you do at your workplace (What is your job title?)
[Interviewer: If respondent is self-employed: What do you do?]

Refused.....	-999
Don't Know.....	-888

Q180 When did you start working at that job? The month and year is fine if you do not remember the exact date.
[Interviewer: If respondent is self-employed: When did you start doing that?]

__ __ | __ __ | __ __

Month Day Year

Refused.....-999
Don't Know.....-888

Q181 How many hours do you usually work at this job in a typical week?

Number of hours worked _____
Refused.....-999
Don't Know.....-888

Q182 What is your rate of pay (before taxes and other deductions)?

[Interviewer: If respondent is self-employed: About how much money do you make doing that?]
\$ _____ . _____ Per hour Per day Per week Per month Per year
[Select the appropriate time frame]

Refused.....-999
Don't Know.....-888

Q183 How do you usually get to work?

[Select choice that best matches respondent's answer.]

You drive yourself......01
You get a ride from someone else......02
You take the bus......03
You take a taxi......04
You ride a bicycle......05
You walk......06
Other......07

Specify _____
Refused.....-999
Don't Know.....-888

Q184 Do you take any of your children {your child} to child care before going to work?

Yes......01 **Go to Q185**

No......02 **Go to Q189**

Refused.....-999
Don't Know.....-888

Q185 How do you usually take your children {child} to child care?

[Select choice that best matches respondent's answer.]

You drive your children {child} there yourself......01
You and your children {child} get a ride there from someone else......02
You take your children {child} there by bus......03
You take your children {child} there by taxi......04
You take your children {child} there by bicycle......05
You walk there with your children {child}......06
Other......07

Specify _____
Refused.....-999
Don't Know.....-888

Q186 How many different child care providers do you normally go to before going to work?

Number of child care providers _____
Refused.....-999

Don't Know.....-888

Q187

Including the time required to take your children {child} to child care, how much time do you need to get from home to the place where you work?

____ _ Minutes Hours
[Select appropriate unit of time]

Refused.....-999

Don't Know.....-888

- Q188 How long would you need to get to work if you didn't have to take your children {child} to child care?
 _____ Minutes Hours **Go to Q190**
[Select appropriate unit of time]
 Refused.....-999
 Don't Know.....-888
- Q189 How much time do you need to get from home to the place where you work?
 _____ Minutes Hours
[Select appropriate unit of time]
 Refused.....-999
 Don't Know.....-888
- Q190 In the past month, were you ever late for work because you had a problem with transportation?
 Yes......01
 No......02
 Refused.....-999
 Don't Know.....-888
- Q191 In the past month, did you ever miss work because you had a problem with transportation?
 Yes......01
 No......02
 Refused.....-999
 Don't Know.....-888
- Q192 In the past month, about how often has transportation been a problem in terms of your getting to work?
 Never......01
 Once or twice......02
 Three or four times......03
 Once or twice a week......04
 Three or four times a week......05
 Almost every day......06
 Refused.....-999
 Don't Know.....-888
- Q193 Does your employer offer a health insurance plan?
 Yes......01 **Go to Q194**
 No......02 **Go to Q197**
 N/A (e.g., self-employed).....-777
 Refused.....-999
 Don't Know.....-888
- Q194 Do you receive health insurance through your employer?
 Yes......01 **Go to Q196**
 No......02 **Go to Q195**
 Refused.....-999 **Go to Q197**
 Don't Know.....-888

Q195 Why don't you receive health insurance through your employer?
[Select choice that best matches respondent's answer]
 It costs too much.....01 **Go to Q197**
 You have not been working there long enough to be eligible.....02
 You do not work enough hours to be eligible
 (e.g., part-time employment).....03
 You are covered by your spouse's or partner's insurance.....04
 You are covered by Medical Assistance/Medicaid.....05
 Other.....06
 Specify _____

 Refused.....-999
 Don't Know.....-888

Q196 Are your children {Is your child} also covered by the health insurance your employer offers?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888

Q197 Are you working at any other jobs right now either part-time or full-time?
 Yes.....01 **Go to Q198**
 No.....02 **Go to Q203**
 Refused.....-999
 Don't Know.....-888

Q198 Who is your other current employer? (Where else do you currently work?)
[Interviewer: If respondent is self-employed, record "self-employed"]

 Refused.....-999
 Don't Know.....-888

Q199 What do you do at that workplace (What is your job title?)
[Interviewer: If respondent is self-employed: What do you do?]

 Refused.....-999
 Don't Know.....-888

Q200 When did you start working at that job? The month and year is fine if you do
 not remember the exact date.
[Interviewer: If respondent is self-employed: When did you start doing that?]
 ____ | ____ | ____
 Month Day Year
 Refused.....-999
 Don't Know.....-888

Q201 How many hours do you usually work at this job in a typical week?
 Number of worked _____

Refused.....	-999
Don't Know.....	-888

Q202 What is your rate of pay (before taxes and other deductions)?
[Interviewer: If respondent is self-employed: About how much money do you make doing that?]
 \$ _____ . _____ Per hour Per day Per week Per month Per year
[Select the appropriate time frame]

Refused.....-999
 Don't Know.....-888

Q203 Is this the first time you have worked for pay?
 Yes.....01 **Go to Q269**

No.....02 **Go to Q204**

Refused.....-999 **Go to Q26**
 Don't Know.....-888

Interviewer: Now I would like to ask about the last job you had before your present job(s).

Q204 Who was your employer?
[Interviewer: If respondent was self-employed, record "self-employed"]

 Refused.....-999
 Don't Know.....-888

Q205 What did you do at your workplace (What was your job title?)
[Interviewer: If respondent was self-employed: What did you do?]

 Refused.....-999
 Don't Know.....-888

Q206 When did you start working at that job? The month and year is fine if you do not remember the exact date.
[Interviewer: If respondent was self-employed: When did you start doing that?]

____ | ____ | ____
 Month Day Year
 Refused.....-999
 Don't Know.....-888

Q207 When did you stop working at that job?
[Interviewer: If respondent was self-employed: When did you stop doing that?]

End Date ____ | ____ | ____
 Month Day Year
 Refused.....-999
 Don't Know.....-888

If Q206 = -888 or Q207 = -888 Go to Q208; Otherwise Go to Q209

Q208 About how long did you work at that job?
[Interviewer: If respondent was self-employed: About how long did you do that?]

_____ Days Weeks Months Years

[Select the appropriate time frame]

Refused.....-999
Don't Know.....-888

- Q209 How many hours per week did you usually work at that job?
 Number of worked _____
 Refused.....-999
 Don't Know.....-888
- Q210 What was your rate of pay (before taxes and other deductions)?
[Interviewer: If respondent was self-employed: About how much money did you make doing that?]
 \$_____ Per hour Per day Per week Per month Per year
[Select the appropriate time frame]
 Refused.....-999
 Don't Know.....-888
- Q211 Did your employer offer a health insurance plan?
 Yes.....01 **Go to Q212**
 No.....02 **Go to Q215**
 N/A (e.g., self-employed).....-777 **Go to Q212**
 Refused.....-999
 Don't Know.....-888
- Q212 Did you receive health insurance through you employer?
 Yes.....01 **Go to Q214**
 No.....02 **Go to Q213**
 Refused.....-999 **Go to Q215**
 Don't Know.....-888
- Q213 Why didn't you receive it?
[Select choice that best matches respondent's answer]
 It cost too much.....01 **Go to Q215**
 You did not work there long enough to be eligible.....02
 You did not work enough hours to be eligible
 (e.g., part-time employment).....03
 You were covered by your spouse's or partner's insurance.....04
 You were covered by Medical Assistance/Medicaid.....05
 Other.....06
 Specify _____

 Refused.....-999
 Don't Know.....-888
- Q214 Were your children {Was your child} also covered by the health insurance your employer offered?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888

Q215	<p>What was the main reason you left your last job or employer?</p> <p>[Read choices]</p> <p>You were laid off.....01 Go to Q216</p> <p>You were fired.....02</p> <p>You quit.....03 Go to Q221</p> <p>You resigned.....04</p> <p>You were only hired for temporary work.....05 Go to Q223</p> <p>Other.....06</p> <p>Specify _____</p> <p>Refused.....-999</p> <p>Don't Know.....-888</p>				
Q216	<p>What was the main reason you were laid off or fired?</p> <p>[Select choice that best matches respondent's answer.]</p> <p>You were late for work.....01 Go to Q217</p> <p>You missed work.....02 Go to Q219</p> <p>You think you were discriminated against.....03 Go to Q222</p> <p>Your employer downsized or went out of business.....04 Go to Q223</p> <p>You had a conflict with your employer or supervisor.....05</p> <p>You had a conflict with your co-workers.....06</p> <p>Other.....07</p> <p>Specify _____</p> <p>Refused.....-999</p> <p>Don't Know.....-888</p>				
Q217	Were you late for work because you had a problem with transportation?	Yes 01	No 02	R -999	DK -888
Q218	Were you late for work because you had a problem with child care? Go to Q223	01	02	-999	-888
Q219	Did you miss work because you had a problem with transportation?	Yes 01	No 02	R -999	DK -888
Q220	Did you miss work because you had a problem with child care? Go to Q223	01	02	-999	-888

- Q221 What was the main reason you quit or resigned?
[Select choice that best matches respondent's answer]
- You had a problem with child care.....01 **Go to Q223**
 - You returned to school or attended a training program.....02
 - You took another job.....03
 - You had to care for a sick or disabled child.....04
 - You moved.....05
 - You became ill or disabled.....06
 - You became pregnant or gave birth.....07
 - You saw little chance for advancement.....08
 - You wanted to work different hours.....09
 - Your job lacked benefits.....10
 - Your wages were too low.....11
 - You had a conflict with your employer or supervisor.....12
 - You had a conflict with your co-workers.....13
 - You had a transportation problem.....14

 - You felt discriminated against.....15 **Go to Q222**
 - You felt harassed.....16

 - Other.....17 **Go to Q223**
 - Specify: _____
 - _____
 - Refused.....-999
 - Don't Know.....-888

- Q222 Your employer discriminated against you or harassed you for what reason?
[Select choice that best matches respondent's answer]
- Because of your race/ethnicity.....01
 - Because of your gender.....02
 - Because of your religion.....03
 - Because of your age.....04
 - Because of your disability.....05
 - Because of your sexual orientation.....06
 - Because you are poor.....07
 - Because you are a single parent.....08
 - Because you are a W-2 participant.....09
 - Other.....10
 - Specify _____
 - Refused.....-999
 - Don't Know.....-888

- Q223 Did you receive Unemployment Insurance when you left that job?
- Yes.....01
 - No.....02
 - Refused.....-999
 - Don't Know.....-888

- Q224 Did you work at any other jobs before that one?
- Yes.....01 **Go to Q225**

- Q231 How many hours per week did you usually work at that job?
 Number of hours worked _____
 Refused.....-999
 Don't Know.....-888
- Q232 What was your rate of pay (before taxes and other deductions)?
[Interviewer: If respondent was self-employed: How much money did you make doing that?]
 \$_____ . _____ Per hour Per day Per week Per month Per year
[Select the appropriate time frame]
 Refused.....-999
 Don't Know.....-888
- Q233 Did your employer offer a health insurance plan?
 Yes.....01 **Go to Q234**
 No.....02 **Go to Q237**
 N/A (e.g., self-employed).....-777
 Refused.....-999
 Don't Know.....-888
- Q234 Did you receive health insurance through you employer?
 Yes.....01 **Go to Q236**
 No.....02 **Go to Q235**
 Refused.....-999 **Go to Q237**
 Don't Know.....-888
- Q235 Why didn't you receive it?
[Select choice that best matches respondent's answer]
 It cost too much.....01 **Go to Q237**
 You did not work there long enough to be eligible.....02
 You did not work enough hours to be eligible
 (e.g., part-time employment).....03
 You were covered by your spouse's or partner's insurance.....04
 You were covered by Medical Assistance/Medicaid.....05
 Other.....06
 Specify _____
 Refused.....-999
 Don't Know.....-888
- Q236 Were your children {Was your child} also covered by the health insurance your employer offered?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q237 What was the main reason you left your last job or employer?
[Read choices]
 You were laid off.....01 **Go to Q238**

You were fired.....02

You quit.....03 **Go to Q243**

You resigned.....04

You were only hired for temporary work.....05 **Go to Q245**

Other.....06

Specify _____

Refused.....-999

Don't Know.....-888

Q238 What was the main reason you were laid off or fired?
[Select choice that best matches respondent's answer.]

You were late for work.....01 **Go to Q239**

You missed work.....02 **Go to Q241**

You think you were discriminated against.....03 **Go to Q244**

Your employer downsized or went out of business.....04 **Go to Q245**

You had a conflict with your employer or supervisor.....05

You had a conflict with your co-workers.....06

Other.....07

Specify _____

Refused.....-999

Don't Know.....-888

		Yes	No	R	DK
Q239	Were you late for work because you had a problem with transportation?	01	02	-999	-888
Q240	Were you late for work because you had a problem with child care? Go to Q245	01	02	-999	-888
		Yes	No	R	DK
Q241	Did you miss work because you had a problem with transportation?	01	02	-999	-888
Q242	Did you miss work because you had a problem with child care? Go to Q245	01	02	-999	-888

Q243

What was the main reason you quit or resigned?

