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NATIONAL LONGITUDINAL SURVEY OF YOUTH/1979 COHORT

CHILD SUPPLEMENT

FOR NLSY79 FEMALE RESPONDENT'S OWN
CHILDREN LIVING IN HOUSEHOLD

AGES 0 - 14

2000

ROUND NINETEEN

NLSY79 2000 Survey

*Paper version of the NLSY79 2000 Child Supplement that was administered
as a CAPI instrument in the field.*

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2000 NLSY79 CHILD SUPPLEMENT

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2000 NLSY79 Child CAPI Supplement

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***Qnames** printed in **bold** denote the major question series in each section.

INTRODUCTION

This document describes the content of the 2000 Child Supplement to the National Longitudinal Survey of Youth/1979 Cohort. This data collection instrument, designed to obtain information about the biological children of the female NLSY79 respondents, was administered as a computer-assisted interview. Although some cases were done over the telephone, the dominant interview mode was in-person; thus the term CAPI (computer-assisted personal interview) is used to refer to the data collection technology. From 1986-1992, this supplement was administered using paper and pencil (PAPI) methods, and researchers could easily determine the interview content by examining the printed questionnaire and other interviewing materials.

The aim here is to reproduce the content of the CAPI interview in a clear, complete, and compact format. With this in mind, this CAPI questionnaire has been formatted as similarly as possible to a conventional questionnaire, but it also includes some additional information that enhances the usefulness of the questionnaire for data users. The resulting document summarizes the “conversation” between the interviewer and respondent.

The term “conversation” is chosen to emphasize the difference between the questionnaire and the codebook. The codebook contains the data released as a result of the interview, but some information collected during the interview is not present in the codebook. For example, the questionnaire includes questions for which the responses might somehow identify the respondent. Such items are not released, so the related questions are not present in the codebook. Conversely, the codebook contains some information not directly collected in the interview. For example, while created variables are documented in the codebook, there is no reference to them in the questionnaire as they are not part of the interaction between interviewer and respondent.

In order to simplify the questionnaire and the public use data file, a number of time variables, from which elapsed time can be calculated (time stamps), have been omitted. A time stamp appears at the beginning of each major section of the questionnaire. Elapsed time may be very useful for a variety of methodological studies. Users interested in these data are encouraged to access the files on the NLSY79 Child CD or contact CHRR for additional information.

To aid researchers in using the questionnaire, this introduction provides information on several topics. First, typical question records are described and key terms such as “Question Name,” “Distribution Code Block,” and “Lead in Questions” are defined. This section explains how to follow the flow of the interview through the questionnaire. Second, instrument compression techniques used to produce a compact questionnaire are discussed and elsewhere noted where appropriate. Finally, an overview on how the CAPI child assessments are presented in this questionnaire is included.

Question Records

Question records are the building blocks of the CAPI questionnaire, with various types of records performing different data collection and/or manipulation functions. Loosely grouped, CAPI question records will either: (a) provide administrative information that assists the interviewer or provides an introduction to the next question; (b) provide question text and control for data entry of the response; or (c) perform internal operations and calculations to guide the interview and maintain the internal data storage during the interview. Question records essential to understanding either the content of the survey or the flow of respondents through the interview appear within the Child Supplement questionnaire.

To aid users, the Child CAPI questionnaire contains some elements found in the NLSY79 Child/Young Adult data set codebook. For example, skip patterns are included in each question block. However, many of the elements not essential to understanding the conversational flow of the interview have been removed from the questionnaire, making each question block less cluttered and easier to read. In particular, automated functions transparent to the interviewer, but crucial to understanding the flow of the questionnaire, have been "translated" into a text format that captures the gist of the computer instruction code.

Figure 1 shows the format of a typical question record as used in this document; the various information fields are then explained in the following paragraphs.

Figure 1. CAPI Question Record

QUESTION NAME

In the Question Text block, conventional text indicates what the interviewer reads aloud to a respondent.

AN INSTRUCTION OR COMMENT TO THE INTERVIEWER IS CAPITALIZED.

AUTOMATED CAPI OPERATIONS SUCH AS TEXT FILLS (ChildName, he/she), AND SKIPS OR BRANCHES (GO TO HLTH-99) ARE ITALICIZED.

(CODING INSTRUCTIONS TO THE INTERVIEWER APPEAR HERE)

K ₁	response/answer choice 1 (<i>GO TO HLTH-98</i>)
K ₂	response/answer choice 2
K ₃	response/answer choice 3 (<i>GO TO HLTH-99A1</i>)
.	
.	
.	
K _n	distribution code block text.

(NUMERIC EVALUATIONS AND SKIPS MAY APPEAR HERE)

Lead In(s):

Default Next Question:

Question Name

Question names are the unique identifiers assigned to identical questions across CAPI survey years. They replace the deck-and-column numbering system used in previous surveys. Subsequent CAPI surveys that field this question will use the same question name to help identify comparable questions across years.

Question names provide several items of information. The question name generally indicates the section of the instrument from which each question was derived—e.g., question names beginning with SCHL come from the section of the Child Supplement questionnaire regarding the child's schooling. The HLTH series designates the child health questions. Additionally, the question name indicates the order in which the question was administered within each section.

Embedded in some question names is an indicator that the question was part of a “looped” or repeated series. For example, the “.01” in question HLTH-6C.01 indicates it is the first iteration of a question asking about accidents or injuries that a child may have had; HLTH-6C.02 is the second iteration of the same question, but for the next most recent accident or injury; HLTH-6C.03 is the third most recent accident, and so on. *For the sake of brevity, only the first question of a looped series is shown in the questionnaire.* All replications of a looped question variable that contain data *are* included in the codebook.

Question Text

The “Question Text” field contains the text of the question that the interviewer asked the respondent or other information used to direct the flow of the interview. Machine instructions often appear in text read by the interviewer. For example, the name of the child being interviewed is stored in a variable, or save array, called “*Child Name*” for use during the interview. Each time a question refers to the child by name, the computer automatically inserts the name of the child into the question. The interviewer never actually sees the text “*Child Name*” on the screen, only the child's actual name. Some CAPI text fills are similar to those used in the PAPI interviews, such as “*he/she*” to handle gender fills. The following types of text may appear:

Question Text:	Text that is read aloud to the respondent--question or information--appears in a conventional mixture of upper and lowercase letters.
INTERVIEWER COMMENTS:	Text in all uppercase is either an instruction to the interviewer or a clarifying comment. NORC interviewers do not read these items to the respondent.
<i>AUTOMATION:</i>	If a question record contains a machine instruction that is executed automatically, text representing that instruction is italicized. Upper case italics indicate a machine instruction that is important to skip logic, but is not seen by the interviewer. To reiterate, only a reduced form of the machine instructions is printed in lieu of computer code in this document. Lower/mixed case italics represent a save array or text fill that the interviewer sees.

Distribution Code Block

When a question requires the choice of one or more items from a predefined list, that list, or distribution code block, is shown in the question block. Each item in the distribution code block has three components:

Code:	The numeric code associated with each possible response is listed first (shown in Figure 1 as K_{1...n}). All data in the NLSY79 public use data files are numeric, so each possible item that could be selected is associated with an integer.
Text:	Next is the item text or description associated with the numeric code, such as "Yes" or "No" or "Very Satisfied".
Skip:	When the selection of a specific response determines which question will be asked next, a (<i>GO TO Question</i>) notation follows the text of the response set.

Some questions collect numeric data (hours, weeks, dollar amounts, etc.) or verbatim text. In these cases, spaces or blank lines appear indicating where digits or lines of text were to be entered. Whenever the next question to be asked depends upon an entered numeric value falling in some range, the corresponding evaluation and machine instructions are shown.

Lead-ins

When using PAPI questionnaires, researchers needed to study the instrument in detail to determine under what circumstances a particular question was asked. The CAPI questionnaire simplifies this process somewhat by including a “Lead in(s)” fields in the question block. This field lists the questions that lead into each particular item.

Examples:

CS-99 [Default]	This means that the default path from question CS-99 lead to the current question, but there may be conditions under which a different path would be taken.
-----------------	---

CS-99 [1:4]	This means that whenever the response category for question CS-99 takes on the values one to four (inclusive), the next question will be the current question record. If the response to CS-99 is some other value, the respondent may next be asked a different question.
CS-99	When the lead in question is shown without a qualifier such as [Default], or [1:4], this is a sign that records not essential to understanding the flow of the instrument have been suppressed. In such cases, if the user refers back to the lead in question, this earlier question will clarify the flow of the interview.

By tracing the skip pattern backward, one may determine the universe of respondents asked a given question. This universe information is a new feature not present in the documentation for paper and pencil interviews.

Default Next Question

This field specifies the question to be asked next unless another skip specification in the distribution code block applies. If “Default Next Question” is omitted from the question record, the next question in the questionnaire is the default.

Save Symbols

The term “Save Symbol” indicates a piece of information that is stored for later use by the CAPI instrument. The information is stored in a save array and referenced by its save array name, or *symbol*, in CAPI questions and machine instructions. The information stored in save arrays is used:

- a) as part of the text of a survey question (e.g., the child’s first name is automatically inserted into question text wherever the symbol “*Child First Name*” is referenced).
- b) to govern paths through the questionnaire by comparing the stored information with some other information or condition. Branching is based on whether the comparison condition—or which of several conditions—is evaluated as true or false.
- c) as part of a computation that creates new information, stored for later use in the instrument.

Hard and Soft Limits

Hard or soft limits may be applied for any numeric entry question, typically those items asking “How much...”, or “How many...”. “HardMax” and “HardMin” values indicate the absolute upper and lower limits to numeric entries that are accepted for these questions. The CAPI instrument will not accept an answer input that is outside of these limits, and prompts the interviewer to enter a valid numeric response. “SoftMax” and “SoftMin” fields indicate thresholds beyond which entries are deemed *unusual* for that question. When a numeric entry is outside a soft limit, a prompt appears on-screen indicating that

the value entered is rather unusual for that question. Interviewers then have the choice to enter a different value, or retain the current value as correct. Hard and soft limits may also be declared dynamically, referencing values in a save array. In such cases, the referenced symbol appears in lieu of a number.

Instrument Compression

In order to provide a more compact questionnaire, two types of records have been dropped. The following do not appear within this questionnaire: (1) “looped” questions or repetitive series, and (2) question records that perform internal operations not necessary for understanding the conversational flow of the survey.

First, repetitions of questions that are asked multiple times are not included. Users can readily identify such repeated “loop” questions because the question names end with “.01”; the replications not printed in the questionnaire (which do appear in the codebook) have names that end “.02” to indicate the second replication, etc. Questions that have been dropped because they are replications will, occasionally, appear in lists of lead-in questions or branching instructions. However, if a referenced question has been dropped, the user can easily determine its function by looking at the corresponding question in the first loop, that is, the question whose name is identical except that it has the suffix “.01.” Unless noted in the questionnaire, the number of iterations of a looped question or series was not limited.

Second, the instrument was compressed by eliminating question records that contained only nonessential information. The resulting questionnaire still contains all relevant information about skip patterns and universes and is easier for researchers to use.

Graphic Display of Child Assessments

With the exception of information added to help understand the flow of the instrument, the question records in this document present what interviewers saw on the computer screen during most of the Child Supplement CAPI interview. Capturing the flow of the child assessments included in the interview, however, presents somewhat more of a challenge. These assessments often rely on visual media (such as flip charts) as part of the assessment, particularly the PIAT and PPVT. The Child Supplement CAPI instrument presents such graphics to the interviewer. A question-by-question graphical presentation, accompanied by appropriate skip instructions, would be more true to the interviewers' experience, but voluminous. Thus, much of the more compact, original PAPI format of the child assessment sections has been retained in this document. A sample of typical screens from each assessment is included in Appendix B. Text conventions used throughout the rest of the questionnaire are used in the assessment section wherever possible. Please note: children are still shown the official item plates for the PIAT and PPVT assessments and do not view the laptop screens seen by the interviewer.

Changes in the Child CAPI Supplement

Two major changes were made in the Child CAPI Supplement for 2000. First, mother-report assessment items for children under the age of 4 were moved from the Mother Supplement to the Child CAPI instrument. Thus, The HOME, How My Child Usually Acts (Temperament), and Motor and Social Development assessments were given to mothers of children under 4 during administration of the Child CAPI Supplement. Please note, however, that for children 4 years of age and older, The HOME (for ages 4-14 years) and How My Child Usually Acts (for ages 4-6 years) assessments were still completed by mothers as a self-report in the paper Mother Supplement. Behavior Problems Index items also remained in the Mother Supplement for 2000.

The second change for the Child CAPI Supplement was the addition of the “School and Family Background” items, previously Section 5 of the Mother Supplement. These items were incorporated into the Child Background section of the Child CAPI Supplement.

These two changes eliminated administration of a paper Mother Supplement for all children under the age of 4 years for the 2000 survey round.

Other Documentation

Two additional instruments are used in the NLSY79 Child survey: (1) the *Mother Supplement*, containing maternal reports on the home environment, behavior problems, and child temperament, and (2) the *Child Self-Administered Supplement* (CSAS) for children 10 and over. These paper supplements are available, at a nominal charge, from CHRR. Users interested in interviews with the children age 15 or over (the NLSY79 Young Adults) should consult the *2000 Young Adult CAPI Questionnaire*.

Information about the NLSY79 Child and Young Adult data or additional documentation is available from:

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NLS User Services welcomes comments about the content and suggestions for improving the format of this document.

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PRELIMINARIES

CS-TIME

TIME();

/* Collect beginning time of supplement */

Default Next Questions: CS-DOB-INF

Save Symbol: *STRTIME*

CS-DOB-INF

(CHILD DOB);

/* Record child date of birth from child face sheet */

Lead In(s): CS-TIME [Default]

Default Next Question: CS-CKDOB1

CS-CKDOB1

ISCOMPLETE (CHILD DOB);

/* Check birthdate to see if it has don't know or refusal */

If Answer =1 Then Go To: CS-CALC-AGE1

Lead In(s): CS-DOB-INF [Default]

Default Next Question: CS-ENTR-DOB

CS-CALC-AGE1

DIFFAGE (INTERVIEW DATE, CHILD DOB, CHILD AGE (YEARS), MONTHS, DAYS);

/* Calculate age of child */

Lead In(s): CS-CKDOB1 [1:1]

Default Next Question: CS-CKMOS1A

CS-CKMOS1A

(MONTHS= -1);

If Answer =0 Then Go To: CS-CALC-MOS1

Lead In(s): CS-CALC-AGE1 [Default]

Default Next Question: CS-CKMOS1B

CS-CKMOS1B

SYMBOL(MONTHS=11=INT);

*/*Set months of child's age to 11 because can't be calculated */*

Lead In(s): CS-CKMOS1A [Default]

Default Next Question: CS-CALC-MOS1

CS-CALC-MOS1

*((CHILD AGE (YEARS) * 12) + MONTHS);*

/ Calculate age of child in months */*

Lead In(s): CS-CKMOS1B [Default], CS-CKMOS1A [0:0]

Default Next: CS-INTRO-AGECK Save Symbol: *CHILD AGE IN MONTHS*

CS-INTRO-AGECK

(CHILD AGE (YEARS) < 3) OR ((CHILD AGE (YEARS) = 3) AND (MONTHS < 11)) OR ((CHILD AGE (YEARS) = 3) AND (MONTHS = 11) AND (DAYS < 16));

/ Calculate age of child in months */*

If Answer =1 Then Go To: CS-INTRO-1A

Lead In(s): CS-CALC-MOS1 [Default]

Default Next Question: CS-INTRO-2A

CS-INTRO-1A

In the past years, NLS has gathered information about the work, education, and family life of your generation. Since you have children of your own, and because they are your children, they are important people to us. The purpose of this study is to better understand how children learn and develop.

The National Institute of Child Health and Human Development sponsors this study of the children of the NLS respondents. For each child who participates, you will receive \$5 in appreciation for the time spent answering the questionnaire.

Lead In(s): CS-INTRO-AGECK [1:1]

Default Next Question: CS-INTRO-1B

CS-INTRO-1B

All information will be protected under the Privacy Act of 1974. Results of the study will be made public only in summary or statistical form so that individuals who participate cannot be identified. Your participation is vital to the success of the study, but it is voluntary.

We would like to ask you some questions about *Child Full Name*.

Lead In(s): CS-INTRO-1A [Default]

Default Next Question: CS-AGE-VRFY1

CS-INTRO-2A

In the past years, NLS has gathered information about the work, education, and family life of your generation. Since you have children of your own, and because they are your children, they are important people to us. The purpose of this study is to better understand how children learn and develop.

The National Institute of Child Health and Human Development sponsors this study of the children of the NLS respondents. For each child who participates, you will receive \$5 in appreciation for the time spent answering the questionnaire. Some parts of the questionnaire are asked of the mother and other parts are completed with the child.

Lead In(s): CS-INTRO-AGECK [Default]
Default Next Question: CS-INTRO-2B

CS-INTRO-2B

All information will be protected under the Privacy Act of 1974. Results of the study will be made public only in summary or statistical form so that individuals who participate cannot be identified. Both your participation and that of your child are vital to the success of the study, but are voluntary.

We would first like to ask you some questions about *Child Full Name* and then interview *him/her*.

(READ IF PERSONAL INTERVIEW: In order to assure that *Child First Name's* answers are *his/her* best, we need to conduct the interview in a quiet atmosphere with as little noise and as few distractions as possible.)

Lead In(s): CS-INTRO-2A [Default]
Default Next Question: CS-AGE-VRFY1

CS-AGE-VRFY1

(VERIFY CHILD'S AGE WITH MOTHER:) *Child First Name* is *Child Age (Years)* years and *Child Age in Months* months.

Is that correct?

- 1 Yes ... (Go To CS-AGECK1)
- 0 No

Lead In(s): CS-INTRO-1B [Default], CS-INTRO-2B [Default]
Default Next Question: CS-ENTR-DOB

CS-ENTR-DOB

INTERVIEWER: ENTER CORRECT BIRTH DATE FOR *CHILD FIRST NAME*.

Lead In(s): CS-CKDOB1 [Default], CS-AGE-VRFY1 [Default]
Default Next Question: CS-CKDOB2 Save Symbol: *CHILD DOB*
HardMax: *Interview Date*
HardMin: 01/01/1960

CS-CKDOB2

ISCOMPLETE (CHILD DOB);

/ Check birthdate to see if it has don't know or refusal */*

If Answer =1 Then Go To: CS-CALC-AGE2

Lead In(s): CS-ENTR-DOB [Default]

Default Next Question: CS-FILLYRS

CS-CALC-AGE2

DIFFAGE (INTERVIEW DATE, CHILD DOB, CHILD AGE (YEARS), MONTHS, DAYS);

/ Calculate age of child */*

Lead In(s): CS-CKDOB2 [1:1]

Default Next Question: CS-CKMOS2A

CS-CKMOS2A

(MONTHS=-1);

If Answer =0 Then Go To: CS-CALC-MOS2

Lead In(s): CS-CALC-AGE2 [Default]

Default Next Question: CS-CKMOS2B

CS-CKMOS2B

SYMBOL (MONTHS=11=INT);

*/*If months cannot be calculated because age is over 11 months and 15 days, set to 11 */*

Lead In(s): CS-CKMOS2A [Default]

Default Next Question: CS-CALC-MOS2

CS-CALC-MOS2

*((CHILD AGE (YEARS) * 12) + MONTHS);*

/ Calculate age of child in months */*

Lead In(s): CS-CKMOS2B [Default], CS-CKMOS2A [0:0]

Default Next Question: CS-AGE-VRFY2 Save Symbol: *CHILD AGE IN MONTHS*

CS-AGE-VRFY2

(VERIFY CHILD'S AGE WITH MOTHER:) *Child First Name* is *Child Age (Years)* years and *Child Age in Months* months.

Is that correct?

(INTERVIEWER: IF CHILD'S AGE IS STILL INCORRECT, PRESS THE <PAGE-UP> KEY TO RETURN TO THE PREVIOUS QUESTION AND ENTER THE CORRECT BIRTH DATE.)

Lead In(s): CS-CALC-MOS2 [Default]

Default Next Question: CS-AGECK1

CS-FILLYRS

How old was *Child First Name* on *his/her* last birthday?

(INTERVIEWER: ENTER YEARS. CODE 00=LESS THAN ONE YEAR. MONTHS APPEAR ON NEXT SCREEN.)

Enter Answer: |__| |__|

If Answer >=-2 and Answer <=-1 Then Go To: CS-FILLEXIT

Lead In(s): CS-CKDOB2 [Default]

Default Next Question: CS-FILLMOS

Save Symbol: *CHILDAGE*

HardMax: 20

SoftMax: 15

HardMin: 0

SoftMin: 0

CS-FILLMOS

INTERVIEWER: ENTER AGE - MONTHS.

Enter Answer: |__| |__|

If Answer >=-2 and Answer <=-1 Then Go To: CS-FILLSET

Lead In(s): CS-FILLYRS [Default]

Default Next Question: CS-FILLCALC

Save Symbol: *MONTHS*

HardMax: 12

SoftMax: 12

HardMin: 0

SoftMin: 0

CS-FILLSET

SYMBOL (months=0=INT);

/* Don't know or refusal has been entered for months. Insert a zero for months so that age in months gets calculated correctly and continue.*/

Lead In(s): CS-FILLMOS [-2:-1]

Default Next Question: CS-FILLCALC

CS-FILLCALC

((*CHILD AGE (YEARS)* * 12) + *MONTHS*);

/* Calculate age of child in months */

Lead In(s): CS-FILLMOS [Default], CS-FILLSET [Default]

Default Next Question: CS-AGECK1 Save Symbol: *CHILD AGE IN MONTHS*

CS-FILLEXIT

INTERVIEWER: NO ACCURATE AGE OR BIRTH DATE COULD BE DETERMINED FOR *CHILD FIRST NAME*. THIS CASE WILL BE TERMINATED. USE THE <PAGE-UP> KEY TO RETURN TO THE BIRTH DATE OR AGE QUESTION IF A BIRTH DATE OR AGE HAS BEEN INCORRECTLY ENTERED.

Lead In(s): CS-FILLYRS [-2:-1]

Default Next Question: CSIR-1

CS-AGECK1

(*CHILD AGE (YEARS)* < 3) OR ((*CHILD AGE (YEARS)* = 3) AND (*MONTHS* < 11)) OR ((*CHILD AGE (YEARS)* = 3) AND (*MONTHS* = 11) AND (*DAYS* < 16));

/* Is child under PPVT AGE 4? */

Lead In(s): CS-AGE-VRFY2 [Default], CS-FILLCALC [Default], CS-AGE-VRFY1 [1:1]

Default Next Question: CS-INT-MODE Save Symbol: *LT PPVT AGE 4*

CS-INT-MODE

INTERVIEWER: SELECT INTERVIEW MODE.

- 1 IN PERSON
- 2 TELEPHONE

Lead In(s): CS-INT-MODE

Default Next Question: CS-AGECK2 Save Symbol: *INTERVIEW MODE*

CS-AGECK2

(*CHILD AGE (YEARS)*);

/* Check child age */

If Answer >=0 and Answer <=2 Then Go To: HLTH-TITLE

If Answer >=3 and Answer <=13 Then Go To: BKGN-1

If Answer >=14 and Answer <=99 Then Go To: CS-AGECK3

Lead In(s): CS-INT-MODE [Default]

Default Next Question: HLTH-TITLE

CS-AGECK3

(*BIRTH YEAR* <= 79) OR (*CHILD AGE IN MONTHS* >= 180);

/* Additional age check */

If Answer =1 Then Go To: CS-OVERAGE-1

Lead In(s): CS-AGECK2 [14:99]

Default Next Question: BKG N-1

CS-OVERAGE-1

INTERVIEWER: THIS CHILD, *CHILD FIRST NAME*, IS 15 YEARS OR OLDER AS OF 12/31/2000 AND SHOULD NOT BE ASSESSED. PLEASE VERIFY DOB AND AGE OF THIS CHILD WITH MOTHER. IF CHILD IS STILL FOUND TO BE 15 OR OLDER BY 12/31/2000, PREPARE TO TERMINATE CASE. NOTIFY YOUR FM FOR REASSIGNMENT OF THIS CASE.

Lead In(s): CS-AGECK3 [1:1]

Default Next Question: CS-OVERAGE-2

CS-OVERAGE-2

(1);

/* Set a value for those children who are over 15 and the case is being terminated */

Lead In(s): CS-OVERAGE-1 [Default]

Default Next Question: CS-OVERAGE-3

CS-OVERAGE-3

INTERVIEWER: PLEASE RECORD ANY ADDITIONAL COMMENTS REGARDING THIS CASE. RECORD INTERVIEWER ID IN NEXT SCREEN AND TERMINATE CASE.

Lead In(s): CS-OVERAGE-2 [Default]

Default Next Question: CSIR-IDNUM

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CHILD BACKGROUND

School Attendance

BKGN-1

Is *Child First Name* currently attending or enrolled in regular school or preschool?

(If *Child First Name* is between the spring and fall school sessions, please tell us about the LAST school year.)

- 1 Yes ...(Go To BKGN-3)
- 0 No

Lead In(s): CS-AGECK3 [Default], CS-AGECK2 [3:13]

Default Next Question: BKGN-2

BKGN-2

Has *he/she* ever attended regular school, nursery school, or preschool?

- 1 Yes
- 0 No ...(Go To BKGN-5)
- 2 IF VOLUNTEERED: Home Schooling ...(Go To BKGN-4)

Lead In(s): BKGN-1 [Default]

Default Next Question: BKGN-3 Save Symbol: *EVER IN SCHOOL*

BKGN-3

What grade is *<child first name>* currently attending/did *<child first name>* last attend?

(IF R SAYS 'PRE-FIRST GRADE', CODE KINDERGARTEN.)

- | | |
|----------------------|-------------------------------|
| 90 Nursery/preschool | 9 9th grade |
| 0 Kindergarten | 10 10th grade |
| 1 1st grade | 11 11th grade |
| 2 2nd grade | 12 12th grade |
| 3 3rd grade | 13 1st year in college |
| 4 4th grade | 14 2nd year in college |
| 5 5th grade | 15 3rd year in college |
| 6 6th grade | 16 4th year in college |
| 7 7th grade | 95 Ungraded ...(Go To BKGN-4) |
| 8 8th grade | |

If Answer = -2 Then Go To: BKGN-4

Lead In(s): BKGN-2

Default Next Question: BKGN-5

Save Symbol: *CHILD GRADE*

BKGN-4

If *Child First Name* were in a graded class, what grade would *he/she* be enrolled in?

(IF R SAYS 'PRE-FIRST GRADE', CODE KINDERGARTEN.)

90 Nursery/preschool	7 7th grade
0 Kindergarten	8 8th grade
1 1st grade	9 9th grade
2 2nd grade	10 10th grade
3 3rd grade	11 11th grade
4 4th grade	12 12th grade
5 5th grade	95 Other (specify)
6 6th grade	

Lead In(s): BKGN-2 [2:2], BKGN-3 [-2:-2], BKGN-3 [95:95]

Default Next Question: BKGN-5

Save Symbol: *CHILD GRADE*

BKGN-5

(*CHILD AGE (YEARS)* < 8);

If Answer =1 Then Go To: BKGN-6

Lead In(s): BKGN-3 [Default], BKGN-4 [Default], BKGN-2 [0:0]

Default Next Question: BKGN-17

BKGN-6

(*CHILD GRADE*);

/* Is *Child First Name* currently attending nursery/preschool? Is *Child Grade* coded 90?*/

If Answer =90 Then Go To: BKGN-8

Lead In(s): BKGN-5 [1:1]

Default Next Question: BKGN-7

BKGN-7

Has *Child First Name* ever been enrolled in a preschool program (not including kindergarten)?

1 Yes
0 No

Lead In(s): BKGN-6 [Default]

Default Next Question: BKGN-8

BKGN-8

Has *Child First Name* ever been enrolled in day care?

- 1 Yes
- 0 No

Lead In(s): BKGN-7 [Default], BKGN-6 [90:90]

Default Next Question: BKGN-9

Head Start

BKGN-9

*SYMBOL*EXIST(*HEADSTRT*);

/* Check to make sure that HEADSTRT flag was included on info sheet */

If Answer =1 Then Go To: BKGN-11

Lead In(s): BKGN-8 [Default]

Default Next Question: BKGN-10

BKGN-10

SYMBOL(*HEADSTRT*=0=*INT*);

/* Set HEADSTRT to 0 if not included on info sheet */

Lead In(s): BKGN-9 [Default]

Default Next Question: BKGN-11

BKGN-11

(*HEADSTRT*=1);

/* Does complete information on Head Start participation already exist for *Child First Name* ? */

If Answer =1 Then Go To: BKGN-17

Lead In(s): BKGN-10 [Default], BKGN-9 [1:1]

Default Next Question: BKGN-12

BKGN-12

Has *Child First Name* ever been enrolled in the Head Start Program?

- 1 Yes
- 0 No ...(Go To BKGN-17)

Lead In(s): BKGN-11 [Default]

Default Next Question: BKGN-13

BKGN-13

How old was *Child First Name* when *he/she* first attended Head Start?

(INTERVIEWER: ENTER AGE IN YEARS. CODE 00 = LESS THAN 1 YEAR OLD.)

Enter Answer: |__| |__|

Lead In(s): BKGN-12 [Default]

Default Next Question: BKGN-14

HardMax: 20

HardMin: 0

BKGN-14

In total, how long *has Child First Name attended/did Child First Name attend* Head Start?

- 1 Less than 3 months
- 2 3 - 11 months
- 3 1 year - 23 months
- 4 2 years or more
- 5 Still enrolled

Lead In(s): BKGN-13 [Default]

Default Next Question: BKGN-15

BKGN-15

How satisfied are you with what Head Start has done for *Child First Name*?

- 1 Very satisfied
- 2 Somewhat satisfied
- 3 Somewhat dissatisfied
- 4 Very dissatisfied

Lead In(s): BKGN-14 [Default]

Default Next Question: BKGN-16

BKGN-16

How satisfied are you with what *Child First Name's* Head Start program has done for you?

- 1 Very satisfied
- 2 Somewhat satisfied
- 3 Somewhat dissatisfied
- 4 Very dissatisfied

Lead In(s): BKGN-15 [Default]

Default Next Question: BKGN-17

BKGN-17

(*CHILD AGE (YEARS)* < 5);

/* If child age is less than 5 YRS , jump to Child Health */

If Answer =1 Then Go To: HLTH-TITLE

Lead In(s): BKGN-5 [Default], BKGN-16 [Default], BKGN-11 [1:1], BKGN-12 [0:0]

Default Next Question: BKGN-18

School Background

BKGN-18

(*IN SCHOOL*=0);

If Answer =1 Then Go To: BKGN-19

Lead In(s): BKGN-17 [Default]

Default Next Question: BKGN-20

BKGN-19

If *Child First Name* does not attend school at all, what is the reason?

- 1 Unable to attend due to physical, emotional, or mental condition(Go To BKGN-23)
- 2 Expelled or suspended..... (Go To BKGN-23)
- 3 School closed because of strike, physical damage, etc. (Go To BKGN-23)
- 4 Child's father, stepfather, father-figure won't let child attend(Go To BKGN-23)
- 7 Home schooled(Go To BKGN-23)
- 5 Other reasons (please specify)(Go To BKGN-23)

Lead In(s): BKGN-18 [1:1]

Default Next Question: BKGN-20

Save Symbol: *RESN-NOSCHL*

BKGN-20

Which of the following describes the school *Child First Name* attends:

- 1 Public school
- 2 Charter school(Go To BKGN-21)
- 3 Catholic school(Go To BKGN-21)
- 4 Other religious or church-sponsored school(Go To BKGN-21)
- 5 Non-religious private school
- 6 Indian reservation school(Go To BKGN-21)
- 7 Military academy(Go To BKGN-21)
- 8 Home-schooled
- 9 Other (please specify)(Go To BKGN-21)

Lead In(s): BKGN-18 [Default], BKGN-19 [Default]

Default Next Question: BKGN-22

BKGn-21

Is the school *he/she* attends public or private?

- 1 Public
- 2 Private
- 3 Other (please write what)
- 4 Does not attend school at all

Lead In(s): BKGn-20 [2:2], BKGn-20 [3:3], BKGn-20 [4:4], BKGn-20 [6:6], BKGn-20 [7:7], BKGn-20 [9:9]

Default Next Question: BKGn-22

BKGn-22

Is *Child First Name* attending the same school that *he/she* was attending the last time we interviewed you on *Mom Date of Last Interview*?

- 1 Yes
- 0 No

Lead In(s): BKGn-20 [Default], BKGn-21 [Default]

Default Next Question: BKGn-23

BKGn-23

(EVER IN SCHOOL=0) AND (IN SCHOOL=0);

If Answer =1 Then Go To: BKGn-32

Lead In(s): BKGn-22 [Default], BKGn-19 [1:7]

Default Next Question: BKGn-24

BKGn-24

How many different schools has your child ever attended? Please include the school *he/she* is currently attending.

Enter Answer:

Lead In(s): BKGn-23 [Default]

Default Next Question: BKGn-25

HardMax: 99

SoftMax: 15

HardMin: 0

SoftMin: 0

BKGn-25

How many of these were elementary schools?

Enter Answer:

Lead In(s): BKGn-24 [Default]

Default Next Question: BKGn-26

HardMax: 99

SoftMax: 10

HardMin: 0

SoftMin: 0

Teacher Behavior & Classroom

BKGN-26

In a typical school week, how much time does *Child First Name* usually spend after school working on math problems or math homework?

ENTER HOURS PER WEEK.

Enter Answer: |

Lead In(s): BKGN-25 [Default]

Default Next Question: BKGN-27

HardMax: 99.9

SoftMax: 40.0

HardMin: 0.0

SoftMin: 0.0

BKGN-27

In a typical school week, how much time does *Child First Name* usually spend after school writing up reports, papers, book-reports, or stories?

ENTER HOURS PER WEEK.

Enter Answer: |

Lead In(s): BKGN-26 [Default]

Default Next Question: BKGN-28

HardMax: 99.9

SoftMax: 40.0

HardMin: 0.0

SoftMin: 0.0

BKGN-28

(*EVER IN SCHOOL=0*) AND (*IN SCHOOL=0*);

If Answer =1 Then Go To: BKGN-32

Lead In(s): BKGN-27 [Default]

Default Next Question: BKGN-29A

BKGN-29A

Has *Child First Name* participated in a remedial math program in the past year?

1 Yes

0 No

Lead In(s): BKGN-28 [Default]

Default Next Question: BKGN-29B

BKGn-29B

Has *he/she* participated in a remedial reading, remedial English, or remedial language arts program in the past year?

- 1 Yes
0 No

Lead In(s): BKGn-29A [Default]
Default Next Question: BKGn-29C

BKGn-29C

Has *he/she* participated in a gifted and talented program, or had a special class for advanced work in the past year?

- 1 Yes
0 No

Lead In(s): BKGn-29B [Default]
Default Next Question: BKGn-29D

BKGn-29D

Has *he/she* participated in special education or a program for handicapped children in the past year?

- 1 Yes
0 No

Lead In(s): BKGn-29C [Default]
Default Next Question: BKGn-29E

BKGn-29E

Has *he/she* participated in a program that teaches English as a second language (ESL) in the past year?

- 1 Yes
0 No

Lead In(s): BKGn-29D [Default]
Default Next Question: BKGn-30

BKGn-30

(IN SCHOOL=1);

If Answer =0 Then Go To: BKGn-32
Lead In(s): BKGn-29E [Default]
Default Next Question: BKGn-31A

Parental Involvement

BKGN-31A

Do you or your (spouse/partner) participate in a parent-teacher organization at *Child First Name's* school?

- 1 Yes
- 0 No

Lead In(s): BKGN-30 [Default]

Default Next Question: BKGN-31B

BKGN-31B

Do you or your (spouse/partner) volunteer in the classroom at *his/her* school?

- 1 Yes
- 0 No

Lead In(s): BKGN-31A [Default]

Default Next Question: BKGN-31C

BKGN-31C

Do you or your (spouse/partner) do volunteer work such as supervising lunch, or chaperoning a field trip at *Child First Name's* school?

- 1 Yes
- 0 No

Lead In(s): BKGN-31B [Default]

Default Next Question: BKGN-31D

BKGN-31D

Do you or your (spouse/partner) attend parent-teacher conferences at *his/her* school?

- 1 Yes
- 0 No

Lead In(s): BKGN-31C [Default]

Default Next Question: BKGN-32

BKGN-32

How many of *Child First Name's* close friends do you know by sight and by first and last name?

Do you know . . .

- 1 All of them
- 2 Most of them
- 3 About half
- 4 Only a few
- 5 None of them
- 6 CHILD HAS NO CLOSE FRIENDS

Lead In(s): BKGN-31D [Default], BKGN-23 [1:1], BKGN-28 [1:1], BKGN-30 [0:0]

Default Next Question: BKGN-33

BKGN-33

About how often do you know who *Child First Name* is with when *he/she* is not at home?

Would you say you know who *he/she* is with . . .

- 1 All of the time
- 2 Most of the time
- 3 Some of the time, or
- 4 Rarely?

Lead In(s): BKGN-32 [Default]

Default Next Question: BKGN-34

Religion

BKGN-34

In the past year, how often has *Child First Name* attended religious services (including Sunday School, or other religious classes)?

- 1 About once a week
- 2 At least once a month
- 3 A few times a year
- 4 Never

Lead In(s): BKGN-33 [Default]

Default Next Question: BKGN-35

BKGN-35

Aside from attending religious services, how important is it to you to provide religious training for *him/her*?

- 1 Very important
- 2 Fairly important
- 3 Not at all important

Lead In(s): BKGN-34 [Default]

Default Next Question: BKGN-CONF-INTRO-A

Confidential Report: Home & School

BKGN-CONF-INTRO-A

INTERVIEWER: IF THERE ARE ANY CHILDREN OVER 4 YEARS OLD PRESENT, MOTHER WILL ENTER RESPONSES FOR THE FOLLOWING SECTION DIRECTLY.

Lead In(s): BKGN-35 [Default]

Default Next Question: BKGN-CONF-INTRO-B

BKGN-CONF-INTRO-B

INTERVIEWER: IF THERE ARE NO CHILDREN OVER 4 YEARS OLD PRESENT, OR THIS IS A TELEPHONE INTERVIEW, YOU MAY PROCEED WITH THE INTERVIEW AS USUAL.

Lead In(s): BKGN-CONF-INTRO-A [Default]

Default Next Question: BKGN-CONF-TIME

BKGN-CONF-TIME

TIME();

/*STARTING TIME FOR BKGN CONFIDENTIAL SECTION*/

Lead In(s): BKGN-CONF-INTRO-B [Default]

Default Next Question: BKGN-CONF-CHK

Save Symbol: *START TIME CONFIDENTIAL SERIES*

BKGN-CONF-CHK

INTERVIEWER:

IS MOTHER COMPLETING THE FOLLOWING SECTION? (ARE THERE ANY CHILDREN OVER 4 YEARS OLD PRESENT?)

- 1 YES ... (Go To BKGN-CONF-INTRO-C)
- 0 NO
- 2 NO - TELEPHONE INTEVIEW

Lead In(s): BKGN-CONF-TIME [Default]

Default Next Question: BKGN-36

Save Symbol: *MOMCASI*

BKGN-CONF-INTRO-C

INTERVIEWER: TURN THE COMPUTER AROUND AND INSTRUCT R HOW TO PROCEED BY FOLLOWING THE INSTRUCTIONS AT THE TOP OF EACH SCREEN. R HAS FINISHED THIS SHORT CONFIDENTIAL SECTION WHEN SHE IS ON THE SCREEN THANKING HER FOR FILLING OUT THE SECTION.

PLEASE ASSIST R IF ASKED TO DO SO.

Lead In(s): BKGN-CONF-CHK [1:1]

Default Next Question: BKGN-INSTRUCT1

BKGN-INSTRUCT1

Please read the instructions in the following screens before you begin to answer the questions. Once you have entered your answer, the machine will automatically go to the next question.

Press the <ENTER> key to proceed.

Lead In(s): BKGN-CONF-INTRO-C [Default]

Default Next Question: BKGN-INSTRUCT2

BKGN-INSTRUCT2

To answer a question, the first thing you will need to do is to "TURN ON" the screen. To do this simply press the "DOWN ARROW" key, located in the lower right hand corner of the keypad. This will allow you to select or enter an answer to the question.

Lead In(s): BKGN-INSTRUCT1 [Default]

Default Next Question: BKGN-INSTRUCT3

BKGN-INSTRUCT3

Once you have selected your answer, press <ENTER> TWICE to continue to the next question.

If you do not know an answer or do not wish to answer a question, press <F6> for DON'T KNOW, or <F5> for DO NOT WISH TO ANSWER. These keys are at the top of the keyboard.

Lead In(s): BKGN-INSTRUCT2 [Default]

Default Next Question: BKGN-INSTRUCT4

BKGN-INSTRUCT4

There is only one type of question in this short section...

Lead In(s): BKGN-INSTRUCT3 [Default]

Default Next Question: BKGN-INSTRUCT6

BKGn-INSTRUCT6

EXAMPLE: What did you do most often for entertainment last year?

If the answer is "WENT TO A PLAY" you would TURN ON the screen using the "DOWN ARROW" key and highlight "WENT TO A PLAY" also using the "DOWN ARROW" key. Then press <ENTER> to select that answer and hit <ENTER> again to continue.

- 1 Went golfing
- 2 Went skiing
- 3 Read books
- 4 Went to a play
- 5 Played cards
- 6 Went to a movie

Lead In(s): BKGn-INSTRUCT4 [Default]

Default Next Question: BKGn-INSTRUCT7

BKGn-INSTRUCT7

You are now ready to begin this short section of the questionnaire.

You are free to complete this short section of the questionnaire without your interviewer, but please don't hesitate to ask your interviewer questions at any time.

Lead In(s): BKGn-INSTRUCT6 [Default]

Default Next Question: BKGn-36

BKGn-36

(*CHILD GRADE*≤2) OR (*CHILD GRADE*=90);

/* If child is LE 2nd grade in school, ask if child ever repeated grade */

/* Else, ask if child has repeated grade since DLI */

Lead In(s): BKGn-CONF-CHK [Default], BKGn-INSTRUCT7 [Default]

Default Next Question: BKGn-37

Save Symbol: *GRADE-LE2*

BKGn-37

Has/Since we last interviewed you on (date of mom's last interview) has Child First Name repeated a grade for any reason?

(PRESS "DOWN ARROW" TO TURN ON SCREEN AND TO HIGHLIGHT AN ANSWER. THEN PRESS <ENTER> TWICE TO CONTINUE.)

(PRESS <F6> FOR DON'T KNOW AND <F5> FOR DO NOT WISH TO ANSWER.)

- 1 Yes
- 0 No ... (Go To BKGn-38)

Lead In(s): BKGn-36

Default Next Question: BKGn-37-LOOP-BEGIN

BKGN-37-LOOP-BEGIN.01

REPEAT(BKGN-LOOP1);

Lead In(s): BKGN-37 [Default]

Default Next Question: BKGN-37A

BKGN-37A.01

What was the *most recent/next most recent* grade that *Child First Name* repeated?

(PRESS "DOWN ARROW" TO TURN ON SCREEN AND TO HIGHLIGHT AN ANSWER. THEN PRESS <ENTER> TWICE TO CONTINUE.)

(PRESS <F6> FOR DON'T KNOW AND <F5> FOR DO NOT WISH TO ANSWER.)

- | | |
|---|---------------|
| 0 PRE-KINDERGARTEN/KINDERGARTEN/
PRE-1ST GRADE | 6 6TH GRADE |
| 1 1ST GRADE | 7 7TH GRADE |
| 2 2ND GRADE | 8 8TH GRADE |
| 3 3RD GRADE | 9 9TH GRADE |
| 4 4TH GRADE | 10 10TH GRADE |
| 5 5TH GRADE | 11 11TH GRADE |
| | 12 12TH GRADE |

Lead In(s): BKGN-37-LOOP-BEGIN

Default Next Question: BKGN-37B

BKGN-37B.01

What was the main reason *he/she* repeated that grade?

(PRESS "DOWN ARROW" TO TURN ON SCREEN AND TO HIGHLIGHT AN ANSWER. THEN PRESS <ENTER> TWICE TO CONTINUE.)

(PRESS <F6> FOR DON'T KNOW AND <F5> FOR DO NOT WISH TO ANSWER.)

- 1 Academic failure or lack of ability
- 2 Immature; acts too young
- 3 Frequently absent (excused absence)
- 4 Truancy (unexcused absence)
- 5 Health reasons
- 6 Moved into a more difficult school
- 7 Other reason

Lead In(s): BKGN-37A [Default]

Default Next Question: BKGN-37C

BKGN-37C.01

Has *Child First Name* repeated any other grades?

(PRESS "DOWN ARROW" TO TURN ON SCREEN AND TO HIGHLIGHT AN ANSWER. THEN PRESS <ENTER> TWICE TO CONTINUE.)

(PRESS <F6> FOR DON'T KNOW AND <F5> FOR DO NOT WISH TO ANSWER.)

1 Yes

0 No

Lead In(s): BKGN-37B [Default]

Default Next Question: BKGN-37D

Save Symbol: *REPTMORE*

BKGN-37D.01

(*REPTMORE=1*);

/* Any more grades repeated? */

Lead In(s): BKGN-37C [Default]

Default Next Question: BKGN-37-LOOP-END

Save Symbol: *ANYMOREREPT*

BKGN-37-LOOP-END.01

UNTIL(BKGN-LOOP1, ANYMOREREPT=0);

Lead In(s): BKGN-37D [Default]

Default Next Question: BKGN-38

BKGN-38

Has *Child First Name* ever had any behavior problems at school resulting in your receiving a note or being asked to come in and talk to the teacher or principal?

(PRESS "DOWN ARROW" TO TURN ON SCREEN AND TO HIGHLIGHT AN ANSWER. THEN PRESS <ENTER> TWICE TO CONTINUE.)

(PRESS <F6> FOR DON'T KNOW AND <F5> FOR DO NOT WISH TO ANSWER.)

1 Yes ...(Go To BKGN-39)

0 No

Lead In(s): BKGN-37-LOOP-END [Default], BKGN-37 [0:0]

Default Next Question: BKGN-40

BKGn-39

What grade was *Child First Name* in the first time you received a note, or were asked to come in and talk to the teacher or principal?

(PRESS "DOWN ARROW" TO TURN ON SCREEN AND TO HIGHLIGHT AN ANSWER. THEN PRESS <ENTER> TWICE TO CONTINUE.)

(PRESS <F6> FOR DON'T KNOW AND <F5> FOR DO NOT WISH TO ANSWER.)

- | | |
|-----------------------------|---------------|
| 90 NURSERY SCHOOL/PRESCHOOL | 6 6TH GRADE |
| 0 KINDERGARTEN | 7 7TH GRADE |
| 1 1ST GRADE | 8 8TH GRADE |
| 2 2ND GRADE | 9 9TH GRADE |
| 3 3RD GRADE | 10 10TH GRADE |
| 4 4TH GRADE | 11 11TH GRADE |
| 5 5TH GRADE | 12 12TH GRADE |

Lead In(s): BKGn-38 [1:1]

Default Next Question: BKGn-40

BKGn-40

Has *Child First Name* ever been suspended or expelled from school?

(PRESS "DOWN ARROW" TO TURN ON SCREEN AND TO HIGHLIGHT AN ANSWER. THEN PRESS <ENTER> TWICE TO CONTINUE.)

(PRESS <F6> FOR DON'T KNOW AND <F5> FOR DO NOT WISH TO ANSWER.)

- 1 Yes ... (Go To BKGn-40A)
- 0 No

Lead In(s): BKGn-38 [Default], BKGn-39 [Default]

Default Next Question: BKGn-41

BKGn-40A

(Has your child ever been suspended or expelled from school?)

In what grade did this first happen?

(PRESS "DOWN ARROW" TO TURN ON SCREEN AND TO HIGHLIGHT AN ANSWER. THEN PRESS <ENTER> TWICE TO CONTINUE.)

(PRESS <F6> FOR DON'T KNOW AND <F5> FOR DO NOT WISH TO ANSWER.)

- | | |
|-----------------------------|---------------|
| 90 NURSERY SCHOOL/PRESCHOOL | 6 6TH GRADE |
| 0 KINDERGARTEN | 7 7TH GRADE |
| 1 1ST GRADE | 8 8TH GRADE |
| 2 2ND GRADE | 9 9TH GRADE |
| 3 3RD GRADE | 10 10TH GRADE |
| 4 4TH GRADE | 11 11TH GRADE |
| 5 5TH GRADE | 12 12TH GRADE |

Lead In(s): BKGn-40 [1:1]

Default Next Question: BKGn-41

BKGN-41

(IN SCHOOL=0);

If Answer =1 Then Go To: BKGN-44

Lead In(s): BKGN-40 [Default], BKGN-40A [Default]

Default Next Question: BKGN-42

BKGN-42

Is your child one of the best students in class, above the middle, in the middle, below the middle, or near the bottom of the class?

(PRESS "DOWN ARROW" TO TURN ON SCREEN AND TO HIGHLIGHT AN ANSWER. THEN PRESS <ENTER> TWICE TO CONTINUE.)

(PRESS <F6> FOR DON'T KNOW AND <F5> FOR DO NOT WISH TO ANSWER.)

- 1 One of the best students in class
- 2 Above the middle
- 3 In the middle
- 4 Below the middle
- 5 Near the bottom of the class

Lead In(s): BKGN-41 [Default]

Default Next Question: BKGN-43A

BKGN-43A

Please think about how well *Child First Name's* school does its job.

What grade would you give the school for how much the teachers care about the students?

(PRESS "DOWN ARROW" TO TURN ON SCREEN AND TO HIGHLIGHT AN ANSWER. THEN PRESS <ENTER> TWICE TO CONTINUE.)

(PRESS <F6> FOR DON'T KNOW AND <F5> FOR DO NOT WISH TO ANSWER.)

- 5 A
- 4 B
- 3 C
- 2 D
- 1 FAIL

Lead In(s): BKGN-42 [Default]

Default Next Question: BKGN-43B

BKGn-43B

What grade would you give the school for how effective the principal is as the leader of the school?

(PRESS "DOWN ARROW" TO TURN ON SCREEN AND TO HIGHLIGHT AN ANSWER. THEN PRESS <ENTER> TWICE TO CONTINUE.)

(PRESS <F6> FOR DON'T KNOW AND <F5> FOR DO NOT WISH TO ANSWER.)

- 5 A
- 4 B
- 3 C
- 2 D
- 1 FAIL

Lead In(s): BKGn-43A [Default]

Default Next Question: BKGn-43C

BKGn-43C

What grade would you give the school for the skill of the teachers?

(PRESS "DOWN ARROW" TO TURN ON SCREEN AND TO HIGHLIGHT AN ANSWER. THEN PRESS <ENTER> TWICE TO CONTINUE.)

(PRESS <F6> FOR DON'T KNOW AND <F5> FOR DO NOT WISH TO ANSWER.)

- 5 A
- 4 B
- 3 C
- 2 D
- 1 FAIL

Lead In(s): BKGn-43B [Default]

Default Next Question: BKGn-43D

BKGn-43D

What grade would you give the school for how safe the school is for the students to attend?

(PRESS "DOWN ARROW" TO TURN ON SCREEN AND TO HIGHLIGHT AN ANSWER. THEN PRESS <ENTER> TWICE TO CONTINUE.)

(PRESS <F6> FOR DON'T KNOW AND <F5> FOR DO NOT WISH TO ANSWER.)

- 5 A
- 4 B
- 3 C
- 2 D
- 1 FAIL

Lead In(s): BKGn-43C [Default]

Default Next Question: BKGn-43E

BKGN-43E

What grade would you give the school for letting parents know how their children are doing?

(PRESS "DOWN ARROW" TO TURN ON SCREEN AND TO HIGHLIGHT AN ANSWER. THEN PRESS <ENTER> TWICE TO CONTINUE.)

(PRESS <F6> FOR DON'T KNOW AND <F5> FOR DO NOT WISH TO ANSWER.)

- 5 A
- 4 B
- 3 C
- 2 D
- 1 FAIL

Lead In(s): BKGN-43D [Default]
Default Next Question: BKGN-43F

BKGN-43F

What grade would you give the school for letting parents participate in decisions about how the school is run?

(PRESS "DOWN ARROW" TO TURN ON SCREEN AND TO HIGHLIGHT AN ANSWER. THEN PRESS <ENTER> TWICE TO CONTINUE.)

(PRESS <F6> FOR DON'T KNOW AND <F5> FOR DO NOT WISH TO ANSWER.)

- 5 A
- 4 B
- 3 C
- 2 D
- 1 FAIL

Lead In(s): BKGN-43E [Default]
Default Next Question: BKGN-43G

BKGN-43G

What grade would you give the school for helping students learn the difference between right and wrong?

(PRESS "DOWN ARROW" TO TURN ON SCREEN AND TO HIGHLIGHT AN ANSWER. THEN PRESS <ENTER> TWICE TO CONTINUE.)

(PRESS <F6> FOR DON'T KNOW AND <F5> FOR DO NOT WISH TO ANSWER.)

- 5 A
- 4 B
- 3 C
- 2 D
- 1 FAIL

Lead In(s): BKGN-43F [Default]
Default Next Question: BKGN-43H

BKGn-43H

What grade would you give for maintaining order and discipline?

(PRESS "DOWN ARROW" TO TURN ON SCREEN AND TO HIGHLIGHT AN ANSWER. THEN PRESS <ENTER> TWICE TO CONTINUE.)

(PRESS <F6> FOR DON'T KNOW AND <F5> FOR DO NOT WISH TO ANSWER.)

- 5 A
- 4 B
- 3 C
- 2 D
- 1 FAIL

Lead In(s): BKGn-43G [Default]

Default Next Question: BKGn-44

BKGn-44

Looking ahead, how far do you think *Child First Name* will go in school? Will *he/she*...

(PRESS "DOWN ARROW" TO TURN ON SCREEN AND TO HIGHLIGHT AN ANSWER. THEN PRESS <ENTER> TWICE TO CONTINUE.)

(PRESS <F6> FOR DON'T KNOW AND <F5> FOR DO NOT WISH TO ANSWER.)

- 1 leave high school before graduation
- 2 graduate from high school
- 3 get some college or other training
- 4 graduate from college
- 5 take further training after college
- 6 or something else? (other specify)

Lead In(s): BKGn-43H [Default], BKGn-41 [1:1]

Default Next Question: BKGn-45

BKGn-45

In general, how much trouble has *Child First Name* been to bring up?

(PRESS "DOWN ARROW" TO TURN ON SCREEN AND TO HIGHLIGHT AN ANSWER. THEN PRESS <ENTER> TWICE TO CONTINUE.)

(PRESS <F6> FOR DON'T KNOW AND <F5> FOR DO NOT WISH TO ANSWER.)

- 1 None
- 2 Just a little
- 3 Quite a bit
- 4 A lot

Lead In(s): BKGn-44 [Default]

Default Next Question: BKGn-46A

BKGn-46A

Think now about how things are going in general in *Child First Name's* life. Please rate each of the following parts of *his/her* life as either excellent, good, only fair, or poor.

First, how would you rate *Child First Name's* health?

(PRESS "DOWN ARROW" TO TURN ON SCREEN AND TO HIGHLIGHT AN ANSWER. THEN PRESS <ENTER> TWICE TO CONTINUE.)

(PRESS <F6> FOR DON'T KNOW AND <F5> FOR DO NOT WISH TO ANSWER.)

- 4 EXCELLENT
- 3 GOOD
- 2 FAIR
- 1 POOR

Lead In(s): BKGn-45 [Default]

Default Next Question: BKGn-46B

BKGn-46B

(Please rate each of the following parts of *Child First Name's* life as either excellent, good, only fair, or poor.)

How would you rate *his/her* friendships?

(PRESS "DOWN ARROW" TO TURN ON SCREEN AND TO HIGHLIGHT AN ANSWER. THEN PRESS <ENTER> TWICE TO CONTINUE.)

(PRESS <F6> FOR DON'T KNOW AND <F5> FOR DO NOT WISH TO ANSWER.)

- 4 EXCELLENT
- 3 GOOD
- 2 FAIR
- 1 POOR

Lead In(s): BKGn-46A [Default]

Default Next Question: BKGn-46C

BKGn-46C

(How would you rate...) *his/her* relationship with you?

(PRESS "DOWN ARROW" TO TURN ON SCREEN AND TO HIGHLIGHT AN ANSWER. THEN PRESS <ENTER> TWICE TO CONTINUE.)

(PRESS <F6> FOR DON'T KNOW AND <F5> FOR DO NOT WISH TO ANSWER.)

- 4 EXCELLENT
- 3 GOOD
- 2 FAIR
- 1 POOR

Lead In(s): BKGn-46B [Default]

Default Next Question: BKGn-46D

BKGN-46D

(How would you rate...) *his/her* feelings about *him/herself*?

(PRESS "DOWN ARROW" TO TURN ON SCREEN AND TO HIGHLIGHT AN ANSWER. THEN PRESS <ENTER> TWICE TO CONTINUE.)

(PRESS <F6> FOR DON'T KNOW AND <F5> FOR DO NOT WISH TO ANSWER.)

- 4 EXCELLENT
- 3 GOOD
- 2 FAIR
- 1 POOR

Lead In(s): BKGN-46C [Default]

Default Next Question: BKGN-46E

BKGN-46E

(How would you rate...) *his/her* prospects for the future?

(PRESS "DOWN ARROW" TO TURN ON SCREEN AND TO HIGHLIGHT AN ANSWER. THEN PRESS <ENTER> TWICE TO CONTINUE.)

(PRESS <F6> FOR DON'T KNOW AND <F5> FOR DO NOT WISH TO ANSWER.)

- 4 EXCELLENT
- 3 GOOD
- 2 FAIR
- 1 POOR

Lead In(s): BKGN-46D [Default]

Default Next Question: BKGN-46F

BKGN-46F

(How would you rate...) *his/her* relationships with brothers, sisters, or other children *he/she* lives with?

(PRESS "DOWN ARROW" TO TURN ON SCREEN AND TO HIGHLIGHT AN ANSWER. THEN PRESS <ENTER> TWICE TO CONTINUE.)

(PRESS <F6> FOR DON'T KNOW AND <F5> FOR DO NOT WISH TO ANSWER.)

- 4 EXCELLENT
- 3 GOOD
- 2 FAIR
- 1 POOR
- 0 NO OTHER CHILDREN IN HOUSEHOLD

Lead In(s): BKGN-46E [Default]

Default Next Question: BKGN-RESP-CHK

BKGN-RESP-CHK

(MOMCASI=1);

/* Skip stop screen if interviewer completed BKGN confidential items */

If Answer =0 Then Go To: BKGN-CONF-TIME-END

Lead In(s): BKGN-46F [Default]

Default Next Question: BKGN-CONF-THANK

BKGN-CONF-THANK

Please stop here.

You are now finished with this section of the interview. Thank you.

Please turn the screen back toward the interviewer, and the survey will continue.

Lead In(s): BKGN-RESP-CHK [Default]

Default Next Question: BKGN-CONF-TIME-END

BKGN-CONF-TIME-END

TIME();

/*END TIME FOR BKGN CONFIDENTIAL SECTION*/

Lead In(s): BKGN-CONF-THANK [Default], BKGN-RESP-CHK [0:0]

Default Next Question: HLTH-TITLE Save Symbol: *END TIME CONFIDENTIAL SERIES*

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CHILD HEALTH

General Health Status

HLTH-INTRO

(READ TO MOTHER/GUARDIAN)

Now I'd like to ask you some questions about *Child First Name's* general state of health and *his/her* physical characteristics.

Lead In(s): HLTH-TITLE [Default]

Default Next Question: HLTH-1

HLTH-1

((IN SCHOOL=1) OR ((IN SCHOOL=0) AND (EVER IN SCHOOL=1)));

If Answer =0 Then Go To: HLTH-2C

Lead In(s): HLTH-INTRO [Default]

Default Next Question: HLTH-2A

HLTH-2A

Does *Child First Name* have any physical, emotional, or mental condition that limits or prevents *his/her* ability to...

...attend school regularly?

1 Yes

0 No

Lead In(s): HLTH-1 [Default]

Default Next Question: HLTH-2B

Save Symbol: *LIM-ATTSCHL*

HLTH-2B

Does *he/she* have any physical, emotional, or mental condition that limits or prevents *his/her* ability to...

...do regular school work?

1 Yes

0 No

Lead In(s): HLTH-2A [Default]

Default Next Question: HLTH-2C

Save Symbol: *LIM-SCHLWK*

HLTH-2C

Does *Child First Name* have any physical, emotional, or mental condition that limits or prevents *his/her* ability to...

...do usual childhood activities such as play, or participate in games or sports?

1 Yes

0 No

Lead In(s): HLTH-2B [Default], HLTH-1 [0:0]

Default Next Question: HLTH-3A

Save Symbol: *LIM-PLAY*

HLTH-3A

Does *he/she* have any physical, emotional, or mental condition that requires...

...frequent attention or treatment from a doctor or other health professional?

1 Yes

0 No

Lead In(s): HLTH-2C [Default]

Default Next Question: HLTH-3B

Save Symbol: *LIM-DR-OFTN*

HLTH-3B

Does *Child First Name* have any physical, emotional, or mental condition that requires...

...regular use of any medicine or drug (other than vitamins)?

1 Yes

0 No

Lead In(s): HLTH-3A [Default]

Default Next Question: HLTH-3C

Save Symbol: *LIM-MEDS*

HLTH-3C

Does *he/she* have any physical, emotional, or mental condition that requires...

... use of any special equipment, such as a brace, crutches, a wheelchair, special shoes, a helmet, a special bed, a breathing mask, an air filter, or a catheter and so on?

1 Yes

0 No

Lead In(s): HLTH-3B [Default]

Default Next Question: HLTH-4

Save Symbol: *LIM-EQMT*

HLTH-4

((LIM-ATTSCHL=1) OR (LIM-SCHLWK=1) OR (LIM-PLAY=1) OR (LIM-DR-OFTN=1) OR (LIM-MEDS=1) OR (LIM-EQMT=1) OR (RESN-NOSCHL=1));

/* Answer 'yes' to any HLTH-2,3 series, or Reason Not Attending School = 1 */

If Answer =0 Then Go To: HLTH-6

Lead In(s): HLTH-3C [Default]

Default Next Question: HLTH-5

HLTH-5

What (is/are) *Child First Name's* health condition(s) or limitation(s)?

(INTERVIEWER: PROBE AS NECESSARY: (What is it called?))

RECORD VERBATIM AND CODE ALL THAT APPLY ON NEXT SCREEN:)

Lead In(s): HLTH-4 [Default]

Default Next Question: HLTH-5A

Save Symbol: *HEALTH CONDITION TEXT*

HLTH-5A

(What (is/are) *Child First Name's* health condition(s) or limitation(s)?)

ENTRY FROM PREVIOUS SCREEN: *Health Condition Text*.

(INTERVIEWER: CODE ALL THAT APPLY:)

- | | |
|---|--|
| 1 Learning disability | 10 Allergic condition(s) |
| 2 Minimal brain dysfunction, minimal cerebral dysfunction, attention deficit disorder | 11 Crippled, orthopedic handicap |
| 3 Hyperkineses, hyperactivity | 12 Mental retardation |
| 4 Asthma | 13 Heart trouble |
| 5 Respiratory disorder or sinus infection | 14 Chronic nervous disorder |
| 6 Speech impairment | 16 Chronic ear problems or infections |
| 7 Serious hearing difficulty or deafness | 17 Blood disorder or immune deficiency (e.g. sickle cell anemia) |
| 8 Serious difficulty in seeing or blindness | 18 Epilepsy/Seizures |
| 9 Serious emotional disturbance | 95 Other (SPECIFY) |

Lead In(s): HLTH-5 [Default]

Default Next Question: HLTH-5B

HLTH-5B

(*CHILD AGE IN MONTHS* <= 11);

If Answer =1 Then Go To: HLTH-6

Lead In(s): HLTH-5A [Default]

Default Next Question: HLTH-5C

HLTH-5C

How long has *Child First Name* had (this/these) limitation(s)?(INTERVIEWER: ENTER IN YEARS. CODE 00=LESS THAN ONE YEAR AND 95=ALL *HIS/HER* LIFE.)Enter Answer:

Lead In(s): HLTH-5B [Default]

Default Next Question: HLTH-6

HardMax: 95

SoftMax: *CHILD AGE (YEARS)*

HardMin: 0

SoftMin: 0

Accidents, Injuries & Illnesses

HLTH-6

Since Child First Name was born has <he/she>/During the past 12 months has Child First Name had any accidents or injuries that required medical attention?

1 Yes ... (Go To HLTH-6-LOOP-BEGIN)

0 No

Lead In(s): HLTH-5C [Default], HLTH-4 [0:0], HLTH-5B [1:1]

Default Next Question: HLTH-7

HLTH-6-LOOP-BEGIN.01

*REPEAT(HLTH-LOOP1);**/*Begin loop about accidents requiring medical attention*/*

Lead In(s): HLTH-6 [1:1]

Default Next Question: HLTH-6-CNT

HLTH-6-CNT.01

(HLTH-LOOP1);

Lead In(s): HLTH-6-LOOP-BEGIN [Default]

Default Next Question: HLTH-6B

HLTH-6B.01

Thinking of the *most recent accident or injury/accident or injury that occurred before the one you just described*, in what month and year did it occur?

Lead In(s): HLTH-6-CNT

Default Next Question: HLTH-6C

HardMax: *Interview Month and Year*

HardMin:MOMD4

HLTH-6C.01

What was the cause of that accident or injury?

(RECORD VERBATIM AND CODE ONLY ONE.)

- | | |
|---|--|
| (1) Motor vehicle accident as occupant | (14) "Rough housing,"/impact injury: wrestling, etc. |
| (2) Motor vehicle accident as pedestrian | (16) Fighting: broke bone/nose, hit in face, shot, stabbed, etc. |
| (3) Cycling | (17) Struck by object from other person (intent unknown) |
| (4) Fall unrelated to athletics or sports activity | (18) Insect sting or bite |
| (5) Fall/contact related to athletics/sports activity | (19) Stepped on sharp object, i.e., glass/nails/metal |
| (6) Fire or smoke | (20) Ran into stationary object (not in home environment) |
| (7) Hot liquid | (22) Ran into stationary object (home environment) |
| (8) Toy or item intended for child use | (21) Animal bite |
| (9) Equipment or device not intended for a child | (23) Cut by sharp object, i.e., knife/glass/tool |
| (10) Poisoning | (24) Burn, i.e. from heater/cigarette/oven/stove |
| (11) Smashed body part: car/door/window bruise/ contusion | (25) Jump/fall accident, i.e., off furniture/other object |
| (12) Adult injured child accidentally (pull/lift injury) | (26) "Temper" injuries, i.e., fell, kicked furniture, etc. |
| (13) Intentional violent injury | (15) Other (SPECIFY) |

Lead In(s): HLTH-6B [Default]

Default Next Question: HLTH-6D

HLTH-6D.01

What specific injury or conditions resulted from the accident mentioned above?

(CODE ALL THAT APPLY)

- 1 Broken or dislocated bones
- 2 Sprain, strain, or pulled muscle
- 3 Wound: cuts, scrapes, puncture
- 4 Head injury, concussion
- 5 Bruise, contusion, or internal bleeding
- 6 Burn, scald
- 7 Illness or effect from poisons, medicines (drugs), etc
- 15 Other (SPECIFY)

Lead In(s): HLTH-6C [Default]

Default Next Question: HLTH-6E

HLTH-6E.01

Where did the accident or injury happen?

(CODE ONE.)

- 1 At home (any, not necessarily the child's)
- 2 School (including grounds and athletic areas)
- 3 Day care location (preschool/nursery)
- 4 Street or highway
- 5 Public building or space (other than streets or schools)
- 6 Place of recreation and sports, except school
- 7 Farm or agricultural area, except farm house
- 8 Other (SPECIFY)

Lead In(s): HLTH-6D [Default]

Default Next Question: HLTH-6G

HLTH-6G.01

Has *Child First Name* had any other accidents or injuries requiring medical attention *since <he/she> was born/during the past 12 months?*

- 1 Yes
- 0 No

Lead In(s): HLTH-6E [Default]

Default Next Question: HLTH-6H

Save Symbol: *MOREHURTS*

HLTH-6H.01

(MOREHURTS=1);

Lead In(s): HLTH-6G [Default]

Default Next Question: HLTH-6-LOOP-END

Save Symbol: *ANYMOREHURTS*

HLTH-6-LOOP-END.01

*UNTIL(HLTH-LOOP1, (ANYMOREHURTS=0));**/* Loop until there are no more accidents or injuries*/*

Lead In(s): HLTH-6H [Default]

Default Next Question: HLTH-7

HLTH-7

Now we're going to talk about any time *Child First Name* may have been hospitalized since *<he/she> was born/we last interviewed you on <mom date of last interview>*. (This may include an injury that you have already mentioned here.)

Has *Child First Name* had any accidents or injuries that required hospitalization since *<he/she> was born/we last interviewed you on <mom date of last interview>*?

- 1 Yes ... (Go To HLTH-7-LOOP-BEGIN)
- 0 No

Lead In(s): HLTH-6 [Default], HLTH-6-LOOP-END [Default]
Default Next Question: HLTH-8

HLTH-7-LOOP-BEGIN.01

REPEAT(HLTH-LOOP2);

Lead In(s): HLTH-7 [1:1]
Default Next Question: HLTH-7-CNT

HLTH-7-CNT.01

(HLTH-LOOP2);

Lead In(s): HLTH-7-LOOP-BEGIN [Default]
Default Next Question: HLTH-7B

HLTH-7B.01

Thinking of the *most recent accident or injury that/accident or injury that occurred before the one you just described that also* required hospitalization, in what month and year did it occur?

Lead In(s): HLTH-7-CNT
Default Next Question: HLTH-7C

HardMax: interview month and year
HardMin: MOMD4

HLTH-7C.01

What was the cause of this accident or injury?

(RECORD VERBATIM AND CODE ONLY ONE.)

- | | |
|---|--|
| (1) Motor vehicle accident as occupant | (14) "Rough housing,"/impact injury: wrestling, etc. |
| (2) Motor vehicle accident as pedestrian | (16) Fighting: broke bone/nose, hit in face, shot, stabbed, etc. |
| (3) Cycling | (17) Struck by object from other person (intent unknown) |
| (4) Fall unrelated to athletics or sports activity | (18) Insect sting or bite |
| (5) Fall/contact related to athletics/sports activity | (19) Stepped on sharp object, i.e., glass/nails/metal |
| (6) Fire or smoke | (20) Ran into stationary object (not in home environment) |
| (7) Hot liquid | (22) Ran into stationary object (home environment) |
| (8) Toy or item intended for child use | (21) Animal bite |
| (9) Equipment or device not intended for a child | (23) Cut by sharp object, i.e., knife/glass/tool |
| (10) Poisoning | (24) Burn, i.e. from heater/cigarette/oven/stove |
| (11) Smashed body part: car/door/window bruise/ contusion | (25) Jump/fall accident, i.e., off furniture/other object |
| (12) Adult injured child accidentally (pull/lift injury) | (26) "Temper" injuries, i.e., fell, kicked furniture, etc. |
| (13) Intentional violent injury | (15) Other (SPECIFY) |

Lead In(s): HLTH-7B [Default]

Default Next Question: HLTH-7D

HLTH-7D.01

What specific injury or conditions resulted from the accident mentioned above?

(CODE ALL THAT APPLY)

- 1 Broken or dislocated bones
- 2 Sprain, strain, or pulled muscle
- 3 Wound: cuts, scrapes, puncture
- 4 Head injury, concussion
- 5 Bruise, contusion, or internal bleeding
- 6 Burn, scald
- 7 Illness or effect from poisons, medicines (drugs), etc.
- 15 Other (SPECIFY)

Lead In(s): HLTH-7C [Default]

Default Next Question: HLTH-7E

HLTH-7E.01

Where did the accident or injury happen?

- 1 At home (any, not necessarily the child's)
- 2 School (including grounds and athletic areas)
- 3 Day care location (preschool/nursery)
- 4 Street or highway
- 5 Public building or space (other than streets or schools)
- 6 Place of recreation and sports, except school
- 7 Farm or agricultural area, except farm house
- 8 Other (SPECIFY)

Lead In(s): HLTH-7D [Default]

Default Next Question: HLTH-7G

HLTH-7G.01

Has *Child First Name* had any other accidents or injuries requiring hospitalization since *<he/she> was born/we last interviewed you on <mom date of last interview>?*

- 1 Yes
- 0 No

Lead In(s): HLTH-7E [Default]

Default Next Question: HLTH-7H

Save Symbol: *MOREHOSP*

HLTH-7H.01

(MOREHOSP=1);

Lead In(s): HLTH-7G [Default]

Default Next Question: HLTH-7-LOOP-END

Save Symbol: *ANYMOREHOSP*

HLTH-7-LOOP-END.01

UNTIL(HLTH-LOOP2, (ANYMOREHOSP=0));

Lead In(s): HLTH-7H [Default]

Default Next Question: HLTH-8

HLTH-8

Since *Child First Name* was born has *<he/she>/During the past 12 months has Child First Name* had any illnesses that required medical attention or treatment?

- 1 Yes
- 0 No ... (Go To HLTH-9)

Lead In(s): HLTH-7 [Default], HLTH-7-LOOP-END [Default]

Default Next Question: HLTH-8A

HLTH-8A

How many such illnesses has *Child First Name* had since *<he/she>* was born/during the past 12 months?

Enter Answer:

Lead In(s): HLTH-8 [Default]

Default Next Question: HLTH-9

HardMax: 36

SoftMax:12

HardMin: 1

SoftMin:1

HLTH-9

When did *Child First Name* last see a doctor for a routine health checkup?

- 1 Less than 1 month ago
- 2 1 - 3 months ago
- 3 4 - 6 months ago
- 4 7 - 11 months ago
- 5 1 year - 23 months ago
- 6 2 or more years ago
- 7 Never

Lead In(s): HLTH-8A [Default], HLTH-8 [0:0]

Default Next Question: HLTH-10A

Menses/Menarche

HLTH-10A

(*CHILD SEX* = 2);

If Answer =1 Then Go To: HLTH-10B

Lead In(s): HLTH-9 [Default]

Default Next Question: HLTH-10D

HLTH-10B

(*CHILD AGE (YEARS)* >=8);

/* Is *Child First Name* age 8 yrs or older? */

If Answer =0 Then Go To: HLTH-10D

Lead In(s): HLTH-10A [1:1]

Default Next Question: HLTH-10C

HLTH-10C

(*MENSES FLAG*=1);

/* Has child had a menstrual period? */

If Answer =0 Then Go To: HLTH-11A

Lead In(s): HLTH-10B [Default]

Default Next Question: HLTH-12A

HLTH-10D

(*CHILD AGE (YEARS)*>=2);

/* Is *Child First Name* age 2 yrs or older? */

If Answer =0 Then Go To: HLTH-14

Lead In(s): HLTH-10A [Default], HLTH-10B [0:0]

Default Next Question: HLTH-12A

HLTH-11A

Has *Child First Name* ever had a menstrual period?

1 Yes

0 No ...(Go To HLTH-12A)

Lead In(s): HLTH-10C [0:0]

Default Next Question: HLTH-11B

HLTH-11B

How old was *Child First Name* when she had her first menstrual period?

(INTERVIEWER: ENTER AGE IN YEARS.)

Enter Answer: |__| |__|

Lead In(s): HLTH-11A [Default]

Default Next Question: HLTH-11C

HardMax: *Child Age (Years)*

HardMin: 0

HLTH-11C

In what month and year did she have her first period?

Enter Date:
 month year

Lead In(s): HLTH-11B [Default]

Default Next Question: HLTH-12A

HardMax: *Interview Month and Year*

HardMin: 01/1980

Handedness

HLTH-12A

Which hand does *Child First Name* use for writing?

(CODE ONLY ONE. IF R SAYS CHILD DOESN'T WRITE YET, ASK WHICH HAND *HE/SHE* USES MOST OFTEN. IF R VOLUNTEERS "AMBIDEXTROUS", "EITHER", OR "BOTH", ENTER EITHER/BOTH AND RECORD EXPLANATION IN COMMENT SCREEN.)