[Select choice that best matches respondent's answer]

- You had a problem with child care.....01 **Go to Q245**
- You returned to school or attended a training program.....02
- You took another job.....03
- You had to care for a sick or disabled child.....04
- You moved.....05
- You became ill or disabled.....06
- You became pregnant or gave birth.....07
- You saw little chance for advancement.....08
- You wanted to work different hours.....09
- Your job lacked benefits.....10
- Your wages were too low.....11
- You had a conflict with your employer or supervisor.....12
- You had a conflict with your co-workers.....13
- You had a transportation problem.....14

- You felt discriminated against.....15 **Go to Q244**
- You felt harassed.....16

- Other.....17 **Go to Q245**
- Specify: _____

- Refused.....-999
- Don't Know.....-888

Q244

Your employer discriminated against you or harassed you because of what reason?

[Select choice that best matches respondent's answer]

- Because of your race/ethnicity.....01
- Because of your gender.....02
- Because of your religion.....03
- Because of your age.....04
- Because of your disability.....05
- Because of your sexual orientation.....06
- Because you are poor.....07
- Because you are a single parent.....08
- Because you are a W-2 participant.....09
- Other.....10

- Specify _____
- Refused.....-999
- Don't Know.....-888

Q245

Did you receive Unemployment Insurance when you left that job?

- Yes.....01
- No.....02
- Refused.....-999
- Don't Know.....-888

Q246

Did you work at any other jobs before that one?

- Yes.....01 **Go to Q247**
- No.....02 **Go to Q269**

Refused.....-999
Don't Know.....-888

Interviewer: Now let's talk about the job you had prior to the one we just talked about.

Q247 Who was your employer?
[Interviewer: If respondent was self-employed record "self-employed"]

Refused.....-999
Don't Know.....-888

Q248 What did you do at that workplace (What was your job title?)
[Interviewer: If respondent was self-employed: What did you do?]

Refused.....-999
Don't Know.....-888

Q249 When did you start working at that job? The month and year is fine if you do not remember the exact date.
[Interviewer: If respondent was self-employed: When did you start doing that?]
____ | ____ | ____
Month Day Year
Refused.....-999
Don't Know.....-888

You were covered by Medical Assistance/Medicaid.....	05
Other.....	06
Specify _____	
Refused.....	-999
Don't Know.....	-888

Q257	<u>Were your children</u> {Was your child} also covered by the health insurance your employer offered? Yes.....01 No.....02 Refused.....-999 Don't Know.....-888				
Q258	What was the main reason you left your last job or employer? [Read choices] You were laid off.....01 You were fired.....02 You quit.....03 You resigned.....04 You were only hired for temporary work.....05 Other.....06 Specify _____ _____ Refused.....-999 Don't Know.....-888	Go to Q259			
Q259	What was the main reason you were laid off or fired? [Select choice that best matches respondent's answer.] You were late for work.....01 You missed work.....02 You think you were discriminated against.....03 Your employer downsized or went out of business.....04 You had a conflict with your employer or supervisor.....05 You had a conflict with your co-workers.....06 Other.....07 Specify _____ _____ Refused.....-999 Don't Know.....-888	Go to Q260	Go to Q262	Go to Q265	Go to Q266
Q260	Were you late for work because you had a problem with transportation?	Yes 01	No 02	R -999	DK -888
Q261	Were you late for work because you had a problem with child care? Go to Q266	01	02	-999	-888
Q262	Did you miss work because you had a problem with transportation?	Yes 01	No 02	R -999	DK -888
Q263	Did you miss work because you had a problem with child care? Go to Q266	01	02	-999	-888

Q264	What was the main reason you quit or resigned? [Select choice that best matches respondent's answer]	
	You had a problem with child care.....01	Go to Q266
	You returned to school or attended a training program.....02	
	You took another job.....03	
	You had to care for a sick or disabled child.....04	
	You moved.....05	
	You became ill or disabled.....06	
	You became pregnant or gave birth.....07	
	You saw little chance for advancement.....08	
	You wanted to work different hours.....09	
	Your job lacked benefits.....10	
	Your wages were too low.....11	
	You had a conflict with your employer or supervisor.....12	
	You had a conflict with your co-workers.....13	
	You had a transportation problem.....14	
	You felt discriminated against.....15	Go to Q265
	You felt harassed.....16	
	Other.....17	Go to Q266
	Specify: _____	

	Refused.....-999	
	Don't Know.....-888	

Q265	Your employer discriminated against you or harassed you for what reason? [Select choice that best matches respondent's answer]
	Because of your race/ethnicity.....01
	Because of your gender.....02
	Because of your religion.....03
	Because of your age.....04
	Because of your disability.....05
	Because of your sexual orientation.....06
	Because you are poor.....07
	Because you are a single parent.....08
	Because you are a W-2 participant.....09
	Other.....10
	Specify _____
	Refused.....-999
	Don't Know.....-888

Q266	Did you receive Unemployment Insurance when you left that job?
	Yes.....01
	No.....02
	Refused.....-999
	Don't Know.....-888

Q267	Did you work at any other jobs before that one?
	Yes.....01 Go to Q268

No.....02
Refused.....-999
Don't Know.....-888

Go to Q269

Q268 How many different full-time or part-time jobs have you had in the past two years?
 Number of jobs _____
 Refused.....-999
 Don't Know.....-888

Q269 Selection of Focal Child

Q270 Selection of Focal Child

Q271 Name or Initials of Focal Child _____

Q272 Please tell me how old [focal child's name] is?
 If [focal child's name] is younger than 2 years old, please tell me his or her age in months.

0 - 3 months.....	.01
4 - 6 months.....	.02
7 - 9 months.....	.03
10 - 11 months.....	.04
12 months.....	.05
13 - 15 months.....	.06
16 - 18 months.....	.07
19 - 21 months.....	.08
22 - 23 months.....	.09
2 years.....	.10
3 years.....	.11
4 years.....	.12
5 years.....	.13
6 years.....	.14
7 years.....	.15
8 years.....	.16
9 years.....	.17
10 years.....	.18
11 years.....	.19
12 years.....	.20
13 years.....	.21
14 years and older.....	.22

If Q272 = 21 or 22 Go to Q297; Otherwise Go to Q273

Section 5: Child Care

The next set of questions are about child care. For the moment, I would like you to think just about child care for [focal child's name].

- Q273 Was [focal child's name] cared for at least part of the time by someone other than yourself during the past month because you were **working or searching for a job**?
Yes.....01 **Go to Q274**

No.....02 **Go to Q297**
Refused.....-999
Don't Know.....-888

Now I want to ask you about the kinds of child care you used for [focal child's name] at least once a week while you were working or searching for a job during the past month. [Interviewer: If respondent uses more than one child care provider of a particular type (e.g., two day care centers), ask about the one with whom focal child spends the most time.]

- Q274 During the past month, did [focal child's name] attend Head Start while you were working or searching for a job?
Yes.....01 **Go to Q275**

No.....02 **Go to Q276**
Refused.....-999
Don't Know.....-888

- Q275 How many hours each week did [focal child's name] attend Head Start?
Number of Hours _____
Refused.....-999
Don't Know.....-888

- Q276 During the past month, was [focal child's name] cared for at a day care center while you were working or searching for a job?
[Interviewer: Enter "yes" if child attended nursery school or preschool.]
Yes.....01 **Go to Q277**

No.....02 **Go to Q280**
Refused.....-999
Don't Know.....-888

- Q277 How many hours each week was [focal child's name] cared for at that day care center?
Number of Hours _____
Refused.....-999
Don't Know.....-888

- Q278 How many children were being cared for in [focal child's name] room or group at that day care center?
Number of Children _____
Refused.....-999
Don't Know.....-888

- Q279 How many adults were usually supervising the children in that room or group?

Number of Adults _____
Refused.....-999
Don't Know.....-888

Q280 During the past month, was [focal child's name] cared for by a child care provider or babysitter in **your** home while you were working or searching for a job?

Yes.....01 **Go to Q281**

No.....02 **Go to Q287**

Refused.....-999

Don't Know.....-888

Q281 Is this child care provider or babysitter related to [focal child's name]?

Yes.....01 **Go to Q282**

No.....02 **Go to Q283**

Refused.....-999

Don't Know.....-888

Q282 Is this child care provider or babysitter the child's other parent?

Yes.....01

No.....02

Refused.....-999

Don't Know.....-888

Q283 Does this child care provider or babysitter live with you?

Yes.....01

No.....02

Refused.....-999

Don't Know.....-888

Q284 Is this child care provider or babysitter your spouse or partner?

Yes.....01

No.....02

Refused.....-999

Don't Know.....-888

Q285 How many hours each week was [focal child's name] cared for in your home by this child care provider or babysitter?

Number of Hours _____

Refused.....-999

Don't Know.....-888

Q286 Altogether, how many children were being cared for in your home by this child care provider or babysitter at the same time? Please count any of your other children as well as children who are not yours.

Number of Children _____

Refused.....-999

Don't Know.....-888

Q287 During the past month, was [focal child's name] cared for in the **home of a child care provider or babysitter** while you were working or searching for a job?
Yes.....01 **Go to Q288**
No.....02 **Go to Q293**
Refused.....-999
Don't Know.....-888

Q288 Is this child care provider or babysitter related to [focal child's name]?
Yes.....01 **Go to Q289**
No.....02 **Go to Q290**
Refused.....-999
Don't Know.....-888

Q289 Is this child care provider or babysitter the child's other parent?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888

Q290 How many hours each week was [focal child's name] cared for in this child care provider's or babysitter's home?
Number of Hours _____
Refused.....-999
Don't Know.....-888

Q291 Altogether, how many children were usually cared for at the same time in this child care provider's or babysitter's home?
Number of Children _____
Refused.....-999
Don't Know.....-888

Q292 Did this child care provider or babysitter normally have help from other adults caring for [focal child's name] and the other children in his or her home?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888

Q293 During the past month, did [focal child's name] attend a before-school or after-school program while you were working or searching for a job ?
Yes.....01 **Go to Q294**
No.....02 **Go to Q297**
Refused.....-999

- Don't Know.....-888
- Q294 How many hours each week did [focal child's name] attend a before-school or after- school program?
 Number of Hours _____
 Refused.....-999
 Don't Know.....-888
- Q295 How many children were being cared for in [focal child's name] room or group at this before-school or after-
 school program?
 Number of Children _____
 Refused.....-999
 Don't Know.....-888
- Q296 How many adults were usually supervising the children in that room or group at this before-school or after-school
 program?
 Number of Adults _____
 Refused.....-999
 Don't Know.....-888

Q297 **Interviewer: If Q23 = 1 Go to Q309; Otherwise Continue**

Besides [focal child's name], were any of your other children { was your other child }
 cared for part of the time by someone other than yourself during the past month because you were **working or
 searching for a job?**

- Yes.....01 **Go to Q298**
- No.....02 **Go to Q309**
- Refused.....-999
- Don't Know.....-888

**Now I want to ask you about the kinds of child care you used for your other children besides [focal child's name]
 {child} at least once a week while you were working or searching for a job during the past month.**

- Q298 During the past month, did any of your children besides [focal child's name] {your other child} attend Head Start
 while you were working or searching for a job?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888

- Q299 During the past month, did a day care center care for any of your children besides [focal child's name] {your other
 child} while you were working or searching for a job?
[Interviewer: Enter "yes" if child(ren) attended nursery school or preschool.]
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888

- Q300 During the past month, did a child care provider or babysitter care for any of your children besides [focal child's name]

- {your other child} in **your** home while you were working or searching for a job?
 Yes.....01 **Go to Q301**
 No.....02 **Go to Q305**
 Refused.....-999
 Don't Know.....-888
- Q301 Is this child care provider or babysitter related to any of those children {that child}?
 Yes.....01 **Go to Q302**
 No.....02 **Go to Q303**
 Refused.....-999
 Don't Know.....-888
- Q302 Is this child care provider or babysitter the other parent of any of those children {that child}?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q303 Does this child care provider or babysitter live with you?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q304 Is this child care provider or babysitter your spouse or partner?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q305 During the past month, were any of your children besides [focal child's name] {your other child} cared for in the home of a child care provider or babysitter while you were working or searching for a job?
 Yes.....01 **Go to Q306**
 No.....02 **Go to Q308**
 Refused.....-999
 Don't Know.....-888
- Q306 Is this child care provider or babysitter related to any of those children {that child}?
 Yes.....01 **Go to Q307**
 No.....02 **Go to Q308**
 Refused.....-999
 Don't Know.....-888
- Q307 Is this child care provider or babysitter any of those children's {that child's} other parent?
 Yes.....01

No.....02
Refused.....-999

Q308 During the past month, did any of your children besides [focal child's name] {your other child} attend a before-school or after-school program while you were working or searching for a job?

Yes.....01

No.....02
Refused.....-999
Don't Know.....-888

The next few questions are about your child care costs during the past month.

Q309 Did you receive any help paying for your child care during the past month?
Yes.....01 **Go to Q310**

No.....02 **Go to Q311**
Refused.....-999
Don't Know.....-888

Q310 Who or what helped you pay for child care during the past month?

W-2 Agency.....01
[Prompt: Agency name from Q0.2]
Milwaukee County Social Services.....02
Employer.....03
Other.....04
Specify _____

Refused.....-999
Don't Know.....-888

Q311 Besides any child care assistance you might have received, how much did your child care cost you during a typical week during the past month? That is, how much did you pay for child care out-of-pocket?
 \$ _____
 Refused.....-999
 Don't Know.....-888

Now I'd like to ask you about some child care problems you may have experienced during the past month.