- 1 Left
- 2 Right
- 3 Either/both

Lead In(s): HLTH-10C [Default], HLTH-10D [Default], HLTH-11C [Default], HLTH-11A [0:0]

Default Next Question: HLTH-12B

HLTH-12B

Please think about the hand *Child First Name* uses for activities such as throwing a ball or brushing teeth. When *he/she* throws a ball, does *he/she* use *his/her*...

- 1 ...right hand nearly all of the time?
- 2 ...right hand more than half of the time?
- 3 ...right and left hands about equally?
- 4 ...left hand more than half of the time?
- 5 ...left hand nearly all of the time?

Lead In(s): HLTH-12A [Default]

Default Next Question: HLTH-12C

HLTH-12C

When *he/she* brushes *his/her* teeth, does *he/she* use *his/her*...

- 1 ...right hand nearly all of the time?
- 2 ...right hand more than half of the time?
- 3 ...right and left hands about equally?
- 4 ...left hand more than half of the time?
- 5 ...left hand nearly all of the time?

Lead In(s): HLTH-12B [Default]

Default Next Question: HLTH-13

HLTH-13

When did *Child First Name* last see a dentist for a checkup or to have some dental work done?

- 1 Less than 1 month ago
- 2 1 - 3 months ago
- 3 4 - 6 months ago
- 4 7 - 11 months ago
- 5 1 year - 23 months ago
- 6 2 or more years ago
- 7 Never

Lead In(s): HLTH-12C [Default]

Default Next Question: HLTH-14

Insurance Coverage

HLTH-14

Is *Child First Name's* health care now covered by health insurance provided either by an employer or by an individual plan that pays part or all of a hospital, doctor's, or surgeon's bill?

(THIS DOES NOT INCLUDE PUBLIC ASSISTANCE HEALTH CARE PROGRAMS.)

- 1 Yes
- 0 No

Lead In(s): HLTH-13 [Default], HLTH-10D [0:0]

Default Next Question: HLTH-15

HLTH-15

There is a national program called Medicaid that pays for health care for persons in need.

Is *Child First Name's* health care now covered by Medicaid?

1 Yes

0 No

Lead In(s): HLTH-14 [Default]

Default Next Question: HLTH-16

HLTH-16

(*CHILD AGE (YEARS)* >= 3);

/* Is child's age 3 years or older? */

If Answer = 0 Then Go To: HLTH-19

Lead In(s): HLTH-15 [Default]

Default Next Question: HLTH-17

Mental Health

HLTH-17

During the past 12 months has *Child First Name* seen a psychiatrist, psychologist, or counselor about any behavioral, emotional, or mental problem?

1 Yes

0 No ...(Go To HLTH-19)

Lead In(s): HLTH-16 [Default]

Default Next Question: HLTH-17A

HLTH-17A

What was the problem?

(RECORD VERBATIM THEN CODE ALL THAT APPLY ON NEXT SCREEN.)

Enter Answer:

Lead In(s): HLTH-17 [Default]

Default Next Question: HLTH-17B

Save Symbol: *BEHAVIOR PROBLEM TEXT*

HLTH-17B

(What was the problem?)

(CODE ALL THAT APPLY.)

ENTRY FROM PREVIOUS SCREEN: *BEHAVIOR PROBLEM TEXT*

- 1 LEARNING PROBLEMS OR DISABILITY, DYSLEXIA, READING OR SPEECH PROBLEMS
- 11 ATTENTION DEFICIT HYPERACTIVITY DISORDER (ADHD, ADD)
- 2 BEHAVIOR PROBLEMS IN SCHOOL/PRESCHOOL
- 3 FAMILY PROBLEMS: LOSS OF PARENT OR SIB, DIVORCE
- 4 UNMANAGEABLE, TEMPER TANTRUMS, DISRUPTIVE, HYPERACTIVE
- 5 STRESS, CRIES A LOT
- 6 LYING
- 7 EMOTIONAL TRAUMA: MOLESTATION, ABUSE
- 8 AUTISM
- 9 SHYNESS
- 10 NIGHTMARES
- 15 OTHER (SPECIFY)

Lead In(s): HLTH-17A [Default]

Default Next Question: HLTH-18

HLTH-18

Was the cost of the visit to the psychiatrist, psychologist, or counselor covered, at least in part, by any form of insurance or benefit program?

- 1 Yes
- 0 No

Lead In(s): HLTH-17B [Default]

Default Next Question: HLTH-20

HLTH-19

Since <child first name> was born/During the past 12 months have you felt, or has anyone suggested, that Child First Name needed help for any behavioral, emotional, or mental problem?

- 1 Yes
- 0 No

Lead In(s): HLTH-16 [0:0], HLTH-17 [0:0]

Default Next Question: HLTH-20

HLTH-20

Does *Child First Name* regularly take any medicines or prescription drugs to help control *his/her* activity level or behavior?

- 1 Yes
- 0 No

Lead In(s): HLTH-18 [Default], HLTH-19 [Default]

Default Next Question: CS-MASS-BEGIN

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MOTHER REPORT ASSESSMENTS - PRELIMINARIES

AGES: 0–47 MONTHS

CS-MASS-BEGIN

(1); /* Mother report assessments items for CS2000 begin here */

Lead In(s): HLTH-20 [Default]

Default Next Question: CS-AGECK4

CS-AGECK4

(CHILD AGE IN MONTHS<48);

/* If child age < 48 months, enter Home/MSD/Temperament section, otherwise skip over section */

If Answer =1 Then Go To: CS-CKDADFLAG1

Lead In(s): CS-MASS-BEGIN [Default]

Default Next Question: CS-MASS-END

CS-CKDADFLAG1

SYMBOLEXIST(FATHER IN HOUSEHOLD);

/* Verify: Is father presence flag on info sheet?*/

/* FATHER IN HOUSEHOLD flag passed to spawned info sheets */

/* Value is from Q9-45 of the 79 Main Youth: is biofather in hh? 1=yes 0=no */

If Answer =1 Then Go To: CS-CKDADFLAG2

Lead In(s): CS-AGECK4 [1:1]

Default Next Question: CS-CKDADFLAG3

CS-CKDADFLAG2

CHECK(FATHER IN HOUSEHOLD);

/* Verify: Is father presence info stored in symbol?*/

/* FATHER IN HOUSEHOLD flag passed to spawned info sheets */

/* Value is from Q9-45 of the 79 MAIN YOUTH: IS BIOFATHER IN HH? 1=YES 0=NO */

If Answer =1 Then Go To: CS-DADPRESENT

Lead In(s): CS-AGECK4 [1:1]

Default Next Question: CS-CKDADFLAG3

CS-CKDADFLAG3

SYMBOL (FATHER IN HOUSEHOLD=0=INT);

/ Initialize father presence flag = 0 because it's not on info sheet*/*

Lead In(s): CS-CKDADFLAG1 [Default], CS-CKDADFLAG2 [Default]

Default Next Question: CS-DADPRESENT

CS-DADPRESENT

SYMBOL(WHODAD=FATHER IN HOUSEHOLD=INT);

/ Father flag: Is bio-father present in mother household?*/*

Lead In(s): CS-CKDADFLAG3 [Default], CS-CKDADFLAG2 [1:1]

Default Next Question: CS-MASS-TITLE

CS-MASS-TITLE

SET NAME (ASSESSHEADER, "ASSESSMENTS");

/ Header */*

Lead In(s): CS-DADPRESENT [Default]

Default Next Question: HOME-INTRO

THE HOME

AGES: 0–47 MONTHS¹

Birth – 2 Years (0-35 Months)

HOME-INTRO

INTERVIEWER: THE FOLLOWING SECTION IS A CHILD ASSESSMENT. IT IS VITAL THAT YOU COMPLETE ALL QUESTIONS IN THIS SECTION.

READ TO MOTHER

We are interested in your family's lifestyle and rules.

Lead In(s): CS-MASS-TITLE [Default]
Default Next Question: HOME-AGECK

HOME-AGECK

(*CHILD AGE IN MONTHS*);

/* If child age is 0 to 35 months jump to HOME A */
/* If child age is 36 to 47 months jump to HOME B */

If Answer >=0 and Answer <=35 Then Go To: HOME-A01
If Answer >=36 and Answer <=47 Then Go To: HOME-B01
Lead In(s): HOME-INTRO [Default]
Default Next Question: CS-MASS-END

HOME-A01

About how often does *Child First Name* have a chance to get out of the house?

- 5 Every day
- 4 4 or more times a week
- 3 A few times a week
- 2 About once a week
- 1 A few times a month or less

Lead In(s): HOME-AGECK [0:35]
Default Next Question: HOME-A02

¹ In prior years, all items for this assessment appeared in the paper Mother Supplement and were completed as a self-report. For 2000, items from The HOME assessment for children under age 4 were moved to the Child CAPI Supplement. Items for ages 4 to 14 remain in the 2000 Mother Supplement.

HOME-A02

About how many children's books does *Child First Name* have?

- 4 10 or more books
- 3 3 to 9 books
- 2 1 or 2 books
- 1 None

Lead In(s): HOME-A01 [Default]

Default Next Question: HOME-A03

HOME-A03

How often do you get a chance to read stories to *Child First Name*?

- 1 Never
- 2 Several times a year
- 3 Several times a month
- 4 Once a week
- 5 About 3 times a week
- 6 Everyday

Lead In(s): HOME-A02 [Default]

Default Next Question: HOME-A04

HOME-A04

About how often do you take *Child First Name* to the grocery store?

- 1 Twice a week or more
- 2 Once a week
- 3 Once a month
- 4 Hardly ever

Lead In(s): HOME-A03 [Default]

Default Next Question: HOME-A05

HOME-A05

About how many, if any, cuddly, soft or role-playing toys (like a doll) does *Child First Name* have? (May be shared with sister or brother.)

ENTER NUMBER OF SOFT TOYS.

Enter Answer: |__| |__|

Lead In(s): HOME-A04 [Default]

Default Next Question: HOME-A06

HardMax: 999

HardMin: 0

HOME-A06

About how many, if any, push or pull toys does *Child First Name* have? (May be shared with sister or brother.)

ENTER NUMBER OF PUSH/PULL TOYS.

Enter Answer: |__| |__|

Lead In(s): HOME-A05 [Default]

Default Next Question: HOME-A07

HardMax: 999

HardMin: 0

HOME-A07

Some parents spend time teaching their children new skills while other parents believe children learn best on their own. Which of the following most closely describes your attitude?

- 1 Parents should always spend time teaching their children
- 2 Parents should usually spend time teaching their children
- 3 Parents should usually allow their children to learn on their own
- 4 Parents should always allow their children to learn on their own

Lead In(s): HOME-A06 [Default]

Default Next Question: HOME-A08

HOME-A08

Think for a moment about a typical weekday for your family. How much time--either in your home or elsewhere--does *Child First Name* spend watching television on a typical weekday ?

INTERVIEWER: ENTER HOURS PER WEEKDAY ("NO" OR "NONE"= 0)

IF REPLY IS "Do not have a TV" THEN PROMPT:

Does *Child First Name* spend any time watching TV outside of your home (for example with a babysitter) on a typical weekday? (ENTER NUMBER OF HOURS)

Enter Answer: |__| |__|

Lead In(s): HOME-A07 [Default]

Default Next Question: HOME-A09

HardMax: 24.0

SoftMax: 12.0

HardMin: 0.0

SoftMin: 0.0

HOME-A09

Now, think about a typical weekend day (Saturday or Sunday) for your family. How much time--either in your home or elsewhere--does *Child First Name* spend watching television on a typical weekend day ?

INTERVIEWER: ENTER HOURS PER WEEKEND DAY ("NO" OR "NONE"= 0)

IF REPLY IS "Do not have a TV" THEN PROMPT:

Does *Child First Name* spend any time watching TV outside of your home (for example with a babysitter) on a typical weekend day? (ENTER NUMBER OF HOURS)

Enter Answer: |__| |__|

Lead In(s): HOME-A08 [Default]

Default Next Question: HOME-A10A

HardMax: 24.0

SoftMax: 12.0

HardMin: 0.0

SoftMin: 0.0

HOME-A10A

About how many hours is the TV on in your home each day?

INTERVIEWER: SELECT AS APPROPRIATE

- 1 HAS A TV - ENTER HOURS PER DAY ON NEXT SCREEN ...(Go To HOME-A10B)
- 0 DOES NOT HAVE A TV

Lead In(s): HOME-A09 [Default]

Default Next Question: HOME-A-DADCHK1

HOME-A10B

(About how many hours is the TV on in your home each day?)

INTERVIEWER: ENTER HOURS PER DAY

NOTE: LESS THAN ONE HOUR PER DAY = 0

Enter Answer: |__| |__|

Lead In(s): HOME-A10A [1:1]

Default Next Question: HOME-A-DADCHK1

HardMax: 24.0

SoftMax: 12.0

HardMin: 0.0

SoftMin: 0.0

HOME-A-DADCHK1

(*FATHER IN HOUSEHOLD=1*);

/* if father present in mother household skip to HOME-A14 */

If Answer =1 Then Go To: HOME-A14

Lead In(s): HOME-A10A [Default], HOME-A10B [Default]

Default Next Question: HOME-A11

HOME-A11

Does *Child First Name* ever see *his/her* father, or someone you consider a father-figure?

1 Yes

0 No ...(Go To HOME-A16)

Lead In(s): HOME-A-DADCHK1 [Default]

Default Next Question: HOME-A12 Save Symbol: *WHODAD*

HOME-A12

Is this person *his/her* biological father, stepfather, or a father-figure?

1 BIOLOGICAL FATHER

2 STEPFATHER

3 FATHER-FIGURE

Lead In(s): HOME-A11 [Default]

Default Next Question: HOME-A13 Save Symbol: *WHODAD*

HOME-A13

What is his relationship to you? (Is he your spouse, your partner, your friend, a relative, or someone else?)

1 SPOUSE

2 EX-SPOUSE

3 PARTNER

4 EX-PARTNER

5 BOYFRIEND

6 EX-BOYFRIEND

7 FIANCE

8 FRIEND

9 FATHER

10 GRANDFATHER

11 BROTHER

12 UNCLE

13 SOMEONE ELSE (SPECIFY)

Lead In(s): HOME-A12 [Default]

Default Next Question: HOME-A14

HOME-A14

Does *Child First Name* see his/her (father/stepfather/father-figure) on a daily basis?

- 1 Yes
- 0 No

Lead In(s): HOME-A13

Default Next Question: HOME-A15

HOME-A15

How often does *Child First Name* eat a meal with both you and his/her (father/stepfather/father-figure)?

- 1 More than once a day
- 2 Once a day
- 3 Several times a week
- 4 About once a week
- 5 About once a month
- 6 Never

Lead In(s): HOME-A14 [Default]

Default Next Question: HOME-A16

HOME-A16

Children seem to demand attention when their parents are busy around the house. How often do you talk to *Child First Name* while you are working?

- 1 Always (talk to child when working)
- 2 Often (talk to child when working)
- 3 Sometimes (talk to child when working)
- 4 Rarely (talk to child when working)
- 5 Never (talk to child when working)

Lead In(s): HOME-A15 [Default], HOME-A11 [0:0]

Default Next Question: HOME-A17A

HOME-A17A

How close does *Child First Name* feel toward you? Does he/she feel...

- 1 Extremely close
- 2 Quite close
- 3 Fairly close
- 4 Not at all close

Lead In(s): HOME-A16 [Default]

Default Next Question: HOME-A-DADCHK2

HOME-A-DADCHK2

(WHODAD);

/* WHODAD=0 (no father-figure), skip to HOME-A18 */

/* WHODAD>=1 skip to HOME-A17B */

If Answer >=1 and Answer <=3 Then Go To: HOME-A17B

If Answer =0 Then Go To: HOME-A18

Lead In(s): HOME-A17A [Default]

Default Next Question: HOME-A17B

HOME-A17B

How close does *he/she* feel toward *his/her* (biological) father?

- 1 Extremely close
- 2 Quite close
- 3 Fairly close
- 4 Not at all close
- 5 Does not have this parent

Lead In(s): HOME-A-DADCHK2 [Default], HOME-A-DADCHK2 [1:3]

Default Next Question: HOME-A-DADCHK3

HOME-A-DADCHK3

(WHODAD);

/* IF father is in HH, don't ask about closeness to stepfather*/

/* (WHODAD=1 skip to HOME-A18) */

If Answer =1 Then Go To: HOME-A18

Lead In(s): HOME-A17B [Default]

Default Next Question: HOME-A17D

HOME-A17D

How close does *he/she* feel toward *his/her* (father/stepfather/father-figure)?

- 1 Extremely close
- 2 Quite close
- 3 Fairly close
- 4 Not at all close

Lead In(s): HOME-A-DADCHK3 [Default]

Default Next Question: HOME-A18

HOME-A18

Sometimes kids mind pretty well and sometimes they don't.

About how many times, if any, have you had to spank *Child First Name* in the past week?

Enter Answer: |__| |__|

Lead In(s): HOME-A17D [Default], HOME-A-DADCHK2 [0:0], HOME-A-DADCHK3 [1:1]

Default Next Question: HOME-END

HardMax: 99

HardMin: 0

Age 3 Years (36-47 Months)

HOME-B01

About how often do you read stories to *Child First Name*?

- 1 Never
- 2 Several times a year
- 3 Several times a month
- 4 Once a week
- 5 At least 3 times a week
- 6 Everyday

Lead In(s): HOME-AGECK [36:47]

Default Next Question: HOME-B02

HOME-B02

About how many children's books does *Child First Name* have?

- 4 10 or more books
- 3 3 to 9 books
- 2 1 or 2 books
- 1 None

Lead In(s): HOME-B01 [Default]

Default Next Question: HOME-B03

HOME-B03

About how many magazines does your family get regularly?

- 1 None
- 2 One
- 3 Two
- 4 Three
- 5 Four or more

Lead In(s): HOME-B02 [Default]

Default Next Question: HOME-B04

HOME-B04

Does *Child First Name* have the use of a CD player, tape deck, or tape recorder, or record player at home and at least 5 children's records or tapes? (May be shared with sister or brother.)

- 1 Yes
0 No

Lead In(s): HOME-B03 [Default]
Default Next Question: HOME-B05A

HOME-B05A

Please tell me which of the following you (or someone else) have helped *Child First Name* learn at home.

Do you or have you helped with...numbers?

- 1 Yes
0 No

Lead In(s): HOME-B04 [Default]
Default Next Question: HOME-B05B

HOME-B05B

Do you (or someone else) help with...the alphabet?

- 1 Yes
0 No

Lead In(s): HOME-B05A [Default]
Default Next Question: HOME-B05C

HOME-B05C

Do you (or someone else) help with...colors?

- 1 Yes
0 No

Lead In(s): HOME-B05B [Default]
Default Next Question: HOME-B05D

HOME-B05D

Do you (or someone else) help with...shapes and sizes?

- 1 Yes
0 No

Lead In(s): HOME-B05C [Default]
Default Next Question: HOME-B06

HOME-B06

How much choice is *Child First Name* allowed in deciding what foods *he/she* eats at breakfast and lunch?

- 1 A great deal of choice
- 2 Some choice
- 3 Little choice
- 4 No choice

Lead In(s): HOME-B05D [Default]

Default Next Question: HOME-B07A

HOME-B07A

About how many hours is the TV on in your home each day?

INTERVIEWER: SELECT AS APPROPRIATE

- 1 HAS A TV - ENTER HOURS PER DAY ON NEXT SCREEN ...(Go To HOME-B07B)
- 0 DOES NOT HAVE A TV

Lead In(s): HOME-B06 [Default]

Default Next Question: HOME-B08A

HOME-B07B

(About how many hours is the TV on in your home each day?)

INTERVIEWER: ENTER HOURS PER DAY

NOTE: LESS THAN ONE HOUR PER DAY = 0

Enter Answer:

Lead In(s): HOME-B07A [1:1]

Default Next Question: HOME-B08A

HardMax: 24.0

SoftMax: 12.0

HardMin: 0.0

SoftMin: 0.0

HOME-B08A

Most children get angry at their parents from time to time. If *Child First Name* got so angry that *he/she* hit you, what would you do?

INTERVIEWER: ENTER VERBATIM AND MARK ALL THAT APPLY ON NEXT SCREEN.

Enter Answer:

Lead In(s): HOME-B07A [Default], HOME-B07B [Default]

Default Next Question: HOME-B08B

HOME-B08B

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

PREVIOUS TEXT ENTRY: *HOME-B08A ANSWER TEXT*

INTERVIEWER: MARK ALL THAT APPLY.

- 1 Hit *him/her* back
- 2 Send *him/her* to *his/her* room
- 3 Spank *him/her*
- 4 Talk to *him/her*
- 5 Ignore it
- 6 Give *him/her* household chore
- 7 Take away *his/her* allowance
- 8 Hold child's hands until *he/she* was calm
- 10 Put child in a short 'time out'
- 9 Other

Lead In(s): HOME-B08A [Default]

Default Next Question: HOME-B09

HOME-B09

How often does a family member get a chance to take *Child First Name* on any kind of outing (like shopping, to the park, a picnic, drive-in, and so on)?

- 1 A few times a year or less
- 2 About once a month
- 3 About two or three times a month
- 4 Several times a week
- 5 About once a day

Lead In(s): HOME-B08B [Default]

Default Next Question: HOME-B10

HOME-B10

How often has a family member taken or arranged to take *Child First Name* to any type of museum (children's, scientific, art, historical, etc.) within the past year?

- 1 Never
- 2 Once or twice
- 3 Several times
- 4 About once a month
- 5 About once a week or more often

Lead In(s): HOME-B09 [Default]

Default Next Question: HOME-B11

HOME-B11

Think for a moment about a typical weekday for your family. How much time--either in your home or elsewhere--does *Child First Name* spend watching television on a typical weekday ?

INTERVIEWER: ENTER HOURS PER WEEKDAY ("NO" OR "NONE"= 0)

IF REPLY IS "Do not have a TV" THEN PROMPT:

Does *Child First Name* spend any time watching TV outside of your home (for example with a babysitter) on a typical weekday? (ENTER NUMBER OF HOURS)

Enter Answer:

Lead In(s): HOME-B10 [Default]

Default Next Question: HOME-B12

HardMax: 24.0

SoftMax:12.0

HardMin: 0.0

SoftMin:0.0

HOME-B12

Now, think about a typical weekend day (Saturday or Sunday) for your family. How much time--either in your home or elsewhere--does *Child First Name* spend watching television on a typical weekend day ?

INTERVIEWER: ENTER HOURS PER WEEKEND DAY ("NO" OR "NONE"= 0)

IF REPLY IS "Do not have a TV" THEN PROMPT:

Does *Child First Name* spend any time watching TV outside of your home (for example with a babysitter) on a typical weekend day? (ENTER NUMBER OF HOURS)

Enter Answer:

Lead In(s): HOME-B11 [Default]

Default Next Question: HOME-B-DADCHK1

HardMax: 24.0

SoftMax:12.0

HardMin: 0.0

SoftMin:0.0

HOME-B-DADCHK1

(FATHER IN HOUSEHOLD=1);

/* IF FATHER PRESENT IN MOTHER HOUSEHOLD SKIP TO HOME-B16 */

If Answer =1 Then Go To: HOME-B16

Lead In(s): HOME-B12 [Default]

Default Next Question: HOME-B13

HOME-B13

Does *Child First Name* ever see *his/her* father, or someone you consider a father-figure?

- 1 Yes
- 0 No ...(Go To HOME-B18A)

Lead In(s): HOME-B-DADCHK1 [Default]

Default Next Question: HOME-B14

HOME-B14

Is this man *Child First Name's* biological father, stepfather, or a father-figure?

- 1 BIOLOGICAL FATHER
- 2 STEPFATHER
- 3 FATHER-FIGURE

Lead In(s): HOME-B13 [Default]

Default Next Question: HOME-B15

Save Symbol: *WHODAD*

HOME-B15

What is his relationship to you? (Is he your spouse, your partner, your friend, a relative, or someone else?)

- | | |
|----------------|---------------------------|
| 1 SPOUSE | 8 FRIEND |
| 2 EX-SPOUSE | 9 FATHER |
| 3 PARTNER | 10 GRANDFATHER |
| 4 EX-PARTNER | 11 BROTHER |
| 5 BOYFRIEND | 12 UNCLE |
| 6 EX-BOYFRIEND | 13 SOMEONE ELSE (SPECIFY) |
| 7 FIANCE | |

Lead In(s): HOME-B14 [Default]

Default Next Question: HOME-B16

HOME-B16

Does *Child First Name* see *his/her* (father/stepfather/father-figure) on a daily basis?

- 1 Yes
- 0 No

Lead In(s): HOME-B15

Default Next Question: HOME-B17

HOME-B17

How often does *Child First Name* eat a meal with you and *his/her* (father/stepfather/father-figure)?

- 1 More than once a day
- 2 Once a day
- 3 Several times a week
- 4 About once a week
- 5 About once a month
- 6 Never

Lead In(s): HOME-B16 [Default]

Default Next Question: HOME-B18A

HOME-B18A

How close does *Child First Name* feel toward you? Does *he/she* feel...

- 1 Extremely close
- 2 Quite close
- 3 Fairly close
- 4 Not at all close

Lead In(s): HOME-B17 [Default], HOME-B13 [0:0]

Default Next Question: HOME-B-DADCHK2

HOME-B-DADCHK2

(WHODAD);

/* WHODAD=0 (no father-figure), skip to HOME-B19 */

/* WHODAD>=1 skip to HOME-B18B */

If Answer >=1 and Answer <=3 Then Go To: HOME-B18B

If Answer =0 Then Go To: HOME-B19

Lead In(s): HOME-B18A [Default]

Default Next Question: HOME-B18B

HOME-B18B

How close does *Child First Name* feel toward *his/her* (biological) father?

- 1 Extremely close
- 2 Quite close
- 3 Fairly close
- 4 Not at all close
- 5 Does not have this parent

Lead In(s): HOME-B-DADCHK2 [Default], HOME-B-DADCHK2 [1:3]

Default Next Question: HOME-B-DADCHK3

HOME-B-DADCHK3

(WHODAD);

/* IF father is in HH, don't ask about closeness to stepfather*/

/* (WHODAD=1 skip to HOME-B19) */

If Answer =1 Then Go To: HOME-B19

Lead In(s): HOME-B18B [Default]

Default Next Question: HOME-B18D

HOME-B18D

How close does *Child First Name* feel toward *his/her (father/stepfather/father-figure)?*

- 1 Extremely close
- 2 Quite close
- 3 Fairly close
- 4 Not at all close

Lead In(s): HOME-B-DADCHK3 [Default]

Default Next Question: HOME-B19

HOME-B19

Sometimes kids mind pretty well and sometimes they don't. About how many times, if any, have you had to spank *Child First Name* in the past week?

Enter Answer:

Lead In(s): HOME-B18D [Default], HOME-B-DADCHK2 [0:0], HOME-B-DADCHK3 [1:1]

Default Next Question: HOME-END

HardMax: 999

HardMin: 0

HOME-END

(1); /*End of home assessment*/

Lead In(s): HOME-A18 [Default], HOME-B19 [Default]

Default Next Question: ACT-INTRO

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HOW MY CHILD USUALLY ACTS

AGES: 0–47 MONTHS²

ACT-INTRO

INTERVIEWER: THE FOLLOWING SECTION IS A CHILD ASSESSMENT. IT IS VITAL THAT YOU COMPLETE ALL QUESTIONS IN THIS SECTION.

READ TO MOTHER

We are interested in how your child normally acts during an average day. Please think about *Child First Name* during the last two weeks.

If *he/she* was not feeling well, think back to the last two-week time period when *he/she* was *his/her* normal self.

Lead In(s): HOME-END [Default]

Default Next Question: ACT-AGECK

ACT-AGECK

(*CHILD AGE IN MONTHS*);

/* If child age is 0 to 11 months jump to TEMPERAMENT A */

/* If child age is 12 to 23 months jump to TEMPERAMENT B */

/* If child age is 24 to 47 months jump to TEMPERAMENT C */

If Answer >=0 and Answer <=11 Then Go To: ACT-A01

If Answer >=12 and Answer <=23 Then Go To: ACT-B01

If Answer >=24 and Answer <=47 Then Go To: ACT-C01

Lead In(s): ACT-INTRO [Default]

Default Next Question: CS-MASS-END

Birth-11 Months

ACT-A01

(The following questions ask about how often *Child First Name* acted in a certain way.)

During feeding, how often does *Child First Name* squirm and kick?

Would that be...

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-AGECK [0:11]

Default Next Question: ACT-A02

² In prior years, all items for this assessment appeared in the paper Mother Supplement and were completed as a self-report. For 2000, items from this assessment for children under age 4 were moved to the Child CAPI Supplement. Items for ages 4 to 6 remain in the 2000 Mother Supplement.

ACT-A02

During feeding, how often does *Child First Name* wave *his/her* arms?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-A01 [Default]

Default Next Question: ACT-A03

ACT-A03

During sleep, how often does *he/she* usually move around in the crib?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-A02 [Default]

Default Next Question: ACT-A04

ACT-A04

Some children get sleepy about the same time each evening, give or take 15 minutes. How often does *Child First Name* do this?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-A03 [Default]

Default Next Question: ACT-A05

ACT-A05

Some children get hungry at about the same time each day, give or take 15 minutes. How often does *Child First Name* do this?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-A04 [Default]

Default Next Question: ACT-A06

ACT-A06

When *he/she* wakes up in the morning, how often is *he/she* in the same mood?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-A05 [Default]

Default Next Question: ACT-A07

ACT-A07

When *Child First Name* sees a stranger, how often does *he/she* turn away or cry as if afraid?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-A06 [Default]

Default Next Question: ACT-A08

ACT-A08

When *he/she* sees an unfamiliar dog or cat, how often does *he/she* turn away or cry as if afraid?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-A07 [Default]

Default Next Question: ACT-A09

ACT-A09

When you leave the room and leave *him/her* alone, how often does *he/she* become upset?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-A08 [Default]

Default Next Question: ACT-A10

ACT-A10

When you take *Child First Name* to the doctor, dentist or nurse, how often does *he/she* turn away or cry as if afraid?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-A09 [Default]

Default Next Question: ACT-A11

ACT-A11

When you play with *Child First Name*, how often does *he/she* smile or laugh?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-A10 [Default]

Default Next Question: ACT-A12

ACT-A12

When *he/she* plays alone, how often does *he/she* smile or laugh?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-A11 [Default]

Default Next Question: ACT-A13

ACT-A13

When *he/she* is in the bath, how often does *he/she* smile or laugh?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-A12 [Default]

Default Next Question: ACT-A14

ACT-A14

When *Child First Name* hears an unexpected loud sound (for example, a car back-firing or a vacuum cleaner), how often does *he/she* cry or become upset?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-A13 [Default]

Default Next Question: ACT-A15

ACT-A15

How often do you have trouble soothing or calming *him/her* when *he/she* is crying or upset?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-A14 [Default]

Default Next Question: ACT-A16

ACT-A16

The answer choices change a little here....

During the average day, how often does *Child First Name* get fussy and irritable?

Would you say...

- 1 Almost never
- 2 Once or twice a day
- 3 A couple of times a.m. & p.m.
- 4 Several times a day
- 5 Almost every hour

Lead In(s): ACT-A15 [Default]

Default Next Question: ACT-A17

Age 1 Year (12-23 Months)

ACT-A17

In general, compared with most babies, how often does *Child First Name* cry and fuss?

Would that be...

- 1 Almost never
- 2 Less than average
- 3 About average
- 4 More than average
- 5 Almost always

Lead In(s): ACT-A16 [Default]

Default Next Question: ACT-END

ACT-B01

(The following questions ask about how often *Child First Name* acted in a certain way.)

When *Child First Name* sees a stranger, how often does *he/she* turn away or cry as if afraid?

Would that be...

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-AGECK [12:23]

Default Next Question: ACT-B02

ACT-B02

When *Child First Name* sees an unfamiliar dog or cat, how often does *he/she* turn away or cry as if afraid?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-B01 [Default]

Default Next Question: ACT-B03

ACT-B03

When you leave the room and leave *him/her* alone, how often does *he/she* become upset?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-B02 [Default]

Default Next Question: ACT-B04

ACT-B04

When you take *Child First Name* to the doctor, dentist or nurse, how often does *he/she* turn away or cry as if afraid?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-B03 [Default]

Default Next Question: ACT-B05

ACT-B05

When you play with *Child First Name*, how often does *he/she* smile or laugh?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-B04 [Default]

Default Next Question: ACT-B06

ACT-B06

When *he/she* plays alone, how often does *he/she* smile or laugh?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-B05 [Default]

Default Next Question: ACT-B07

ACT-B07

When *he/she* is in the bath, how often does *he/she* smile or laugh?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-B06 [Default]

Default Next Question: ACT-B08

ACT-B08

When *Child First Name* hears an unexpected loud sound (for example, a car back-firing or a vacuum cleaner), how often does *he/she* cry or become upset?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-B07 [Default]

Default Next Question: ACT-B09

ACT-B09

How often do you have trouble soothing or calming *him/her* when *he/she* is crying or upset?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-B08 [Default]

Default Next Question: ACT-B10

ACT-B10

The answer choices change a little here....

During the average day, how often does *Child First Name* get fussy and irritable?

Would you say...

- 1 Almost never
- 2 Once or twice a day
- 3 A couple of times a.m. & p.m.
- 4 Several times a day
- 5 Almost every hour

Lead In(s): ACT-B09 [Default]

Default Next Question: ACT-B11

ACT-B11

In general, compared with most toddlers, how often does *Child First Name* cry and fuss?

Would that be...

- 1 Almost never
- 2 Less than average
- 3 About average
- 4 More than average
- 5 Almost always

Lead In(s): ACT-B10 [Default]

Default Next Question: ACT-END

Age 2-3 Years (24-47 Months)

ACT-C01

(The following questions ask about how often *Child First Name* acted in a certain way.)

When it is mealtime, how often does *Child First Name* eat what you want *him/her* to eat?

Would that be...

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-AGECK [24:47]

Default Next Question: ACT-C02

ACT-C02

When *Child First Name* doesn't eat what you want *him/her* to eat and you tell *him/her* to do so, how often does *he/she* obey and eat?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-C01 [Default]

Default Next Question: ACT-C03

ACT-C03

When it is *Child First Name's* bedtime, how often does *he/she* protest or resist going to bed?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-C02 [Default]

Default Next Question: ACT-C04

ACT-C04

When *he/she* does protest and you tell *him/her* again to go to bed, how often does *he/she* do so?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-C03 [Default]

Default Next Question: ACT-C05

ACT-C05

When you tell *Child First Name* to turn off the TV, how often does *he/she* do so without protest?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-C04 [Default]

Default Next Question: ACT-C06

ACT-C06

When *he/she* does protest and you tell *him/her* again to turn off the TV, how often does *he/she* do so?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-C05 [Default]

Default Next Question: ACT-C07

ACT-C07

When *Child First Name* meets a new child about the same age, how often is *he/she* shy at first?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-C06 [Default]

Default Next Question: ACT-C08

ACT-C08

When *he/she* meets an adult *he/she* does not know, how often is *he/she* shy at first?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-C07 [Default]

Default Next Question: ACT-C09

ACT-C09

How often does *Child First Name* cry when *he/she* hurts *him/herself* a little bit?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-C08 [Default]

Default Next Question: ACT-C10

ACT-C10

How often does *he/she* laugh and smile easily (for example, when no one is touching *him/her*)?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-C09 [Default]

Default Next Question: ACT-C11

ACT-C11

When *Child First Name* is with other children *his/her* own age, how often does *he/she* fight, take toys, hit, and so on?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-C10 [Default]

Default Next Question: ACT-C12

ACT-C12

When *he/she* is with other children *his/her* own age, how often does *he/she* willingly share toys?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-C11 [Default]

Default Next Question: ACT-C13

ACT-C13

How often do you have trouble soothing or calming *Child First Name* when *he/she* is upset?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-C12 [Default]

Default Next Question: ACT-C14

ACT-C14

When *Child First Name* is playing, how often does *he/she* stay close to you and make sure that *he/she* can still see you?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-C13 [Default]

Default Next Question: ACT-C15

ACT-C15

How often does *he/she* try to copy what you do or how you act? (You may not always allow *him/her* to do this.)

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-C14 [Default]

Default Next Question: ACT-C16

ACT-C16

When you leave the room and leave *Child First Name* alone, how often does *he/she* get upset?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-C15 [Default]

Default Next Question: ACT-C17

ACT-C17

How often is *Child First Name* demanding and impatient even when you are busy?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-C16 [Default]

Default Next Question: ACT-C18

ACT-C18

When you get upset about something, how often does *he/she* get worried, or try to help, or make you feel better?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-C17 [Default]

Default Next Question: ACT-C19

ACT-C19

How often does *Child First Name* want you to help with the things *he/she* is doing?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-C18 [Default]

Default Next Question: ACT-C20

ACT-C20

During the past year, how often has *Child First Name* slept through the night?

(Would that be...)

- 1 Almost never
- 2 Less than 1/2 the time
- 3 1/2 the time
- 4 More than 1/2 the time
- 5 Almost always

Lead In(s): ACT-C19 [Default]

Default Next Question: ACT-END

ACT-END

(1); /* End Of Temperament (How My Child Usually Acts) Assessment */

Lead In(s): ACT-A17 [Default], ACT-B11 [Default], ACT-C20 [Default]

Default Next Question: MSD-INTRO

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MOTOR & SOCIAL DEVELOPMENT

AGES: BIRTH – 47 MONTHS

MSD-INTRO

INTERVIEWER: THE FOLLOWING SECTION IS A CHILD ASSESSMENT. IT IS VITAL THAT YOU COMPLETE ALL QUESTIONS IN THIS SECTION.

READ TO MOTHER

This section asks you questions about things children do at different ages.