Q312 Have you ever had trouble finding child care during the past month because you were working evenings, nights, or weekends?
 Yes......01
 No......02
 Refused.....-999
 Don't Know.....-888

Q313 Have you ever had trouble finding child care during the past month because you were working different hours on different days?
 Yes......01
 No......02
 Refused.....-999
 Don't Know.....-888

Q314 Have you ever missed work or been unable to search for a job during the past month because you could not find child care ?
 Yes......01
 No......02
 Refused.....-999
 Don't Know.....-888

Q315 Have you ever missed work or been unable to search for a job during the past month because you could not pay for child care?
 Yes......01
 No......02
 Refused.....-999
 Don't Know.....-888

Q316 Have you ever missed work or been unable to search for a job during the past month because you had a sick child for whom you could not find child care?
 Yes......01
 No......02
 Refused.....-999
 Don't Know.....-888

Q317 Did you ever have to quit a job during the past month because you had no child care?
 Yes......01
 No......02
 Refused.....-999
 Don't Know.....-888

Q318 Did you ever have to refuse a job offer during the past month because you had no child care?
 Yes......01

No.....	02
Refused.....	-999
Don't Know.....	-888

- Q319 During the past month, have you ever had trouble finding child care for a child under the age of two?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q320 During the past month, have you ever had trouble finding before-school or after-school child care for a child who attends school?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q321 Do you have a child under the age of 13 who stayed by himself or herself because you needed to work or search for a job during the past month?
 Yes.....01 **Go to Q322**
 No.....02 **Go to Q323**
 Refused.....-999
 Don't Know.....-888
- Q322 How old was the youngest child who stayed by himself or herself?
 Age _____
 Refused.....-999
 Don't Know.....-888
- Q323 Do you have a child under the age of 13 who cared for a younger sibling because you needed to work or search for a job during the past month?
 Yes.....01 **Go to Q324**
 No.....02 **Go to Q326**
 Refused.....-999
 Don't Know.....-888
- Q324 How old was the child who provided that care?
 Age _____
 Refused.....-999
 Don't Know.....-888
- Q325 How old was the youngest sibling he or she cared for?
 Age _____
 Refused.....-999
 Don't Know.....-888
- Q326 Do you have a child under the age of 13 who stayed by himself or herself because you needed to do something other than work or search for a job during the past month?
 Yes.....01 **Go to Q327**
 No.....02 **Go to Q328**
 Refused.....-999
 Don't Know.....-888

Q327

How old was the youngest child who stayed by himself or herself?

Age _____

Refused.....-999

Don't Know.....-888

Q328	Do you have a child under the age of 13 who cared for a younger sibling because you needed to do something other than work or search for a job during the past month?	
	Yes.....	.01 Go to Q329
	No.....	.02 Go to Q331
	Refused.....	-999
	Don't Know.....	-888
Q329	How old was the child who provided that care?	
	Age _____	
	Refused.....	-999
	Don't Know.....	-888
Q330	How old was the youngest sibling he or she cared for?	
	Age _____	
	Refused.....	-999
	Don't Know.....	-888
Q331	Do you have a child with a disability or other special needs for whom you have had trouble finding child care?	
	Yes.....	.01
	No.....	.02
	Refused.....	-999
	Don't Know.....	-888
Q332	Have you changed child care providers within the past 6 months?	
	Yes.....	.01 Go to Q333
	No.....	.02 Go to Q335
	Refused.....	-999
	Don't Know.....	-888
Q333	How many times have you changed child care providers within the past 6 months?	
	Number of times _____	
	Refused.....	-999
	Don't Know.....	-888
Q334	Why did you change child care providers {the last time you changed}?	
	[Select choice that best matches respondent's answer]	
	The provider could not care for your child during your work hours.....	.01
	The child care provider charged too much.....	.02
	The child care provider stopped providing child care.....	.03
	The child care provider was unreliable.....	.04
	You found a provider with a more convenient location.....	.05
	You wanted a child care provider more similar to you.....	.06
	You were not happy with the quality of the care.....	.07
	Your child became too old.....	.08
	Your child started school.....	.09
	You changed jobs.....	.10
	Other.....	.11
	Specify _____	
	Refused.....	-999

Don't Know.....-888

Q335 Some people prefer formal child care providers like day care centers or family day care homes. Others prefer informal child care providers like family, friends and neighbors. Which do you prefer?

Formal.....	.01
Informal.....	.02
No preference.....	.03
Refused.....	-999
Don't Know.....	-888

Section 6: Education and Training

- Q336 Do you have a high school diploma?
 Yes.....01 **Go to Q341**
 No.....02 **Go to Q337**
 Refused.....-999
 Don't Know.....-888
- Q337 Do you have a GED or high school equivalency diploma?
 Yes.....01 **Go to Q341**
 No.....02 **Go to Q338**
 Refused.....-999
 Don't Know.....-888
- Q338 What is the highest grade of school you have completed?
 Grade _____
 Refused.....-999
 Don't Know.....-888
- Q339 Are you currently attending an education program?
 Yes.....01 **Go to Q340**
 No.....02 **Go to Q344**
 Refused.....-999
 Don't Know.....-888
- Q340 What kind of program are you attending?
 A regular high school program?.....01 **Go to Q344**
 A GED program?.....02
 An English as a Second Language program?.....03
 Other.....04
 Specify _____
 Refused.....-999
 Don't Know.....-888
- Q341 Have you ever attended college?
 Yes, you have attended college in the past.....01 **Go to Q342**
 Yes, you are attending college now.....02 **Go to Q344**
 No.....03
 Refused.....-999
 Don't Know.....-888
- Q342 Do you have a college degree?
 Yes.....01 **Go to Q343**
 No.....02 **Go to Q344**
 Refused.....-999
 Don't Know.....-888

- Q343 Is your degree an Associate's (2 year) degree or a Bachelor's (4 year) degree?
 Associate's (2 year).....01
 Bachelor's (4 year).....02
 Refused.....-999
 Don't Know.....-888
- Q344 Have you ever received any job skills training from a vocational, technical or business school or another training program like JTPA?
 Yes, you have received job skills training in the past.....01 **Go to Q345**
 Yes, you are receiving job skills training now.....02 **Go to Q346**
 Yes, you have received job skills training in the past and are receiving training now.....03 **Go to Q345**
 No.....04 **Go to Q347**
 Refused.....-999
 Don't Know.....-888
- Q345 Did you receive a degree or certificate from a school or training program?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q346 What job skills did you learn or are you learning from that school or training program?

 Refused.....-999
 Don't Know.....-888

Section 7: Housing

Q347 What is your current housing situation?
[Select choice that best matches respondent's answer.]
 You are homeless.....01 **Go to Q381**

 You are living in a motel room.....02 **Go to Q348**
 You are living on the streets.....03
 You are living in a car or other vehicle.....04
 You are living in an abandoned building.....05
 You living at a camping ground.....06

 You are living in a house or apartment that **you** rent.....07 **Go to Q349**
 You are living in a house or apartment that **you** own.....08
 You are living in a house or apartment that a
 relative or friend rents or owns.....09
 You are living somewhere else.....10
 Specify _____
 Refused.....-999
 Don't Know.....-888

Q348 Would you say that you are homeless or do not have a regular place to live?
 Yes.....01 **Go to Q381**

 No.....02 **Go to Q350**
 Refused.....-999
 Don't Know.....-888

Q349 How many rooms are there where you are living now? Please do not count bathrooms.
 Number of rooms _____
 Refused.....-999
 Don't Know.....-888

Q350 For how long have you and your children {child} been living there?
 _____ Days Weeks Months Years
[Select the appropriate time frame]
 Refused.....-999
 Don't Know.....-888

If Q350 = Less than 1 year Go to Q351; Otherwise Go to Q354

Q351 Where were you and your children {child} living before that?
[Select choice that best matches respondent's answer.]
 You were homeless.....01 **Go to Q353**

 You were living in a house or apartment that **you** rented.....02 **Go to Q352**
 You were living in a house or apartment that **you** owned.....03
 You were living in a house or apartment that a relative or
 friend rented or owned.....04
 You were living somewhere else.....05
 Specify _____

Refused.....	-999
Don't Know.....	-888

- Q352 What is the main reason you and your children {child} stopped living there?
[Select choice that best matches respondent's answer]
 You could no longer afford to live there.....01
 You thought the housing was in poor condition.....02
 You felt the neighborhood was unsafe.....03
 You were evicted.....04
 You did not have access to public transportation.....05
 You found your own house or apartment.....06
 You found better housing.....07
 You or your children {child} were being abused.....08
 Your housing was condemned.....09
 Other.....10
 Specify _____
 Refused.....-999
 Don't Know.....-888
- Q353 How many times have you and your children {child} moved during the past 12 months?
 Number of times _____
 Refused.....-999
 Don't Know.....-888
- Q354 Do you and your children {child} plan to move within the next 12 months?
 Yes.....01 **Go to Q355**
 No.....02 **Go to Q358**
 Refused.....-999
 Don't Know.....-888
- Q355 Where do you and your children {child} plan to move?
[Select choice that best matches respondent's answer.]
 You plan to stay in Milwaukee.....01
 You plan to move to another part of Wisconsin.....02
 [Q356] Specify where _____
 You plan to move out-of-state.....03
 [Q357] Specify where _____
 You don't know where you are moving.....04
 Refused.....-999
 Don't Know.....888
- Q358 Has there ever been a time when you were homeless or did not have a regular place to live?
 Yes.....01 **Go to Q359**
 No.....02 **Go to Q366**
 Refused.....-999
 Don't Know.....-888
- Q359 Were your children {Was your child} also homeless or without a regular place to live at that time?
 Yes.....01 **Go to Q361**
 No.....02 **Go to Q360**
 Refused.....-999

Don't Know.....-888

- Q360 Where were your children {was your child} living while you were homeless?
[Select choices that best match respondent's answer]
 Your children were {child was} living with another parent.....01
 Your children were {child was} living with relatives.....02
 Your children were {child was} in foster care.....03
 Other.....04
 Specify _____
 Refused.....-999
 Don't Know.....-888
- Q361 Were you {and your children/child} homeless or without a regular place to live during the past year or was it more than a year ago?
 Within the past year.....01
 More than a year ago.....02
 Refused.....-999
 Don't Know.....-888
- Q362 What is the main reason you {and your children/child} became homeless or did not have a regular place to live at that time?
[Select choice that best matches respondent's answer]
 You could no longer afford to live were you were living.....01
 Your housing was condemned.....02
 You were evicted.....03
 You or your children {child} were being abused.....04
 Other.....05
 Specify _____
 Refused.....-999
 Don't Know.....-888
- Q363 For how long were you {and your children/child} homeless or without a regular place to live?
 _____ Days Weeks Months Years
[Select the appropriate time frame]
 Refused.....-999
 Don't Know.....-888
- Q364 While you were homeless or did not have a regular place to live, where did you {and your children/child} usually sleep at night?
[Select choice that best matches respondent's answer.]
 You slept at a relative's or friend's apartment or house.....01
 You slept in a shelter.....02
 You slept in a motel room.....03
 You slept on the streets.....04
 You slept in a car or other vehicle.....05
 You slept in an abandoned building.....06
 You slept at a camping ground.....07
 Other.....08
 Specify _____
 Refused.....-999
 Don't Know.....-888
- Q365 Was that the first time you {and your children/child} were homeless or did not have a regular place to live?

Yes.....	.01
No.....	.02
Refused.....	-999
Don't Know.....	-888

- Q366 Did you and your children {child} ever have to move in with family or friends because you had no other place to live?
 Yes.....01 **Go to Q367**
 No.....02 **Go to Q371**
 Refused.....-999
 Don't Know.....-888
- Q367 Did you and your children {child} have to move in with family or friends because you had no other place to live within the past year or was it more than a year ago?
 Within the past year.....01
 More than a year ago.....02
 Refused.....-999
 Don't Know.....-888
- Q368 What is the main reason you and your children {child} had no other place to live at that time?
[Select choice that best matches respondent's answer]
 You could no longer afford to live were you were living.....01
 Your housing was condemned.....02
 You were evicted.....03
 You or your children {child} were being abused.....04
 Other.....05
 Specify _____
 Refused.....-999
 Don't Know.....-888
- Q369 For how long did you and your children {child} live with family or friends before you were able to move into your own place?
 _____ Days Weeks Months Years
[Select the appropriate time frame]
 You have not yet been able to move into your own place.....-666
 Refused.....-999
 Don't Know.....-888
- Q370 Was that the first time you and your children {child} had to move in with family or friends because you had no other place to live?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q371 Do you live in public housing now?
 Yes.....01 **Go to Q374**
 No.....02 **Go to Q372**
 Refused.....-999
 Don't Know.....-888
- Q372 Are you on a waiting list for public housing?
 Yes.....01 **Go to Q373**

No.....02
Refused.....-999

Don't Know.....-888

Go to Q374

- Q373 How long have you been on the waiting list for public housing?
 _____ Days Weeks Months Years
[Select the appropriate time frame]
 Refused.....-999
 Don't Know.....888
- Q374 Do you receive any housing assistance from a government program like HUD Section 8?
 Yes.....01 **Go to Q377**
 No.....02 **Go to Q375**
 Refused.....-999
 Don't Know.....-888
- Q375 Are you on a waiting list for housing assistance like HUD Section 8?
 Yes.....01 **Go to Q376**
 No.....02 **Go to Q377**
 Refused.....-999
 Don't Know.....-888
- Q376 How long have you been on the waiting list for Section 8?
 _____ Days Week Months Years
[Select the appropriate time frame]
 Refused.....-999
 Don't Know.....-888
- Q377 How much do you, yourself, pay for housing each month on top of any housing assistance you might receive?
 \$ _____ **Go to Q378**
 Not Applicable.....-777 **Go to Q379**
 Refused.....-999
 Don't Know.....-888
- Q378 Does that include your heat and/or utilities {electric}?
 Yes, includes heat.....01
 Yes, includes electric.....02
 Yes, includes both heat and electric.....03
 No, includes neither.....04
 Refused.....-999
 Don't Know.....-888
- Q379 Do you do anything else in exchange for your housing like household chores or child care?
 Yes.....01 **Go to Q380**
 No.....02 **Go to Q402**
 Refused.....-999
 Don't Know.....-888
- Q380 What is it that you do in exchange for housing?
 _____ **Go to Q402**
 Refused.....-999