Lead In(s): ACT-END [Default]

Default Next Question: MSD-AGECK

MSD-AGECK

(*CHILD AGE IN MONTHS*);

If Answer >=0 and Answer <=3 Then Go To: MSD-A01

If Answer >=4 and Answer <=6 Then Go To: MSD-B01

If Answer >=7 and Answer <=9 Then Go To: MSD-C01

If Answer >=10 and Answer <=12 Then Go To: MSD-D01

If Answer >=13 and Answer <=15 Then Go To: MSD-E01

If Answer >=16 and Answer <=18 Then Go To: MSD-F01

If Answer >=19 and Answer <=21 Then Go To: MSD-G01

If Answer >=22 and Answer <=47 Then Go To: MSD-H01

Lead In(s): MSD-INTRO [Default]

Default Next Question: CS-MASS-END

Children 0-3 Months

MSD-A01

When lying on *his/her* stomach, has *Child First Name* ever turned *his/her* head from side to side?

1 Yes

0 No

Lead In(s): MSD-AGECK [0:3]

Default Next Question: MSD-A02

MSD-A02

Have *Child First Name*'s eyes ever followed a moving object?

1 Yes

0 No

Lead In(s): MSD-A01 [Default]

Default Next Question: MSD-A03

MSD-A03

When lying on *his/her* stomach on a flat surface, has *Child First Name* ever lifted *his/her* head off the surface for a moment?

1 Yes

0 No

Lead In(s): MSD-A02 [Default]

Default Next Question: MSD-A04

MSD-A04

Have *Child First Name*'s eyes ever followed a moving object all the way from one side to the other?

1 Yes

0 No

Lead In(s): MSD-A03 [Default]

Default Next Question: MSD-A05

MSD-A05

Has *Child First Name* ever smiled at someone when that person talked to or smiled at (but did not touch) *him/her*?

1 Yes

0 No

Lead In(s): MSD-A04 [Default]

Default Next Question: MSD-A06

MSD-A06

When lying on *his/her* stomach, has *Child First Name* ever raised *his/her* head AND chest from the surface while resting *his/her* weight on *his/her* lower arms or hands?

1 Yes

0 No

Lead In(s): MSD-A05 [Default]

Default Next Question: MSD-A07

MSD-A07

Has *Child First Name* ever turned *his/her* head around to look at something?

- 1 Yes
0 No

Lead In(s): MSD-A06 [Default]
Default Next Question: MSD-A08

MSD-A08

While lying on *his/her* back and being pulled up to a sitting position, did *Child First Name* ever hold *his/her* head stiffly so that it DID NOT hang back as *he/she* was pulled up?

- 1 Yes
0 No

Lead In(s): MSD-A07 [Default]
Default Next Question: MSD-A09

MSD-A09

Has *he/she* ever laughed out loud without being tickled or touched?

- 1 Yes
0 No

Lead In(s): MSD-A08 [Default]
Default Next Question: MSD-A10

MSD-A10

Has *Child First Name* ever held in one hand a moderate size object such as a block or a rattle?

- 1 Yes
0 No

Lead In(s): MSD-A09 [Default]
Default Next Question: MSD-A11

MSD-A11

Has *Child First Name* ever rolled over on *his/her* own ON PURPOSE?

- 1 Yes
0 No

Lead In(s): MSD-A10 [Default]
Default Next Question: MSD-A12

MSD-A12

Has *he/she* ever seemed to enjoy looking in the mirror at *him/her* self?

- 1 Yes
- 0 No

Lead In(s): MSD-A11 [Default]
Default Next Question: MSD-A13

MSD-A13

Has *Child First Name* ever been pulled from a sitting to a standing position and supported *his/her* own weight with legs stretched out?

- 1 Yes
- 0 No

Lead In(s): MSD-A12 [Default]
Default Next Question: MSD-A14

MSD-A14

Has *Child First Name* ever looked around with *his/her* eyes for a toy which was lost or not nearby?

- 1 Yes
- 0 No

Lead In(s): MSD-A13 [Default]
Default Next Question: MSD-A15

MSD-A15

Has *he/she* ever sat alone with no help except for leaning forward on *his/her* hands or with just a little help from someone else?

- 1 Yes
- 0 No

Lead In(s): MSD-A14 [Default]
Default Next Question: MSD-END

Children 4-6 Months

MSD-B01

While lying on *his/her* back and being pulled up to a sitting position, has *Child First Name* ever held *his/her* head stiffly so that it DID NOT hang back as *he/she* was pulled up?

- 1 Yes
- 0 No

Lead In(s): MSD-AGECK [4:6]
Default Next Question: MSD-B02

MSD-B02

Has *Child First Name* ever laughed out loud without being tickled or touched?

- 1 Yes
- 0 No

Lead In(s): MSD-B01 [Default]
Default Next Question: MSD-B03

MSD-B03

Has *he/she* ever held in one hand a moderate size object such as a block or a rattle?

- 1 Yes
- 0 No

Lead In(s): MSD-B02 [Default]
Default Next Question: MSD-B04

MSD-B04

Has *Child First Name* ever rolled over on *his/her* own ON PURPOSE?

- 1 Yes
- 0 No

Lead In(s): MSD-B03 [Default]
Default Next Question: MSD-B05

MSD-B05

Has *Child First Name* ever seemed to enjoy looking in the mirror at *him/herself*?

- 1 Yes
- 0 No

Lead In(s): MSD-B04 [Default]
Default Next Question: MSD-B06

MSD-B06

Has *he/she* ever been pulled from a sitting to a standing position and supported *his/her* own weight with legs stretched out?

- 1 Yes
0 No

Lead In(s): MSD-B05 [Default]
Default Next Question: MSD-B07

MSD-B07

Has *Child First Name* ever looked around with *his/her* eyes for a toy which was lost or not nearby?

- 1 Yes
0 No

Lead In(s): MSD-B06 [Default]
Default Next Question: MSD-B08

MSD-B08

Has *Child First Name* ever sat alone with no help except for leaning forward on *his/her* hands or with just a little help from someone else?

- 1 Yes
0 No

Lead In(s): MSD-B07 [Default]
Default Next Question: MSD-B09

MSD-B09

Has *he/she* ever sat for 10 minutes without any support at all?

- 1 Yes
0 No

Lead In(s): MSD-B08 [Default]
Default Next Question: MSD-B10

MSD-B10

Has *Child First Name* ever pulled *him/herself* to a standing position without help from another person?

- 1 Yes
0 No

Lead In(s): MSD-B09 [Default]
Default Next Question: MSD-B11

MSD-B11

Has *Child First Name* ever crawled when left lying on *his/her* stomach?

- 1 Yes
0 No

Lead In(s): MSD-B10 [Default]
Default Next Question: MSD-B12

MSD-B12

Has *he/she* ever said any recognizable words such as "mama" or "dada"?

- 1 Yes
0 No

Lead In(s): MSD-B11 [Default]
Default Next Question: MSD-B13

MSD-B13

Has *Child First Name* ever picked up small objects such as raisins or cookie crumbs, using only *his/her* thumb and first finger?

- 1 Yes
0 No

Lead In(s): MSD-B12 [Default]
Default Next Question: MSD-B14

MSD-B14

Has *Child First Name* ever walked at least 2 steps with one hand held or holding on to something?

- 1 Yes
0 No

Lead In(s): MSD-B13 [Default]
Default Next Question: MSD-B15

MSD-B15

Has *he/she* ever waved good-bye without help from another person?

- 1 Yes
0 No

Lead In(s): MSD-B14 [Default]
Default Next Question: MSD-END

Children 7-9 Months

MSD-C01

Has *Child First Name* ever seemed to enjoy looking in the mirror at *him/her* self?

- 1 Yes
- 0 No

Lead In(s): MSD-AGECK [7:9]
Default Next Question: MSD-C02

MSD-C02

Has *Child First Name* ever been pulled from a sitting to a standing position and supported *his/her* own weight with legs stretched out?

- 1 Yes
- 0 No

Lead In(s): MSD-C01 [Default]
Default Next Question: MSD-C03

MSD-C03

Has *he/she* ever looked around with *his/her* eyes for a toy which was lost or not nearby?

- 1 Yes
- 0 No

Lead In(s): MSD-C02 [Default]
Default Next Question: MSD-C04

MSD-C04

Has *Child First Name* ever sat alone with no help except for leaning forward on *his/her* hands or with just a little help from someone else?

- 1 Yes
- 0 No

Lead In(s): MSD-C03 [Default]
Default Next Question: MSD-C05

MSD-C05

Has *Child First Name* ever sat for 10 minutes without any support at all?

- 1 Yes
0 No

Lead In(s): MSD-C04 [Default]
Default Next Question: MSD-C06

MSD-C06

Has *he/she* ever pulled *him/herself* to a standing position without help from another person?

- 1 Yes
0 No

Lead In(s): MSD-C05 [Default]
Default Next Question: MSD-C07

MSD-C07

Has *Child First Name* ever crawled when left lying on *his/her* stomach?

- 1 Yes
0 No

Lead In(s): MSD-C06 [Default]
Default Next Question: MSD-C08

MSD-C08

Has *Child First Name* ever said any recognizable words such as "mama" or "dada"?

- 1 Yes
0 No

Lead In(s): MSD-C07 [Default]
Default Next Question: MSD-C09

MSD-C09

Has *he/she* ever picked up small objects such as raisins or cookie crumbs, using only *his/her* thumb and first finger?

- 1 Yes
0 No

Lead In(s): MSD-C08 [Default]
Default Next Question: MSD-C10

MSD-C10

Has *Child First Name* ever walked at least 2 steps with one hand held or holding on to something?

- 1 Yes
0 No

Lead In(s): MSD-C09 [Default]
Default Next Question: MSD-C11

MSD-C11

Has *Child First Name* ever waved good-bye without help from another person?

- 1 Yes
0 No

Lead In(s): MSD-C10 [Default]
Default Next Question: MSD-C12

MSD-C12

Has *Child First Name* ever shown by *his/her* behavior that *he/she* knows the names of common objects when somebody else names them out loud?

- 1 Yes
0 No

Lead In(s): MSD-C11 [Default]
Default Next Question: MSD-C13

MSD-C13

Has *Child First Name* ever shown that *he/she* wanted something by pointing, pulling, or making pleasant sounds rather than crying or whining?

- 1 Yes
0 No

Lead In(s): MSD-C12 [Default]
Default Next Question: MSD-C14

MSD-C14

Has *Child First Name* ever stood alone on *his/her* feet for 10 seconds or more without holding on to anything or another person?

- 1 Yes
0 No

Lead In(s): MSD-C13 [Default]
Default Next Question: MSD-C15

MSD-C15

Has *he/she* ever walked at least 2 steps without holding on to anything or another person?

- 1 Yes
0 No

Lead In(s): MSD-C14 [Default]
Default Next Question: MSD-END

Children 10-12 Months

MSD-D01

Has *Child First Name* ever crawled when left lying on *his/her* stomach?

- 1 Yes
0 No

Lead In(s): MSD-AGECK [10:12]
Default Next Question: MSD-D02

MSD-D02

Has *Child First Name* ever said any recognizable words such as "mama" or "dada"?

- 1 Yes
0 No

Lead In(s): MSD-D01 [Default]
Default Next Question: MSD-D03

MSD-D03

Has *he/she* ever picked up small objects such as raisins or cookie crumbs, using only *his/her* thumb and first finger?

- 1 Yes
0 No

Lead In(s): MSD-D02 [Default]
Default Next Question: MSD-D04

MSD-D04

Has *Child First Name* ever walked at least 2 steps with one hand held or holding on to something?

- 1 Yes
0 No

Lead In(s): MSD-D03 [Default]
Default Next Question: MSD-D05

MSD-D05

Has *Child First Name* ever waved good-bye without help from another person?

- 1 Yes
- 0 No

Lead In(s): MSD-D04 [Default]
Default Next Question: MSD-D06

MSD-D06

Has *Child First Name* ever shown by *his/her* behavior that *he/she* knows the names of common objects when somebody else names them out loud?

- 1 Yes
- 0 No

Lead In(s): MSD-D05 [Default]
Default Next Question: MSD-D07

MSD-D07

Has *Child First Name* ever shown that *he/she* wanted something by pointing, pulling, or making pleasant sounds rather than crying or whining?

- 1 Yes
- 0 No

Lead In(s): MSD-D06 [Default]
Default Next Question: MSD-D08

MSD-D08

Has *Child First Name* ever stood alone on *his/her* feet for 10 seconds or more without holding on to anything or another person?

- 1 Yes
- 0 No

Lead In(s): MSD-D07 [Default]
Default Next Question: MSD-D09

MSD-D09

Has *he/she* ever walked at least 2 steps without holding on to anything or another person?

- 1 Yes
- 0 No

Lead In(s): MSD-D08 [Default]
Default Next Question: MSD-D10

MSD-D10

Has *Child First Name* ever crawled up at least 2 stairs or steps?

- 1 Yes
0 No

Lead In(s): MSD-D09 [Default]
Default Next Question: MSD-D11

MSD-D11

Has *Child First Name* said 2 recognizable words besides "mama" and "dada"?

- 1 Yes
0 No

Lead In(s): MSD-D10 [Default]
Default Next Question: MSD-D12

MSD-D12

Has *he/she* ever run?

- 1 Yes
0 No

Lead In(s): MSD-D11 [Default]
Default Next Question: MSD-D13

MSD-D13

Has *Child First Name* ever said the name of a familiar object, such as a ball?

- 1 Yes
0 No

Lead In(s): MSD-D12 [Default]
Default Next Question: MSD-D14

MSD-D14

Has *Child First Name* ever made a line with a crayon or pencil?

- 1 Yes
0 No

Lead In(s): MSD-D13 [Default]
Default Next Question: MSD-D15

MSD-D15

Did *he/she* ever walk up at least 2 stairs with one hand held or holding the railing?

- 1 Yes
- 0 No

Lead In(s): MSD-D14 [Default]
Default Next Question: MSD-END

Children 13-15 Months

MSD-E01

Has *Child First Name* ever waved good-bye without help from another person?

- 1 Yes
- 0 No

Lead In(s): MSD-AGECK [13:15]
Default Next Question: MSD-E02

MSD-E02

Has *Child First Name* ever shown by *his/her* behavior that *he/she* knows the names of common objects when somebody else names them out loud?

- 1 Yes
- 0 No

Lead In(s): MSD-E01 [Default]
Default Next Question: MSD-E03

MSD-E03

Has *he/she* ever shown that *he/she* wanted something by pointing, pulling, or making pleasant sounds rather than crying or whining?

- 1 Yes
- 0 No

Lead In(s): MSD-E02 [Default]
Default Next Question: MSD-E04

MSD-E04

Has *Child First Name* ever stood alone on *his/her* feet for 10 seconds or more without holding on to anything or another person?

- 1 Yes
0 No

Lead In(s): MSD-E03 [Default]
Default Next Question: MSD-E05

MSD-E05

Has *Child First Name* ever walked at least 2 steps without holding on to anything or another person?

- 1 Yes
0 No

Lead In(s): MSD-E04 [Default]
Default Next Question: MSD-E06

MSD-E06

Has *he/she* ever crawled up at least 2 stairs or steps?

- 1 Yes
0 No

Lead In(s): MSD-E05 [Default]
Default Next Question: MSD-E07

MSD-E07

Has *Child First Name* said 2 recognizable words besides "mama" and "dada"?

- 1 Yes
0 No

Lead In(s): MSD-E06 [Default]
Default Next Question: MSD-E08

MSD-E08

Has *Child First Name* ever run?

- 1 Yes
0 No

Lead In(s): MSD-E07 [Default]
Default Next Question: MSD-E09

MSD-E09

Has *he/she* ever said the name of a familiar object such as a ball?

- 1 Yes
- 0 No

Lead In(s): MSD-E08 [Default]

Default Next Question: MSD-E10

MSD-E10

Has *Child First Name* ever made a line with a crayon or pencil?

- 1 Yes
- 0 No

Lead In(s): MSD-E09 [Default]

Default Next Question: MSD-E11

MSD-E11

Did *Child First Name* ever walk up at least 2 stairs with one hand held or holding the railing?

- 1 Yes
- 0 No

Lead In(s): MSD-E10 [Default]

Default Next Question: MSD-E12

MSD-E12

Has *he/she* ever fed *him/herself* with a spoon or fork without spilling much?

- 1 Yes
- 0 No

Lead In(s): MSD-E11 [Default]

Default Next Question: MSD-E13

MSD-E13

Has *Child First Name* ever let someone know, without crying, that wearing wet (soiled) pants or diapers bothered *him/her*?

- 1 Yes
- 0 No

Lead In(s): MSD-E12 [Default]

Default Next Question: MSD-E14

MSD-E14

Has *Child First Name* ever spoken a partial sentence of 3 words or more?

- 1 Yes
0 No

Lead In(s): MSD-E13 [Default]
Default Next Question: MSD-E15

MSD-E15

Has *he/she* ever walked up stairs by *him/herself* without holding on to a rail?

- 1 Yes
0 No

Lead In(s): MSD-E14 [Default]
Default Next Question: MSD-END

Children 16-18 Months

MSD-F01

Has *Child First Name* ever walked at least 2 steps without holding on to anything or another person?

- 1 Yes
0 No

Lead In(s): MSD-AGECK [16:18]
Default Next Question: MSD-F02

MSD-F02

Has *Child First Name* ever crawled up at least 2 stairs or steps?

- 1 Yes
0 No

Lead In(s): MSD-F01 [Default]
Default Next Question: MSD-F03

MSD-F03

Has *he/she* said 2 recognizable words besides "mama" and "dada"?

- 1 Yes
- 0 No

Lead In(s): MSD-F02 [Default]

Default Next Question: MSD-F04

MSD-F04

Has *Child First Name* ever run?

- 1 Yes
- 0 No

Lead In(s): MSD-F03 [Default]

Default Next Question: MSD-F05

MSD-F05

Has *Child First Name* ever said the name of a familiar object such as a ball?

- 1 Yes
- 0 No

Lead In(s): MSD-F04 [Default]

Default Next Question: MSD-F06

MSD-F06

Has *he/she* ever made a line with a crayon or pencil?

- 1 Yes
- 0 No

Lead In(s): MSD-F05 [Default]

Default Next Question: MSD-F07

MSD-F07

Did *Child First Name* ever walk up at least 2 stairs with one hand held or holding the railing?

- 1 Yes
- 0 No

Lead In(s): MSD-F06 [Default]

Default Next Question: MSD-F08

MSD-F08

Has *Child First Name* ever fed *him/herself* with a spoon or fork without spilling much?

- 1 Yes
0 No

Lead In(s): MSD-F07 [Default]
Default Next Question: MSD-F09

MSD-F09

Has *he/she* ever let someone know, without crying, that wearing wet (soiled) pants or diapers bothered *him/her*?

- 1 Yes
0 No

Lead In(s): MSD-F08 [Default]
Default Next Question: MSD-F10

MSD-F10

Has *Child First Name* ever spoken in a partial sentence of 3 words or more?

- 1 Yes
0 No

Lead In(s): MSD-F09 [Default]
Default Next Question: MSD-F11

MSD-F11

Has *Child First Name* ever walked upstairs by *him/herself* without holding on to a rail?

- 1 Yes
0 No

Lead In(s): MSD-F10 [Default]
Default Next Question: MSD-F12

MSD-F12

Has *he/she* ever washed and dried *his/her* hands without any help except for turning the water on and off?

- 1 Yes
0 No

Lead In(s): MSD-F11 [Default]
Default Next Question: MSD-F13

MSD-F13

Has *Child First Name* ever counted 3 objects correctly?

- 1 Yes
- 0 No

Lead In(s): MSD-F12 [Default]

Default Next Question: MSD-F14

MSD-F14

Has *Child First Name* ever gone to the toilet alone?

- 1 Yes
- 0 No

Lead In(s): MSD-F13 [Default]

Default Next Question: MSD-F15

MSD-F15

Has *he/she* ever walked up stairs by *him/herself* with no help, stepping on each step with only one foot?

- 1 Yes
- 0 No

Lead In(s): MSD-F14 [Default]

Default Next Question: MSD-END

Children 19-21 Months

MSD-G01

Has *Child First Name* ever run?

- 1 Yes
- 0 No

Lead In(s): MSD-AGECK [19:21]

Default Next Question: MSD-G02

MSD-G02

Has *Child First Name* ever said the name of a familiar object such as a ball?

- 1 Yes
0 No

Lead In(s): MSD-G01 [Default]
Default Next Question: MSD-G03

MSD-G03

Has *he/she* ever made a line with a crayon or pencil?

- 1 Yes
0 No

Lead In(s): MSD-G02 [Default]
Default Next Question: MSD-G04

MSD-G04

Did *Child First Name* ever walk up at least 2 stairs with one hand held or holding the railing?

- 1 Yes
0 No

Lead In(s): MSD-G03 [Default]
Default Next Question: MSD-G05

MSD-G05

Has *Child First Name* ever fed *him/herself* with a spoon or fork without spilling much?

- 1 Yes
0 No

Lead In(s): MSD-G04 [Default]
Default Next Question: MSD-G06

MSD-G06

Has *he/she* ever let someone know, without crying, that wearing wet (soiled) pants or diapers bothered *him/her*?

- 1 Yes
0 No

Lead In(s): MSD-G05 [Default]
Default Next Question: MSD-G07

MSD-G07

Has *Child First Name* ever spoken in a partial sentence of 3 words or more?

- 1 Yes
- 0 No

Lead In(s): MSD-G06 [Default]
Default Next Question: MSD-G08

MSD-G08

Has *Child First Name* ever walked up stairs by *him/herself* without holding on to a rail?

- 1 Yes
- 0 No

Lead In(s): MSD-G07 [Default]
Default Next Question: MSD-G09

MSD-G09

Has *he/she* ever washed and dried *his/her* hands without any help except for turning the water on and off?

- 1 Yes
- 0 No

Lead In(s): MSD-G08 [Default]
Default Next Question: MSD-G10

MSD-G10

Has *Child First Name* ever counted 3 objects correctly?

- 1 Yes
- 0 No

Lead In(s): MSD-G09 [Default]
Default Next Question: MSD-G11

MSD-G11

Has *Child First Name* ever gone to the toilet alone?

- 1 Yes
- 0 No

Lead In(s): MSD-G10 [Default]
Default Next Question: MSD-G12

MSD-G12

Has *he/she* ever walked up stairs by *him/herself* with no help, stepping on each step with only one foot?

- 1 Yes
- 0 No

Lead In(s): MSD-G11 [Default]
Default Next Question: MSD-G13

MSD-G13

Does *Child First Name* know *his/her* own age AND sex?

- 1 Yes
- 0 No

Lead In(s): MSD-G12 [Default]
Default Next Question: MSD-G14

MSD-G14

Has *Child First Name* ever said the names of at least 4 colors?

- 1 Yes
- 0 No

Lead In(s): MSD-G13 [Default]
Default Next Question: MSD-G15

MSD-G15

Has *he/she* ever pedaled a tricycle at least 10 feet?

- 1 Yes
- 0 No

Lead In(s): MSD-G14 [Default]
Default Next Question: MSD-END

Children 22-47 Months

MSD-H01

Has *Child First Name* ever let someone know, without crying, that wearing wet (soiled) pants or diapers bothered *him/her*?

- 1 Yes
- 0 No

Lead In(s): MSD-AGECK [22:47]

Default Next Question: MSD-H02

MSD-H02

Has *Child First Name* ever spoken a partial sentence of 3 words or more?

- 1 Yes
- 0 No

Lead In(s): MSD-H01 [Default]

Default Next Question: MSD-H03

MSD-H03

Has *he/she* ever walked up stairs by *him/herself* without holding on to a rail?

- 1 Yes
- 0 No

Lead In(s): MSD-H02 [Default]

Default Next Question: MSD-H04

MSD-H04

Has *Child First Name* ever washed and dried *his/her* hands without any help except for turning the water on and off?

- 1 Yes
- 0 No

Lead In(s): MSD-H03 [Default]

Default Next Question: MSD-H05

MSD-H05

Has *Child First Name* ever counted 3 objects correctly?

- 1 Yes
0 No

Lead In(s): MSD-H04 [Default]
Default Next Question: MSD-H06

MSD-H06

Has *he/she* ever gone to the toilet alone?

- 1 Yes
0 No

Lead In(s): MSD-H05 [Default]
Default Next Question: MSD-H07

MSD-H07

Has *Child First Name* ever walked up stairs by *him/herself* with no help, stepping on each step with only one foot?

- 1 Yes
0 No

Lead In(s): MSD-H06 [Default]
Default Next Question: MSD-H08

MSD-H08

Does *Child First Name* know *his/her* own age AND sex?

- 1 Yes
0 No

Lead In(s): MSD-H07 [Default]
Default Next Question: MSD-H09

MSD-H09

Has *he/she* ever said the names of at least 4 colors?

- 1 Yes
0 No

Lead In(s): MSD-H08 [Default]
Default Next Question: MSD-H10

MSD-H10

Has *Child First Name* ever pedaled a tricycle at least 10 feet?

- 1 Yes
0 No

Lead In(s): MSD-H09 [Default]
Default Next Question: MSD-H11

MSD-H11

Has *Child First Name* ever done a somersault without help from anybody?

- 1 Yes
0 No

Lead In(s): MSD-H10 [Default]
Default Next Question: MSD-H12

MSD-H12

Has *he/she* ever dressed *him/herself* without any help except for *tying shoes/tying shoes and buttoning the backs of dresses*?

- 1 Yes
0 No

Lead In(s): MSD-H11
Default Next Question: MSD-H13

MSD-H13

Has *Child First Name* ever said *his/her* first and last name together without someone's help? (Nickname may be used for first name.)

- 1 Yes
0 No

Lead In(s): MSD-H12 [Default]
Default Next Question: MSD-H14

MSD-H14

Has *Child First Name* ever counted out loud up to 10?

- 1 Yes
0 No

Lead In(s): MSD-H13 [Default]
Default Next Question: MSD-H15

MSD-H15

Has *he/she* ever drawn a picture of a man or woman with at least 2 parts of the body besides a head?

1 Yes

0 No

Lead In(s): MSD-H14 [Default]

Default Next Question: MSD-END

MSD-END

(I); /*End of Motor & Social Development Assessment*/

Lead In(s): MSD-A15 [Default], MSD-B15 [Default], MSD-C15 [Default], MSD-D15 [Default], MSD-E15 [Default], MSD-F15 [Default], MSD-G15 [Default], MSD-H15 [Default]

Default Next Question: CS-MASS-END

CS-MASS-END

(I); /* End of Mother Supplement – Report Assessment Items */

Lead In(s): CS-AGECK4 [Default], HOME-AGECK [Default], ACT-AGECK [Default], MSD-AGECK [Default], MSD-END [Default]

Default Next Question: HLTH-TITLE2

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HEALTH – HEIGHT/WEIGHT

HLTH-TITLE2

SET NAME (HEADERINDEX2, "CHILD HEALTH");

/ Header */*

Lead In(s): CS-MASS-END [Default]
Default Next Question: HLTH-AGECK1

HLTH-AGECK1

((CHILD AGE (YEARS) < 3) OR ((CHILD AGE (YEARS) = 3) AND (MONTHS < 11)) OR ((CHILD AGE (YEARS) = 3) AND (MONTHS = 11) AND (DAYS < 16)));

/ If child age is less than 3 yrs, 11 months, 16 days skip to HLTH-22A */*

If Answer =1 Then Go To: HLTH-22A1
Lead In(s): HLTH-TITLE2 [Default]
Default Next Question: HLTH-TELCHK-A

HLTH-TELCHK-A

(INTERVIEW MODE=2);

If Answer =1 Then Go To: HLTH-TELCHK-B
Lead In(s): HLTH-AGECK1 [Default]
Default Next Question: HLTH-21A

HLTH-TELCHK-B

INTERVIEWER: THIS CASE HAS BEEN CODED AS A TELEPHONE INTERVIEW. DO YOU PLAN TO ADMINISTER ANY ASSESSMENTS TO *CHILD FULL NAME* AT ALL?

1 YES
0 NO ...(Go To HLTH-22A1)

Lead In(s): HLTH-TELCHK-A [1:1]
Default Next Question: HLTH-INT-NOTE

HLTH-INT-NOTE

RESTART NOTE FOR TELEPHONE INTERVIEWS!

INTERVIEWER: IF YOU PLAN TO ASSESS THE CHILD, EXIT THE INTERVIEW AT THE NEXT SCREEN AND RESTART THE INTERVIEW IN PERSON.

PRESS <F1> FOR HELP, OR <ENTER> TO CONTINUE.

Lead In(s): HLTH-TELCHK-B [Default]

Default Next Question: HLTH-SET-RESTART

HELP SCREEN: HELP-PHONE-NOTE

HLTH-SET-RESTART

(1);

/* Set value for restart place holder */

Lead In(s): HLTH-INT-NOTE [Default]

Default Next Question: HLTH-RESTART-A

HELP SCREEN: HELP-PHONE-NOTE

HLTH-RESTART-A

EXIT/RESTART POINT

INTERVIEWER: IF YOU PLAN TO ASSESS THE CHILD, EXIT THE INTERVIEW FROM THIS SCREEN NOW. RESTART THE INTERVIEW IN PERSON AT THIS POINT.

PRESS <F1> FOR HELP, <F10> TO EXIT NOW, OR <ENTER> TO CONTINUE IF YOU HAVE RESTARTED THE INTERVIEW.

Lead In(s): HLTH-SET-RESTART [Default]

Default Next Question: HLTH-RESTART-B

HELP SCREEN: HELP-PHONE-NOTE

HLTH-RESTART-B

RESTART

INTERVIEWER: SELECT INTERVIEW MODE TO CONFIRM YOU ARE RESTARTING THE INTERVIEW IN PERSON.

1 IN PERSON

2 TELEPHONE ...(Go To HLTH-22A1)

Lead In(s): HLTH-RESTART-A [Default]

Default Next Question: HLTH-21A

Save Symbol: *INTERVIEW MODE*

HLTH-21A

INTERVIEWER: DOES CHILD HAVE ANY SERIOUS HEALTH LIMITATIONS THAT WOULD AFFECT TESTING? IF YES, RECORD CONDITION IN COMMENT FIELD.

- 1 YES ...(Go To HLTH-21B)
- 0 NO

Lead In(s): HLTH-TELCHK-A [Default], HLTH-RESTART-B [Default]
Default Next Question: HLTH-CONSENT-A

HLTH-21B

INTERVIEWER: IF CHILD HAS A SERIOUS PHYSICAL OR MENTAL CONDITION THAT MAY INFLUENCE MEASUREMENT, TACTFULLY TELL MOTHER THAT SOME MEASUREMENTS MAY BE INAPPROPRIATE FOR THE CHILD BUT YOU WILL ADMINISTER THE ONES YOU CAN.

Lead In(s): HLTH-21A [1:1]
Default Next Question: HLTH-CONSENT-A

HLTH-CONSENT-A

INTERVIEWER: PLEASE ASK R TO SIGN A CONSENT FORM FOR *CHILD FULL NAME* TO PARTICIPATE IN THE CHILD SURVEY. RECORD R'S REPONSE BELOW.

- 1 R SIGNED FORM ...(Go To HLTH-22A1)
- 2 R REFUSED TO SIGN FORM

Lead In(s): HLTH-21A [Default], HLTH-21B [Default]
Default Next Question: HLTH-CONSENT-B

Save Symbol: *CONSENT FLAG*

HLTH-CONSENT-B

INTERVIEWER: PLEASE EXPLAIN TO MOTHER THAT WITHOUT A CONSENT FORM THIS CHILD CANNOT PARTICIPATE IN THE CHILD SURVEY. RECORD HER RESPONSE BELOW. IF SHE STILL REFUSES TO SIGN, CONTINUE WITH QUESTIONS TO MOTHER, BUT DO NOT ASSESS CHILD.

- 1 R SIGNED FORM
- 2 R REFUSED TO SIGN FORM

Lead In(s): HLTH-CONSENT-A [Default]
Default Next Question: HLTH-22A1

Save Symbol: *CONSENT FLAG*

HLTH-23

(INTERVIEWER: IF CHILD IS NOT ALREADY PRESENT, READ TO MOTHER:) Could you please bring *Child First Name* into the room and help me make *him/her* feel comfortable?

Lead In(s): HLTH-22B [Default]
Default Next Question: HLTH-24A

HLTH-24A

(CONSENT FLAG=1) AND (((CHILD AGE (YEARS) = 3) AND (MONTHS = 11) AND (DAYS >= 16)) OR (CHILD AGE (YEARS) >= 4));

/ Check: child age 3 yrs, 11 months, 16 days or older AND mother signed consent form? */*

If Answer =0 Then Go To: HLTH-HGT-FT

Lead In(s): HLTH-23 [Default]

Default Next Question: HLTH-24B

HLTH-24B

(CHILD AGE (YEARS) >= 5);

/ (If child is between 3 yrs, 11 months, 16 days and 4 yrs read A. If child is 5 yrs or older read B.) */*

If Answer =1 Then Go To: HLTH-25B

Lead In(s): HLTH-24A [Default]

Default Next Question: HLTH-25A

HLTH-25A

What did your mother tell you about my visit?

(WAIT FOR CHILD'S RESPONSE, THEN CONTINUE:) (That's right or I see.) Your mother has been helping us by answering some questions. Now it's your turn. First we'll see how big you are and then I'll ask you some questions. I want you to give me the best answers you can.

Lead In(s): HLTH-24B [Default]

Default Next Question: HLTH-HGT-FT

HLTH-25B

What did your mother tell you about my visit?

(WAIT FOR CHILD'S RESPONSE, THEN CONTINUE:) (That's right or I see.) Your mother has been helping us by answering questions for many years now. This makes her a very important person to us. Now we have some questions for you. Some are about language, some are about arithmetic/math, and some are about how you feel. Some questions have right or wrong answers, others don't. I want you to concentrate on the questions and give me your best answer for each one.

Lead In(s): HLTH-24B [1:1]

Default Next Question: HLTH-HGT-FT

HLTH-HGT-FT

(TO MOTHER:) I'd like to find out how tall *Child First Name* is. *Would you prefer to measure <him/her> yourself or shall I do it?/<no text>*

(RECORD FEET)

(INTERVIEWER: INCHES APPEAR ON NEXT SCREEN.)

Enter Answer:

Lead In(s): HLTH-25A [Default], HLTH-25B [Default], HLTH-24A [0:0], HLTH-22B [2:2]

Default Next Question: HLTH-HGT-IN

HardMax: 8

SoftMax:6

HardMin: 1

SoftMin:1

HLTH-HGT-IN

INTERVIEWER: RECORD INCHES.

Enter Answer:

Lead In(s): HLTH-HGT-FT [Default]

Default Next Question: HLTH-HGT-REPT

HardMax: 11

SoftMax:11

HardMin: 0

SoftMin:0

HLTH-HGT-REPT

INTERVIEWER: HOW WAS HEIGHT REPORTED?

- 1 TAPE MEASUREMENT
- 2 MOTHER RECALL

Lead In(s): HLTH-HGT-IN [Default]

Default Next Question: HLTH-WGT-LBS

HLTH-WGT-LBS

I'd like to find out *Child First Name's* weight. *Would you prefer to weigh <him/her> yourself or shall I do it?/<no text>*

(RECORD POUNDS.)

(INTERVIEWER: BE SURE CHILD IS NOT WEARING SHOES OR HEAVY OUTER GARMENTS.
OUNCES FOR CHILDREN UNDER 20 LBS. APPEAR ON NEXT SCREEN.)

Enter Answer:

If Answer >=1 and Answer <=19 Then Go To: HLTH-WGT-OZ

Lead In(s): HLTH-HGT-REPT [Default]

Default Next Question: HLTH-WGT-REPT

HardMax: 999

SoftMax:175

HardMin: 1

SoftMin:1

HLTH-WGT-OZ

INTERVIEWER: RECORD OUNCES.

Enter Answer: |__| |__|

Lead In(s): HLTH-WGT-LBS [1:19]

Default Next Question: HLTH-WGT-REPT

HardMax: 15

SoftMax:15

HardMin: 0

SoftMin:0

HLTH-WGT-REPT

INTERVIEWER: HOW WAS WEIGHT REPORTED?

- 1 SCALE MEASUREMENT
- 2 MOTHER RECALL

Lead In(s): HLTH-WGT-LBS [Default], HLTH-WGT-OZ [Default]

Default Next Question: HLTH-26

HLTH-26

INTERVIEWER: WAS ANYONE ELSE PRESENT, EXCLUDING THE RESPONDENT AND YOUNG CHILDREN (AGE 3 AND YOUNGER), WHEN YOU ASKED THE QUESTIONS ABOUT *Child First Name's* HEALTH?

- 1 YES
- 0 NO
- 2 TELEPHONE INTERVIEW

Lead In(s): HLTH-WGT-REPT [Default]

Default Next Question: HLTH-27

HLTH-27

((CHILD AGE (YEARS) < 3) OR ((CHILD AGE (YEARS) = 3) AND (MONTHS < 11)) OR ((CHILD AGE (YEARS) = 3) AND (MONTHS = 11) AND (DAYS < 16)));

/ If child age is less than 3 yrs, 11 months, 16 days skip to CSEV-5 */*

If Answer =1 Then Go To: CSEV-5

Lead In(s): HLTH-26 [Default]

Default Next Question: CST-TELCHK

CHILD ASSESSMENTS

CST-TELCHK

(INTERVIEW MODE=2);

If Answer =1 Then Go To: CS-END-TEL

Lead In(s): HLTH-27 [Default]

Default Next Question: CST-TITLE

CST-TITLE

SET NAME (HEADERINDEX3,"CHILD ASSESSMENTS");

/ Header */*

Lead In(s): CST-TELCHK [Default]

Default Next Question: CST-1

CST-1

INTERVIEWER (ON A SCALE FROM 1 TO 5): HOW SHY OR ANXIOUS WAS CHILD WHEN YOU FIRST MET *HIM/HER*?

- 1 (1) NOT AT ALL SHY OR ANXIOUS/SOCIABLE & FRIENDLY
- 2 (2) *
- 3 (3) (MIDPOINT)
- 4 (4) *
- 5 (5) EXTREMELY SHY/QUIET/WITHDRAWN
- 6 (6) UNABLE TO ASSESS CHILD (SPECIFY)
- 7 (7) CHILD NOT PRESENT - TOO YOUNG TO ASSESS

Lead In(s): CST-TITLE [Default]

Default Next Question: CST-SUBNAME

CST-SUBNAME

Substring (CHILD NAME);

Lead In(s): CST-1 [Default]

Default Next Question: CST-PERMCHK

Save Symbol: *ONE WORD FIRST NAME*

CST-PERMCHK

(CONSENT FLAG=1);

/ Check whether mother signed consent form. If mom refused , skip to CS-END-REF. */*

If Answer =1 Then Go To: CST-AGE1

Lead In(s): CST-SUBNAME [Default]

Default Next Question: CS-END-REF

CST-AGE1

(CHILD AGE IN MONTHS);

/* Do jumps depending on child age */

If Answer =47	Then Go To: CST-AGE1A
If Answer >=48 and Answer <=58	Then Go To: CST-CALLPPVT
If Answer =59	Then Go To: CST-AGE1B
If Answer >=60 and Answer <=83	Then Go To: CST-CALLMATH
If Answer >=84 and Answer <=179	Then Go To: CST-AGE2
Lead In(s): CST-PERMCHK [1:1]	
Default Next Question: CSEV-5	

CST-AGE1A

(DAYS >= 16);

/* Do jumps depending on child age */

If Answer =1	Then Go To: CST-CALLPPVT
Lead In(s): CST-AGE1 [47:47]	
Default Next Question: CSEV-5	

CST-AGE1B

(DAYS >= 16);

/* Do jumps depending on child age */

If Answer =1	Then Go To: CST-CALLMATH
Lead In(s): CST-AGE1 [59:59]	
Default Next Question: CST-CALLPPVT	

CST-AGE2

(CHILD AGE IN MONTHS);

/* Do jumps depending on child age */

If Answer >=84 and Answer <=143	Then Go To: CST-CALLDIGIT
If Answer >=144 and Answer <=179	Then Go To: CST-CALLSPPC
Lead In(s): CST-AGE1 [84:179]	
Default Next Question: SCHL-AGECK1	

CST-CALLMATH

/*Execute Child Assessment Program “PIAT MATH” */

Lead In(s): CST-AGE1 [60:83], CST-AGE1B [1:1]

Default Next Question: CST-ASSESS-END

CST-CALLSPPC

/*Execute Child Assessment Program “WHAT I AM LIKE” */

Lead In(s): CST-AGE2 [144:179]

Default Next Question: CST-ASSESS-END

CST-CALLDIGIT

/*Execute Child Assessment Program “DIGIT SPAN” */

Lead In(s): CST-AGE2 [84:143]

Default Next Question: CST-ASSESS-END

CST-CALLPPVT

/*Execute Child Assessment Program “PPVT” */

Lead In(s): CST-AGE1B [Default], CST-AGE1 [48:58], CST-AGE1A [1:1]

Default Next Question: CST-ASSESS-END

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WHAT I AM LIKE

(SELF-PERCEPTION PROFILE FOR CHILDREN)

AGES: CHILDREN 12 YEARS AND OLDER

INTERVIEWER: [IF NEEDED, READ TO MOTHER/GUARDIAN.]

This section is meant to give us an idea of how (CHILD) views (*him/her*)self.

INTERVIEWER: READ TO CHILD.

- A. All kids think and feel differently about things. We are interested in what you think you are like and how you think and feel. This is not a test. There are no right or wrong answers. Remember, all kids are different.

[HAND SHOWCARD SET B.] This Section is called "What I Am Like." Here's an example of how the questions work. I'll read the question aloud and you follow along and think about it before you answer. This question is about two kinds of kids and we want to know which kids are more like you.

- B. READ BOTH PARTS OF PRACTICE SENTENCE. EMPHASIZE THE UNDERLINED WORDS.

Some kids would rather		other kids would
<u>play outdoors</u> in their	BUT	rather <u>watch TV</u> .
spare time.		

- C. What you do is this: First, decide which kids are more like you -- the kids on the "X" side of the card (POINT TO "X" SIDE OF SHOWCARD) or the kids on the "Y" side of the card (POINT TO "Y" SIDE OF SHOWCARD).

IF NECESSARY, PROBE: Which kind of kid is more like you? The kid on the "X" side or the kid on the "Y" side of the card?

- D. POINTING TO ANSWER CATEGORIES ON SHOWCARD, SAY:

Now, think about the answer you just gave me and then decide if that is really true for you or only sort of true for you.

IF NECESSARY, PROBE: OK, what do you think? Really true or sort of true for you?

- E. Okay, that was just for practice. Now let's do some more questions. Turn to the next card.

REALLY TRUE FOR ME	SORT OF TRUE FOR ME	X	Q#	Y	SORT OF TRUE FOR ME	REALLY TRUE FOR ME
4	3	Some kids feel they are very good at their school work.	1. BUT	Other kids worry about whether they can do the school work assigned to them.	2	1
1	2	Some kids are often unhappy with themselves.	2. BUT	Other kids are pretty pleased with themselves.	3	4
4	3	Some kids feel like they are just as smart as other kids their ages.	3. BUT	Other kids aren't so sure and wonder if they are as smart.	2	1
1	2	Some kids don't like the way they are leading their life.	4. BUT	Other kids do like the way they are leading their life.	3	4
1	2	Some kids are pretty slow in finishing their school work.	5. BUT	Other kids can do their school work quickly .	3	4
4	3	Some kids are happy with themselves as a person.	6. BUT	Other kids are often not happy with themselves as a person.	2	1
REALLY TRUE FOR ME	SORT OF TRUE FOR ME	X	Q#	Y	SORT OF TRUE FOR ME	REALLY TRUE FOR ME

REALLY TRUE FOR ME	SORT OF TRUE FOR ME	X	Q#	Y	SORT OF TRUE FOR ME	REALLY TRUE FOR ME
1	2	Some kids often <u>forget</u> what they learn.	7. BUT	Other kids can remember things <u>easily</u> .	3	4
4	3	Some kids <u>like</u> the kind of <u>person</u> they are.	8. BUT	Other kids often wish they were someone else.	2	1
4	3	Some kids do <u>very well</u> at their classwork.	9. BUT	Other kids <u>don't</u> do very well at their classwork.	2	1
4	3	Some kids are very <u>happy</u> being the way they are.	10. BUT	Other kids wish they were <u>different</u> .	2	1
1	2	Some kids have <u>trouble</u> figuring out the answers in school.	11. BUT	Other kids almost <u>always</u> can figure out the answers.	3	4
1	2	Some kids are not very happy with the way they do a lot of things.	12. BUT	Other kids think the way they do things is <u>fine</u> .	3	4
REALLY TRUE FOR ME	SORT OF TRUE FOR ME	X	Q#	Y	SORT OF TRUE FOR ME	REALLY TRUE FOR ME

GO TO INTERVIEWER REMARKS.

INTERVIEWER REMARKS:

1. WAS ANYONE ELSE PRESENT IN THE ROOM DURING THE ADMINISTRATION OF THIS WHAT I AM LIKE SECTION?

YES.....(*GO TO 2*) 1

NO(*GO TO 3*) 0

2.		EFFECT ON CHILD'S PERFORMANCE		
IF PRESENT,	CODE # PERSONS	SEEMED TO BE HARMFUL	NONE OBSERVABLE	SEEMED TO IMPROVE
MOTHER	_____	1	2	3
FATHER	_____	1	2	3
OTHER ADULT(S)	_____	1	2	3
CHILDREN	_____	1	2	3

3. CODE CHILD'S ENERGY LEVEL DURING SECTION.

LOW 1

MEDIUM..... 2

HIGH 3

CAPI CHECK: WAS THIS SECTION TERMINATED PREMATURELY?

YES..... (GO TO 4).....1

NO..... (GO TO 5).....0

4. REASON(S) FOR PREMATURE TERMINATION OF THIS SECTION.
CODE ALL THAT APPLY.

PARENT/GUARDIAN TERMINATED/REFUSED01

CHILD WOULD NOT RESPOND.....02

MAJOR INTERRUPTION CAUSED TERMINATION03

CHILD COULD NOT UNDERSTAND TASK04

CHILD HAD LANGUAGE PROBLEM05

CHILD'S EMOTIONAL CONDITION06

CHILD'S PHYSICAL CONDITION07

CHILD TIRED.....08

OTHER (SPECIFY) _____

_____ **09**

INTERVIEWER: YOU HAVE COMPLETED WHAT I AM LIKE.

WERE THERE ANY PROBLEMS NOT ALREADY NOTED THAT
OCCURRED DURING THIS ASSESSMENT?

YES (GO TO 6)

NO (GO TO NEXT SECTION: **PIAT MATH**)

6. RECORD PROBLEMS: _____

(GO TO NEXT SECTION: **PIAT MATH**)

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MEMORY FOR DIGIT SPAN

AGES: CHILDREN 7-11 YEARS

[IF NEEDED, READ TO MOTHER/GUARDIAN.]

This section gives us an idea of (Child Name)'s memory for number order. Each sequence of numbers has more digits than the last. It is rare for anyone to remember all the sequences.

INSTRUCTIONS FOR DIGITS FORWARD.

ADMINISTER QUESTIONS:

- (1) READ EACH DIGIT SPAN **ONLY ONCE** AT AN EVEN RATE OF 1 DIGIT PER SECOND.
- (2) READ PART A OF QUESTION; PAUSE FOR RESPONSE, THEN SCORE.
- (3) READ PART B OF QUESTION; PAUSE FOR RESPONSE, THEN SCORE.
- (4) IF CHILD DOES NOT RESPOND, DO **NOT** ENCOURAGE FURTHER.
- (5) STOP WHEN CHILD MISSES PART A **AND** PART B OF ANY **ONE** QUESTION.

SCORE QUESTIONS:

- (1) TO BE SCORED CORRECT, NO DIGITS MAY BE OMITTED OR BE IN REVERSED ORDER.

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DIGITS FORWARD.

READ TO CHILD.

I am going to say some numbers. Listen carefully, and when I am through, say them right after me. SAY: "Ready" BEFORE EACH QUESTION.

(One item is shown per screen; e.g., item 1A is shown on one screen, and item 1B on the next)

		CORRECT	WRONG
1.	A. 3 - 8 - 6	1	2
	B. 6 - 1 - 2	1	2

CAPI CHECK: IF BOTH A & B ARE CODED WRONG, SKIP TO DIGITS BACKWARD.

2.	A. 3 - 4 - 1 - 7	1	2
	B. 6 - 1 - 5 - 8	1	2

CAPI CHECK: IF BOTH A & B ARE CODED WRONG, SKIP TO DIGITS BACKWARD.

3.	A. 8 - 4 - 2 - 3 - 9	1	2
	B. 5 - 2 - 1 - 8 - 6	1	2

CAPI CHECK: IF BOTH A & B ARE CODED WRONG, SKIP TO DIGITS BACKWARD.

4.	A. 3 - 8 - 9 - 1 - 7 - 4	1	2
	B. 7 - 9 - 6 - 4 - 8 - 3	1	2

CAPI CHECK: IF BOTH A & B ARE CODED WRONG, SKIP TO DIGITS BACKWARD.

5.	A. 5 - 1 - 7 - 4 - 2 - 3 - 8	1	2
	B. 9 - 8 - 5 - 2 - 1 - 6 - 3	1	2

CAPI CHECK: IF BOTH A & B ARE CODED WRONG, SKIP TO DIGITS BACKWARD.

6.	A. 1 - 6 - 4 - 5 - 9 - 7 - 6 - 3	1	2
	B. 2 - 9 - 7 - 6 - 3 - 1 - 5 - 4	1	2

CAPI CHECK: IF BOTH A & B ARE CODED WRONG, SKIP TO DIGITS BACKWARD.

7.	A. 5 - 3 - 8 - 7 - 1 - 2 - 4 - 6 - 9	1	2
	B. 4 - 2 - 6 - 9 - 1 - 7 - 8 - 3 - 5	1	2

CAPI CHECK: IF BOTH A & B ARE CODED WRONG, SKIP TO DIGITS BACKWARD.

DIGITS BACKWARD.

A. READ: Now I am going to say some more numbers, but this time when I stop, I want you to say them backward. For example, if I say 9-2-7, what would you say?

B. PAUSE FOR THE CHILD TO RESPOND. DID CHILD RESPOND CORRECTLY (7-2-9)?

YES (7-2-9) SAY: That's right. Let's go on with the rest of the numbers.

PROCEED TO 1ST ITEM

NO SAY: No, you would say 7-2-9. I said 9-2-7, so to say it backward you would say 7-2-9. Now try these numbers. Remember, you are to say them backward: 3-6-5.

C. WHETHER THE CHILD IS CORRECT OR WRONG ON THE SECOND EXAMPLE, THE TEST WILL PROCEED.

(One item shown per screen.)

		CORRECT	WRONG
8.	A. 2 - 5 (ANS = 5-2)	1	2
	B. 6 - 3 (ANS = 3-6)	1	2

CAPI CHECK: IF BOTH A & B ARE CODED WRONG, SKIP TO INTERVIEWER REMARKS.

9.	A. 5 - 7 - 4 (ANS = 4-7-5)	1	2
	B. 2 - 5 - 9 (ANS = 9-5-2)	1	2

CAPI CHECK: IF BOTH A & B ARE CODED WRONG, SKIP TO INTERVIEWER REMARKS.

10.	A. 7 - 2 - 9 - 6 (ANS = 6-9-2-7)	1	2
	B. 8 - 4 - 9 - 3 (ANS = 3-9-4-8)	1	2

CAPI CHECK: IF BOTH A & B ARE CODED WRONG, SKIP TO INTERVIEWER REMARKS.

11.	A. 4 - 1 - 3 - 5 - 7 (ANS = 7-5-3-1-4)	1	2
	B. 9 - 7 - 8 - 5 - 2 (ANS = 2-5-8-7-9)	1	2

CAPI CHECK: IF BOTH A & B ARE CODED WRONG, SKIP TO INTERVIEWER REMARKS.

12.	A. 1 - 6 - 5 - 2 - 9 - 8 (ANS = 8-9-2-5-6-1)	1	2
	B. 3 - 6 - 7 - 1 - 9 - 4 (ANS = 4-9-1-7-6-3)	1	2

CAPI CHECK: IF BOTH A & B ARE CODED WRONG, SKIP TO INTERVIEWER REMARKS.

		CORRECT	WRONG
13.	A. 8 - 5 - 9 - 2 - 3 - 4 - 2 (ANS = 2-4-3-2-9-5-8)	1	2
	B. 4 - 5 - 7 - 9 - 2 - 8 - 1 (ANS = 1-8-2-9-7-5-4)	1	2

CAPI CHECK: IF BOTH A & B ARE CODED WRONG, SKIP TO INTERVIEWER REMARKS.

14.	A. 6 - 9 - 1 - 6 - 3 - 2 - 5 - 8 (ANS = 8-5-2-3-6-1-9-6)	1	2
	B. 3 - 1 - 7 - 9 - 5 - 4 - 8 - 2 (ANS = 2-8-4-5-9-7-1-3)	1	2

GO TO INTERVIEWER REMARKS.

INTERVIEWER REMARKS:

1. WAS ANYONE ELSE PRESENT IN THE ROOM DURING THE ADMINISTRATION OF THIS SECTION?

YES.....(GO TO 2) 1

NO(GO TO 3) 0

2.		EFFECT ON CHILD'S PERFORMANCE		
IF PRESENT,	CODE # PERSONS	SEEMED TO BE HARMFUL	NONE OBSERVABLE	SEEMED TO IMPROVE
MOTHER	—	1	2	3
FATHER	—	1	2	3
OTHER ADULT(S)	— —	1	2	3
CHILDREN	— —	1	2	3

3. CODE CHILD'S ENERGY LEVEL DURING SECTION.

LOW1

MEDIUM.....2

HIGH.....3

*CAP I CHECK: WAS THIS SECTION TERMINATED PREMATURELY?**YES (GO TO 4).....1**NO (GO TO 5).....0*

4. REASON(S) FOR PREMATURE TERMINATION OF THIS SECTION.

CODE ALL THAT APPLY.

- PARENT/GUARDIAN TERMINATED/REFUSED01
- CHILD WOULD NOT RESPOND.....02
- MAJOR INTERRUPTION CAUSED TERMINATION03
- CHILD COULD NOT UNDERSTAND TASK04
- CHILD HAD LANGUAGE PROBLEM05
- CHILD'S EMOTIONAL CONDITION06
- CHILD'S PHYSICAL CONDITION07
- CHILD TIRED08
- OTHER (SPECIFY) _____
- _____ 09
-

5. INTERVIEWER: YOU HAVE COMPLETED MEMORY FOR DIGIT SPAN.
WERE THERE ANY PROBLEMS NOT ALREADY NOTED THAT
OCCURRED DURING THIS ASSESSMENT?

- YES (GO TO 6)
- NO (GO TO NEXT SECTION: **PIAT MATH**)
-

6. RECORD PROBLEMS: _____

(GO TO NEXT SECTION: **PIAT MATH**)

PIAT MATH

AGES: CHILDREN PPVT AGE 5-14 YEARS

INTERVIEWER: [IF NEEDED, READ TO MOTHER/GUARDIAN.]

This section measures (Child's Name)'s mathematical skills. The questions begin at a very basic skill level and go to a very high skill level. No one is expected to answer all the questions.

PRACTICE EXERCISES.

CAPI CHECK: IS CHILD IN 1ST GRADE OR HIGHER?

YES..... (GO TO B)

NO..... (GO TO A)

A. PRACTICE EXERCISES FOR CHILDREN NOT YET IN 1ST GRADE.

- (1) TURN TO "INTRODUCTION TO THE MATHEMATICS SUBTEST" (IN PIAT VOLUME I). READ: Let's start with some math problems. First, we'll do some just for practice to show you what they are like.
- (2) FOLLOW TEXT IN EASEL FOR PRACTICE EXERCISES A – E.

B. NO PRACTICE FOR CHILDREN IN 1ST GRADE OR HIGHER.

READ: We are going to start with some mathematics problems. Some of the first ones would be too easy for you, so let's start with this one.

CAPI CHECK: SKIP TO THE APPROPRIATE STARTING QUESTION BASED ON CHILD'S CURRENT GRADE AS DETERMINED IN CS-8 AND CS-8A.

KINDERGARTEN	
OR LESS	(GO TO Q.1)..... 00
1ST GRADE.....	(GO TO Q.15)..... 01
2ND GRADE	(GO TO Q.25)..... 02
3RD GRADE	(GO TO Q.30)..... 03
4TH GRADE	(GO TO Q.35)..... 04
5TH GRADE	(GO TO Q.40)..... 05
6TH GRADE	(GO TO Q.45)..... 06
7TH GRADE	(GO TO Q.50)..... 07
8TH GRADE	(SKIP TO Q.54) 08
9TH GRADE	(SKIP TO Q.58) 09
10TH GRADE	(SKIP TO Q.60) 10
11TH GRADE	(SKIP TO Q.62) 11
12TH GRADE	
(OR HIGHER)	(SKIP TO Q.64) 12

Note: Interviewer turns to appropriate easel page and proceeds.

BASAL=5 of 5 CORRECT

CEILING=5 of 7 WRONG

IF STARTING Q. IS WRONG, PROGRAM DROPS BACK TO NEXT GRADE LEVEL UNTIL CHILD ANSWERS CORRECTLY, THEN PROCEEDS FORWARD.

IF CHILD CAN'T GET 5 IN A ROW CORRECT, PROGRAM WORKS BACK, ITEM BY ITEM TO GET BASAL, THEN PROCEEDS FORWARD.

GRADE	Q#/ ANSWER	RECORD RESPONSE	(ITEM SCORE)		GRADE	Q#/ ANSWER	RECORD RESPONSE	(ITEM SCORE)	
			CORRECT	WRONG				CORRECT	WRONG
8th	53. (4)	()	1	2		69. (1)	()	1	2
	54. (4)	()	1	2		70. (1)	()	1	2
	55. (2)	()	1	2		71. (2)	()	1	2
9th	56. (3)	()	1	2		72. (1)	()	1	2
	57. (1)	()	1	2		73. (1)	()	1	2
	58. (2)	()	1	2		74. (3)	()	1	2
10th	59. (2)	()	1	2		75. (3)	()	1	2
	60. (1)	()	1	2		76. (4)	()	1	2
	61. (3)	()	1	2		77. (3)	()	1	2
11th	62. (1)	()	1	2		78. (2)	()	1	2
	63. (4)	()	1	2		79. (3)	()	1	2
	64. (3)	()	1	2		80. (4)	()	1	2
12th	65. (2)	()	1	2		81. (2)	()	1	2
	66. (2)	()	1	2		82. (1)	()	1	2
	67. (4)	()	1	2		83. (2)	()	1	2
	68. (4)	()	1	2		84. (2)	()	1	2

CAPI CHECK: IF CHILD GETS 5 OUT OF 7 WRONG, SKIP TO COMPUTE SCORE.

COMPUTE SCORE: (Scores are computed by machine but not displayed.)

A. FINAL BASAL.

— —

B. CEILING Q# (LAST ITEM WRONG).

— —

C. TOTAL # OF ERRORS BETWEEN BASAL AND CEILING. =

— —

D. SUBTRACT 'C' FROM 'B'.

— — SCORE

INTERVIEWER REMARKS:

1. WAS ANYONE ELSE PRESENT IN THE ROOM DURING THE ADMINISTRATION OF THIS SECTION?

YES.....(GO TO 2) 1

NO(GO TO 3) 0

		EFFECT ON CHILD'S PERFORMANCE		
IF PRESENT,	CODE # PERSONS	SEEMED TO BE HARMFUL	NONE OBSERVABLE	SEEMED TO IMPROVE
MOTHER	—	1	2	3
FATHER	—	1	2	3
OTHER ADULT(S)	— —	1	2	3
CHILDREN	— —	1	2	3

3. CODE CHILD'S ENERGY LEVEL DURING SECTION.

LOW 1

MEDIUM..... 2

HIGH 3

CAPI CHECK: WAS THIS SECTION TERMINATED PREMATURELY?

YES (GO TO 4) 1

NO (GO TO 5) 0

4. REASON(S) FOR PREMATURE TERMINATION OF THIS SECTION.
CODE ALL THAT APPLY.

- PARENT/GUARDIAN TERMINATED/REFUSED01
- CHILD WOULD NOT RESPOND.....02
- MAJOR INTERRUPTION CAUSED TERMINATION03
- CHILD COULD NOT UNDERSTAND TASK04
- CHILD HAD LANGUAGE PROBLEM05
- CHILD'S EMOTIONAL CONDITION06
- CHILD'S PHYSICAL CONDITION07
- CHILD TIRED08
- OTHER (SPECIFY) _____
- _____09
-

5. INTERVIEWER: YOU HAVE COMPLETED PIAT MATH.
WERE THERE ANY PROBLEMS NOT ALREADY NOTED THAT
OCCURRED DURING THIS ASSESSMENT?

YES (GO TO 6)

NO (GO TO NEXT SECTION: **PIAT READING RECOGNITION**)

6. RECORD PROBLEMS: _____

(GO TO NEXT SECTION: **PIAT READING RECOGNITION**)

PIAT READING RECOGNITION

AGES: CHILDREN PPVT AGE 5-14 YEARS

[IF NEEDED, READ TO MOTHER/GUARDIAN.]

This section measures (Child Name)'s ability to recognize letters and words. The questions begin at a basic level and proceed to a higher level of skill. No one is expected to answer all the questions.

PRACTICE EXERCISES.

A. CAPI CHECK: IS CHILD IN 1ST GRADE OR HIGHER?

YES (SKIP TO C) 1
 NO (GO TO B) 0

B. PRACTICE FOR CHILDREN NOT YET IN 1ST GRADE.

- (1) TURN TO "INTRODUCTION TO READING RECOGNITION SUBTEST" (IN PIAT VOLUME I). READ:

Now I am going to give you some problems in reading. First, let's look at some more practice ones to show you what these are like. (TURN TO EXERCISE A.)

- (2) FOLLOW TEXT IN EASEL FOR PRACTICE EXERCISES (A-E).

C. NO PRACTICE FOR CHILDREN IN 1ST GRADE OR HIGHER. TURN TO "INTRODUCTION TO READING RECOGNITION SUBTEST" (PIAT VOLUME 1) READ:

Now we are going to do some reading. Again, let's skip over some of the very easy ones and start here.

CAPI CHECK: RECORD SCORE FROM PIAT MATH (COMPUTE SCORE ITEM D).

SKIP TO STARTING Q# BASED ON PIAT MATH SCORE. TURN TO APPROPRIATE EASEL PAGE AND PROCEED.

Note: Interviewer turns to appropriate easel page and proceeds.

BASAL = 5 OF 5 CORRECT

CEILING = 5 OF 7 WRONG

IF STARTING Q. IS WRONG, PROGRAM JUMPS BACK 5 UNTIL CHILD ANSWERS CORRECTLY, THEN PROCEEDS FORWARD.

IF CHILD CAN'T GET 5 IN A ROW CORRECT, PROGRAM WORKS BACK, ITEM BY ITEM TO GET BASAL.

CAPI CHECK: ANSWER EVERY ITEM ADMINISTERED.

RECORD AND SCORE EVERY ANSWER.

PLATE #	ITEM #	RECORD ANSWER	ITEM SCORE...		PLATE #	ITEM #	RECORD ANSWER	ITEM SCORE...	
			CORRECT	WRONG				CORRECT	WRONG
1	1.	(1)	1	2		23.	(wagon)	1	2
2	2.	(2)	1	2		24.	(fishing)	1	2
3	3.	(1)	1	2		25.	(brook)	1	2
4	4.	(4)	1	2		26.	(gloves)	1	2
5	5.	(3)	1	2		27.	(smile)	1	2
6	6.	(2)	1	2		28.	(colt)	1	2
7	7.	(1)	1	2		29.	(round)	1	2
8	8.	(2)	1	2	PLATE 17 ?	30.	(blaze)	1	2
9	9.	(4)	1	2		31.	(feather)	1	2
10	10.	(B b)	1	2		32.	(flour)	1	2
11	11.	(A a)	1	2		33.	(igloo)	1	2
12	12.	(O)	1	2		34.	(liquid)	1	2
13	13.	(S)	1	2		35.	(purse)	1	2
14	14.	(N)	1	2		36.	(dangerous)	1	2
PLATE 15 ?	15.	(c)	1	2		37.	(lodge)	1	2
	16.	(i)	1	2		38.	(stylish)	1	2
	17.	(d)	1	2		39.	(accident)	1	2
	18.	(m)	1	2		40.	(ruin)	1	2
PLATE 16 ?	19.	(run)	1	2		41.	(exercise)	1	2
	20.	(play)	1	2		42.	(pigeon)	1	2
	21.	(jump)	1	2		43.	(moisture)	1	2
	22.	(kitten)	1	2		44.	(artificial)	1	2

CAPI CHECK: IF CHILD GETS 5 OUT OF 7 WRONG, SKIP TO COMPUTE SCORE.

BASAL = 5 OF 5 CORRECT

CEILING = 5 OF 7 WRONG

IF STARTING Q. IS WRONG, PROGRAM JUMPS BACK 5 UNTIL CHILD ANSWERS CORRECTLY, THEN PROCEEDS FORWARD.

IF CHILD CAN'T GET 5 IN A ROW CORRECT, PROGRAM WORKS BACK, ITEM BY ITEM TO GET BASAL.

CAPI CHECK: ANSWER EACH ITEM GIVEN. RECORD AND SCORE EVERY ANSWER.

PLATE #	ITEM #	RECORD ANSWER	ITEM SCORE... CORRECT WRONG		PLATE #	ITEM #	RECORD ANSWER	ITEM SCORE... CORRECT WRONG	
PLATE 18 ?	45.	(anchor)	1	2		65.	(diminutive)	1	2
	46.	(elegant)	1	2		66.	(ensign)	1	2
	47.	(gaudy)	1	2		67.	(dilapidated)	1	2
	48.	(treacherous)	1	2		68.	(bureaucrat)	1	2
	49.	(yacht)	1	2		69.	(adulation)	1	2
	50.	(guerrilla)	1	2		70.	(exorbitantly)	1	2
	51.	(boisterous)	1	2		71.	(epoch)	1	2
	52.	(isthmus)	1	2		72.	(aesthetic)	1	2
	53.	(anticipation)	1	2		73.	(deluge)	1	2
	54.	(vertebrates)	1	2		74.	(didactic)	1	2
	55.	(contemplate)	1	2		75.	(titular)	1	2
	56.	(heroine)	1	2		76.	(credulity)	1	2
	57.	(unparalleled)	1	2		77.	(judiciable)	1	2
	58.	(inaccessible)	1	2	PLATE 20 ?	78.	(nihilism)	1	2
PLATE 19 ?	59.	(colleague)	1	2		79.	(pharyngeal)	1	2
	60.	(medieval)	1	2		80.	(pterodactyl)	1	2
	61.	(pinnacle)	1	2		81.	(macrocosm)	1	2
	62.	(picturesque)	1	2		82.	(chimerical)	1	2
	63.	(adjacent)	1	2		83.	(disaccharide)	1	2
	64.	(navigable)	1	2		84.	(apophthegm)	1	2

CAPI CHECK: IF CHILD GETS 5 OUT OF 7 WRONG, SKIP TO COMPUTE SCORE.

CAPI CHECK: WAS THIS SECTION TERMINATED PREMATURELY?

YES (GO TO A)..... 1

NO (GO TO COMPUTE SCORE) 0

- A. REASON FOR PREMATURE TERMINATION OF THIS SECTION.
CODE ALL THAT APPLY.

PARENT/GUARDIAN TERMINATED/REFUSED01

CHILD WOULD NOT RESPOND.....02

MAJOR INTERRUPTION CAUSED TERMINATION03

CHILD COULD NOT UNDERSTAND TASK04

CHILD HAD LANGUAGE PROBLEM05

CHILD'S EMOTIONAL CONDITION06

CHILD'S PHYSICAL CONDITION07

CHILD TIRED.....08

OTHER (SPECIFY _____)

_____ 09

SKIP TO READING COMPREHENSION.

COMPUTE SCORE: (Scores computed by machine but not displayed.)

- A. FINAL BASAL.

- B. CEILING Q# (LAST ITEM WRONG).

- C. TOTAL # OF ERRORS BETWEEN BASAL AND CEILING.

- ____

- D. SUBTRACT 'C' FROM 'B'.

= SCORE

- E. IS CHILD'S SCORE 19 OR HIGHER?

YES ...(GO TO PIAT READING COMPREHENSION SECTION) 1

NO (SKIP TO INTERVIEWER REMARKS AT END OF READING
COMPREHENSION) 0

PIAT READING COMPREHENSION

(IF CHILD'S READING RECOGNITION SCORE IS 19 OR HIGHER)

[IF NEEDED, READ TO MOTHER/GUARDIAN.]

This section measures (Child Name)'s ability to understand what (*he/she*) reads. The questions begin at a very basic skill level and go to a very high skill level. No one is expected to answer all the questions.

PRACTICE EXERCISES.

A. CAPI CHECK: IS CHILD IN 1ST GRADE OR HIGHER GRADE?

YES..... (SKIP TO C)..... 1
 NO(GO TO B) 0

B. PRACTICE FOR CHILDREN NOT YET IN 1ST GRADE.

- (1) TURN TO "INTRODUCTION TO READING COMPREHENSION SUBTEST" (IN PIAT VOLUME II) AND READ:

Now I want to find out how well you understand and remember what you read. Let us practice again a little so you will know what I want you to do. (**GO TO PRACTICE A.**)

- (2) FOLLOW TEXT IN EASEL FOR PRACTICE EXERCISES.

C. NO PRACTICE FOR CHILDREN IN 1ST GRADE OR HIGHER. TURN TO "INTRODUCTION TO THE READING COMPREHENSION SUBTEST," IN PIAT VOLUME II AND READ:

Now I want to find out how well you can understand and remember what you read. But, first, let me explain what you are to do. I am going to show you a page. It will have only a sentence printed on it. Read this sentence silently (PAUSE) to yourself (PAUSE) just once. When you have finished, look up at me. Then I will show you the next page which will have four pictures on it. You are to (show me/point to/tell me the number of) the picture that best describes what you have read. Be sure to remember what you have read, once, and then look up at me.

CAPI CHECK: RECORD SCORE FROM PIAT READING RECOGNITION, (COMPUTE SCORE ITEM D). IF RAW SCORE = 19 OR HIGHER, SKIP TO STARTING Q# BASED ON READING RECOGNITION SCORE. [TURN TO APPROPRIATE EASEL PAGE AND PROCEED.]

(STARTING Q# FROM READING RECOGNITION)

Note: Interviewer turns to appropriate easel page and proceeds.

BASAL = 5 OF 5 CORRECT
CEILING = 5 OF 7 WRONG

IF STARTING Q. IS WRONG, PROGRAM JUMPS BACK 5 UNTIL
CHILD ANSWERS CORRECTLY, THEN PROCEEDS FORWARD.

IF CHILD CAN'T GET 5 IN A ROW CORRECT, PROGRAM
WORKS BACK, ITEM BY ITEM TO GET BASAL.

CAPI CHECK: BE SURE TO CODE <u>EVERY</u> ANSWER.									
PLATE	CORRECT	RECORD	ITEM SCORE ...		PLATE	CORRECT	RECORD	ITEM SCORE ...	
#	ANSWER	RESPONSE	CORRECT	WRONG	#	ANSWER	RESPONSE	CORRECT	WRONG
19.	(3)	()	1	2	42.	(3)	()	1	2
20.	(1)	()	1	2	43.	(1)	()	1	2
21.	(2)	()	1	2	44.	(4)	()	1	2
22.	(3)	()	1	2	45.	(2)	()	1	2
23.	(2)	()	1	2	46.	(3)	()	1	2
24.	(3)	()	1	2	47.	(1)	()	1	2
25.	(1)	()	1	2	48.	(1)	()	1	2
26.	(1)	()	1	2	49.	(2)	()	1	2
27.	(2)	()	1	2	50.	(3)	()	1	2
28.	(3)	()	1	2	51.	(2)	()	1	2
29.	(2)	()	1	2	52.	(4)	()	1	2
30.	(1)	()	1	2	53.	(3)	()	1	2
31.	(3)	()	1	2	54.	(4)	()	1	2
32.	(4)	()	1	2	55.	(2)	()	1	2
39.	(2)	()	1	2	56.	(4)	()	1	2
34.	(4)	()	1	2	57.	(2)	()	1	2
35.	(3)	()	1	2	58.	(4)	()	1	2
36.	(4)	()	1	2	59.	(3)	()	1	2
37.	(1)	()	1	2	60.	(2)	()	1	2
38.	(2)	()	1	2	61.	(3)	()	1	2
39.	(3)	()	1	2	62.	(2)	()	1	2
40.	(1)	()	1	2	63.	(4)	()	1	2
41.	(3)	()	1	2	64.	(3)	()	1	2

CAPI CHECK: IF CHILD GETS 5 OUT OF 7 WRONG, SKIP TO COMPUTE SCORE.

PLATE #	CORRECT ANSWER	RECORD RESPONSE	ITEM SCORE . . .		PLATE #	CORRECT ANSWER	RECORD RESPONSE	ITEM SCORE . . .	
			CORRECT	WRONG				CORRECT	WRONG
65.	(4)	()	1	2	75.	(1)	()	1	2
66.	(1)	()	1	2	76.	(2)	()	1	2
67.	(2)	()	1	2	77.	(3)	()	1	2
68.	(1)	()	1	2	78.	(4)	()	1	2
69.	(4)	()	1	2	79.	(2)	()	1	2
70.	(2)	()	1	2	80.	(3)	()	1	2
71.	(1)	()	1	2	81.	(3)	()	1	2
72.	(1)	()	1	2	82.	(1)	()	1	2
73.	(4)	()	1	2	83.	(2)	()	1	2
74.	(4)	()	1	2	84.	(1)	()	1	2

CAPI CHECK: IF CHILD GETS 5 OUT OF 7 WRONG, GO TO COMPUTE SCORE.

COMPUTE SCORE: (Scores computed but not displayed.)

A. FINAL BASAL.

— —

B. CEILING Q# (LAST ITEM WRONG).

— —

C. TOTAL # OF ERRORS BETWEEN BASAL AND CEILING.

- — —

D. SUBTRACT 'C' FROM 'B'.

— — = SCORE

(GO TO INTERVIEWER REMARKS.)

INTERVIEWER REMARKS:

1. WAS ANYONE ELSE PRESENT IN THE ROOM DURING THE ADMINISTRATION OF THIS SECTION?

YES(GO TO 2)..... 1

NO(GO TO 3)..... 0

2.

		EFFECT ON CHILD'S PERFORMANCE		
IF PRESENT,	CODE # PERSONS	SEEMED TO BE HARMFUL	NONE OBSERVABLE	SEEMED TO IMPROVE
MOTHER	—	1	2	3
FATHER	—	1	2	3
OTHER ADULT(S)	— —	1	2	3
CHILDREN	— —	1	2	3

3. CODE CHILD'S ENERGY LEVEL DURING SECTION.

LOW 1

MEDIUM..... 2

HIGH..... 3

CAPI CHECK: WAS THIS SECTION TERMINATED PREMATURELY?

YES (GO TO 4) 1

NO (GO TO 5) 0

4. REASON(S) FOR PREMATURE TERMINATION OF THIS SECTION.
(CODE ALL THAT APPLY).

PARENT/GUARDIAN TERMINATED/REFUSED 01

CHILD WOULD NOT RESPOND..... 02

MAJOR INTERRUPTION CAUSED TERMINATION 03

CHILD COULD NOT UNDERSTAND TASK 04

CHILD HAD LANGUAGE PROBLEM 05

CHILD'S EMOTIONAL CONDITION 06

CHILD'S PHYSICAL CONDITION 07

CHILD TIRED..... 08

OTHER (SPECIFY) _____

_____ 09

-
5. INTERVIEWER: YOU HAVE COMPLETED PIAT READING COMPREHENSION.
WERE THERE ANY PROBLEMS NOT ALREADY NOTED THAT
OCCURRED DURING THIS ASSESSMENT?

YES (GO TO 6)

NO (GO TO 7)

-
6. RECORD PROBLEMS: _____

-
7. CAPI CHECK: IF CHILD PPVT AGE 4-5 YRS OR 10-11 YRS GO TO **PPVT**.
ELSE, GO TO **CST-ASSESS-END**

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PEABODY PICTURE VOCABULARY TEST (PPVT-R)

AGES: CHILDREN PPVT AGE 4-5 or 10-11 YEARS

[IF NEEDED, READ TO MOTHER/GUARDIAN]

This section is designed to measure (Child Name)'s vocabulary. Children usually enjoy doing this. I tell (him/her) a word and (he/she) looks at four pictures and tells me which picture has the same meaning as the word I said.