Don't Know.....-888

- Q381 Are your children {Is your child} also homeless or without a regular place to live?
 Yes.....01 **Go to Q383**
 No.....02 **Go to Q382**
 Refused.....-999
 Don't Know.....-888
- Q382 Where have your children {has your child} been living since you became homeless or have not had a regular place to live?
[Select choices that best match respondent's answer]
 Your children are {child is} living with another parent.....01
 Your children are {child is} living with relatives.....02
 Your children are {child is} in foster care.....03
 Other.....04
 Specify _____
 Refused.....-999
 Don't Know.....-888
- Q383 For how long have you and {your children/child} been homeless or without a regular place to live?
 _____ Days Weeks Months Years
[Select the appropriate time frame]
 Refused.....-999
 Don't Know.....-888
- Q384 Where do you and your {children/child} usually sleep at night?
 You sleep at a relative's or friend's apartment or house.....01
 You sleep in a shelter.....02
 You sleep in a motel room.....03
 You sleep on the streets.....04
 You sleep in a car or other vehicle.....05
 You sleep in an abandoned building.....06
 You sleep at a camping ground.....07
 Other.....08
 Specify _____
 Refused.....-999
 Don't Know.....-888
- Q385 Where were you {and your children/child} living before you became homeless?
[Select choice that best matches respondent's answer.]
 You were living in a house or apartment that **you** rented.....01
 You were living in a house or apartment that **you** owned.....02
 You were living in a house or apartment that a relative or friend rented or owned.....03
 You were living somewhere else.....04
 Specify _____
 Refused.....-999
 Don't Know.....-888
- Q386 What is the main reason you {and your children/child} became homeless?
[Select choice that best matches respondent's answer]
 You could no longer afford to live were you were living.....01
 Your housing was condemned.....02

- You were evicted.....03
 You or your children {child} were being abused.....04
 Other.....05
 Specify _____
 Refused.....-999
 Don't Know.....-888
- Q387 Were you {and your children/child} ever homeless or did you ever not have a regular place to live before?
 Yes.....01 **Go to Q390**
 No.....02 **Go to Q388**
 Refused.....-999
 Don't Know.....-888
- Q388 Was the last time you {and your children/child} were homeless or without a regular place to live during the past year or more than a year ago?
 Within the past year.....01
 More than a year ago.....02
 Refused.....-999
 Don't Know.....-888
- Q389 For how long were you {and your children/child} homeless or without a regular place to live?
 _____ Days Weeks Months Years
[Select the appropriate time frame]
 Refused.....-999
 Don't Know.....-888
- Q390 Where are you planning to find housing for you and your children {child}?
[Select choice that best matches respondent's answer.]
 You plan to find housing in Milwaukee.....01
 You plan to find housing in another part of Wisconsin.....02
 [Q391] Specify where _____
 You plan to find housing in another state.....03
 [Q392] Specify where _____
 You don't know where you plan to find housing.....04
 Refused.....-999
- Q393 Did you and your children {child} ever have to move in with family or friends because you had no other place to live?
 Yes.....01 **Go to Q394**
 No.....02 **Go to Q397**
 Refused.....-999
 Don't Know.....-888
- Q394 What is the main reason you and your children {child} had no other place to live?
[Select choice that best matches respondent's answer]
 You could no longer afford to live were you were living.....01
 Your housing was condemned.....02
 You were evicted.....03

- You or your children {child} were being abused.....04
 Other.....05
 Specify_____
- Refused.....-999
 Don't Know.....-888
- Q395 For how long did you and your children {child} live with family or friends before you were able to move into your own place?
 _____ Days Weeks Months Years
[Select the appropriate time frame]
 You have not yet been able to move into your own place.....-666
 Refused.....-999
 Don't Know.....-888
- Q396 Did you and your children {child} ever have to move in with family or friends because you had no other place to live during the past year or was it more than a year ago?
 Within the past year.....01
 More than a year ago.....02
 Refused.....-999
 Don't Know.....-888
- Q397 Was that the first time you and your children {child} had to move in with family or friends because you had no other place to live?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q398 Are you on a waiting list for public housing?
 Yes.....01 **Go to Q399**
 No.....02 **Go to Q400**
 Refused.....-999
 Don't Know.....-888
- Q399 How long have you been on the waiting list for public housing?
 _____ Days Weeks Months Years
[Select the appropriate time frame]
 Refused.....-999
 Don't Know.....-888
- Q400 Are you on a waiting list for housing assistance like HUD Section 8?
 Yes.....01 **Go to Q401**
 No.....02 **Go to Q402**
 Refused.....-999
 Don't Know.....-888
- Q401 How long have you been on the waiting list for Section 8?

_____ Days Week Months Years
[Select the appropriate time frame]
 Refused.....-999
 Don't Know.....-888

Interviewer: Now I would like to ask you some questions about your neighborhood.

Q402 How would you rate your neighborhood as a place to raise children?
 Excellent.....01
 Very Good.....02
 Good.....03
 Fair.....04
 Poor.....05
 Refused.....-999
 Don't Know.....-888

- Q403 How safe do you feel or would you feel being out alone in your neighborhood at night?
Very safe.....01
Reasonably safe.....02
Somewhat unsafe.....03
Very unsafe.....04
Refused.....-999
Don't Know.....-888
- Q404 How safe do you feel or would you feel being out alone in your neighborhood in the daytime?
Very safe.....01
Reasonably safe.....02
Somewhat unsafe.....03
Very unsafe.....04
Refused.....-999
Don't Know.....-888
- Q405 Have you or someone else in your immediate family been a victim of a crime in the past year?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888

Section 8: Government Program Participation

Now I would like to ask you some questions about your experience with government programs like Food Stamps and Medicaid. Please tell me which, if any, of these benefits you or your children received last month?

Q406 Medical Assistance or Medicaid?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888

Q407 WIC (i.e., Supplemental Nutrition Program for Women, Infants and Children)?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888

Q408 SSI (Supplemental Security Income)?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888

Q409 Social Security (Old Age, Survivor's or Disability Insurance)?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888

Q410 Unemployment Insurance?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888

Q411 Food Stamps?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888

Q412 **If Q408 = 1 Continue; Otherwise Go to Q413**
How much money did you receive in SSI last month?
\$ ____
Refused.....-999
Don't Know.....-888

Q413 **If Q409 = 1 Continue; Otherwise Go to Q414**
How much money did you receive in Social Security last month?
\$ ____
Refused.....-999

Don't Know.....-888

Q414 **If Q410 = 1 Continue; Otherwise Go to Q415**
How much money did you receive in Unemployment Insurance last month?
\$ _____
Refused.....-999
Don't Know.....-888

Q415 **If Q411 = 1 Continue; Otherwise Go to Q416**
How much in Food Stamps did you receive last month?
\$ _____
Refused.....-999
Don't Know.....-888

Q416 Did you receive any other benefits from government programs last month?
Yes.....01 **Go to Q417**

No.....02 **Go to Q419**
Refused.....-999
Don't Know.....-888

Q417 Which program(s) did you receive benefits from?

Refused.....-999
Don't Know.....-888

Q418 Altogether, how much money did you receive from other programs last month?
\$ _____
Refused.....-999
Don't Know.....-888

Did you receive any benefits from any of these programs at all during the past 12 months?

Q419 **If Q406 = 02 Continue; Otherwise Go to Q420**
Medical Assistance/Medicaid?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888

Q420 **If Q407 = 02 Continue; Otherwise Go to Q421**
WIC?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888

Q421 **If Q408 = 02 Continue; Otherwise Go to Q422**
SSI?
Yes.....01
No.....02

Refused.....-999
Don't Know.....-888

Q422

If Q409 = 02 Continue; Otherwise Go to Q423

Social Security?

Yes.....01
No.....02
Refused.....-999
Don't Know.....-888

Q423 **If Q410 = 02 Continue; Otherwise Go to Q424**
 Unemployment?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888

Q424 **If Q411 = 02 Continue; Otherwise Go to Q425**
 Food Stamps?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888

Q425 Are you familiar with the Earned Income Tax Credit (EITC) ?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888

Interviewer: The Earned Income Tax Credit (EITC) is a special government program that allows working families who make less than about \$25,000 a year to receive a tax credit even if they have not earned enough money to owe income tax.

Q426 Did you receive the EITC during the past 12 months?
 Yes.....01 **Go to Q427**
 No.....02 **Go to Q429**
 Not Applicable.....-777
 Refused.....-999
 Don't Know.....-888

Q427 How much money did you receive through the EITC?
 \$ ____ _
 Refused.....-999
 Don't Know.....-888

Q428 Did you receive your EITC from the federal government, the state of Wisconsin, or both?
 Federal government.....01
 State of Wisconsin.....02
 Both.....03
 Refused.....-999
 Don't Know.....-888

Q429 Did you or your children ever receive public assistance like Aid to Families with Dependent Children (AFDC)?
 Yes.....01 **Go to Q430**
 No.....02 **Go to Q433**
 Refused.....-999
 Don't Know.....-888

- Q430 Were you or your children on AFDC one time or more than one time?
 One time.....01
 More than one time.....02
 Refused.....-999
 Don't Know.....-888
- Q431 About how long altogether would you say you were receiving AFDC?
 _____ Months _____ Years
[Select the appropriate time frame]
 Refused.....-999
 Don't Know.....-888
- Q432 What was the main reason you stopped receiving AFDC the last time you were on it?
[Select choice that best matches respondent's answer.]
 Your case was closed because you did not comply
 with program rules or requirements.....01
 You were still eligible but asked that your case be closed.....02
 You transferred to another public assistance program such as Pay For
 Performance, Self-Sufficiency First, Or Wisconsin Works (W-2).....03
 You began working.....04
 You were working more hours at your job.....05
 You were given a raise at your job.....06
 You found a better job.....07
 You got married/remarried or reconciled with your spouse/partner.....08
 You had problems with the agency.....09
 You had problems with your worker.....10
 Other.....11
 Specify _____
 Refused.....-999
 Don't Know.....-888
- Q433 Are all of the children living with you {Is your child} currently covered either by Medical Assistance or by some
 other health insurance?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888

Section 9: W-2 Experience and Participation

Now I am going to ask you some questions about Wisconsin’s new welfare program. As you may know, it is called Wisconsin Works or W-2. Some of the questions are about your experience with the program. Other questions are intended to find out whether the information people have about the program is correct.

- Q434 Have you ever applied for W-2 assistance before?
 Yes.....01 **Go to Q435**
 No.....02 **Go to Q440**
 Refused.....-999
 Don’t Know.....-888
- Q435 Have you ever received W-2 assistance before?
 Yes.....01 **Go to Q436**
 No.....02 **Go to Q440**
 Refused.....-999
 Don’t Know.....-888
- Q436 Did you receive a cash payment from the W-2 agency when you were first informed that you were eligible for the program?
 Yes.....01 **Go to Q437**
 No.....02 **Go to Q438**
 Refused.....-999
 Don’t Know.....-888
- Q437 How much time passed between when you applied for W-2 assistance and when you received your first cash payment?
 _____ Days Weeks Months
[Select appropriate unit of time]
 Not Applicable.....-777
 Refused.....-999
 Don’t Know.....-888
- Q438 Did the W-2 agency place you in W-2 T, a community service job or a trial job?
 Yes, W-2 T.....01
 Yes, a community service job.....02
 Yes, a trial job.....03
 Yes, but you are not sure if it was a community service or trial job.....04
 No.....05
 Refused.....-999
 Don’t Know.....-888

- Q439 Why did you stop receiving assistance from the W-2 program?
[Select choice that best matches respondent's answer.]
 Your case was closed because you did not comply
 with program rules or requirements.....01
 You were still eligible but asked that your case be closed.....02
 You began working.....03
 You were working more hours at your job.....04
 You were given a raise at your job.....05
 You found a better job.....06
 You got married/remarried or reconciled with your spouse/partner.....07
 You found the program too much of a hassle.....08
 Other.....09
 Specify _____
 Refused.....-999
 Don't Know.....-888
- Q440 There are many things that can happen to people which might lead them to come to a W-2 agency for assistance.
 What would you say happened that brought you to the W-2 agency **[Insert agency name from Q2]** for assistance
at this time?
[Select choice(s) that best matches respondent's answer.]
 You recently lost your job.....01
 You have been unemployed for several months.....02
 You and your spouse {partner} divorced or separated {broke-up}.....03
 Your spouse/partner died.....04
 You became pregnant.....05
 You gave birth to child.....06
 You became employed and needed child care.....07
 You just moved to Milwaukee from another state.....08
 You just moved to Milwaukee from somewhere else in Wisconsin.....09
 Other.....10
 Specify _____

 Refused.....-999
 Don't Know.....-888
- Q441 What kind of help were you looking for when you came to the agency for assistance?
[Select choice(s) that best matches respondent's answer.]
 You wanted cash assistance.....01
 You wanted Medical Assistance and/or Food Stamps.....02
 You wanted child care assistance.....03
 You wanted help finding job.....04
 You wanted help finding a better job.....05
 You wanted help with job training.....06
 You wanted help with education.....07
 Refused.....-999
 Don't Know.....-888
- Q442 How clear or confused are you about the benefits and services the program can provide? Are you **“Very clear”**,
“Fairly clear”, **“Fairly confused”**, or **“Very confused”**?
 Very clear.....01
 Fairly clear.....02

Fairly confused.....03
 Very confused.....04
 Refused.....-999
 Don't Know.....-888

Q443 How clear or confused are you about the rules and requirements of the program? Are you “**Very clear**”, “**Fairly clear**”, “**Fairly confused**”, or “**Very confused**”?