CAPICHECK: DETERMINE APPROPRIATE START POINT FOR PRACTICE ITEMS.

IS CHILD'S PPVT AGE . . .

4 YRS – 5 YRS ..(*GO TO INSTRUCTION SCREEN 1*)

10 YRS – 11 YRS (*GO TO INSTRUCTION SCREEN 2*)

INSTRUCTION SCREEN 1: (PPVT age 4-5 years)

PRACTICE A: TURN TO PPVT EASEL, TRAINING PLATE A AND SAY TO CHILD: I want you to look at some pictures with me. See all the pictures on this page? (POINT TO EACH PICTURE.) I will say a word; then I want you to put your finger on the picture of the word I have said. If you are not sure, just tell me your best guess. Let's try one. Put your finger on the picture of doll. (*See Screen Capture: Figure 20*)

<u>doll</u> (4)	CORRECT..... GO TO PRACTICE B.
fork (1)	WRONG..... ASK ALTERNATE WORDS, THEN GO TO
table (2)	PRACTICE B.
car (3)	

PRACTICE B: TURN TO TRAINING PLATE B. PROCEED AS IN PRACTICE A.

<u>man</u> (2)
comb (3)
sock (4)
mouth (1)

PRACTICE C: TURN TO TRAINING PLATE C. PROCEED AS IN PRACTICE A.

<u>swinging</u> (3)
drinking (4)
walking (1)
climbing (2)

INSTRUCTION SCREEN 2: (PPVT age 10-11 years)

READ TO CHILD: I have some pictures to show you/OR (FOR OLDER CHILDREN) I want to find out how large your vocabulary is.

PRACTICE D: TURN TO TRAINING PLATE D AND READ:

See, there are four pictures. Each of them is numbered (POINT). I will say a word; then I want you to tell me the number of, or point to, the picture that best tells the meaning of wheel. If you are not sure, tell me your best guess. PROCEED AS IN PRACTICE A.

<u>wheel</u>	(4)
zipper	(2)
rope	(1)
rake	(3)

PRACTICE E: TURN TO TRAINING PLATE E. PROCEED AS IN PRACTICE D.

<u>giant</u>	(1)
bride	(3)
witch	(4)
royal	(2)

CAPI CHECK: SKIP TO STARTING QUESTION BASED ON THE CHILD'S PPVT AGE...

Note: Interviewer turns to appropriate easel page and proceeds.

4 YRS - 4 YRS, 5 MOS	(GO TO Q.15)
4 YRS, 6 MOS - 4 YRS, 11 MOS.....	(GO TO Q.20)
5 YRS - 5 YRS, 5 MOS.....	(GO TO Q.30)
5 YRS, 6 MOS - 5 YRS, 11 MOS.....	(GO TO Q.35)
10 YRS – 10 YRS, 11 MOS	(GO TO Q.80)
11 YRS - 11 YRS, 11 MOS.....	(GO TO Q.85)

WORD			RECORD RESPONSE	ITEM SCORE . . .	
				CORRECT	WRONG
1.	bus	(4)	()	1	2
2.	hand	(1)	()	1	2
3.	bed	(3)	()	1	2
4.	tractor	(2)	()	1	2
5.	closet	(1)	()	1	2
6.	snake	(4)	()	1	2
7.	boat	(2)	()	1	2
8.	tire	(3)	()	1	2
9.	cow	(1)	()	1	2
10.	lamp	(4)	()	1	2
11.	drum	(3)	()	1	2
12.	knee	(4)	()	1	2
13.	helicopter	(2)	()	1	2
14.	elbow	(4)	()	1	2
15.	bandage	(4)	()	1	2
16.	feather	(1)	()	1	2
17.	empty	(3)	()	1	2
18.	fence	(4)	()	1	2
19.	accident	(2)	()	1	2
20.	net	(2)	()	1	2
21.	tearing	(4)	()	1	2
22.	sail	(1)	()	1	2
23.	measuring	(2)	()	1	2

BASAL = 8 OF 8 CORRECT

CEILING = 6 OF 8 WRONG

COUNT BACK 8 FOR BASAL.

NO JUMP BACK FOR THE PPVT.

CAPI CHECK: IF CHILD GETS 6 OF 8 WRONG, SKIP TO COMPUTE SCORE.

WORD			RECORD RESPONSE	ITEM SCORE. . .	
				CORRECT	WRONG
24.	peeling	(3)	()	1	2
25.	cage	(1)	()	1	2
26.	tool	(4)	()	1	2
27.	square	(4)	()	1	2
28.	stretching	(1)	()	1	2
29.	arrow	(2)	()	1	2
30.	tying	(2)	()	1	2
31.	nest	(1)	()	1	2
32.	envelope	(2)	()	1	2
33.	hook	(3)	()	1	2
34.	pasting	(4)	()	1	2
35.	patting	(1)	()	1	2
36.	penguin	(1)	()	1	2
37.	sewing	(2)	()	1	2
38.	delivering	(1)	()	1	2
39.	diving	(2)	()	1	2
40.	parachute	(3)	()	1	2
41.	furry	(4)	()	1	2
42.	vegetable	(4)	()	1	2
43.	shoulder	(3)	()	1	2
44.	dripping	(2)	()	1	2
45.	claw	(4)	()	1	2
46.	decorated	(3)	()	1	2

BASAL = 8 OF 8 CORRECT

CEILING = 6 OF 8 WRONG

COUNT BACK 8 FOR BASAL.

NO JUMP BACK FOR THE PPVT.

CAPI CHECK: IF CHILD GETS 6 OF 8 WRONG, SKIP TO COMPUTE SCORE.

WORD			RECORD RESPONSE	ITEM SCORE. . .	
				CORRECT	WRONG
47.	frame	(1)	()	1	2
48.	forest	(3)	()	1	2
49.	faucet	(2)	()	1	2
50.	group	(3)	()	1	2
51.	stem	(3)	()	1	2
52.	vase	(3)	()	1	2
53.	pedal	(1)	()	1	2
54.	capsule	(2)	()	1	2
55.	surprise	(4)	()	1	2
56.	bark	(2)	()	1	2
57.	mechanic	(2)	()	1	2
58.	tambourine	(1)	()	1	2
59.	disappointment	(4)	()	1	2
60.	awarding	(3)	()	1	2
61.	pitcher	(3)	()	1	2
62.	reel	(1)	()	1	2
63.	signal	(1)	()	1	2
64.	trunk	(2)	()	1	2
65.	human	(2)	()	1	2
66.	nostril	(1)	()	1	2
67.	disagreement	(1)	()	1	2
68.	exhausted	(2)	()	1	2
69.	vine	(4)	()	1	2

BASAL = 8 OF 8 CORRECT

CEILING = 6 OF 8 WRONG

COUNT BACK 8 FOR BASAL.

NO JUMP BACK FOR THE PPVT.

CAPI CHECK: IF CHILD GETS 6 OF 8 WRONG, SKIP TO COMPUTE SCORE.

WORD			RECORD RESPONSE	ITEM SCORE. . .	
				CORRECT	WRONG
70.	ceremony	(4)	()	1	2
71.	casserole	(2)	()	1	2
72.	vehicle	(4)	()	1	2
73.	globe	(3)	()	1	2
74.	filing	(3)	()	1	2
75.	clamp	(2)	()	1	2
76.	reptile	(2)	()	1	2
77.	island	(1)	()	1	2
78.	spatula	(3)	()	1	2
79.	cooperation	(4)	()	1	2
80.	scalp	(4)	()	1	2
81.	twig	(2)	()	1	2
82.	weasel	(2)	()	1	2
83.	demolishing	(4)	()	1	2
84.	balcony	(1)	()	1	2
85.	locket	(1)	()	1	2
86.	amazed	(3)	()	1	2
87.	tubular	(1)	()	1	2
88.	tusk	(1)	()	1	2
89.	bolt	(3)	()	1	2
90.	communication	(4)	()	1	2
91.	carpenter	(2)	()	1	2
92.	isolation	(1)	()	1	2

BASAL = 8 OF 8 CORRECT

CEILING = 6 OF 8 WRONG

COUNT BACK 8 FOR BASAL.

NO JUMP BACK FOR THE PPVT.

CAPI CHECK: IF CHILD GETS 6 OF 8 WRONG, SKIP TO COMPUTE SCORE.

WORD			RECORD RESPONSE	ITEM SCORE. . .	
				CORRECT	WRONG
93.	inflated	(3)	()	1	2
94.	coast	(3)	()	1	2
95.	adjustment	(2)	()	1	2
96.	fragile	(3)	()	1	2
97.	assaulting	(1)	()	1	2
98.	appliance	(1)	()	1	2
99.	pyramid	(4)	()	1	2
100.	blazing	(1)	()	1	2
101.	hoisting	(1)	()	1	2
102.	arch	(4)	()	1	2
103.	lecturing	(4)	()	1	2
104.	dilapidated	(4)	()	1	2
105.	contemplating	(2)	()	1	2
106.	canister	(1)	()	1	2
107.	dissecting	(3)	()	1	2
108.	link	(4)	()	1	2
109.	solemn	(3)	()	1	2
110.	archery	(2)	()	1	2
111.	transparent	(3)	()	1	2
112.	husk	(1)	()	1	2
113.	utensil	(2)	()	1	2
114.	citrus	(3)	()	1	2
115.	pedestrian	(2)	()	1	2

BASAL = 8 OF 8 CORRECT

CEILING = 6 OF 8 WRONG

COUNT BACK 8 FOR BASAL.

NO JUMP BACK FOR THE PPVT.

CAP I CHECK: IF CHILD GETS 6 OF 8 WRONG, SKIP TO COMPUTE SCORE.

WORD			RECORD RESPONSE	ITEM SCORE. . .	
				CORRECT	WRONG
116.	parallelogram	(1)	()	1	2
117.	slumbering	(3)	()	1	2
118.	peninsula	(4)	()	1	2
119.	upholstery	(2)	()	1	2
120.	barricade	(4)	()	1	2
121.	quartet	(4)	()	1	2
122.	tranquil	(3)	()	1	2
123.	abrasive	(1)	()	1	2
124.	fatigued	(3)	()	1	2
125.	spherical	(2)	()	1	2
126.	syringe	(2)	()	1	2
127.	feline	(2)	()	1	2
128.	arid	(4)	()	1	2
129.	exterior	(1)	()	1	2
130.	constellation	(4)	()	1	2
131.	cornea	(2)	()	1	2
132.	mercantile	(1)	()	1	2
133.	ascending	(3)	()	1	2
134.	filtration	(1)	()	1	2
135.	consuming	(4)	()	1	2
136.	cascade	(4)	()	1	2
137.	perpendicular	(3)	()	1	2
138.	replenishing	(1)	()	1	2

BASAL = 8 OF 8 CORRECT

CEILING = 6 OF 8 WRONG

COUNT BACK 8 FOR BASAL.

NO JUMP BACK FOR THE PPVT.

CAP I CHECK: IF CHILD GETS 6 OF 8 WRONG, SKIP TO COMPUTE SCORE.

WORD			RECORD RESPONSE	ITEM SCORE ...	
				CORRECT	WRONG
139.	emission	(3)	()	1	2
140.	talon	(3)	()	1	2
141.	wrath	(3)	()	1	2
142.	incandescent	(4)	()	1	2
143.	arrogant	(2)	()	1	2
144.	confiding	(3)	()	1	2
145.	rhombus	(3)	()	1	2
146.	nautical	(3)	()	1	2
147.	tangent	(1)	()	1	2
148.	inclement	(4)	()	1	2
149.	trajectory	(1)	()	1	2
150.	fettered	(1)	()	1	2
151.	waif	(3)	()	1	2
152.	jubilant	(2)	()	1	2
153.	pilfering	(4)	()	1	2
154.	repose	(2)	()	1	2
155.	carrion	(3)	()	1	2
156.	indigent	(2)	()	1	2
157.	convex	(1)	()	1	2

BASAL = 8 OF 8 CORRECT

CEILING = 6 OF 8 WRONG

COUNT BACK 8 FOR BASAL.

NO JUMP BACK FOR THE PPVT.

CAPI CHECK: IF CHILD GETS 6 OF 8 WRONG, SKIP TO COMPUTE SCORE.

WORD			RECORD RESPONSE	ITEM SCORE ...	
				CORRECT	WRONG
158.	emaciated	(2)	()	1	2
159.	divergence	(4)	()	1	2
160.	dromedary	(2)	()	1	2
161.	embellishing	(2)	()	1	2
162.	entomologist	(3)	()	1	2
163.	constrain	(1)	()	1	2
164.	infirm	(1)	()	1	2
165.	anthropoid	(3)	()	1	2
166.	specter	(4)	()	1	2
167.	incertitude	(2)	()	1	2
168.	vitreous	(1)	()	1	2
169.	obelisk	(1)	()	1	2
170.	embossed	(4)	()	1	2
171.	ambulation	(2)	()	1	2
172.	calyx	(2)	()	1	2
173.	osculation	(3)	()	1	2
174.	cupola	(4)	()	1	2
175.	homunculus	(4)	()	1	2

BASAL = 8 OF 8 CORRECT

CEILING = 6 OF 8 WRONG

COUNT BACK 8 FOR BASAL.

NO JUMP BACK FOR THE PPVT.

CAPI CHECK: IF CHILD GETS 6 OF 8 WRONG, SKIP TO COMPUTE SCORE.

COMPUTE SCORE: (Scores are computed by machine but not displayed.)

A. FINAL BASAL.

— — —

B. HIGHEST CEILING Q# (LAST ITEM WRONG).

— — —

C. TOTAL # OF ERRORS BETWEEN
BASAL AND CEILING.

-- —————

D. SUBTRACT 'C' FROM 'B'.

— — — = SCORE

INTERVIEWER REMARKS:

1. WAS ANYONE ELSE PRESENT IN THE ROOM DURING THE ADMINISTRATION OF THIS SECTION?

YES (GO TO 2) 1

NO (GO TO 3) 0

2.

		EFFECT ON CHILD'S PERFORMANCE		
IF PRESENT,	CODE # PERSONS	SEEMED TO BE HARMFUL	NONE OBSERVABLE	SEEMED TO IMPROVE
MOTHER	—	1	2	3
FATHER	—	1	2	3
OTHER ADULT(S)	— —	1	2	3
CHILDREN	— —	1	2	3

3. CODE CHILD'S ENERGY LEVEL DURING SECTION.

LOW 1
 MEDIUM..... 2
 HIGH..... 3

CAPI CHECK: WAS THIS SECTION TERMINATED PREMATURELY?

YES (GO TO 4)..... 1
 NO (GO TO 7)..... 0

4. REASON(S) FOR PREMATURE TERMINATION OF THIS SECTION.
CODE ALL THAT APPLY.

PARENT/GUARDIAN TERMINATED/REFUSED 01
 CHILD WOULD NOT RESPOND..... 02
 MAJOR INTERRUPTION CAUSED TERMINATION 03
 CHILD COULD NOT UNDERSTAND TASK 04
 CHILD HAD LANGUAGE PROBLEM 05
 CHILD'S EMOTIONAL CONDITION 06
 CHILD'S PHYSICAL CONDITION 07
 CHILD TIRED..... 08
 OTHER (SPECIFY) 09

5. INTERVIEWER: YOU HAVE COMPLETED PPVT-R.
WERE THERE ANY PROBLEMS NOT ALREADY NOTED THAT
OCCURRED DURING THIS ASSESSMENT?

YES (GO TO 6)
 NO (GO TO CST-ASSESS-END)

6. RECORD PROBLEMS: _____

CST-ASSESS-END

PRESS ENTER TO CONTINUE WITH CHILD CAPI SUPPLEMENT.

Lead In(s): CST-CALLMATH [Default], CST-CALLSPPC [Default], CST-CALLDIGIT [Default], CST-
 CALLPPVT [Default]
 Default Next Question: SCHL-AGECK1

CHILD SCHOOLING

AGES: 6-14 YEARS

SCHL-AGECK1

(CHILD AGE (YEARS) >= 6);

/ If Child LT 6, Skip School Q's and start Eval. Of Testing Conditions */*

If Answer =0 Then Go To: CS-END

Lead In(s): CST-AGE2 [Default], CST-ASSESS-END [Default]

Default Next Question: SCHL-TITLE

SCHL-TITLE

SET NAME (HEADERINDEX4,"CHILD SCHOOLING");

/ Header */*

Lead In(s): SCHL-AGECK1 [Default]

Default Next Question: SCHL-1

Reading and Homework

SCHL-1

Now I would like to ask you a few questions about school. About how much time do you spend on homework each week in school?

(INTERVIEWER: RECORD # OF HOURS.)

Enter Answer:

HardMax: 99

SoftMax:50

HardMin: 0

SoftMin:0

If Answer =-2 Then Go To: SCHL-1A

Lead In(s): SCHL-TITLE [Default]

Default Next Question: SCHL-2

SCHL-1A

Which of these is closer to the amount of time you usually spend on homework during school each week?

- 1 1-4 hours
- 2 5-9 hours
- 3 10-14 hours
- 4 15-19 hours
- 5 20 or more hours

Lead In(s): SCHL-1 [-2:-2]

Default Next Question: SCHL-2

SCHL-2

And about how much time do you spend on homework each week outside of school?

(INTERVIEWER: RECORD # OF HOURS.)

Enter Answer:

HardMax: 99

SoftMax:50

HardMin: 0

SoftMin:0

If Answer =-2 Then Go To: SCHL-2A

Lead In(s): SCHL-1 [Default], SCHL-1A [Default]

Default Next Question: SCHL-3

SCHL-2A

Which of these is closer to the amount of time you usually spend on homework outside of school each week?

- 1 1-4 hours
- 2 5-9 hours
- 3 10-14 hours
- 4 15-19 hours
- 5 20 or more hours

Lead In(s): SCHL-2 [-2:-2]

Default Next Question: SCHL-3

SCHL-3

How many hours each week do you read for fun? (Do not count any school-assigned reading.)

(INTERVIEWER: RECORD # OF HOURS.)

Enter Answer:

HardMax: 99

SoftMax:50

HardMin: 0

SoftMin:0

If Answer =-2 Then Go To: SCHL-3A

Lead In(s): SCHL-2 [Default], SCHL-2A [Default]

Default Next Question: SCHL-AGECK2

SCHL-3A

Which of these is closest to the amount of time you usually spend on reading for fun each week?

- 1 1-4 hours
- 2 5-9 hours
- 3 10-14 hours
- 4 15-19 hours
- 5 20 or more hours

Lead In(s): SCHL-3 [-2:-2]

Default Next Question: SCHL-AGECK2

SCHL-AGECK2

(CHILD AGE (YEARS) < 8);

/ Check age for text fill*/*

Lead In(s): SCHL-3 [Default], SCHL-3A [Default]

Default Next Question: SCHL-4

Classroom Activities

SCHL-4

(HAND CHILD SCHOOLING SHOWCARD #1.)

When you have language arts or English class how often does your teacher.../How often does your teacher...

...review work from the previous day?

- 0 Never
- 1 Less than once a month
- 2 1-2 times a month
- 3 1-2 times a week
- 4 Almost every day
- 5 Every day

Lead In(s): SCHL-AGECK2 [Default]

Default Next Question: SCHL-5

SCHL-5

(When you have language arts or English class how often does your teacher.../How often does your teacher...)

...lecture or teach to the whole class at the same time?

- 0 Never
- 1 Less than once a month
- 2 1-2 times a month
- 3 1-2 times a week
- 4 Almost every day
- 5 Every day

Lead In(s): SCHL-4 [Default]

Default Next Question: SCHL-6

SCHL-6

(When you have language arts or English class how often does your teacher.../How often does your teacher...)

...have you use a textbook or workbook?

- 0 Never
- 1 Less than once a month
- 2 1-2 times a month
- 3 1-2 times a week
- 4 Almost every day
- 5 Every day

Lead In(s): SCHL-5 [Default]

Default Next Question: SCHL-7

SCHL-7

(When you have language arts or English class how often does your teacher.../How often does your teacher...)

...have you explain your work or give a report in front of the class (or give a report out loud)?

- 0 Never
- 1 Less than once a month
- 2 1-2 times a month
- 3 1-2 times a week
- 4 Almost every day
- 5 Every day

Lead In(s): SCHL-6 [Default]

Default Next Question: SCHL-8

SCHL-8

(When you have language arts or English class how often does your teacher.../How often does your teacher...)

...have you work in small groups with other students?

- 0 Never
- 1 Less than once a month
- 2 1-2 times a month
- 3 1-2 times a week
- 4 Almost every day
- 5 Every day

Lead In(s): SCHL-7 [Default]

Default Next Question: SCHL-9

SCHL-9

(When you have language arts or English class how often does your teacher.../How often does your teacher...)

...read to you in class?

- 0 Never
- 1 Less than once a month
- 2 1-2 times a month
- 3 1-2 times a week
- 4 Almost every day
- 5 Every day

Lead In(s): SCHL-8 [Default]

Default Next Question: SCHL-10

SCHL-10

(When you have language arts or English class how often does your teacher.../How often does your teacher...)

...have you read books in class?

- 0 Never
- 1 Less than once a month
- 2 1-2 times a month
- 3 1-2 times a week
- 4 Almost every day
- 5 Every day

Lead In(s): SCHL-9 [Default]

Default Next Question: SCHL-11

SCHL-11

(When you have language arts or English class how often does your teacher.../How often does your teacher...)

...have you work on a writing assignment (paper, story, report, poem, etc.)?

- 0 Never
- 1 Less than once a month
- 2 1-2 times a month
- 3 1-2 times a week
- 4 Almost every day
- 5 Every day

Lead In(s): SCHL-10 [Default]

Default Next Question: SCHL-12

SCHL-12

(When you have language arts or English class how often does your teacher.../How often does your teacher...)

...assign you work sheets or workbook pages in class?

- 0 Never
- 1 Less than once a month
- 2 1-2 times a month
- 3 1-2 times a week
- 4 Almost every day
- 5 Every day

Lead In(s): SCHL-11 [Default]

Default Next Question: SCHL-13

SCHL-13

(When you have language arts or English class how often does your teacher.../How often does your teacher...)

...have you use a computer?

- 0 Never
- 1 Less than once a month
- 2 1-2 times a month
- 3 1-2 times a week
- 4 Almost every day
- 5 Every day

Lead In(s): SCHL-12 [Default]

Default Next Question: SCHL-14

SCHL-14

(When you have language arts or English class how often does your teacher.../How often does your teacher...)

...give you a quiz or test?

- 0 Never
- 1 Less than once a month
- 2 1-2 times a month
- 3 1-2 times a week
- 4 Almost every day
- 5 Every day

Lead In(s): SCHL-13 [Default]

Default Next Question: SCHL-15

SCHL-15

(When you have language arts or English class how often does your teacher.../How often does your teacher...)

...give you homework?

- 0 Never
- 1 Less than once a month
- 2 1-2 times a month
- 3 1-2 times a week
- 4 Almost every day
- 5 Every day
- 6 Teacher/school does not give homework (too young)

Lead In(s): SCHL-14 [Default]

Default Next Question: SCHL-16

SCHL-16

(When you have language arts or English class how often does your teacher.../How often does your teacher...)

...grade your homework and pass it back?

- 0 Never
- 1 Less than once a month
- 2 1-2 times a month
- 3 1-2 times a week
- 4 Almost every day
- 5 Every day
- 6 Teacher/school does not give homework (too young)

Lead In(s): SCHL-15 [Default]

Default Next Question: SCHL-17

Parental Involvement

SCHL-17

How often do(es) your parent(s)...

...check on whether you have done your homework?

- 0 Never
- 1 Less than once a month
- 2 1-2 times a month
- 3 1-2 times a week
- 4 Almost every day
- 5 Every day
- 6 Teacher/school does not give homework (too young)

Lead In(s): SCHL-16 [Default]

Default Next Question: SCHL-18

SCHL-18

(How often do(es) your parent(s)...)

...help you with your homework?

- 0 Never
- 1 Less than once a month
- 2 1-2 times a month
- 3 1-2 times a week
- 4 Almost every day
- 5 Every day
- 6 Teacher/school does not give homework (too young)

Lead In(s): SCHL-17 [Default]

Default Next Question: SCHL-19

SCHL-19

(How often do(es) your parent(s)...)

...require you to do work or chores around the home?

- 0 Never
- 1 Less than once a month
- 2 1-2 times a month
- 3 1-2 times a week
- 4 Almost every day
- 5 Every day

Lead In(s): SCHL-18 [Default]

Default Next Question: SCHL-20

SCHL-20

Do(es) your parent(s) ...

...give you special privileges because of good grades or progress reports?

1 Yes

0 No

Lead In(s): SCHL-19 [Default]

Default Next Question: SCHL-21

SCHL-21

(Do(es) your parent(s) ...)

...limit privileges because of poor grades or progress report?

1 Yes

0 No

Lead In(s): SCHL-20 [Default]

Default Next Question: SCHL-22

SCHL-22

(HAND CHILD SCHOOLING SHOWCARD #2.)

How often do your parent(s) ...

...limit the amount of time you can spend watching TV or playing video games?

0 Never

1 Rarely

2 Sometimes

3 Often

Lead In(s): SCHL-21 [Default]

Default Next Question: SCHL-AGECK3

SCHL-AGECK3

(*CHILD AGE (YEARS)* >= 10);

/* If child LT 10 years, go to SCHL-24 */

If Answer =0 Then Go To: SCHL-24

Lead In(s): SCHL-22 [Default]

Default Next Question: SCHL-23

SCHL-23

(How often do your parent(s) ...)

...limit the amount of time you go out with friends on school nights?

- 0 Never
- 1 Rarely
- 2 Sometimes
- 3 Often

Lead In(s): SCHL-AGECK3 [Default]

Default Next Question: SCHL-24

SCHL-24

In the first half of the school year, how often have you discussed the following with either or both of your parents (or guardians)...

...school activities or events of particular interest to you?

- 0 Never
- 1 Rarely
- 2 Sometimes
- 3 Often

Lead In(s): SCHL-23 [Default], SCHL-AGECK3 [0:0]

Default Next Question: SCHL-25

SCHL-25

(In the first half of the school year, how often have you discussed the following with either or both of your parents (or guardians)...)

...things you've studied in class?

- 0 Never
- 1 Rarely
- 2 Sometimes
- 3 Often

Lead In(s): SCHL-24 [Default]

Default Next Question: SCHL-26

SCHL-26

(In the first half of the school year, how often have you discussed the following with either or both of your parents (or guardians)...)

...your grades or report card?

- 0 Never
- 1 Rarely
- 2 Sometimes
- 3 Often

Lead In(s): SCHL-25 [Default]

Default Next Question: SCHL-27

SCHL-27

(In the first half of the school year, how often have you discussed the following with either or both of your parents (or guardians)...)

...community, national, or world events?

- 0 Never
- 1 Rarely
- 2 Sometimes
- 3 Often

Lead In(s): SCHL-26 [Default]

Default Next Question: SCHL-28

SCHL-28

(In the first half of the school year, how often have you discussed the following with either or both of your parents (or guardians)...)

...plans and preparation for district, state, or national tests (such as the ACT, SAT, state proficiency exams)?

- 0 Never
- 1 Rarely
- 2 Sometimes
- 3 Often

Lead In(s): SCHL-27 [Default]

Default Next Question: SCHL-AGECK4

SCHL-AGECK4

(*CHILD AGE (YEARS)* >= 10);

/* If child LT 10 years, go to SCHL-31*/

If Answer =0 Then Go To: SCHL-31

Lead In(s): SCHL-28 [Default]

Default Next Question: SCHL-29

SCHL-29

(In the first half of the school year, how often have you discussed the following with either or both of your parents (or guardians)...)

...selecting courses or programs at school?

- 0 Never
- 1 Rarely
- 2 Sometimes
- 3 Often

Lead In(s): SCHL-AGECK4 [Default]

Default Next Question: SCHL-30

SCHL-30

(In the first half of the school year, how often have you discussed the following with either or both of your parents (or guardians)...)

...going to college?

- 0 Never
- 1 Rarely
- 2 Sometimes
- 3 Often

Lead In(s): SCHL-29 [Default]

Default Next Question: SCHL-31

SCHL-31

(In the first half of the school year, how often have you discussed the following with either or both of your parents (or guardians)...)

...things that are troubling you?

- 0 Never
- 1 Rarely
- 2 Sometimes
- 3 Often

Lead In(s): SCHL-30 [Default], SCHL-AGECK4 [0:0]

Default Next Question: SCHL-32

SCHL-32

(HAND CHILD SCHOOLING SHOWCARD #3.)

In the first half of the school year, how many times did either of your parents (or guardians)...

...attend a school meeting?

- 0 Never/almost never
- 1 1-2 times a term
- 2 Once a month
- 3 1-2 times a month
- 4 Once a week or more

Lead In(s): SCHL-31 [Default]

Default Next Question: SCHL-33

SCHL-33

(In the first half of the school year, how many times did either of your parents (or guardians)...)

...phone or speak to your teacher or counselor?

- 0 Never/almost never
- 1 1-2 times a term
- 2 Once a month
- 3 1-2 times a month
- 4 Once a week or more

Lead In(s): SCHL-32 [Default]

Default Next Question: SCHL-34

SCHL-34

(In the first half of the school year, how many times did either of your parents (or guardians)...)

...attend a school event in which you participated?

- 0 Never/almost never
- 1 1-2 times a term
- 2 Once a month
- 3 1-2 times a month
- 4 Once a week or more

Lead In(s): SCHL-33 [Default]

Default Next Question: SCHL-35

SCHL-35

(In the first half of the school year, how many times did either of your parents (or guardians)...)

...act as a volunteer at your school?

- 0 Never/almost never
- 1 1-2 times a term
- 2 Once a month
- 3 1-2 times a month
- 4 Once a week or more

Lead In(s): SCHL-34 [Default]

Default Next Question: CS-END

CS-END

(CHILD AGE IN MONTHS);

/* Do jumps depending on child age */

If Answer >=36 and Answer <=119 Then Go To: CSEV-TITLE

If Answer >=120 and Answer <=999 Then Go To: CS-SAS

If Answer >=0 and Answer <=35 Then Go To: CSEV-5

Lead In(s): SCHL-35 [Default], SCHL-AGECK1 [0:0]

Default Next Question: CSEV-TITLE

CS-END-REF

(CHILD AGE IN MONTHS);

/* Do jumps depending on child age */

If Answer >=0 and Answer <=119 Then Go To: CSEV-5

If Answer >=120 and Answer <=999 Then Go To: CS-SAS

Lead In(s): CST-PERMCHK [Default]

Default Next Question: CSEV-5

CS-END-TEL

(CHILD AGE IN MONTHS);

/* Do jumps depending on child age. If child is 10 years or older, administer CSAS. */

If Answer >=36 and Answer <=119 Then Go To: CSEV-6

If Answer >=120 and Answer <=999 Then Go To: CS-SAS

If Answer >=0 and Answer <=35 Then Go To: CSEV-5

Lead In(s): CST-TELCHK [1:1]

Default Next Question: CSEV-5

CS-SAS

INTERVIEWER: GIVE *CHILD FULL NAME* THE CHILD SELF-ADMINISTERED SUPPLEMENT. IF THIS IS A TELEPHONE INTERVIEW, TRY TO ADMINISTER THE CSAS TO *CHILD FULL NAME* OVER THE PHONE.

Lead In(s): CS-END [120:999], CS-END-REF [120:999], CS-END-TEL [120:999]

Default Next Question: CS-EVAL-TELCK

CS-EVAL-TELCK

(*INTERVIEW MODE=2*);

/* Check for telephone interview, all kids > 10 yrs */

If Answer =1 Then Go To: CSEV-5

Lead In(s): CS-SAS [Default]

Default Next Question: CSEV-TITLE

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EVALUATION OF TESTING CONDITIONS

CSEV-TITLE

SET NAME (HEADERINDEX6,"EVALUATION OF TESTING CONDITIONS");

/* Header */

Lead In(s): CS-END [Default], CS-EVAL-TELCK [Default], CS-END [36:119]

Default Next Question: CSEV-1A

CSEV-1A

INTERVIEWER: DURING THE INTERVIEW, HOW WAS *CHILD FIRST NAME'S*...ATTITUDE TOWARD BEING TESTED?

- 1 POOR
- 2 BELOW AVERAGE
- 3 AVERAGE
- 4 ABOVE AVERAGE
- 5 EXCELLENT
- 6 UNABLE TO ASSESS CHILD AT ALL

Lead In(s): CSEV-TITLE [Default]

Default Next Question: CSEV-1B

CSEV-1B

INTERVIEWER: HOW WAS *CHILD FIRST NAME'S*...RAPPORT WITH INTERVIEWER?

- 1 POOR
- 2 BELOW AVERAGE
- 3 AVERAGE
- 4 ABOVE AVERAGE
- 5 EXCELLENT
- 6 UNABLE TO ASSESS CHILD AT ALL

Lead In(s): CSEV-1A [Default]

Default Next Question: CSEV-1C

CSEV-1C

INTERVIEWER: HOW WAS *CHILD FIRST NAME'S*... PERSEVERANCE/PERSISTENCE?

- 1 POOR
- 2 BELOW AVERAGE
- 3 AVERAGE
- 4 ABOVE AVERAGE
- 5 EXCELLENT
- 6 UNABLE TO ASSESS CHILD AT ALL

Lead In(s): CSEV-1B [Default]

Default Next Question: CSEV-1D

CSEV-1D

INTERVIEWER: HOW WAS *CHILD FIRST NAME'S*...COOPERATION?

- 1 POOR
- 2 BELOW AVERAGE
- 3 AVERAGE
- 4 ABOVE AVERAGE
- 5 EXCELLENT
- 6 UNABLE TO ASSESS CHILD AT ALL

Lead In(s): CSEV-1C [Default]

Default Next Question: CSEV-1E

CSEV-1E

INTERVIEWER: HOW WAS *CHILD FIRST NAME'S*...MOTIVATION/INTEREST?

- 1 POOR
- 2 BELOW AVERAGE
- 3 AVERAGE
- 4 ABOVE AVERAGE
- 5 EXCELLENT
- 6 UNABLE TO ASSESS CHILD AT ALL ...(Go To CSEV-3)

Lead In(s): CSEV-1D [Default]

Default Next Question: CSEV-2A

CSEV-2A

INTERVIEWER: DURING THE INTERVIEW WERE THERE ANY PROBLEMS WITH *CHILD FIRST NAME'S*... VISUAL SHARPNESS?

- 1 YES
- 0 NO

Lead In(s): CSEV-1E [Default]

Default Next Question: CSEV-2B

CSEV-2B

INTERVIEWER: DURING THE INTERVIEW WERE THERE ANY PROBLEMS WITH *CHILD FIRST NAME'S*... HEARING?

- 1 YES
- 0 NO

Lead In(s): CSEV-2A [Default]
Default Next Question: CSEV-2C

CSEV-2C

INTERVIEWER: DURING THE INTERVIEW WERE THERE ANY PROBLEMS WITH *CHILD FIRST NAME'S*... STATE OF HEALTH?

- 1 YES
- 0 NO

Lead In(s): CSEV-2B [Default]
Default Next Question: CSEV-2D

CSEV-2D

(([CSEV-2A]=1) OR ([CSEV-2B]=1) OR ([CSEV-2C]=1));

If Answer =1 Then Go To: CSEV-2E
Lead In(s): CSEV-2C [Default]
Default Next Question: CSEV-3

CSEV-2E

INTERVIEWER: WHAT WAS THE NATURE OF THE PROBLEM?

Enter Answer:

Lead In(s): CSEV-2D [1:1]
Default Next Question: CSEV-3

CSEV-3

((*CHILD AGE (YEARS)* < 3) OR ((*CHILD AGE (YEARS)* = 3) AND (*MONTHS* < 11)) OR ((*CHILD AGE (YEARS)* = 3) AND (*MONTHS* = 11) AND (*DAYS* < 16)));

/* If child age is less than 3 yrs, 11 months, 16 days skip to CSEV-4 */

If Answer =1 Then Go To: CSEV-4
Lead In(s): CSEV-2D [Default], CSEV-2E [Default], CSEV-1E [6:6]
Default Next Question: CSEV-3B

CSEV-3B

INTERVIEWER: HOW SHY AND ANXIOUS WAS *CHILD FIRST NAME* AT THE END OF THE CHILD SUPPLEMENT?

- 1 (1) NOT AT ALL SHY OR ANXIOUS/SOCIABLE & FRIENDLY
- 2 (2) *
- 3 (3) (MIDPOINT)
- 4 (4) *
- 5 (5) EXTREMELY SHY/QUIET/WITHDRAWN
- 6 (6) UNABLE TO ASSESS CHILD (SPECIFY)

Lead In(s): CSEV-3 [Default]

Default Next Question: CSEV-4

CSEV-4

INTERVIEWER: DID ANY INTERFERENCES OCCUR DURING THE CHILD SUPPLEMENT?

- 1 YES
- 0 NO ...(Go To CSEV-5)

Lead In(s): CSEV-3B [Default], CSEV-3 [1:1]

Default Next Question: CSEV-4A

CSEV-4A

INTERVIEWER (ON A SCALE FROM 1 TO 5): CODE EACH CATEGORY BY AMOUNT OF INTERFERENCE:

...NOISE LEVEL.

- 1 (1) INTERFERING
- 2 (2) *
- 3 (3) (MIDPOINT)
- 4 (4) *
- 5 (5) NOT INTERFERING
- 6 (6) NOT APPLICABLE

Lead In(s): CSEV-4 [Default]

Default Next Question: CSEV-4B

CSEV-4B

INTERVIEWER (ON A SCALE FROM 1 TO 5): CODE EACH CATEGORY BY AMOUNT OF INTERFERENCE:

...INTERRUPTIONS.

- 1 (1) INTERFERING
- 2 (2) *
- 3 (3) (MIDPOINT)
- 4 (4) *
- 5 (5) NOT INTERFERING
- 6 (6) NOT APPLICABLE

Lead In(s): CSEV-4A [Default]
Default Next Question: CSEV-4C

CSEV-4C

INTERVIEWER (ON A SCALE FROM 1 TO 5): CODE EACH CATEGORY BY AMOUNT OF INTERFERENCE:

...DISTRACTIONS.