Very clear.....01
 Fairly clear.....02
 Fairly confused.....03
 Very confused.....04
 Refused.....-999
 Don't Know.....-888

Q444 Will you be required to work or participate in any work-related activities in order to receive benefits or services from the W-2 agency [**Insert agency name from Q2**]?

Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888

Q445 Do you expect to receive a cash payment each month from the W-2 agency [**Insert agency name from Q.02**]?

Yes.....01 **Go to Q446**
 No.....02 **Go to Q447**
 Refused.....-999
 Don't know.....-888

Q446 Would you receive more money each month if you had a larger family?

Yes.....01
 No.....02
 Refused.....-999
 Don't know.....-888

Q447 Will the W-2 agency [**Insert agency name from Q2**] assist you in paying for child care?

Yes.....01 **Go to Q448**
 No.....02 **Go to Q448**
 Refused.....-999
 Don't know.....-888

Q448 Will you have to pay any portion of your child care costs?

Yes.....01
 No.....02
 Refused.....-999
 Don't know.....-888

Q449 Do W-2 participants receive a smaller cash payment if they miss work or other W-2 activities?

Yes.....01
 No.....02
 Refused.....-999
 Don't know.....-888

Q450 Is there a limit on the number of months a W-2 participant can be assigned to W-2 T?

Yes.....01
 No.....02
 Refused.....-999
 Don't know.....-888

Q451 Is there a limit on the number of months a W-2 participant can be assigned to a community service job?

Yes.....01
 No.....02
 Refused.....-999
 Don't know.....-888

Q452 Is there a lifetime limit on the total amount of time a W-2 participant can receive cash assistance?

Yes.....01 **Go to Q453**
 No.....02 **Go to Q454**
 Refused.....-999
 Don't know.....-888

Q453 What is that lifetime limit?

— — Months Years
 [Select Appropriate Time Frame]
 Refused.....-999
 Don't know.....-888

Q454 Can a family receive Food Stamps even if a parent does not participate in W-2?

Yes.....01
 No.....02
 Refused.....-999
 Don't know.....-888

Q455 Can children receive Medicaid even if their parents do not participate in W-2?

Yes.....01
 No.....02
 Refused.....-999
 Don't know.....-888

Please tell me if you "Strongly agree", "Agree", "Disagree", or "Strongly disagree" with each of the following statements.

		SA	A	D	SD	R	DK
Q456	The W-2 agency staff treated you with respect.	01	02	03	04	-999	-888
Q457	The W-2 agency staff provided you with useful	01	02	03	04	-999	-888

	information.						
Q458	The W-2 agency staff seem interested in helping you with your problems.	01	02	03	04	-999	-888
Q459	The W-2 work requirements are fair to mothers with young children.	01	02	03	04	-999	-888
Q460	The W-2 agency staff discouraged you from applying for assistance at this time.	01	02	03	04	-999	-888

Section 10: Household Income

The next few questions will deal with the sources of income your family had last month before you applied for W-2 assistance.

Q461 Last month, how many members of your family who currently live with you received earnings from a formal job (i.e., a job for which you receive a pay-check and taxes are taken out)? Please include yourself and anyone else who worked at formal jobs.

Number with earnings from formal jobs _____ **If Q461 = 0 Go to Q464; Otherwise Go to Q462**
Refused.....-999
Don't Know.....-888

Q462 Altogether, how much money did you and/or other family members earn from formal jobs last month?

\$ _ _ _ _
Refused.....-999
Don't Know.....-888

If Q462 = -999 or -888 Go to Q463; Otherwise Go to Q464

Q463 Would you say it was:

Less than \$100.....01
At least \$100 but less than \$500.....02
At least \$500 but less than \$1000.....03
At least \$1000 but less than \$1500.....04
\$1,500 or more.....05
Refused.....-999
Don't Know.....-888

Q464 Last month, how many members of your family who currently live with you did any informal jobs such as odd jobs, side jobs, under-the-table jobs or off-the-books jobs. Please include yourself and anyone else who worked at informal jobs last month.

Number with earnings from informal jobs _____ **If Q464 = 0 Go to Q467; Otherwise Go to Q465**
Refused.....-999
Don't Know.....-888

Q465 Altogether, how much money did you and/or other family members earn from informal jobs last month?

\$ _ _ _ _
Refused.....-999
Don't Know.....-888

If Q465 = -999 or -888 Go to Q466; Otherwise Go to Q467

Q466 Would you say it was:

Less than \$100.....01
At least \$100 but less than \$500.....02
At least \$500 but less than \$1000.....03
At least \$1000 but less than \$1500.....04
\$1,500 or more.....05

Refused.....	-999
Don't Know.....	-888

Q467 Last month, did you have to borrow any money from family or friends for food, rent or other bills?
 Yes.....01 **Go to Q468**
 No.....02 **Go to Q470**
 Refused.....-999
 Don't Know.....-888

Q468 Altogether, about how much money did you have to borrow last month?
 \$ _____
 Refused.....-999
 Don't Know.....-888

If Q465 = -999 or -888 Go to Q466; Otherwise Go to Q467

Q469 Would you say it was:
 Less than \$100.....01
 At least \$100 but less than \$300.....02
 At least \$500 but less than \$1000.....03
 At least \$1000 but less than \$1500.....04
 \$1,500 or more.....05
 Refused.....-999
 Don't Know.....-888

Q470 Do you have any outstanding debts like a credit card balance, a car loan, or a personal loan from family or friends?
 Yes.....01 **Go to Q471**
 No.....02 **Go to Q473**
 Refused.....-999
 Don't Know.....-888

Q471 Altogether, about how much is your total debt?
 \$ _____
 Refused.....-999
 Don't Know.....-888

If Q471 = -999 or -888 Go to Q472; Otherwise Go to Q473

Q472 Would you say it was:
 Less than \$100.....01
 At least \$100 but less than \$300.....02
 At least \$500 but less than \$1000.....03
 At least \$1000 but less than \$1500.....04
 \$1,500 or more.....05
 Refused.....-999
 Don't Know.....-888

During the past 12 months, have you ever not have enough money to do any of these things:

Yes No R DK

Q473	Buy food that your family needed?	01	02	-999	-888
Q474	Buy clothing or shoes that your family needed?	01	02	-999	-888
Q475	Pay the rent or mortgage?	01	02	-999	-888
Q476	Pay an important bill like a utility bill or medical bill?	01	02	-999	-888
Q477	Have you and your family received help in the form of money or other goods like food or clothing from family and/or friends during the past month?				
	Yes.....	.01			
	No.....	.02			
	Refused.....	-999			
	Don't Know.....	-888			
Q478	Have you and your family received help in the form of money or other goods like food or clothing from churches, community?				
	Yes.....	.01			
	No.....	.02			
	Refused.....	-999			
	Don't Know.....	-888			
Q479	Have you received help from any other people or places?				
	Yes.....	.01			Go to Q480
	No.....	.02			Go to Q481
	Refused.....	-999			
	Don't Know.....	-888			
Q480	From what other people or places have you received help?				
	_____				Go to Q481
	Not Applicable.....	-777			
	Refused.....	-999			
	Don't Know.....	-888			
Q481-Q487	Have you experienced any of the following events during the past 12 months?				
		Yes	No	R	DK
Q481	Not had enough food to feed your family?	01	02	-999	-888
Q482	Gone to a food pantry or community meal program?	01	02	-999	-888
Q483	Had your utilities shut off?	01	02	-999	-888
Q484	Had your phone service cut off?	01	02	-999	-888
Q485	Been evicted?	01	02	-999	-888

Q486	Moved in with family or friends because you could not afford your own place?	01	02	-999	-888
Q487	Had your furniture, car, or other belongings repossessed?	01	02	-999	-888
Q488	Which of these statements best describes the food eaten in your household during the past 30 days:				
	Enough of the kinds of foods you want to eat.....				.01
	Enough food, but not always the kinds of food you want to eat.....				.02
	Sometimes not enough food to eat.....				.03
	Often not enough to eat.....				.04

Section 11: Parenting

Q489 For this next set of questions, I would like you to think just about [name of focal child].

If Q272 = 0 - 10 Go to Q490

If Q272 = 11 - 13 Go to Q501

If Q272 = 14 - 22 Go to Q513

Q490 About how often does your child get a chance to go outside your house or apartment?

[Select choice that best matches respondent's answer]

- Never.....01
- A few times a year.....02
- Once a month.....03
- 2 or 3 times a month.....04
- Once a week.....05
- 2 or 3 times a week.....06
- 4 or 5 times a week.....07
- Almost every day.....08
- Refused.....-999
- Don't Know.....-888

Q491 Does your child like books?

- Yes.....01
- No.....02
- Refused.....-999
- Don't Know.....-888

Q492 About how many books does your child have?

[Select choice that best matches respondent's answer]

- None.....01
- 1 or 2.....02
- More than 2 but less than 10.....03
- 10 or more.....04
- Refused.....-999
- Don't Know.....-888

Q493 Does your child like it when you read stories to him or her?

- Yes.....01
- No.....02
- Refused.....-999
- Don't Know.....-888

Q494 About how often are you able to read stories to your child?

[Select choice that best matches respondent's answer]

- Never.....01
- A few times a year.....02
- Once a month.....03
- 2 or 3 times a month.....04
- Once a week.....05
- 2 or 3 times a week.....06
- 4 or 5 times a week.....07

Almost every day.....08
Refused.....-999
Don't Know.....-888

Q495 About how many role-playing toys like stuffed animals or dolls does your child have?
[Prompt: Role-playing toys are toys that your child can play make-believe or pretend with.]
Number of toys _____
Refused.....-999
Don't Know.....-888

Q496 About how many push or pull toys does your child have?
Number of toys _____
Refused.....-999
Don't Know.....-888

Q497 About how frequently do you talk to your child while you are doing housework?
[Select choice that best matches respondent's answer]
You always talk to your child while you are doing housework.....01
You often talk to your child while you are doing housework.....02
You sometimes talk to your child while you are doing housework.....03
You rarely talk to your child while you are doing housework.....04
You never talk to your child while you are doing housework.....05
Refused.....-999
Don't Know.....-888

Q498 About how often are you able to go on walks with your child?
[Select choice that best matches respondent's answer]
Never.....01
A few times a year.....02
Once a month.....03
2 or 3 times a month.....04
Once a week.....05
2 or 3 times a week.....06
4 or 5 times a week.....07
Almost every day.....08
Refused.....-999
Don't Know.....-888

Q499 About how often are you able to take your child to parks or playgrounds?
[Select choice that best matches respondent's answer]
Never.....01
A few times a year.....02
Once a month.....03
2 or 3 times a month.....04
Once a week.....05
2 or 3 times a week.....06
4 or 5 times a week.....07
Almost every day.....08

Refused.....	999
Don't Know.....	888

Q500 About how often are you able to play with your child?
[Select choice that best matches respondent's answer]
 Never.....01 **Go to Q513**
 A few times a year.....02
 Once a month.....03
 2 or 3 times a month.....04
 Once a week.....05
 2 or 3 times a week.....06
 4 or 5 times a week.....07
 Almost every day.....08
 Refused.....-999
 Don't Know.....-888

Q501 About how often are you or another family member able to take your child on any kind of outing like going shopping, on a picnic, or to a park?
[Select choice that best matches respondent's answer]
 Never.....01
 A few times a year.....02
 Once a month.....03
 2 or 3 times a month.....04
 Once a week.....05
 2 or 3 times a week.....06
 4 or 5 times a week.....07
 Almost every day.....08
 Refused.....-999
 Don't Know.....-888

Q502 Does your child like it when you read stories to him or her?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888

Q503 About how often are you able to read stories to your child?
[Select choice that best matches respondent's answer]
 Never.....01
 A few times a year.....02
 Once a month.....03
 2 or 3 times a month.....04
 Once a week.....05
 2 or 3 times a week.....06
 4 or 5 times a week.....07
 Almost every day.....08
 Refused.....-999
 Don't Know.....-888

Q504 About how many times have you or another family member been able to take your child to a museum?
[Select choice that best matches respondent's answer]
 Never.....01
 Once or twice.....02
 Several times.....03

At least once a month.....04
At least once a week.....05
Refused.....-999
Don't Know.....-888

Q505 Does your child like books?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888

Q506 About how many books does your child have?
[Select choice that best matches respondent's answer]
None.....01
1 or 2.....02
More than 2 but less than 10.....03
10 or more.....04
Refused.....-999
Don't Know.....-888

Q507 Does your child listen to children's records or tapes at home?
[Select choice that best matches respondent's answer]
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888

Q508 About how often are you able to play with your child?
[Select choice that best matches respondent's answer]
Never.....01
A few times a year.....02
Once a month.....03
2 or 3 times a month.....04
Once a week.....05
2 or 3 times a week.....06
4 or 5 times a week.....07
Almost every day.....08
Refused.....-999
Don't Know.....-888

Q509 Have your or another family member helped or been helping your child to learn numbers?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888

Q510 Have your or another family member helped or been helping your child to learn the alphabet?
Yes.....01
No.....02

Refused.....-999
 Don't Know.....-888

Q511 Have your or another family member helped or been helping your child to learn colors?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888

Q512 Have your or another family member helped or been helping your child to learn shapes and sizes?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888

Being a parent can be very difficult. I am going to ask you some questions about the kinds of difficulties parents often experience. Thinking about [focal child's name], please tell me whether you feel this way "Almost never", "Less than half the time", "Half the time", "More than half the time", or "Almost always".