- 1 (1) INTERFERING
- 2 (2) *
- 3 (3) (MIDPOINT)
- 4 (4) *
- 5 (5) NOT INTERFERING
- 6 (6) NOT APPLICABLE

Lead In(s): CSEV-4B [Default]
Default Next Question: CSEV-4D

CSEV-4D

INTERVIEWER (ON A SCALE FROM 1 TO 5): CODE EACH CATEGORY BY AMOUNT OF INTERFERENCE:

...LIGHT.

- 1 (1) INTERFERING
- 2 (2) *
- 3 (3) (MIDPOINT)
- 4 (4) *
- 5 (5) NOT INTERFERING
- 6 (6) NOT APPLICABLE

Lead In(s): CSEV-4C [Default]
Default Next Question: CSEV-4E

CSEV-4E

INTERVIEWER (ON A SCALE FROM 1 TO 5): CODE EACH CATEGORY BY AMOUNT OF INTERFERENCE:

...TEMPERATURE.

- 1 (1) INTERFERING
- 2 (2) *
- 3 (3) (MIDPOINT)
- 4 (4) *
- 5 (5) NOT INTERFERING
- 6 (6) NOT APPLICABLE

Lead In(s): CSEV-4D [Default]
Default Next Question: CSEV-4F

CSEV-4F

INTERVIEWER (ON A SCALE FROM 1 TO 5): CODE EACH CATEGORY BY AMOUNT OF INTERFERENCE:

...PRESENCE OF OTHERS.

- 1 (1) INTERFERING
- 2 (2) *
- 3 (3) (MIDPOINT)
- 4 (4) *
- 5 (5) NOT INTERFERING
- 6 (6) NOT APPLICABLE

Lead In(s): CSEV-4E [Default]
Default Next Question: CSEV-4G

CSEV-4G

INTERVIEWER: WERE THERE ANY OTHER SOURCES OF INTERFERENCE?

- 1 Yes ...(Go To CSEV-4H)
- 0 No

Lead In(s): CSEV-4F [Default]
Default Next Question: CSEV-5

CSEV-4H

INTERVIEWER: ENTER WHAT THE SOURCE OF THE INTERFERENCE WAS IN THE TEXT BOX.

CODE SOURCE FOR AMOUNT OF INTERFERENCE CAUSED (ON A SCALE FROM 1 TO 5).

(IF NO OTHER SOURCES OF INTERFERENCE, ENTER "NONE" IN THE TEXT BOX, AND SELECT "NOT APPLICABLE" FROM THE PICK LIST BELOW.)

- 1 (1) INTERFERING
- 2 (2) *
- 3 (3) (MIDPOINT)
- 4 (4) *
- 5 (5) NOT INTERFERING
- 6 (6) NOT APPLICABLE

Lead In(s): CSEV-4G [1:1]

Default Next Question: CSEV-5

CSEV-5

INTERVIEWER: WHERE WAS THIS CHILD SUPPLEMENT ADMINISTERED?

- 1 CHILD'S RESIDENCE
- 2 OTHER PRIVATE RESIDENCE
- 3 TELEPHONE INTERVIEW
- 4 OTHER SITE (SPECIFY)

Lead In(s): CST-AGE1 [Default], CST-AGE1A [Default], CS-END-REF [Default], CS-END-TEL [Default],
CSEV-4G [Default], CSEV-4H [Default], CS-EVAL-TELCK [1:1], HLTH-27 [1:1], CS-END [0:35],
CS-END-REF [0:119], CS-END-TEL [0:35], CSEV-4 [0:0]

Default Next Question: CSEV-5B

CSEV-5B

(CHILD AGE IN MONTHS<48);

/* If child age < 48 mos, skip to CSEV-6B*/

If Answer =1 Then Go To: CSEV-6B

Lead In(s): CSEV-5 [Default]

Default Next Question: CSEV-6

CSEV-6

INTERVIEWER: IS THE MOTHER SUPPLEMENT COMPLETED?

- 1 YES ...(Go To CSEV-6B)
- 0 NO

Lead In(s): CSEV-5B [Default], CS-END-TEL [36:119]

Default Next Question: CSEV-6A

CSEV-6A

INTERVIEWER: IF YOU HAVE ALREADY GIVEN MS TO MOTHER, ASK HER IF SHE NEEDS ANY HELP IN COMPLETEING IT. IF YOU HAVE NOT YET GIVEN MS TO MOTHER, DO SO NOW.

Lead In(s): CSEV-6 [Default]

Default Next Question: CSEV-6B

CSEV-6B

((*CHILD AGE (YEARS)* < 3) OR ((*CHILD AGE (YEARS)* = 3) AND (MONTHS < 11)) OR ((*CHILD AGE (YEARS)* = 3) AND (MONTHS = 11) AND (DAYS < 16)));

/* Do jumps depending on child age */

If Answer =1 Then Go To: CSEV-10

Lead In(s): CSEV-6A [Default], CSEV-5B [1:1], CSEV-6 [1:1]

Default Next Question: CSEV-7

CSEV-7

INTERVIEWER: HAVE ALL APPROPRIATE ASSESSMENTS IN THIS CHILD SUPPLEMENT BEEN COMPLETED?

1 YES ...(Go To CSEV-10)

0 NO

Lead In(s): CSEV-6B [Default]

Default Next Question: CSEV-8

CSEV-8

INTERVIEWER: WHY IS CHILD SUPPLEMENT INCOMPLETE?

1 SECTIONS INCOMPLETE

2 TERMINATED PREMATURELY ...(Go To CSEV-9)

Lead In(s): CSEV-7 [Default]

Default Next Question: CSEV-8A

CSEV-8A

INTERVIEWER: TRY TO COMPLETE SECTIONS NOW. AFTER ATTEMPT (WHETHER SUCCESSFUL OR NOT), RETURN HERE AND RECORD RESULTS.

1 CS NOW COMPLETE ...(Go To CSEV-10)

2 CS INCOMPLETE

Lead In(s): CSEV-8 [Default]

Default Next Question: CSEV-9

CSEV-9

INTERVIEWER: WHY WAS CHILD SUPPLEMENT TERMINATED PREMATURELY OR ANY SECTIONS LEFT INCOMPLETE?

- 1 PARENT/GUARDIAN TERMINATED
- 2 CHILD TIRED OR SICK
- 3 CHILD COULDN'T UNDERSTAND
- 4 INTERRUPTION
- 5 CHILD NOT PRESENT
- 6 OTHER (SPECIFY)

Lead In(s): CSEV-8A [Default], CSEV-8 [2:2]

Default Next Question: CSEV-10

CSEV-10

INTERVIEWER: IN WHAT LANGUAGE WAS THIS CHILD SUPPLEMENT ADMINISTERED?

- 1 English
- 2 Spanish
- 3 Other (SPECIFY)

Lead In(s): CSEV-9 [Default], CSEV-6B [1:1], CSEV-7 [1:1], CSEV-8A [1:1]

Default Next Question: CSOB-TITLE

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HOME OBSERVATIONS

AGE 0-14 YEARS

CSOB-TITLE

SET NAME (HEADERINDEX7,"INTERVIEWER OBSERVATIONS OF HOME ENVIRONMENT");

/* Header */

Lead In(s): CSEV-10 [Default]

Default Next Question: CSOB-AGECK1

CSOB-AGECK1

(*CHILD AGE IN MONTHS*);

/* Do jumps depending on child age */

If Answer >=0 and Answer <=35 Then Go To: CSOB-1A

If Answer >=36 and Answer <=71 Then Go To: CSOB-1B

If Answer >=72 and Answer <=179 Then Go To: CSOB-1C

Lead In(s): CSOB-TITLE [Default]

Default Next Question: CSOB-1A

Birth - 2 Years (0-35 Months)

CSOB-1A

INTERVIEWER: DID YOU OBSERVE *CHILD FULL NAME* AND *HIS/HER* MOTHER TOGETHER AT ANY TIME?

1 YES

0 NO ...(Go To CSOB-9A)

Lead In(s): CSOB-AGECK1 [Default], CSOB-AGECK1 [0:35]

Default Next Question: CSOB-2A

CSOB-2A

INTERVIEWER: (MOTHER/GUARDIAN) SPONTANEOUSLY SPOKE TO *CHILD FIRST NAME* TWICE OR MORE (EXCLUDING SCOLDING).

1 YES

0 NO

Lead In(s): CSOB-1A [Default]

Default Next Question: CSOB-3A

HELP SCREEN: HELP-CSOB-2A

CSOB-3A

INTERVIEWER: (MOTHER/GUARDIAN) RESPONDED VERBALLY TO *CHILD FIRST NAME'S* SPEECH.

- 1 YES
- 0 NO

Lead In(s): CSOB-2A [Default]
Default Next Question: CSOB-4A

HELP SCREEN: HELP-CSOB-3A

CSOB-4A

INTERVIEWER: (MOTHER/GUARDIAN) CARESSED, KISSED, OR HUGGED *CHILD FIRST NAME* AT LEAST ONCE.

- 1 YES
- 0 NO

Lead In(s): CSOB-3A [Default]
Default Next Question: CSOB-5A

HELP SCREEN: HELP-CSOB-4A

CSOB-5A

INTERVIEWER: (MOTHER/GUARDIAN) SLAPPED OR SPANKED *CHILD FIRST NAME* AT LEAST ONCE.

- 1 YES
- 0 NO

Lead In(s): CSOB-4A [Default]
Default Next Question: CSOB-6A

HELP SCREEN: HELP-CSOB-5A

CSOB-6A

INTERVIEWER: (MOTHER/GUARDIAN) INTERFERED WITH *CHILD FIRST NAME'S* ACTIONS OR RESTRICTED *CHILD FIRST NAME* FROM EXPLORING MORE THAN 3 TIMES.

- 1 YES
- 0 NO

Lead In(s): CSOB-5A [Default]
Default Next Question: CSOB-7A

HELP SCREEN: HELP-CSOB-6A

CSOB-7A

INTERVIEWER: (MOTHER/GUARDIAN) PROVIDED TOYS OR INTERESTING ACTIVITIES FOR *CHILD FIRST NAME*.

- 1 YES
- 0 NO

Lead In(s): CSOB-6A [Default]
Default Next Question: CSOB-8A

HELP SCREEN: HELP-CSOB-7A

CSOB-8A

INTERVIEWER: (MOTHER/GUARDIAN) KEPT *CHILD FIRST NAME* IN VIEW/COULD SEE *CHILD FIRST NAME*/LOOKED AT *HIM/HER* OFTEN.

1 YES

0 NO

Lead In(s): CSOB-7A [Default]

Default Next Question: CSOB-9A

HELP SCREEN: HELP-CSOB-8A

CSOB-9A

INTERVIEWER: *CHILD FIRST NAME'S* PLAY ENVIRONMENT IS SAFE. (NO POTENTIALLY DANGEROUS HEALTH OR STRUCTURAL HAZARDS WITHIN A TODDLER'S OR INFANT'S RANGE.)

1 YES

0 NO

2 CHILD'S HOME NOT OBSERVED

Lead In(s): CSOB-8A [Default], CSOB-1A [0:0]

Default Next Question: CS-ENDTIME-A

HELP SCREEN: HELP-CSOB-9A

CS-ENDTIME-A

TIME();

/* Collect ending time of supplement */

Lead In(s): CSOB-9A [Default]

Default Next Question: CSIR-TITLE

HELP SCREEN: HELP-CSOB-9A Save Symbol: *ENDTIME*

Age 3-5 Years (36-71 Months)

CSOB-1B

INTERVIEWER: DID YOU OBSERVE *CHILD FULL NAME* AND *HIS/HER* MOTHER TOGETHER AT ANY TIME?

1 YES

0 NO ...(Go To CSOB-8B)

Lead In(s): CSOB-AGECK1 [36:71]

Default Next Question: CSOB-2B

HELP SCREEN: HELP-CSOB-9A

CSOB-2B

INTERVIEWER: (MOTHER/GUARDIAN) CONVERSED WITH *CHILD FIRST NAME* AT LEAST TWICE (EXCLUDING SCOLDING OR SUSPICIOUS COMMENTS).

- 1 YES
- 0 NO

Lead In(s): CSOB-1B [Default]

Default Next Question: CSOB-3B

HELP SCREEN: HELP-CSOB-2B

CSOB-3B

INTERVIEWER: (MOTHER/GUARDIAN) ANSWERED *CHILD FIRST NAME'S* QUESTIONS OR REQUESTS VERBALLY.

- 1 YES
- 0 NO

Lead In(s): CSOB-2B [Default]

Default Next Question: CSOB-4B

HELP SCREEN: HELP-CSOB-3B

CSOB-4B

INTERVIEWER: (MOTHER/GUARDIAN) CARESSED, KISSED, OR HUGGED *CHILD FIRST NAME* AT LEAST ONCE.

- 1 YES
- 0 NO

Lead In(s): CSOB-3B [Default]

Default Next Question: CSOB-5B

HELP SCREEN: HELP-CSOB-4B

CSOB-5B

INTERVIEWER: (MOTHER/GUARDIAN) INTRODUCED INTERVIEWER TO *CHILD FIRST NAME* BY NAME.

- 1 YES
- 0 NO

Lead In(s): CSOB-4B [Default]

Default Next Question: CSOB-6B

HELP SCREEN: HELP-CSOB-5B

CSOB-6B

INTERVIEWER: (MOTHER/GUARDIAN) PHYSICALLY RESTRICTED OR (SHOOK/GRABBED) *CHILD FIRST NAME*.

- 1 YES
- 0 NO

Lead In(s): CSOB-5B [Default]

Default Next Question: CSOB-7B

HELP SCREEN: HELP-CSOB-6B

CSOB-7B

INTERVIEWER: (MOTHER/GUARDIAN) SLAPPED OR SPANKED *CHILD FIRST NAME* AT LEAST ONCE.

- 1 YES
- 0 NO

Lead In(s): CSOB-6B [Default]
Default Next Question: CSOB-8B

HELP SCREEN: HELP-CSOB-7B

CSOB-8B

INTERVIEWER: (MOTHER/GUARDIAN)'S VOICE CONVEYED POSITIVE FEELING ABOUT *CHILD FIRST NAME*.

- 1 YES
- 0 NO

Lead In(s): CSOB-7B [Default], CSOB-1B [0:0]
Default Next Question: CSOB-9B

HELP SCREEN: HELP-CSOB-8B

CSOB-9B

INTERVIEWER: *CHILD FIRST NAME*'S PLAY ENVIRONMENT IS SAFE. (NO POTENTIALLY DANGEROUS STRUCTURAL OR HEALTH HAZARDS WITHIN A PRESCHOOLER'S RANGE).

- 1 YES
- 0 NO
- 2 CHILD'S HOME NOT OBSERVED

Lead In(s): CSOB-8B [Default]
Default Next Question: CSOB-10B

HELP SCREEN: HELP-CSOB-9B

CSOB-10B

INTERVIEWER: INTERIOR OF THE HOME IS DARK OR PERCEPTUALLY MONOTONOUS.

- 1 YES
- 0 NO
- 2 CHILD'S HOME NOT OBSERVED

Lead In(s): CSOB-9B [Default]
Default Next Question: CSOB-11B

HELP SCREEN: HELP-CSOB-10B

CSOB-11B

INTERVIEWER: ALL VISIBLE ROOMS OF HOUSE/APARTMENT ARE REASONABLY CLEAN.

- 1 YES
- 0 NO
- 2 CHILD'S HOME NOT OBSERVED

Lead In(s): CSOB-10B [Default]
Default Next Question: CSOB-12B

HELP SCREEN: HELP-CSOB-11B

CSOB-12B

INTERVIEWER: ALL VISIBLE ROOMS OF HOUSE/APARTMENT ARE MINIMALLY CLUTTERED.

- 1 YES
- 0 NO
- 2 CHILD'S HOME NOT OBSERVED

Lead In(s): CSOB-11B [Default]

Default Next Question: CS-ENDTIME-B

HELP SCREEN: HELP-CS0B-12B

CS-ENDTIME-B

TIME();

/* Collect ending time of supplement */

Lead In(s): CSOB-12B [Default]

Default Next Question: CSIR-1

HELP SCREEN: HELP-CS0B-12B Save Symbol: *ENDTIME*

Age 6-14 Years (72-179 Months)

CSOB-1C

INTERVIEWER: DID YOU OBSERVE *CHILD FULL NAME* AND *HIS/HER* MOTHER TOGETHER AT ANY TIME?

- 1 YES
- 0 NO ... (Go To CSOB-6C)

Lead In(s): CSOB-AGECK1 [72:179]

Default Next Question: CSOB-2C

HELP SCREEN: HELP-CS0B-12B

CSOB-2C

INTERVIEWER: (MOTHER/GUARDIAN) ENCOURAGED *CHILD FIRST NAME* TO CONTRIBUTE TO THE CONVERSATION.

- 1 YES
- 0 NO

Lead In(s): CSOB-1C [Default]

Default Next Question: CSOB-3C

HELP SCREEN: HELP-CSOB-2C

CSOB-3C

INTERVIEWER: (MOTHER/GUARDIAN) ANSWERED *CHILD FIRST NAME*'S QUESTIONS OR REQUESTS VERBALLY.

- 1 YES
- 0 NO

Lead In(s): CSOB-2C [Default]

Default Next Question: CSOB-4C

HELP SCREEN: HELP-CSOB-3C

CSOB-4C

INTERVIEWER: (MOTHER/GUARDIAN) CONVERSED WITH *CHILD FIRST NAME* EXCLUDING SCOLDING OR SUSPICIOUS COMMENTS.

- 1 YES
- 0 NO

Lead In(s): CSOB-3C [Default]

Default Next Question: CSOB-5C

HELP SCREEN: HELP-CSOB-4C

CSOB-5C

INTERVIEWER: (MOTHER/GUARDIAN) INTRODUCED INTERVIEWER TO *CHILD FIRST NAME* BY NAME.

- 1 YES
- 0 NO

Lead In(s): CSOB-4C [Default]

Default Next Question: CSOB-6C

HELP SCREEN: HELP-CSOB-5C

CSOB-6C

INTERVIEWER: (MOTHER/GUARDIAN)'S VOICE CONVEYED POSITIVE FEELING ABOUT *CHILD FIRST NAME*.

- 1 YES
- 0 NO

Lead In(s): CSOB-5C [Default], CSOB-1C [0:0]

Default Next Question: CSOB-7C

HELP SCREEN: HELP-CSOB-6C

CSOB-7C

INTERVIEWER: INTERIOR OF THE HOME IS DARK OR PERCEPTUALLY MONOTONOUS.

- 1 YES
- 0 NO
- 2 CHILD'S HOME NOT OBSERVED

Lead In(s): CSOB-6C [Default]

Default Next Question: CSOB-8C

HELP SCREEN: HELP-CSOB-7C

CSOB-8C

INTERVIEWER: ALL VISIBLE ROOMS OF THE HOUSE/APARTMENT ARE REASONABLY CLEAN.

- 1 YES
- 0 NO
- 2 CHILD'S HOME NOT OBSERVED

Lead In(s): CSOB-7C [Default]

Default Next Question: CSOB-9C

HELP SCREEN: HELP-CSOB-8C

CSOB-9C

INTERVIEWER: ALL VISIBLE ROOMS OF THE HOUSE/APARTMENT ARE MINIMALLY CLUTTERED.

- 1 YES
- 0 NO
- 2 CHILD'S HOME NOT OBSERVED

Lead In(s): CSOB-8C [Default]

Default Next Question: CSOB-10C

HELP SCREEN: HELP-CSOB-9C

CSOB-10C

INTERVIEWER: BUILDING HAS NO POTENTIALLY DANGEROUS STRUCTURAL OR HEALTH HAZARDS WITHIN A SCHOOL-AGED CHILD'S RANGE.

- 1 YES
- 0 NO
- 2 CHILD'S HOME NOT OBSERVED

Lead In(s): CSOB-9C [Default]

Default Next Question: CS-ENDTIME-C

HELP SCREEN: HELP-CSOB-10C

CS-ENDTIME-C

TIME();

/* Collect ending time of supplement */

Lead In(s): CSOB-10C [Default]

Default Next Question: CSIR-TITLE

HELP SCREEN: HELP-CSOB-10C Save Symbol: *ENDTIME*

INTERVIEWER REMARKS

CSIR-TITLE

SET NAME (HEADERINDEX8,"INTERVIEWER REMARKS");

/ Header */*

Lead In(s): CS-ENDTIME-A [Default], CS-ENDTIME-C [Default]

Default Next Question: CSIR-1

HELP SCREEN: HELP-CSOB-10C

CSIR-1

INTERVIEWER: LIST QUESTIONS WITH SKIP ERRORS, QUESTIONS THAT WERE CONFUSING TO YOU, OR QUESTIONS THAT OTHERWISE DIDN'T WORK.

1 SELECT TO ENTER QUESTION

0 NO QUESTIONS CAUSED RESPONDENT PROBLEMS ...(Go To CSIR-EVAL)

Lead In(s): CS-FILLEXIT [Default], CS-ENDTIME-B [Default], CSIR-TITLE [Default]

Default Next Question: CSIR-1A

HELP SCREEN: HELP-CSOB-10C

CSIR-1A

INTERVIEWER: LIST SECTION AND QUESTION NUMBER OF FIRST QUESTION THAT CAUSED RESPONDENT PROBLEMS. IF DON'T KNOW SECTION OR QUESTION NUMBER, RECORD DESCRIPTION OF QUESTION.

Enter Answer: |_____|

Lead In(s): CSIR-1 [Default]

Default Next Question: CSIR-1B

HELP SCREEN: HELP-CSOB-10C

CSIR-1B

INTERVIEWER: ENTER DESCRIPTION OF PROBLEM WITH QUESTION MENTIONED IN CSIR-1A. PRESS <PG-UP> TO REVIEW CSIR-1A.

Enter Answer: |_____|

Lead In(s): CSIR-1A [Default]

Default Next Question: CSIR-1C

HELP SCREEN: HELP-CSOB-10C

CSIR-1C

INTERVIEWER: WERE THERE ANY OTHER QUESTIONS THAT CAUSED PROBLEMS?

1 SELECT TO ENTER QUESTION

0 NO QUESTIONS CAUSED RESPONDENT PROBLEMS ...(Go To CSIR-EVAL)

Lead In(s): CSIR-1B [Default]

Default Next Question: CSIR-1A2

HELP SCREEN: HELP-CSOB-10C

CSIR-1A2

INTERVIEWER: LIST SECTION AND QUESTION NUMBER OF FIRST QUESTION THAT CAUSED RESPONDENT PROBLEMS. IF DON'T KNOW SECTION OR QUESTION NUMBER, RECORD DESCRIPTION OF QUESTION.

Enter Answer: |_____|

Lead In(s): CSIR-1C [Default]

Default Next Question: CSIR-1B2

HELP SCREEN: HELP-CSOB-10C

CSIR-1B2

INTERVIEWER: ENTER DESCRIPTION OF PROBLEM WITH QUESTION MENTIONED IN CSIR-1A. PRESS <PG-UP> TO REVIEW CSIR-1A.

Enter Answer: |_____|

Lead In(s): CSIR-1A2 [Default]

Default Next Question: CSIR-EVAL

HELP SCREEN: HELP-CSOB-10C

CSIR-EVAL

INTERVIEWER: IN GENERAL, WHAT WAS THE MOTHER'S ATTITUDE ABOUT ANSWERING QUESTIONS ON THE COMPUTER DIRECTLY? PLEASE DESCRIBE BELOW.

IF MOTHER DID NOT ENTER ANY ANSWERS HERSELF, ENTER "NA". IF NO REACTION, ENTER "NONE".

PRESS <ENTER> TO CONTINUE.

Enter Answer: |_____|

Lead In(s): CSIR-1B2 [Default], CSIR-1 [0:0], CSIR-1C [0:0]

Default Next Question: CSIR-REMINDER

HELP SCREEN: HELP-CSOB-10C

CSIR-REMINDER

INTERVIEWER: MAKE SURE THAT MOTHER HAS BEEN PAID AND THAT SHE HAS SIGNED THE RECEIPT. IF YOU HAVE NOT ALREADY THANKED MOTHER AND CHILD FOR THEIR PARTICIPATION, PLEASE DO SO NOW.

Lead In(s): CSIR-EVAL [Default]

Default Next Question: CSIR-IDNUM

HELP SCREEN: HELP-CSOB-10C

Go To: CSIR-IDNUM

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APPENDIX A:

HOME OBSERVATIONS HELP RECORDS

NLSY79 Child HOME Observations Help Records

In the computer assisted CAPI NLSY79 Child Supplement, interviewers have access to instructions that guide them in the administration of the electronic questionnaire. These “help” screens replace the traditional hardcopy question-by-question instructions that typically accompany a paper and pencil interview schedule.

The help screens (records) listed below are physically linked to the HOME Observation questions in the CAPI questionnaire for the NLSY79 Child survey. These help records are electronically available to the interviewer during the administration of the CAPI instrument.

For each help screen below, the Question Name appears to the left and a brief explanation of the question to the right. A substantive instruction, adapted directly from the HOME manual as prepared by the designers of the original instrument, appears in each record block. Only help records actively linked to the HOME section of the Child CAPI questionnaire are contained in this list.

NOTE: General interviewer instructions on the administration of each of the Child assessments appear on screens directly preceding the CAPI sections containing the assessments.

NLSY79 Child HOME Observations Help Records

HELP-CSOB-2A Title: HOME: Mom spontaneously spoke to child twice or more.

MOTHER SPONTANEOUSLY VOCALIZES TO CHILD AT LEAST TWICE DURING THE VISIT (EXCLUDING SCOLDING). "Vocalizes" refers to any sound or words emitted by the mother. For example, she may say, "S-s-s-" or "Sweet baby," or any random words or sounds. In order for this item to be coded "yes", the mother's vocalizations must have occurred spontaneously as opposed to having occurred in response to some vocalization by the child.

HELP-CSOB-3A Title: HOME: Mom responded verbally to child's speech.

MOTHER RESPONDS TO CHILD'S VOCALIZATIONS WITH A VOCAL OR VERBAL RESPONSE. Again the maternal response may be either a complete word or words or merely clearly differentiated sounds, e.g., "ta-ta"; "tsk-tsk," or "You talking to Mommy?" The key factor here is that the mother is responding to the child's vocalization, not ignoring it. If the child does not vocalize during the interview, thereby denying the mother an opportunity to respond, the score would still be "no."

HELP-CSOB-4A Title: HOME: Mom caressed, kissed, hugged child at least once.

MOTHER CARESSES OR KISSES CHILD AT LEAST ONCE DURING THE VISIT. "Caresses" include a hug, a stroke of the hair, patting an arm or leg, reaching out affectionately and touching the face, etc. Blowing a kiss as well as actually establishing physical contact may be counted as a kiss.

HELP-CSOB-5A Title: HOME: Mom slapped/spanked child once or more.

MOTHER SLAPS OR SPANKS CHILD DURING THE VISIT. Occasionally a visitor will feel that she does not know whether a mother is playing or seriously slapping or spanking a child. The best guide to use in such instances is the child's behavior. If the child reacts with pleasure or happiness, chances are this represents a style of positive interaction between him and his mother. This case would be coded "no", - did not slap or spank. If he frowns, looks unhappy, whimpers, or cries, you can feel pretty confident that, however the mother intended it, the child did not perceive it as pleasurable.

HELP-CSOB-6A Title: HOME: Mom interfered with child's actions more than 3 times.

MOTHER INTERFERES WITH CHILD'S ACTIONS OR RESTRICTS CHILD'S MOVEMENT MORE THAN THREE TIMES DURING THE VISIT. Restrictions and interference here refer to such things as: taking a toy away from a child; putting a child who has climbed up on the sofa back down on the floor; putting a child who is crawling around the floor into a playpen or crib; slapping a child as he starts to pick up the visitor's handbag. In the last instance, the item would be applicable to item CSOB-5A. The Restrictions may also be verbal--"Stop that"; "Get out of there." Do not code as interference any action taken to prevent the child from harming himself (e.g., running into the street).

HELP-CSOB-7A Title: HOME: Mom provided toys or interesting activities.

MOTHER PROVIDES TOYS OR INTERESTING ACTIVITIES FOR CHILD DURING THE INTERVIEW. In order to be credited on this item, the mother must make some special effort to see to it that the child has something interesting to do during the time she will be talking to the interviewer. If the interview is conducted in a room that contains a number of toys or the child's toy box, one should assume that the mother has taken special efforts to have something available to entertain the child during the interview. If, however, the child tires of what is available and begins to whimper or to ask for something to do, this item should not be coded "yes" unless at that time the mother makes some special effort to bring out a new toy or do something else to interest the child.

HELP-CSOB-8A Title: HOME: Mom kept child in view/looked at child often.

MOTHER TENDS TO KEEP CHILD WITHIN VISUAL RANGE AND TO LOOK AT HIM OFTEN. "Often" means frequently enough to ensure safety of the child and to keep some kind of interpersonal contact with him -- the sort of thing lovers do when in the same room but out of reach of one another.

HELP-CSOB-9A Title: HOME: Child's play environment is safe.

THE CHILD'S PLAY ENVIRONMENT APPEARS SAFE AND FREE OF HAZARDS. The interviewer should use her own good judgment in scoring this item. Examples of hazards are: broken glass lying around, furniture with obvious wood splinters, an uncovered rotary fan, boards with nails sticking out, unprotected stairs for a pre-walking baby, a house so close to the street that a child could not safely play in the yard, pot handles extending over edge of the stove, etc. Overcrowding or clutter would not count as a hazard unless it existed to the extent that it could injure the child.

HELP-CSOB-2B Title: HOME: Mom conversed with child at least twice.

MOTHER CONVERSES WITH CHILD AT LEAST TWICE DURING VISIT (SCOLDING AND SUSPICIOUS COMMENTS ARE NOT COUNTED.) This item involves maternal conversation, not just vocalization which can be any sounds or words exchanged with the child. The mother must make an effort to converse with the child and ask questions, to talk about things, or engage in verbal interchange other than scolding or degrading comments.

HELP-CSOB-3B Title: HOME: Mom answered child's questions/requests verbally.

MOTHER ANSWERS CHILD'S QUESTIONS OR REQUESTS VERBALLY. In order to receive credit for this item the mother must make an effort to answer the question for the child. If the mother is unable to answer it at the moment she may tell the child she doesn't know but that they will look up the answer later. Responses such as "Mother's busy, go away" or "Don't bother me now" should be coded "no".

HELP-CSOB-4B Title: HOME: Mom kissed/caressed/hugged child at least once.

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

HELP-CSOB-5B Title: HOME: Mom introduced interviewer to child by name.

MOTHER INTRODUCES INTERVIEWER TO CHILD. In many cases the child already knows the interviewer; however, the mother must still remind the child of the visitor's name. A formal introduction is not necessary for credit. A comment such as, "You remember Mrs. Jones, don't you?" or "Show Mrs. Jones the new book you got for your birthday" will receive credit. The object is for the mother to make the child aware of the visitor's name and the fact that she has come to visit both of them and not just the mother.

HELP-CSOB-6B Title: HOME: Mom physically restricted/grabbed child.

MOTHER USED PHYSICAL RESTRAINT, SHOOK, GRABBED, OR PINCHED CHILD DURING VISIT. In a younger child the mother might be apt to hold the child in her lap even though the child struggles to get down. An older child might be placed in a chair to keep him out of the way, or he might be jerked back for handling items on a table or pulled away if he tried to climb on the interviewer's lap.

HELP-CSOB-7B Title: HOME: Mom slapped/spanked child at least once.

MOTHER SLAPS OR SPANKS CHILD DURING VISIT. This item goes hand in hand with HELP-CSOB-6B. In this item the slaps and spanks must be in anger or as a reprimand for some wrongdoing. An affectionate pat on the bottom as the mother sends the child out to play does not mean a slap or spank.

HELP-CSOB-8B Title: HOME: Mom voice conveyed positive feeling about child.

WHEN SPEAKING OF OR TO CHILD, MOTHER'S VOICE CONVEYS POSITIVE FEELING. Is the mother pleased with her child? Does she enjoy her and talk about her in a pleasant, joyful manner or does she talk in a flat tone that communicates, "She's here, so I'll put up with her."

HELP-CSOB-9B Title: HOME: Child's play environment is safe.

CHILD'S PLAY ENVIRONMENT APPEARS SAFE AND FREE OF HAZARDS. (Not having any outside play area requires an automatic "no".) The interviewer should use good judgment on the scoring. Examples of typical building/home hazards are: plaster coming down from ceiling, stairway with boards missing, rodents, broken glass lying around, junk cars abandoned in the yard or along the side of the street, open ditches of a house so close to a street that a child could not safely play in the yard, and boards with nails sticking out of them.

HELP-CSOB-10B Title: HOME: Interior of home dark/monotonous.

THE INTERIOR OF THE APARTMENT OR HOME IS DARK OR PERCEPTUALLY MONOTONOUS. On this item the interviewer can take into account a lack of lighting, drawn drapes, a lack of pictures or plants, or a seeming lack of effort to dress the home up and make it attractive.

HELP-CSOB-11B Title: HOME: Rooms are reasonably clean.

ALL VISIBLE ROOMS OF THE HOUSE ARE REASONABLY CLEAN. The interviewer will have to use his or her own good judgment. Allowances should be made for differing styles of housekeeping. However, very dirty walls or an abundance of cobwebs should be coded "no." The interviewer should be able to sit on a chair or sofa without first having to clear a space to sit, and the floor should be relatively free of clutter or trash.

HELP-CSOB-12B Title: HOME: Rooms are reasonably uncluttered.

ALL VISIBLE ROOMS OF THE HOUSE ARE MINIMALLY UNCLUTTERED. The interviewer will have to use his or her own good judgment. Allowances should be made for differing styles of housekeeping. The interviewer should be able to sit on a chair or sofa without first having to clear a space to sit, and the floor should be relatively free of clutter or trash.

HELP-CSOB-2C Title: HOME: Mom encouraged child to converse.

PARENT ENCOURAGES CHILD TO CONTRIBUTE TO THE CONVERSATION DURING VISIT. This item should be scored "yes" if the parent actively encourages the child to say something or if the parent allows the child input into the conversation without discouragement.

HELP-CSOB-3C Title: HOME: Mom answered child's questions/requests.

PARENT RESPONDS TO CHILD'S QUESTIONS DURING INTERVIEW. In order to receive credit for this item the parent must make an effort to answer the question for the child. If the parent is unable to answer the question at the moment she may tell the child she doesn't know but that they will look up the answer later. Responses such as, "I'm busy, go away." or, "Don't bother me now." do not receive credit. If the child fails to ask a question during the interview, this item should be coded "no."

HELP-CSOB-4C Title: HOME: Mom conversed with child excluding scolding.

PARENT TALKS TO CHILD DURING VISIT (BEYOND CORRECTION AND INTRODUCTION). This item refers to conversation, not just vocalization. The parent must make an effort to converse with the child and ask questions, to talk about things, or to engage in verbal interchange other than scolding or degrading comments.

HELP-CSOB-5C Title: HOME: Mom introduced interviewer to child by name.

PARENT INTRODUCES INTERVIEWER TO CHILD. To receive credit for this item, parent should introduce the child to the interviewer by name and in some way identify the visitor for the child.

HELP-CSOB-6C Title: HOME: Mom voice conveyed positive feeling about child.

WHEN SPEAKING OF OR TO CHILD, PARENT'S VOICE CONVEYS POSITIVE FEELINGS. The intent of this item is to capture the feeling tone conveyed by the parent toward the child. Does the parent feel good about her child? Does she enjoy her and talk about her in a pleasant, joyful manner or does she talk in a flat tone which communicates, "She's here, so I'll put up with her."

HELP-CSOB-7C Title: HOME: Home is dark or perceptually monotonous.

THE INTERIOR OF THE APARTMENT IS DARK OR PERCEPTUALLY MONOTONOUS. On this item the interviewer can take into account a lack of lighting, drawn drapes, a lack of pictures or plants, or a seeming lack of effort to dress the home up and make it attractive.

HELP-CSOB-8C Title: HOME: All rooms are reasonably clean.

ALL VISIBLE ROOMS OF THE HOUSE ARE REASONABLY CLEAN. Allowances should be made for differing styles of housekeeping. However, very dirty walls or an abundance of cobwebs should be coded "no." The interviewer should be able to sit on a chair or sofa without first having to clear a space to sit, and the floor should be relatively free of clutter or trash.

HELP-CSOB-9C Title: HOME: All rooms are minimally cluttered.

ALL VISIBLE ROOMS OF THE HOUSE ARE MINIMALLY CLUTTERED. Allowances should be made for differing styles of housekeeping. However, the interviewer should be able to sit on a chair or sofa without first having to clear a space to sit, and the floor should be relatively free of clutter or trash.

HELP-CSOB-10C Title: HOME: Building has no dangers/health hazards.

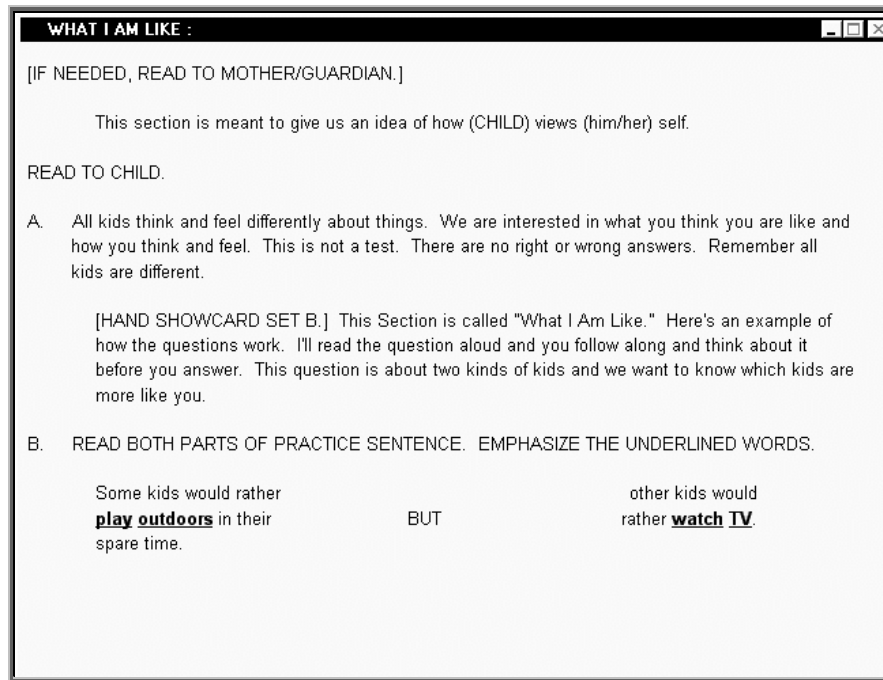
BUILDING HAS NO POTENTIALLY DANGEROUS STRUCTURAL OR HEALTH DEFECTS (E.G., NO PLASTER COMING DOWN FROM CEILING, STAIRWAY WITH BOARDS MISSING, RODENTS, ETC.) Some of the most common concerns for this item are: open gas fires in the small home, and the presence of bleach, cleaning fluids, and other poisons within easy reach of a small child. Overcrowding or clutter in the home would not count as a hazard unless it is to such an extent that it could injure the child. A safe environment should be coded "yes."