Almost never.....01
Less than half the time.....02
Half the time.....03
More than half the time.....04
Almost always.....05
Refused.....R [Enter -999]
Don't Know.....DK [Enter -888]

Q513 How often do you feel you are giving up your own life to meet your child's needs?
 01 02 03 04 05 R DK

Q514 How often do you feel trapped by your responsibilities as a parent?
 01 02 03 04 05 R DK

Q515 How often do you feel that taking care of your child is more work than pleasure?
 01 02 03 04 05 R DK

Q516 How often do you feel your child is harder to care for than most other children?
 01 02 03 04 05 R DK

Q517 How often does your child do things that really bother you a lot?
 01 02 03 04 05 R DK

Q518 How often do you lose patience with your child?
 01 02 03 04 05 R DK

Q519 How often do you feel angry with your child?
 01 02 03 04 05 R DK

Q520 How much trouble has your child been to raise?
 No trouble.....01
 A little trouble.....02

Some trouble.....03
Quite a bit of trouble.....04
A great deal of trouble.....05
Refused.....-999
Don't Know.....-888

Q521 Does [name of focal child]'s father {mother} live with him or her?
Yes.....01 **Go to Q523**

No.....02 **Go to Q522**
Refused.....-999
Don't Know.....-888

Q522	How often does [name of focal child] spend time with his or her <u>father</u> {mother}?
	Every day.....01
	Four or five times a week.....02
	Two or three times a week.....03
	Once a week.....04
	Two or three times a month.....05
	Once a month.....06
	Less than once a month.....07
	Almost never.....08
	N/A (e.g., father is deceased).....-777
	Refused.....-999
	Don't Know.....-888

Section 12: Child Health and Development

Once again, I would like you to think just about [name of focal child].

Q523 In general, how would you describe [focal child's name] health?

[Read each choice]

- Excellent.....01
- Very Good.....02
- Good.....03
- Fair.....04
- Poor.....05
- Refused.....-999
- Don't Know.....-888

Q524 Does [focal child's name] have any health problems that either last a long time or come back again and again?

Yes.....01 **Go to Q525**

No.....02 **Go to Q526**

Refused.....-999

Don't Know.....-888

Q525 What are those problems?

[Do Not Read Choices. Select choice(s) that best matches respondent's answer.]

- Allergies (severe).....01
- Anemia.....02
- Arthritis.....03
- Asthma.....04
- Birth defect.....05
- Brain tumor.....06
- Cerebral palsy.....07
- Colitis or other bowel problem.....08
- Dental problem.....09
- Diabetes.....10
- Ear infections (repeated).....11
- Eczema, impetigo or other skin disease.....12
- Epilepsy or seizures.....13
- Failure to thrive.....14
- Hearing problem.....15
- Heart condition (chronic).....16
- Hernia.....17
- HIV/AIDS.....18
- High blood pressure.....19
- High lead levels.....20
- Physical disability.....21
- Respiratory problem (except asthma).....22
- Sickle cell anemia.....23
- Spina Bifida.....24
- Vision or hearing problem.....25
- Other.....26
- Specify _____
- Refused.....-999

Don't Know.....-888

- Q526 Have you ever been told that [focal child's name] has any disabilities or other special needs?
 Yes.....01 **Go to Q527**
 No.....02 **Go to Q528**
 Refused.....-999
 Don't Know.....-888
- Q527 What are those disabilities or other special needs?
[Do not read choices. Select choice(s) that best matches respondent's answer.]
 Learning disability.....01
 Mental disorder (e.g., depression; anxiety).....02
 Mental retardation.....03
 Physical disability.....04
 Speech impairment.....05
 Language impairment.....06
 Hearing impairment07
 Visual impairment.....08
 Hyperactivity/Attention Deficit Disorder.....09
 Emotional disturbance.....10
 Other
 Specify _____
 Refused.....-999
 Don't Know.....-888
- Q528 Is [focal child's name] receiving any kind of treatment or services for these disabilities or other special needs?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q529 Is [focal child's name] receiving SSI because of those disabilities or other special needs?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q530 In the past year, has [focal child's name] had an illness that required him or her to stay in a hospital overnight?
 Yes.....01 **Go to Q531**
 No.....02 **Go to Q532**
 Refused.....-999
 Don't Know.....-888
- Q531 How many times did this happen?
 Number of times _____
 Refused.....-999
 Don't Know.....-888
- Q532 In the past year, has [focal child's name] had a serious injury, accident, or poisoning that required emergency medical treatment?
 Yes.....01 **Go to Q533**

No.....02
Refused.....-999
Don't Know.....-888

Go to Q535

- Q533 How many times did this happen?
 Number of times _____
 Refused.....-999
 Don't Know.....-888
- Q534 During the past 12 months, did [focal child's name] stay overnight in a hospital because of an injury, accident, or poisoning?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q535 During the past 12 months, has there ever been a time when [focal child's name] did not get medical care when you thought she/he needed it?
 Yes.....01 **Go to Q536**
 No.....02 **If Q272 = 1 Go to Q537**
 Refused.....-999 **If Q272 = 2 Go to Q544**
 Don't Know.....-888 **If Q272 = 3 Go to Q548**
If Q272 = 4 or 5 Go to Q554
If Q272 = 6 Go to Q558
If Q272 = 7 Go to Q562
If Q272 = 8 Go to Q565
If Q272 = 9 - 11 Go to Q570
If Q272 = 12 - 22 Go to Q585
- Q536 Why didn't [focal child's name] get medical care at that time?
[Select choice that best matches respondent's answer]
 Your child did not have health insurance or Medical Assistance.....01 **If Q272 = 1 Go to Q537**
 Your child had insurance or Medical Assistance but you could not afford the copay.....02 **If Q272 = 2 Go to Q544**
Go to Q548 **If Q272 = 3**
 You could not get a doctor appointment.....03 **If Q272 = 4 or 5 Go to Q554**
 You had no transportation to go to a doctor.....04 **If Q272 = 6 Go to Q558**
 You did not have transportation to go to the doctor.....05 **If Q272 = 7 Go to Q562**
 Other.....06 **If Q272 = 8 Go to Q565**
 Specify _____ **If Q272 = 9 - 11 Go to Q570**
 Refused.....-999 **If Q272 = 12 - 22 Go to Q585**
 Don't Know.....-888

- Q537 When lying on his/her stomach, has [name of focal child] ever turned his/her head from side to side?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888
- Q538 Have [name of focal child]'s eyes ever followed a moving object?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888
- Q539 When lying on his/her stomach on a flat surface, has [name of focal child] ever lifted his/her head off the surface for a moment?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888
- Q540 Have [name of focal child]'s eyes ever followed a moving object all the way from one side to another?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888
- Q541 Has [name of focal child] ever smiled at someone when that person talked to or smiled at him or her?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888
- Q542 When lying on his/her stomach, has [name of focal child] ever raised his/her head and chest from the surface while resting his/her weight on his/her lower arms or hands?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888
- Q543 Has [name of focal child] ever turned his/her head around to look at something?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888
- Q544 While lying on his/her back and being pulled up to a sitting position, did [name of focal child] ever hold his/her head stiffly so that it did not hang back as he/she was pulled up?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888

- Q545 Has [name of focal child] ever laughed out loud without being tickled or touched?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q546 Has [name of focal child] ever held in one hand a moderate size object such as a block or rattle?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q547 Has [name of focal child] ever rolled over on his/her own on purpose?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q548 Has [name of focal child] ever seemed to enjoy looking in the mirror at himself/herself?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q549 Has [name of focal child] ever been pulled from a sitting to a standing position and supported his/her own weight with legs stretched out?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q550 Has [name of focal child] ever looked around with his/her eyes for a toy which was lost or not nearby?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q551 Has [name of focal child] ever sat alone with no help except for leaning forward on his/her hands or with just a little help from someone else?
 Yes.....01 **If Q272 = 1 Go to Q597; Otherwise Go to Q552**
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q552 Has [name of focal child] ever sat for 10 minutes without any support at all?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888

- Q553 Has [name of focal child] ever pulled himself/herself to a standing position without any help from another person?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q554 Has [name of focal child] ever crawled when left lying on his/her stomach?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q555 Has [name of focal child] ever said any recognizable words such as "mama" or "dada"?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q556 Has [name of focal child] ever picked up small objects such as raisins or cookie crumbs using only his/her thumb and first finger?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q557 Has [name of focal child] ever walked at least 2 steps with one hand held or holding on to something?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q558 Has [name of focal child] ever waved goodbye without help from another person?
 Yes.....01 **If Q272 = 2 Go to Q597; Otherwise Go to Q559**
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q559 Has [name of focal child] ever shown by his/her behavior that he/she knows the names of common objects when somebody else names them out loud?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q560 Has [name of focal child] ever shown that he/she wanted something by pointing, pulling, or making pleasant sounds rather than crying or whining?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888

- Q561 Has [name of focal child] ever stood alone on his/her feet for 10 seconds or more without holding on to anything or to another person?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q562 Has [name of focal child] ever walked at least 2 steps without holding on to anything of to another person?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q563 Has [name of focal child] ever crawled up at least 2 stairs or steps?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q564 Has [name of focal child] ever said 2 recognizable words besides "mama" and "dada"?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q565 Has [name of focal child] ever run?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q566 Has [name of focal child] ever said the name of a familiar object such as a ball?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q567 Has [name of focal child] ever made a line with a crayon or pencil?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q568 Did [name of focal child] ever walk up at least 2 stairs with one hand held or holding on to the railing?
 Yes.....01 **If Q272 = 4 or 5 Go to Q597; Otherwise Go to Q569**
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q569 Has [name of focal child] ever fed himself/herself with a spoon or fork without spilling much?

Yes.....01
No.....02
Refused.....-999
Don't Know.....-888

Q570 Has [name of focal child] ever let someone know, without crying, that wearing wet or soiled pants or diapers bothered him/her?

Yes.....01
No.....02
Refused.....-999
Don't Know.....-888

Q571 Has [name of focal child] ever spoken a partial sentence of 3 words or more?

Yes.....01
No.....02
Refused.....-999
Don't Know.....-888

Q572 Has [name of focal child] ever walked up the stairs by himself/herself without holding on to a railing?

Yes.....01 **If Q272 = 6 Go to Q597; Otherwise Go to Q573**
No.....02
Refused.....-999
Don't Know.....-888

- Q573 Has [name of focal child] ever washed and dried his/her hands without any help except for turning the water on and off?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q574 Has [name of focal child] ever counted 3 objects correctly
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q575 Has [name of focal child] ever gone to the toilet alone?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q576 Has [name of focal child] ever walked up stairs by himself/herself with no help, stepping on each step with only one foot?
 Yes.....01 **If Q272 = 7 Go to Q597; Otherwise Go to Q577**
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q577 Does [name of focal child] know his/her own age and sex?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q578 Has [name of focal child] ever said the names of at least 4 colors?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q579 Has [name of focal child] ever pedaled a tricycle at least 10 feet?
 Yes.....01 **If Q272 = 8 Go to Q597; Otherwise Go to Q580**
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q580 Has [name of focal child] ever done a somersault without help from anybody?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q581 Has [name of focal child] ever dressed himself/herself without any help except for tying shoes?

Yes.....	01
No.....	02
Refused.....	-999
Don't Know.....	-888

Q582 Has [name of focal child] ever said his/her first and last name together without someone's help?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888

Q583 Has [name of focal child] ever counted out loud up to 10?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888

Q584 Has [name of focal child] ever drawn a picture of a man or woman with at least 2 parts of the body besides a head?
Yes.....01 **Go to Q597**
No.....02
Refused.....-999
Don't Know.....-888

Section 13: Child School and Recreation

Once again, I would like you to think just about [name of focal child].

- Q585 Does [focal child's name] attend school?
Yes.....01 **Go to Q586**
No.....02 **Go to Q591**
Refused.....-999
Don't Know.....-888
- Q586 What grade is [focal child's name] in?
Pre-school/Pre-Kindergarten.....01
Kindergarten.....02
First grade.....03
Second grade.....04
Third grade.....05
Fourth grade.....06
Fifth grade.....07
Sixth grade.....08
Seventh grade.....09
Eighth grade.....10
Ninth grade/High school freshman.....11
Tenth grade/High school sophomore.....12
Eleventh grade/High school junior.....13
Twelfth grade/High school senior.....14
Child is in ungraded program.....15
Child is home schooled.....16
Refused.....-999
Don't Know.....-888
- Q587 Is [focal child's name] in a special education class or receive any other kind of special remedial or resource help at school?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888
- Q588 Has [focal child's name] ever been held back or failed a grade?
Yes.....01
No.....02
N/A.....-777
Refused.....-999
Don't Know.....-888
- Q589 How would you characterize [focal child's name] grades on his/her most recent report card?
Mostly A's or B's.....01
Mostly C's.....02
Mostly D's or F's.....03
Other.....04
Specify_____

- Refused.....-999
 Don't know.....-888
- Q590 About how many days of school does [focal child's name] miss each month?
 Number of Days _____
 Refused.....-999
 Don't know.....-888
- Q591 Does [focal child's name] participate in any organized sports either after school or on the weekends?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q592 Does [focal child's name] participate in any clubs or youth groups for boys and/or girls after school or on the weekends?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q593 Are there any other activities [focal child's name] participates on a regular basis either after school or on the weekend?
 Yes.....01 **Go to Q594**
 No.....02 **If Q272 18 - 22 Go to Q595; Otherwise Go to Q597**
 Refused.....-999
 Don't Know.....-888
- Q594 What activities?
 Specify _____ **If Q272 18 - 22 Go to Q595; Otherwise Go to Q597**
 Refused.....-999
 Don't Know.....-888
- Q595 During the past month, has [focal child's name] had a job outside the home for which she/he was paid?
 Yes.....01 **Go to Q596**
 No.....02 **Go to Q646**
 Refused.....-999
 Don't Know.....-888
- Q596 How many hours per week did [focal child's name] work at that job?
 Hours per week _____ **Go to Q646**
 Refused.....-999
 Don't Know.....-888

Section 14: Child Behavior

Q597 **If Q272 = 1 - 4** **Go to Q598**
 If Q272 = 5 - 9 **Go to Q615**
 If Q272 = 10 - 14 **Go to Q626**

The following questions are about ways that young children sometimes behave. Please tell me if your child behaves that way “Almost never”, “Less than half the time”, “Half the time”, “More than half the time”, or “Almost always”.

Q598 During feeding, how often does [name of focal child] squirm and kick?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888

Q599 During feeding, how often does [name of focal child] wave his/her arms?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888

Q600 During sleeping, how often does [name of focal child] usually move around in the crib?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888

Q601 How often does [name of focal child] get sleepy about the same time each evening, give or take 15 minutes?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888

Q602 How often does [name of focal child] get hungry at the same time each day, give or take 15 minutes?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05

Refused.....-999
Don't Know.....-888

- Q603 When [name of focal child] wakes up in the morning, how often is he/she in the same mood?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q604 When [name of focal child] sees a stranger, how often does he/she cry as if afraid?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q605 When [name of focal child] sees an unfamiliar dog or cat, how often does he/she turn away or cry as if afraid?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q606 When you leave [name of focal child] alone in a room, how often does he/she become upset?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q607 When you take [name of focal child] to the doctor, how often does he/she turn away and cry as if afraid?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q608 When you play with [name of focal child], how often does he/she smile or laugh?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05

Refused.....-999
Don't Know.....-888

- Q609 When [name of focal child] plays alone, how often does he/she smile or laugh?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q610 When [name of focal child] is being given a bath, how often does he/she smile or laugh?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q611 When [name of focal child] hears an unexpected loud sound, like a car back-firing or a vacuum cleaner, how often does he/she cry or become upset?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q612 How often do you have trouble soothing or calming [name of focal child] when he/she is crying or upset?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q613 How often does [name of focal child] get fussy or irritable during the average day?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q614 In general, compared to most infants, how often does [name of focal child] cry and fuss?
 Less than average.....01 **Go to Q704**
 About average.....02
 More than average.....03
 Refused.....-999

Don't Know.....-888

- Q615 When [name of focal child] sees a stranger, how often does he/she cry as if afraid?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q616 When [name of focal child] sees an unfamiliar dog or cat, how often does he/she turn away or cry as if afraid?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q617 When you leave [name of focal child] alone in a room, how often does he/she become upset?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q618 When you take [name of focal child] to the doctor, how often does he/she turn away and cry as if afraid?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q619 When you play with [name of focal child], how often does he/she smile or laugh?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q620 When [name of focal child] plays alone, how often does he/she smile or laugh?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05

Refused.....-999
Don't Know.....-888

- Q621 When [name of focal child] is being given a bath, how often does he/she smile or laugh?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q622 When [name of focal child] hears an unexpected loud sound, like a car back-firing or a vacuum cleaner, how often does he/she cry or become upset?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q623 How often do you have trouble soothing or calming [name of focal child] when he/she is crying or upset?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q624 How often does [name of focal child] get fussy or irritable during the average day?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q625 In general, compared to most toddlers, how often does [name of focal child] cry and fuss?
 Less than average.....01 **Go to Q704**
 About average.....02
 More than average.....03
 Refused.....-999
 Don't Know.....-888
- Q626 When it is mealtime, how often does [name of focal child] eat what you want him/her to eat?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999

Don't Know.....-888

- Q627 When [name of focal child] doesn't eat what you want him/her to eat and you tell him/her to eat it, how often does he/she obey?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q628 When it is [name of focal child]'s bedtime, how often does he/she protest or resist going to bed?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q629 When [name of focal child] does protest and you tell him/her to go to bed again, how often does he/she obey?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q630 When you tell [name of focal child] to turn off the T.V., how often does he/she do so without protest?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q631 When [name of focal child] does protest and you tell him/her to turn the T.V. off again, how often does he/she obey?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q632 When [name of focal child] meets a new child about the same age, how often is he/she shy at first?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03

More than half the time.....	04
Almost always.....	05
Refused.....	-999
Don't Know.....	-888

- Q633 When [name of focal child] meets an adult he/she doesn't know, how often is he/she shy at first?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q634 How often does [name of focal child] cry when he/she hurts himself/herself a little bit?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q635 How often does [name of focal child] laugh and smile easily?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q636 When [name of focal child] is with children his/her own age, how often does he/she fight, hit, or take toys?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q637 When [name of focal child] is with children his/her own age, how often does he/she willingly share toys?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q638 How often do you have trouble soothing or calming [name of focal child] when he/she is crying or upset?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05

Refused.....-999
Don't Know.....-888

- Q639 When [name of focal child] is playing, how often does he/she stay close to you and make sure that he/she can still see you?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q640 How often does [name of focal child] try to copy what you do or how you act?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q641 When you leave [name of focal child] alone in a room, how often does he/she become upset?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q642 How often is [name of focal child] demanding and impatient?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q643 When you get upset about something, how often does [name of focal child] get worried or try to help you or try make you feel better?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888
- Q644 How often does [name of focal child] want help with what he/she is doing?
 Almost never.....01
 Less than half the time.....02
 Half the time.....03

More than half the time.....	04
Almost always.....	05
Refused.....	-999
Don't Know.....	-888

- Q645 How often has [name of focal child] slept through the night during the past year?
 Almost never.....01 **If Q272 = 10 or 11 Go to Q704; Otherwise Go to Q646**
 Less than half the time.....02
 Half the time.....03
 More than half the time.....04
 Almost always.....05
 Refused.....-999
 Don't Know.....-888

I am going to read a series of statements which describe ways in which children commonly behave. For each statement, think about [name of focal child]'s behavior over the last three months and tell me if your child behaves this way "all of the time", "most of the time", "some of the time", "rarely", or "never".

- All of the time.....01**
Most of the time.....02
Some of the time.....03
Rarely.....04
Never.....05
Refused.....R [Enter -999]
Don't Know.....DK [Enter -888]

- Q646 Your child is cheerful or happy. _____
- Q647 Your child waits his or her turn in games or other activities. _____
- Q648 Your child is warm and loving. _____
- Q649 Your child fights with others. _____
- Q650 Your child is curious and likes to explore or experience new things. _____
- Q651 Your child acts sad or depressed. _____
- Q652 Your child thinks before he or she acts. _____
- Q653 Your child talks back to other adults. _____
- Q654 Your child gets along well with other children. _____
- Q655 Your child usually does what you tell him or her to do. _____
- Q656 Your child is easily comforted when he or she gets upset. _____
- Q657 Your child threatens or bullies others. _____
- Q658 Your child is admired or well-liked by other children. _____
- Q659 Your child argues with others. _____
- Q660 Your child tries to do things for himself or herself. _____

- Q661 Your child shows concern for other people's feelings. _____
- Q662 Your child can easily find something to do on his or her own. _____
- Q663 Your child shows pride when he or she does something well or learns something new. _____
- Q664 Your child has low self-esteem. _____
- Q665 Your child can get over being angry quickly. _____
- Q666 Your child is able to concentrate or focus on an activity. _____
- Q667 Your child appears lonely. _____
- Q668 Your child is helpful and cooperative. _____
- Q669 Your child has temper tantrums. _____
- Q670 Your child is considerate and thoughtful of other children. _____
- Q671 Your child tends to share, give, or lend. _____
- Q672 Your child is easily embarrassed. _____
- Q673 Your child is obedient and follows rules. _____
- Q674 Your child is calm and easy-going. _____
- Q675 Your child shows anxiety about being with a group of children. _____
- Q676 Your child sticks with an activity until it is finished. _____
- Q677 Your child gets angry easily. _____
- Q678 Your child is patient if he or she wants something and you are busy. _____
- Q679 Your child is assertive or sticks up for himself or herself. _____
- Q680 Your child tries to be independent and do things for himself or herself. _____
- Q681 During the past 12 months, have you ever seen or heard about [focal child's name] being cruel to a pet or other animal?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888
- Q682 During the past 12 months, have you ever thought [focal child's name] was having behavioral or emotional problems ?

- Yes.....01 **Go to Q683**
- No.....02 **Go to Q687**
- Refused.....-999
- Don't Know.....-888
- Q683 Did you seek help for these problems?
- Yes.....01 **Go to Q684**
- No.....02 **Go to Q686**
- Refused.....-999 **Go to Q687**
- Don't Know.....-888
- Q684 From whom did you seek help? (Specify)
- _____
- Refused.....-999
- Don't Know.....-888
- Q685 Did [focal child's name] receive the help that you were seeking?
- Yes.....01 **Go to Q687**
- No.....02 **Go to Q686**
- Refused.....-999 **Go to Q687**
- Don't Know.....-888
- Q686 Why didn't [focal child's name] receive help for these problems?
[Select choice that best matches respondent's answer.]
- You were not aware of any programs/services in your
community that could help.....01
- You could not find any programs/services in your
community that could help.....02
- You could not find any programs with an opening or
there was a waiting list.....03
- You didn't think the programs/services that were available
would help you or your child.....04
- You had no insurance and could not afford to pay for the
programs/services that were available.....05
- Your family had no time to participate in any programs or services.....06
- Other.....07
- Specify _____
- Refused.....-999
- Don't Know.....-888
- Q687 During the past 12 months, have you ever thought [focal child's name] was having problems with his or her
schoolwork?
- Yes.....01 **Go to Q688**
- No.....02 **If Q272 = 18 - 22 Go to Q692; Otherwise Go to Q697**
- Refused.....-999

- Don't Know.....-888
- Q688 Did you seek help for this problem?
 Yes.....01 **Go to Q689**
 No.....02 **Go to Q691**
 Refused.....-999 **If Q272 = 18 - 22 Go to Q692; Otherwise Go to Q697**
 Don't Know.....-888
- Q689 From whom did you seek help? (Specify)

 Refused.....-999
 Don't Know.....-888
- Q690 Did [focal child's name] receive the help that you were seeking?
 Yes.....01 **If Q272 = 18 - 22 Go to Q692; Otherwise Go to Q697**
 No.....02 **Go to Q691**
 Refused.....-999 **If Q272 = 18 - 22 Go to Q692; Otherwise Go to Q697**
 Don't Know.....-888
- Q691 Why didn't [focal child's name] receive help for this problem?
[Select choice that best matches respondent's answer.]
 You were not aware of any programs/services in your
 community that could help.....01 **If Q272 = 18 - 22 Go to Q692;**
Otherwise Go to Q697
 You could not find any programs/services in your
 community that could help.....02
 You could not find any programs with an opening or
 there was a waiting list.....03
 You didn't think the programs/services that were available
 would help you or your child.....04
 You had no insurance and could not afford to pay for the
 programs/services that were available.....05
 Your family had no time to participate in any programs or services.....06
 Other.....07
 Specify _____
 Refused.....-999
 Don't Know.....-888
- Q692 During the past 12 months, have you ever wanted help because you thought [focal child's name] was having
 problems with alcohol or other drugs?
 Yes.....01 **Go to Q693**

	No.....02	Go to Q697
	Refused.....-999	
	Don't Know.....-888	
Q693	Did you seek help for this problem?	
	Yes.....01	Go to Q694
	No.....02	Go to Q696
	Refused.....-999	Go to Q697
	Don't Know.....-888	
Q694	From whom did you seek help? (Specify)	

	Refused.....-999	
	Don't Know.....-888	
Q695	Did [focal child's name] receive the help that you were seeking?	
	Yes.....01	Go to Q697
	No.....02	Go to Q696
	Refused.....-999	Go to Q697
	Don't Know.....-888	

Q696 Why didn't [focal child's name] receive help for this problem?
[Select choice that best matches respondent's answer.]
 You were not aware of any programs/services in your
 community that could help.....01
 You could not find any programs/services in your
 community that could help.....02
 You could not find any programs with an opening or
 there was a waiting list.....03
 You didn't think the programs/services that were available
 would help you or your child.....04
 You had no insurance and could not afford to pay for the
 programs/services that were available.....05
 Your family had no time to participate in any programs or services.....06
 Other.....07
 Specify _____
 Refused.....-999
 Don't Know.....-888

Q697-Q703 **Has [focal child's name] ever:**

Q697 Been suspended from school?
 Yes.....01
 No.....02
 N/A.....-777
 Refused.....-999
 Don't Know.....-888

Q698 Been expelled from school?
 Yes.....01
 No.....02
 N/A.....-777
 Refused.....-999
 Don't Know.....-888

Q699 Run away from home?
 Yes.....01 **If Q272 = 18 - 22 Go to Q700; Otherwise Go to Q704**
 No.....02
 Refused.....-999
 Don't Know.....-888

Q700 Gotten into trouble for juvenile delinquency?
 Yes.....01
 No.....02
 N/A.....-777
 Refused.....-999
 Don't Know.....-888

Q701 Been arrested for committing a crime?
 Yes.....01 **If Q272 = 20 - 22 Go to Q702; Otherwise Go to Q704**
 No.....02
 Refused.....-999

Don't Know.....-888

Q702

Dropped out of school?

Yes.....01

No.....02

Refused.....-999

Don't Know.....-888

Q703

Become pregnant, given birth or fathered a child?

Yes.....01

No.....02

Refused.....-999

Don't Know.....-888

Section 15: Parent Health and Well-Being

- Q704 In general, how would you describe your health?
[Read each choice]
 Excellent.....01
 Very Good.....02
 Good.....03
 Fair.....04
 Poor.....05
 Refused.....-999
 Don't Know.....-888
- Q705 During the past 12 months, did you ever not get medical care when you thought you needed it?
 Yes.....01 **Go to Q706**
 No.....02 **Go to Q707**
 Refused.....-999
 Don't Know.....-888
- Q706 What was the reason you didn't get medical care you thought you needed it?
[Select choice that best matches respondent's answer.]
 You had no health insurance or Medical Assistance and couldn't afford to pay for medical care.....01
 You had health insurance or Medical Assistance but couldn't afford the co-pay.....02
 You didn't have a doctor.....03
 You had a doctor but could not get an appointment to see him/her.....04
 You did not have transportation to go to the doctor.....05
 Other.....06
 Specify _____
 Refused.....-999
 Don't Know.....-888
- Q707 Do you have any health problems or disabilities that limit the kind or amount of work you can do?
 Yes.....01 **Go to Q708**
 No.....02 **Go to Q709**
 Refused.....-999
 Don't Know.....-888
- Q708 What are those problem or disabilities?
[Do not read choices. Select choice(s) that best matches respondent's answer.]
 Learning disability.....01
 Mental disorder (e.g., depression; anxiety).....02
 Physical disability.....03
 Speech or language impairment.....04
 Hearing or vision impairment.....05
 Other.....06
 Specify _____
 Refused.....-999
 Don't Know.....-888

Q709 Does anyone else in your family have a health problem or disability that limits **your** ability to work or prevents **you** from working?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888

The next few questions are about social activities and community involvement.

Q710 About how many families in your neighborhood are you well enough acquainted with that you visit each other in your homes?
 Number _____
 Refused.....-999
 Don't Know.....-888

Q711 About how many close friends do you have? By close friends I mean people, including relatives, you feel at ease with and can talk with about what is on your mind?
 Number _____
 Refused.....-999
 Don't Know.....-888

Q712 In general, how would you rate your ability to get along with other people these days? Would you say it is:
 Excellent.....01
 Good.....02
 Fair.....03
 Poor.....04
 Refused.....-999
 Don't Know.....888

Q713 About how often do you get together with friends or relatives, like going out together or visiting in each other's homes?
 Every day.....01
 Several days a week.....02
 About once a week.....03
 Two or three times a month.....04
 About once a month.....05
 Five to ten times a year.....06
 Three or four times a year.....07
 One or two times a year.....08
 Never.....09
 Refused.....-999
 Don't Know.....-888

Q714 About how often were you on the telephone with close friends or relatives during the past month?
 Every day.....01
 Several days a week.....02
 About once a week.....03
 Two or three times a month.....04
 Once in the past month.....05
 Not at all in the past month.....06
 N/A (e.g., no phone).....-777
 Refused.....-999

- Don't Know.....-888
- Q715 How often have you attended a religious service during the past month?
 Every day.....01
 More than once a week.....02
 Once a week.....03
 Two or three times.....04
 Once in the past month.....05
 Not at all in the past month.....06
 Refused.....-999
 Don't Know.....-888
- Q716 Do you belong to any voluntary groups, organizations, or clubs?
 Yes.....01 **Go to Q717**
 No.....02 **Go to Q719**
 Refused.....-999
 Don't Know.....-888
- Q717 About how many voluntary groups, organizations, or clubs do you belong to?
 Number of groups or organizations _____
 Refused.....-999
 Don't Know.....-888
- Q718 How active are you in the groups, organizations or clubs to which you belong?
 Very active, attend most meetings.....01
 Fairly active, attend meetings fairly often.....02
 Not active, hardly ever attend meetings.....03
 Refused.....-999
 Don't Know.....-888

I am going to read you a list of statements that describe ways you might have felt or behaved during the past week. Please tell me how many days during the past week you felt or behaved this way.

- Was it: "Less than 1 day".....01
 "1 - 2 days".....02
 "3 - 4 days".....03
 or "5 - 7 days".....04

		<1	1 - 2	3 - 4	5 - 7	R	DK
Q719	I was bothered by things that usually don't bother me.	01	02	03	04	-999	-888
Q720	I did not feel like eating; my appetite was poor.	01	02	03	04	-999	-888
Q721	I felt that I could not shake off the blues even with the help of family and friends.	01	02	03	04	-999	-888
Q722	I felt that I was just as good as other people.*	01	02	03	04	-999	-888
Q723	I had trouble keeping my mind on what I was doing.	01	02	03	04	-999	-888
Q724	I felt depressed.	01	02	03	04	-999	-888
Q725	I felt that everything I did was an effort.	01	02	03	04	-999	-888
Q726	I felt hopeful about the future.*	01	02	03	04	-999	-888
Q727	I thought my life had been a failure.	01	02	03	04	-999	-888
Q728	I felt fearful.	01	02	03	04	-999	-888
Q729	My sleep was restless.	01	02	03	04	-999	-888

Q730	I was happy.*	01	02	03	04	-999	-888
Q731	I talked less than usual.	01	02	03	04	-999	-888
Q732	I felt lonely.	01	02	03	04	-999	-888
Q733	I felt that people were unfriendly.	01	02	03	04	-999	-888
Q734	I enjoyed life.*	01	02	03	04	-999	-888
Q735	I had crying spells.	01	02	03	04	-999	-888
Q736	I felt sad.	01	02	03	04	-999	-888
Q737	I felt that people disliked me.	01	02	03	04	-999	-888
Q738	I could not "get going."	01	02	03	04	-999	-888

I am going to read you a list of statements. For each statement, please tell me whether you:

- “Strongly agree”.....01
- “Agree”.....02
- “Disagree”.....03
- “Strongly disagree”.....04
- Refused.....R [Enter -999]
- Don’t Know.....DK [Enter -888]

		SA	A	D	SD	R	DK
Q739	There is really no way I can solve some of the problems I have.	01	02	03	04	-999	-888
Q740	Sometimes I feel that I am being pushed around in my life.	01	02	03	04	-999	-888
Q741	I have little control over the things that happen to me.	01	02	03	04	-999	-888
Q742	I can do just about anything I really set my mind to.	01	02	03	04	-999	-888
Q743	I often feel helpless in dealing with the problems of life.	01	02	03	04	-999	-888
Q744	What happens to me in the future mostly depends on me.	01	02	03	04	-999	-888
Q745	There is little I can do to change many of the important things in my life.	01	02	03	04	-999	-888
Q746	During the past 12 months, have you ever wanted help for a mental health problem like depression or anxiety? Yes.....01 Go to Q747 No.....02 Go to Q751 Refused.....-999 Don’t Know.....-888						
Q747	Did you seek help for this problem? Yes.....01 Go to Q748 No.....02 Go to Q750 Refused.....-999 Go to Q751 Don’t Know.....-888						
Q748	From whom did you seek help? _____ Refused.....-999 Don’t Know.....-888						
Q749	Did you receive the help you were seeking?						

Yes.....01 **Go to Q751**
 No.....02 **Go to Q750**
 Refused.....-999 **Go to Q751**
 Don't Know.....-888

Q750 Why didn't you receive help?
[Select choice that best matches respondent's answer.]
 You were not aware of any programs/services in your community that
 could help you.....01
 You could not find any programs/services in your community that
 could help you.....02
 You could not find any programs with an opening or you were put
 on a waiting list.....03
 You didn't think the programs/services that were available
 would help.....04
 You had no insurance and could not afford to pay for the
 programs/services that were available.....05
 You had no time to participate in any programs or services.....06
 Other.....07
 Specify _____
 Refused.....-999
 Don't Know.....-888

Q751 During the past 12 months, have you been involved in a relationship with a spouse or partner where you didn't
 feel safe?
 Yes.....01 **Go to Q751**
 No.....02 **Go to Q757**
 Refused.....-999
 Don't Know.....-888

Q752 Was that relationship physically abusive?
 Yes.....01
 No.....02
 Refused.....-999
 Don't Know.....-888

Q753 Did you seek help because you felt unsafe or because you were being physically abused?
 Yes.....01 **Go to Q754**
 No.....02 **Go to Q756**
 Refused.....-999 **Go to Q757**
 Don't Know.....-888

Q754 From whom did you seek help?

 Refused.....-999
 Don't Know.....-888

Q755

Did you receive the help you were seeking?

Yes.....01

Go to Q757

No.....02

Go to Q756

Refused.....-999

Go to Q757

Don't Know.....-888

Q756

Why didn't you receive help?
[Select choice that best matches respondent's answer.]

You were not aware of any programs/services in your community that could help you.....	01
You could not find any programs/services in your community that could help you.....	02
You could not find any programs with an opening or you were put on a waiting list.....	03
You didn't think the programs/services that were available would help.....	04
You had no insurance and could not afford to pay for the programs/services that were available.....	05
You had no time to participate in any programs or services.....	06
You were afraid that seeking help would only lead to more violence.....	07
Other.....	08
Specify _____	
Refused.....	-999
Don't Know.....	-888

Section 16: Alcohol and Other Drugs

- Q757 At any time during the past 12 months did you ever drink beer, wine, or another alcoholic beverage?
Yes.....01 **Go to Q758**
No.....02 **Go to Q761**
Refused.....-999
Don't Know.....-888
- Q758 During the past 12 months, have you ever missed work because you had a hangover?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888
- Q759 During the past 12 months, have you ever lost a job because you had been drinking?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888
- Q760 During the past 12 months, have you ever thought you had a problem with alcohol?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888
- Q761 At any time during the past 12 months did you ever use drugs?
Yes.....01 **Go to Q762**
No.....02 **If Q760 = 02 Go to Q769; Otherwise Go to Q765**
Refused.....-999
Don't Know.....-888
- Q762 During the past 12 months, have you ever missed work because you had a bad reaction from using drugs?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888
- Q763 During the past 12 months, have you ever lost a job because you had been using drugs?
Yes.....01
No.....02
Refused.....-999
Don't Know.....-888
- Q764 During the past 12 months, have you ever thought you had a problem with drugs?
Yes.....01 **Go to Q765**
No.....02 **If Q760 = 02 Go to Q769; Otherwise Go to Q765**
Refused.....-999

Don't Know.....-888

Q765	Did you seek help related to your use of alcohol or drugs? Yes.....01	Go to Q766
	No.....02	Go to Q768
	Refused.....-999	
	Don't Know.....-888	
Q766	From whom did you seek help? _____	
	Refused.....-999	
	Don't Know.....-888	
Q767	Did you receive the help you were seeking? Yes.....01	Go to Q769
	No.....02	Go to Q768
	Refused.....-999	Go to Q769
	Don't Know.....-888	
Q768	Why didn't you receive help? [Select choice that best matches respondent's answer.]	
	You were not aware of any programs/services in your community that could help you.....01	
	You could not find any programs/services in your community that could help you.....02	
	You could not find any programs with an opening or you were put on a waiting list.....03	
	You didn't think the programs/services that were available would help.....04	
	You had no insurance and could not afford to pay for the programs/services that were available.....05	
	You had no time to participate in any programs or services.....06	
	Other.....07	
	Specify _____	
	Refused.....-999	
	Don't Know.....-888	

Section 17: Contact Information

We would like to contact you about a year from now to find out what life has been like for you and your children over the next 12 months. This second interview would last about an hour and you would be paid \$25 for your participation. Because 12 months is a long period of time, and either your address or telephone number may change by then, we want to be sure that we will be able to locate you. One way you can help us locate you is by giving us the name, address and telephone number of three persons, such as friends, family members, or anyone else you can think of who would know where you are.

Q769 Would you be willing to give us this information?
Yes.....01
No.....02

Who should we start with?

Person #1
Q770 Name _____
Q771 Relationship _____
Q772 Address _____

Q773 Telephone Number _____

Who else might we contact?

Person #2
Q774 Name _____
Q775 Relationship _____
Q776 Address _____

Q777 Telephone Number _____

Is there anyone else might we contact?

Person #3
Q778 Name _____
Q779 Relationship _____
Q780 Address _____

Q781 Telephone Number _____

Q782 Another way we might be able to find you is by searching the administrative records of public or private agencies.

Would it be okay with you if we try to locate you by searching one or more of these sources?

Yes, respondent gave verbal permission.....01

No, respondent did not give verbal permission.....02