APPENDIX B:

2000 CHILD CAPI SAMPLE ASSESSMENT SCREENS

SAMPLE SCREENS - WHAT I AM LIKE (SPPC)

The interviewer sees the following two instruction screens at the start of the What I Am Like assessment.



WHAT I AM LIKE :

[IF NEEDED, READ TO MOTHER/GUARDIAN.]

This section is meant to give us an idea of how (CHILD) views (him/her) self.

READ TO CHILD.

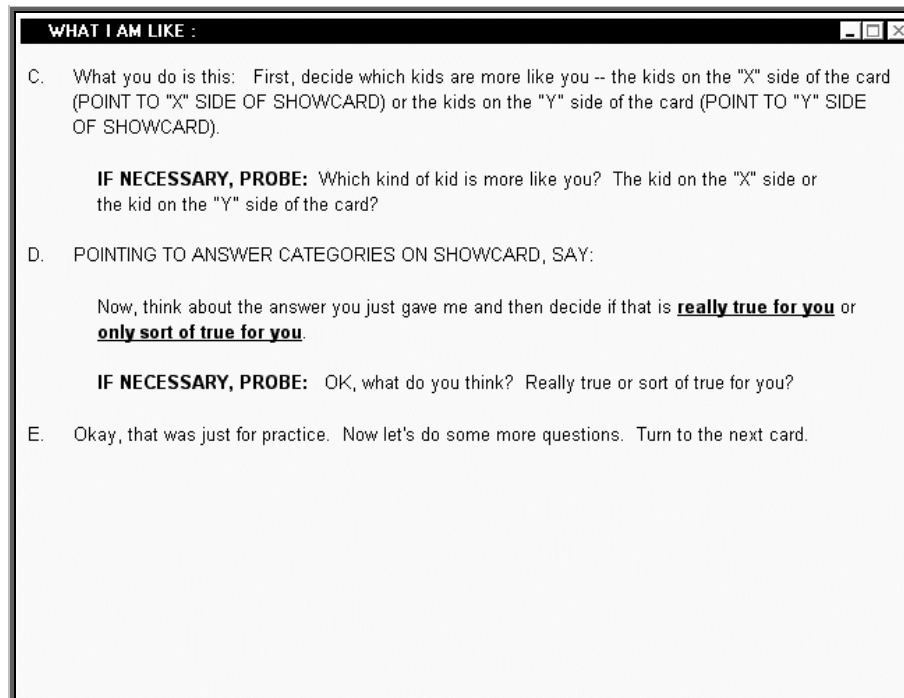
A. All kids think and feel differently about things. We are interested in what you think you are like and how you think and feel. This is not a test. There are no right or wrong answers. Remember all kids are different.

[HAND SHOWCARD SET B.] This Section is called "What I Am Like." Here's an example of how the questions work. I'll read the question aloud and you follow along and think about it before you answer. This question is about two kinds of kids and we want to know which kids are more like you.

B. READ BOTH PARTS OF PRACTICE SENTENCE. EMPHASIZE THE UNDERLINED WORDS.

Some kids would rather play outdoors in their spare time. BUT other kids would rather watch TV.

Figure 2. The first instruction screen of the What I Am Like assessment.



WHAT I AM LIKE :

C. What you do is this: First, decide which kids are more like you -- the kids on the "X" side of the card (POINT TO "X" SIDE OF SHOWCARD) or the kids on the "Y" side of the card (POINT TO "Y" SIDE OF SHOWCARD).

IF NECESSARY, PROBE: Which kind of kid is more like you? The kid on the "X" side or the kid on the "Y" side of the card?

D. POINTING TO ANSWER CATEGORIES ON SHOWCARD, SAY:

Now, think about the answer you just gave me and then decide if that is really true for you or only sort of true for you.

IF NECESSARY, PROBE: OK, what do you think? Really true or sort of true for you?

E. Okay, that was just for practice. Now let's do some more questions. Turn to the next card.

Figure 3. The second instruction screen of the What I Am Like assessment.

WHAT I AM LIKE :

Question # 1

☒ X ☐ Y

Some kids feel they are very good at their school work

BUT

Other kids worry about whether they can do the school work assigned to them

REALLY TRUE FOR ME SORT OF TRUE FOR ME SORT OF TRUE FOR ME REALLY TRUE FOR ME

☒ 1 ☒ 2 ☐ 3 ☐ 4

Restart

F1 Help F2 Comm. F5 Refuse F6 DKnow F10 Quit PgUp Prev Q.

Figure 4. Question 1 of the What I Am Like Assessment is representative of assessment items as seen by the interviewer. The interviewer enters the respondent's selection of X or Y, then the respondent's selection of "really true for me" or "sort of true for me." One question item is shown per screen.

SIDE ONE

REALLY TRUE FOR ME	SORT OF TRUE FOR ME	X	Q#	Y	SORT OF TRUE FOR ME	REALLY TRUE FOR ME
4	3	Some kids feel they are very <u>good</u> at their school work.	1. BUT	Other kids <u>worry</u> about whether they can do the school work assigned to them.	2	1
1	2	Some kids are often <u>unhappy</u> with themselves.	2. BUT	Other kids are pretty <u>pleased</u> with themselves.	3	4
4	3	Some kids feel like they are <u>just as smart</u> as other kids their ages.	3. BUT	Other kids aren't so sure and <u>wonder</u> if they are as smart.	2	1
1	2	Some kids <u>don't</u> like the way they are leading their life.	4. BUT	Other kids <u>do</u> like the way they are leading their life.	3	4
1	2	Some kids are pretty <u>slow</u> in finishing their school work.	5. BUT	Other kids can do their school work <u>quickly</u> .	3	4
4	3	Some kids are <u>happy</u> with themselves as a person.	6. BUT	Other kids are often <u>not</u> happy with themselves as a person.	2	1

There are a few more of these. Turn the card over.

Figure 4a: What I Am Like (SPPC): Show Card viewed by child.

SIDE TWO

REALLY TRUE FOR ME	SORT OF TRUE FOR ME	X	Q#	Y	SORT OF TRUE FOR ME	REALLY TRUE FOR ME
1	2	Some kids often <u>forget</u> what they learn.	7. BUT	Other kids can remember things <u>easily</u> .	3	4
4	3	Some kids <u>like</u> the kind of <u>person</u> they are.	8. BUT	Other kids often wish they were someone else.	2	1
4	3	Some kids do <u>very well</u> at their classwork.	9. BUT	Other kids <u>don't</u> do very well at their classwork.	2	1
4	3	Some kids are very <u>happy</u> being the way they are.	10. BUT	Other kids wish they were <u>different</u> .	2	1
1	2	Some kids have <u>trouble</u> figuring out the answers in school.	11. BUT	Other kids almost <u>always</u> can figure out the answers.	3	4
1	2	Some kids <u>are not</u> very happy with the way they do a lot of things.	12. BUT	Other kids think the way they do things is <u>fine</u> .	3	4

Figure 4b: What I Am Like (SPPC): Continuation of the Show Card viewed by child.

SAMPLE SCREENS - MEMORY FOR DIGIT SPAN

MEMORY FOR DIGIT SPAN :

[IF NEEDED, READ TO MOTHER/GUARDIAN.]

This section gives us an idea of (CHILD)'s memory for number order. Each sequence of numbers has more digits than the last. It is rare for anyone to remember all the sequences.

INSTRUCTIONS FOR DIGITS FORWARD

ADMINISTER QUESTIONS:

- (1) READ EACH DIGIT SPAN **ONLY ONCE** AT AN EVEN RATE OF 1 DIGIT PER SECOND.
- (2) READ PART A OF QUESTIONS; PAUSE FOR RESPONSE THEN SCORE.
- (3) READ PART B OF QUESTION; PAUSE FOR RESPONSE THEN SCORE.
- (4) IF CHILD DOES NOT RESPOND, DO **NOT** ENCOURAGE FURTHER.

SCORE QUESTIONS:

- (1) TO BE SCORED CORRECT, NO DIGITS MAY BE OMITTED OR BE IN REVERSE ORDER.

Figure 5. The instruction screen at the start of the Memory for Digit Span assessment.

MEMORY FOR DIGIT SPAN :

DIGITS FORWARD.

READ TO CHILD IF NECESSARY : I'm going to say some numbers. Listen carefully,
and when I'm through, say them right after me.
SAY: 'Ready' BEFORE EACH QUESTION.

Question #1 .A. **3 - 8 - 6**

CORRECT

WRONG

F1 Help F2 Comm. F5 Refuse F6 DKnow F10 Quit PgUp Prev Q.

Figure 6. Question 1 of the Digits Forward section of the Memory for Digit Span assessment is representative of assessment items as seen by the interviewer. The interviewer enters whether the respondent is correct or wrong.

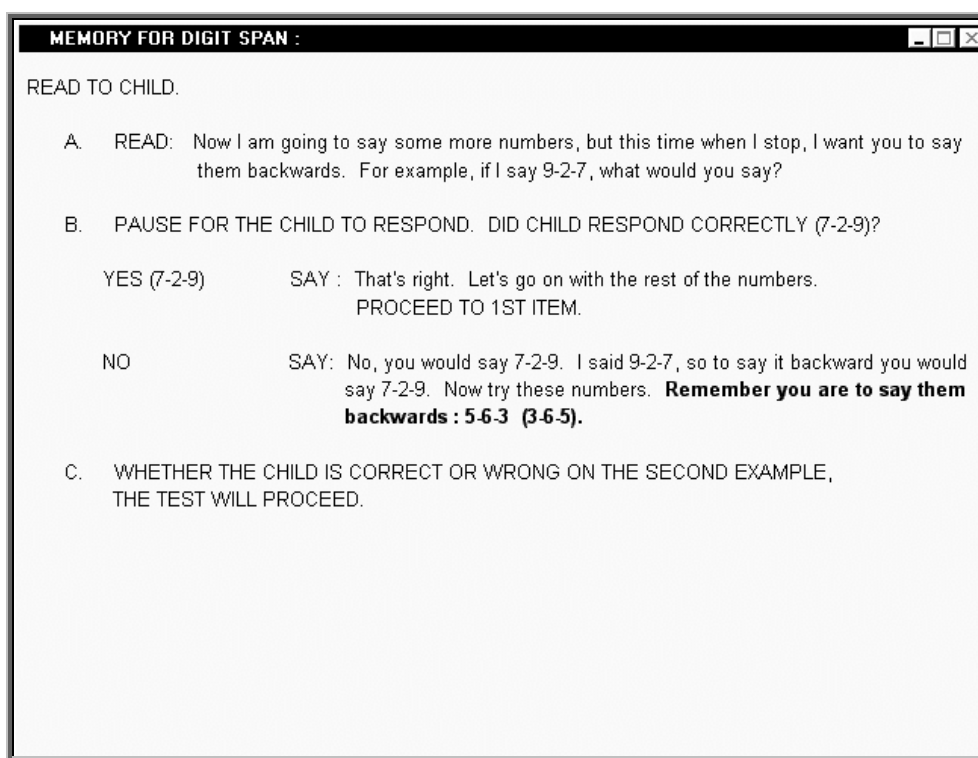


Figure 7. The instruction screen for the Digits Backward section of the assessment.

SAMPLE SCREENS - PIAT MATH

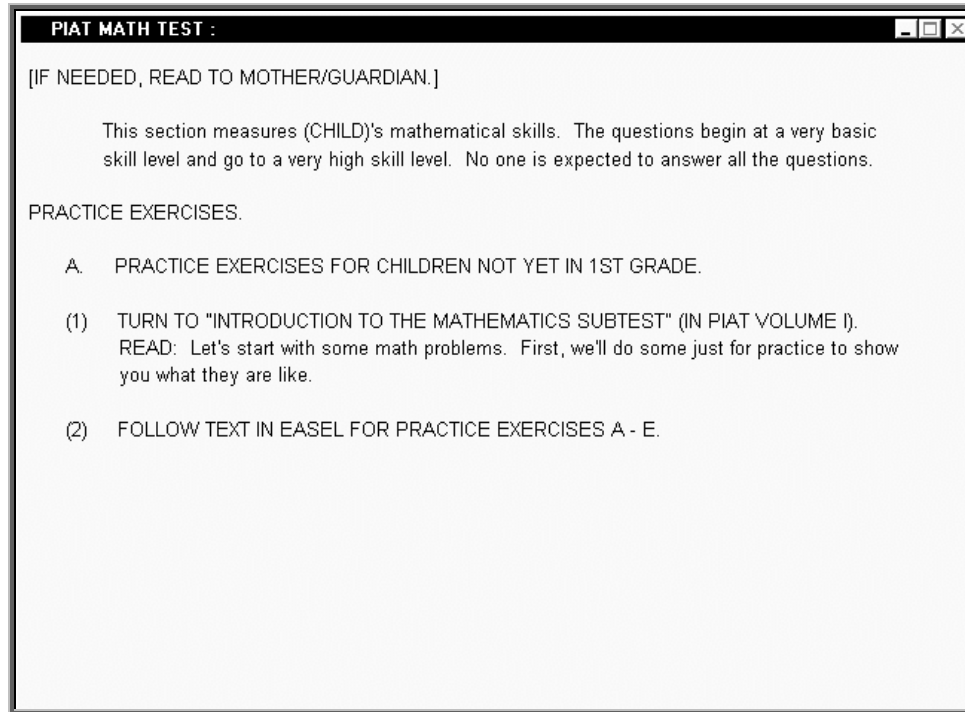


Figure 8. PIAT Math instruction screen if the child has not reached the 1st grade.

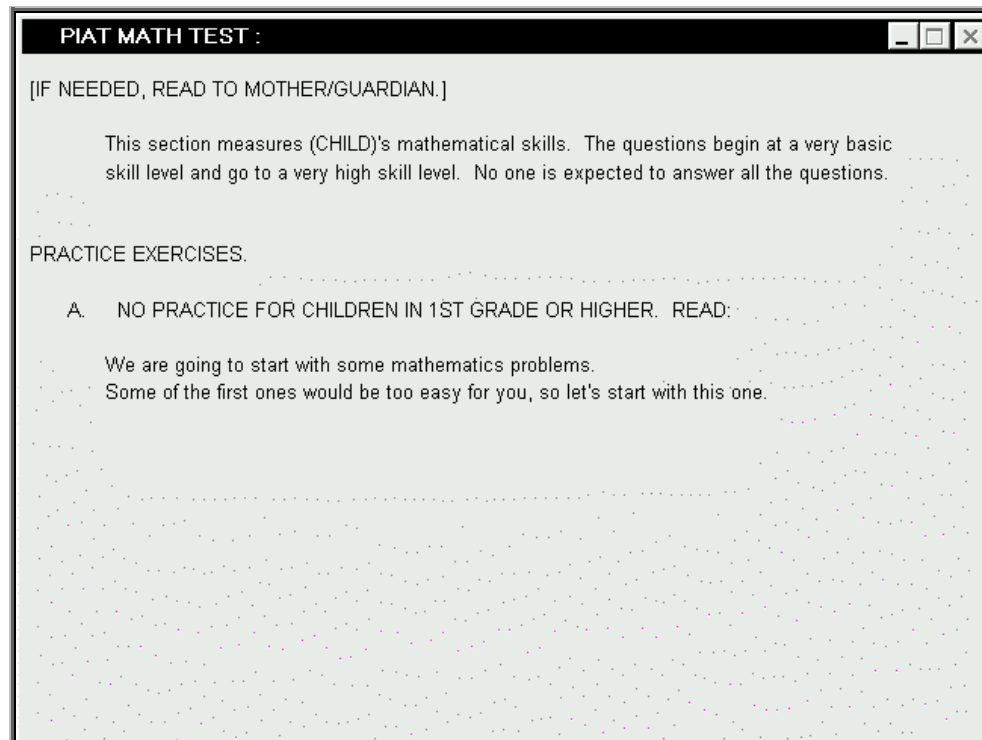


Figure 9. PIAT Math instruction screen presented if child is in 1st grade or above.

(Point to the “3 in the stimulus area.) Find one like this – down here.
(Point in a sweeping motion to the response area.) Point to it.

Figure 10a. PIAT Math item instructions as read to the child.

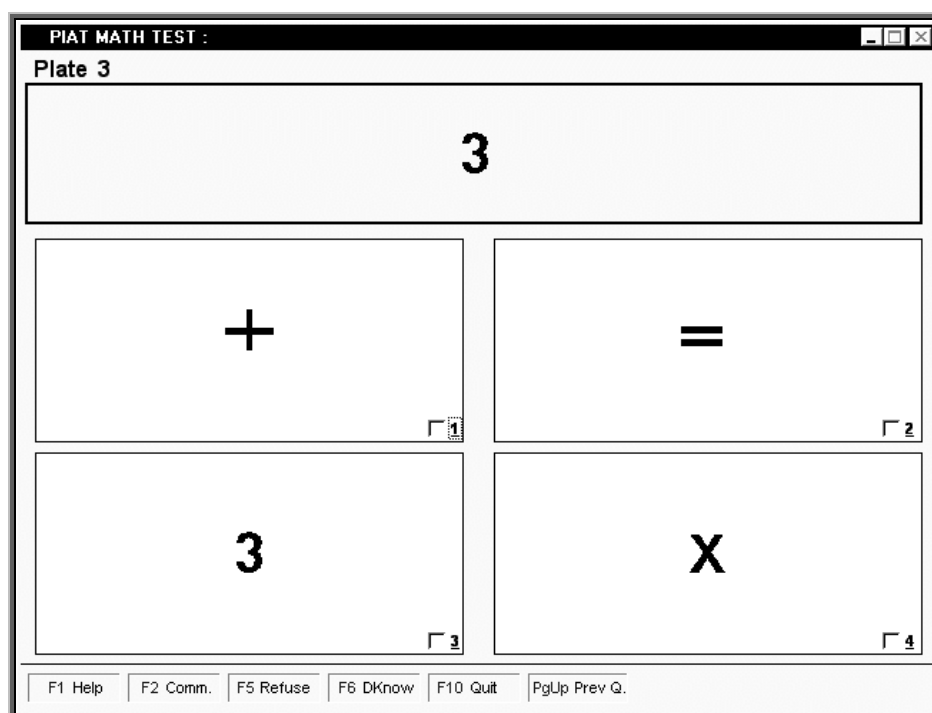


Figure 10b. Plate #3 from the PIAT Math assessment as viewed on the laptop screen by the interviewer. This item is representative of other questions displayed during the assessment. The interviewer reads the question displayed to the child on the PIAT “easel” and then highlights one of the four items to enter the child’s response to the question.

SAMPLE SCREENS - PIAT READING RECOGNITION

PIAT READING RECOGNITION TEST :

[IF NEEDED, READ TO MOTHER/GUARDIAN.]

This section measures (CHILD)'s ability to recognize letters and words. The questions begin at a basic level and proceed to a higher level of skill. No one is expected to answer all the questions.

PRACTICE EXERCISES.

PRACTICE FOR CHILDREN NOT YET IN 1ST GRADE.

(1) TURN TO "INTRODUCTION TO READING RECOGNITION SUBTEST" (IN PIAT VOLUME I). READ :

Now I am going to give you some problems in reading. First, let's look at some more practice ones to show you what these are like. (TURN TO EXERCISE A.)

(2) FOLLOW TEXT IN EASEL FOR PRACTICE EXERCISES (A-E).

Figure 11. PIAT Reading Recognition instruction screen read by the interviewer if child has not reached the 1st grade.

PIAT READING RECOGNITION TEST :

[IF NEEDED, READ TO MOTHER/GUARDIAN.]

This section measures (CHILD)'s ability to recognize letters and words. The questions begin at a basic level and proceed to a higher level of skill. No one is expected to answer all the questions.

PRACTICE EXERCISES.

NO PRACTICE FOR CHILDREN IN 1ST GRADE OR HIGHER. TURN TO "INTRODUCTION TO THE READING RECOGNITION SUBTEST," (PIAT VOLUME I) READ :

Now we are going to do some reading. Again, let's skip over some of the very easy ones and start here.

Figure 12. Instruction screen read by the interviewer if child is in the 1st grade or above.

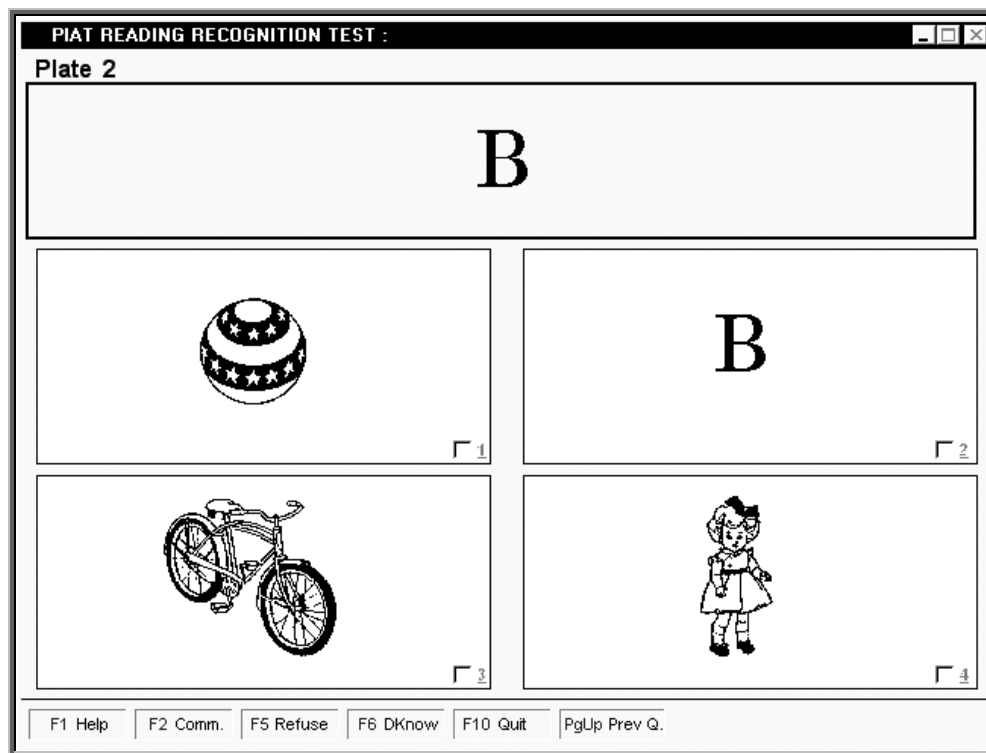


Figure 13. Plate 2 is representative of Plates 1 through 9 as seen by the interviewer.

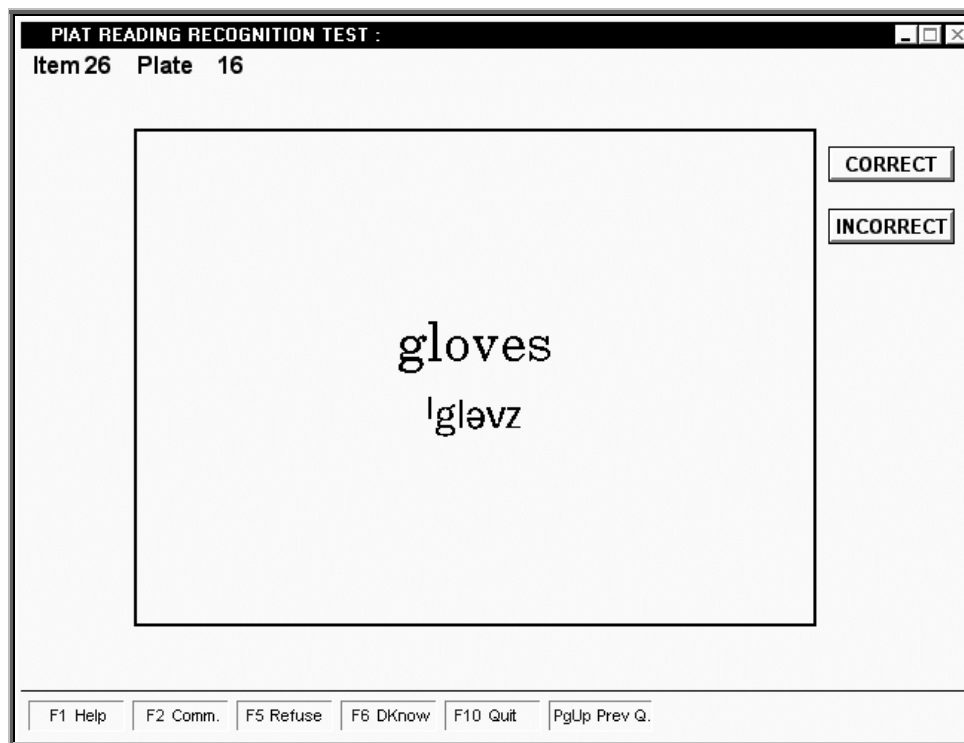


Figure 14. Plate 16 is representative of items presented later in the assessment.

SAMPLE SCREENS - PIAT READING COMPREHENSION

PIAT READING COMPREHENSION TEST :

[IF NEEDED, READ TO MOTHER/GUARDIAN.]

This section measures (CHILD)'s ability to understand what (he/she) reads. The questions begin at a very basic skill level and go to a very high skill level. No one is expected to answer all the questions.

PRACTICE EXERCISES.

PRACTICE FOR CHILDREN NOT YET IN 1ST GRADE.

(1) TURN TO "INTRODUCTION TO READING COMPREHENSION SUBTEST" (IN PIAT VOLUME II) AND READ:

Now I want to find out how well you understand and remember what you read. Let us practice again a little so you will know what I want you to do. **(GO TO PRACTICE A.)**

(2) FOLLOW TEXT IN EASEL FOR PRACTICE EXERCISES.

Figure 15. Instruction screen read by the Interviewer to the mother and child for children who have not reached the 1st grade.

PIAT READING COMPREHENSION TEST :

[IF NEEDED, READ TO MOTHER/GUARDIAN.]

This section measures (CHILD)'s ability to understand what (he/she) reads. The questions begin at a very basic skill level and go to a very high skill level. No one is expected to answer all the questions.

PRACTICE EXERCISES.

NO PRACTICE FOR CHILDREN IN 1ST GRADE OR HIGHER. TURN TO "INTRODUCTION TO THE READING COMPREHENSION SUBTEST," IN PIAT VOLUME II AND READ :

Now I want to find out how well you can understand and remember what you read. But, first, let me explain what you are to do. I am going to show you a page. It will have only a sentence printed on it. Read this sentences silently (PAUSE) to yourself (PAUSE) just once. When you have finished, look up at me. Then I will show you the next page which will have four pictures on it. You are to (show me/point to/ tell me the number of) the picture that best describes you have read. Be sure to remember what you have read, because you cannot look back. Let's try one.

Read this sentence silently - just once, and then look up at me.

Figure 16. PIAT Reading Comprehension instruction screen read by the interviewer if child is in 1st grade or above.

See the boy with the hat.

(Say the following:) Read this sentence silently – just once, and then look up at me. (When the subject looks up, turn to the following page.)

(Say the following:) Look carefully at all four pictures. Point to the picture that best describes what you have read.

(3)

Exercise A

Figure 17a. PIAT Reading Comprehension question as viewed by child on PIAT “easel” with prompts read by the interviewer.

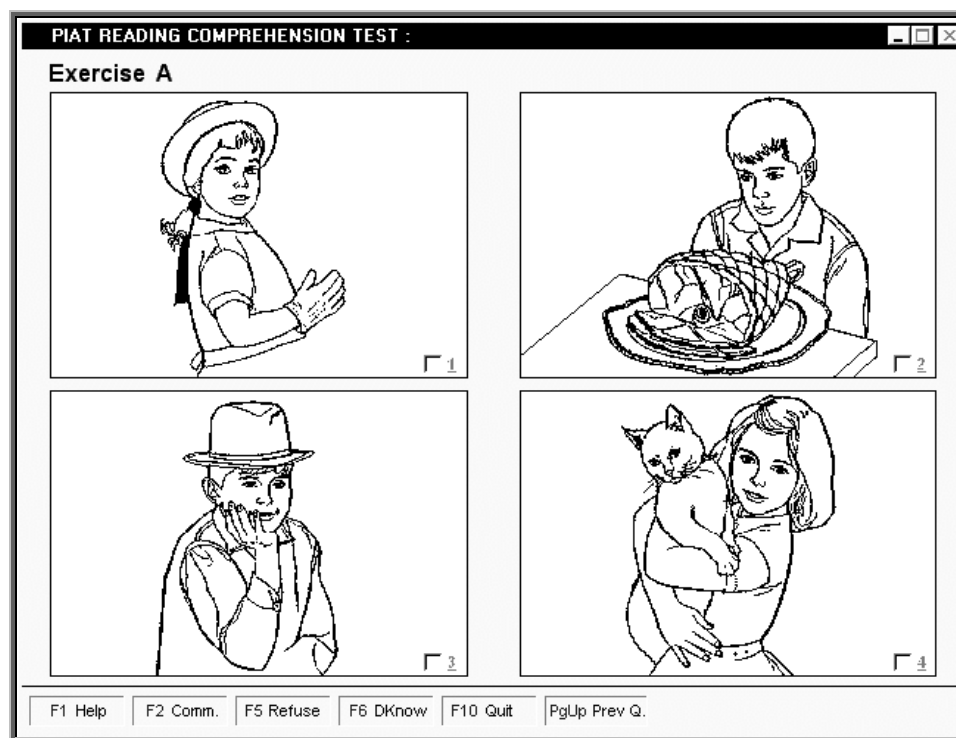


Figure 17b. PIAT Reading Comprehension Exercise A is representative of the least different items displayed during this assessment. The interviewer highlights one of the four items to enter the child’s response to the question.

SAMPLE SCREENS – PPVT-R

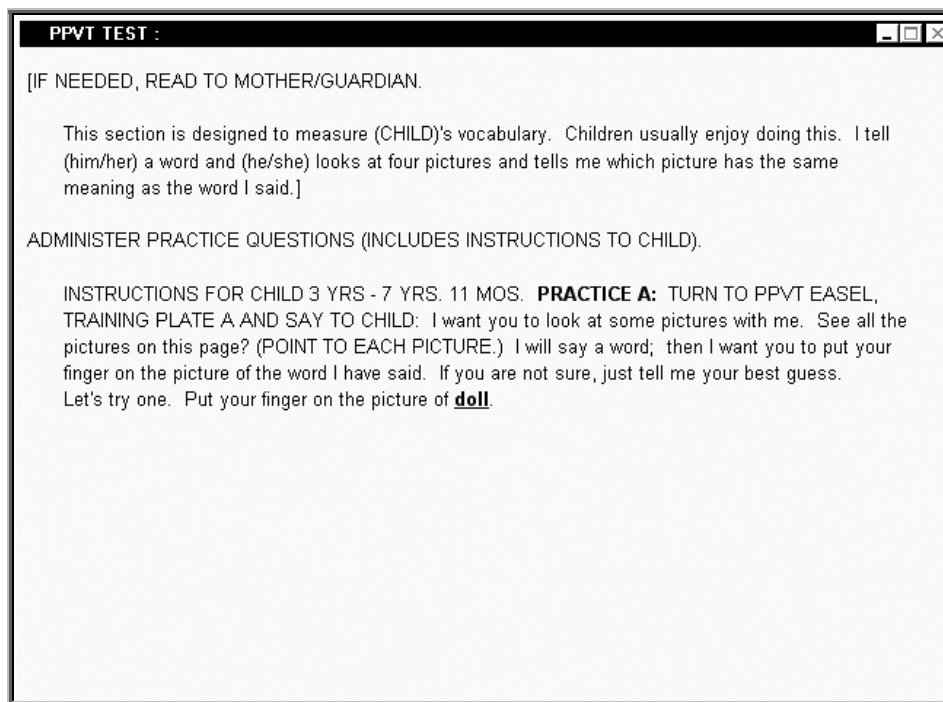


Figure 18. The PPVT-R Practice A instruction screen for children of PPVT ages 4-7.

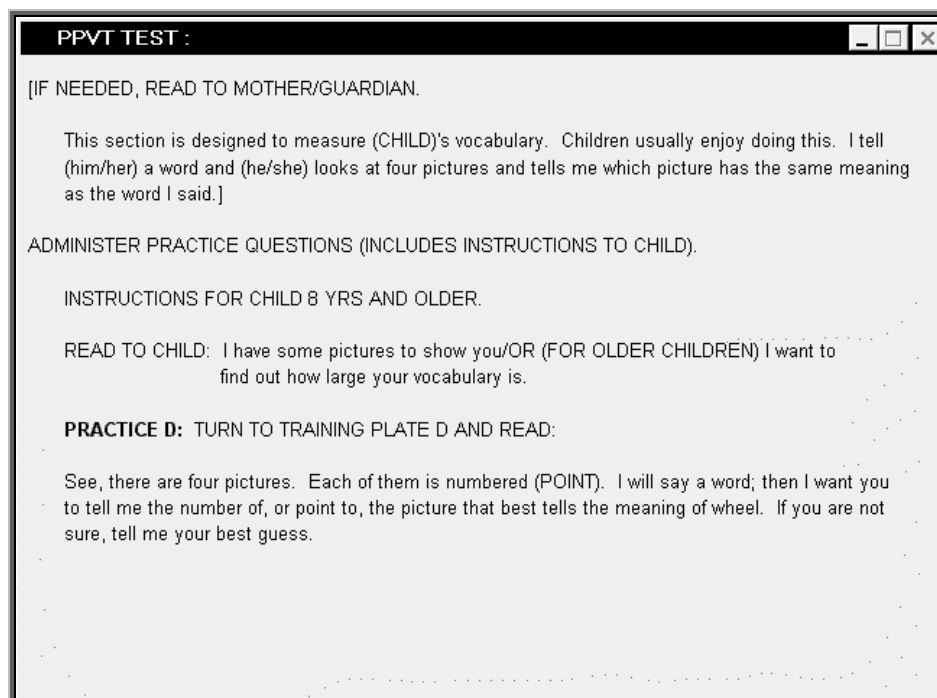


Figure 19. The PPVT-R Practice D instruction screen for children 8 years and older.

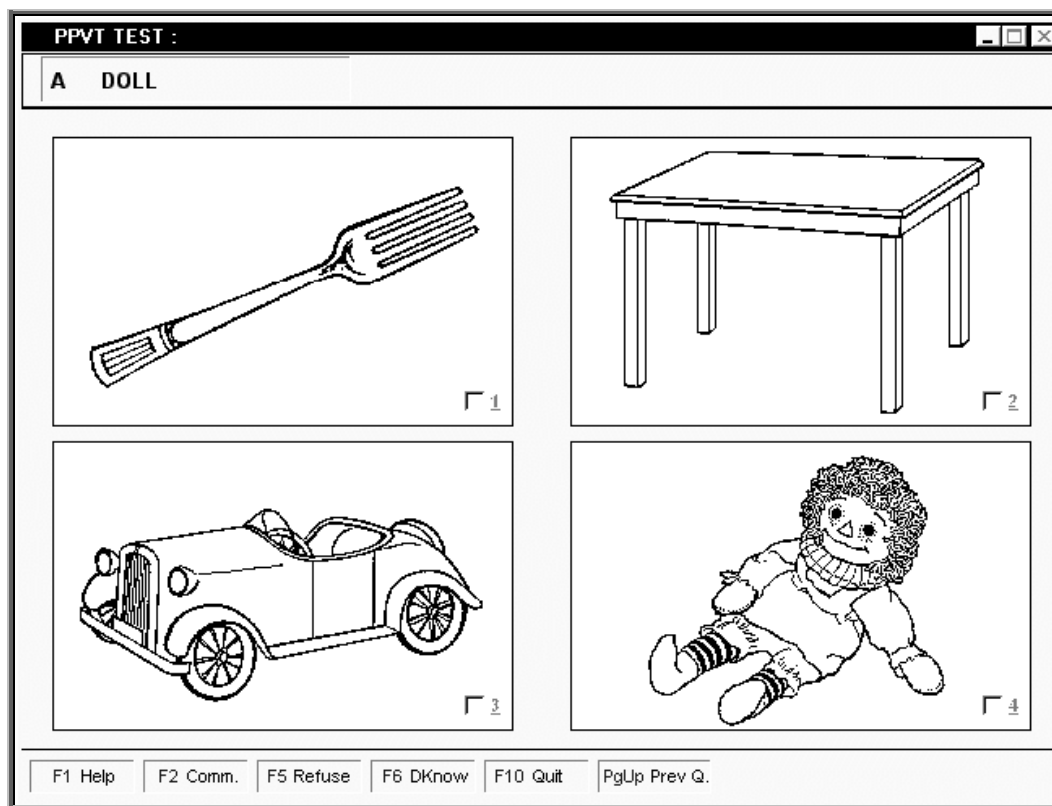


Figure 20. Training Plate A from the PPVT-R is representative of other items displayed to the child on an easel during this assessment.

APPENDIX C:

NLSY79 CHILD CAPI ASSESSMENTS:
ADMINISTRATION PATTERNS

Appendix C-1: Child Supplement 2000 – Administered Sections by Age

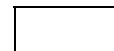
	<i>Child Background</i>		<i>The HOME</i>	<i>How My Child Acts</i>	<i>Motor & Social Dev</i>	<i>HLTH Hgt & Wgt</i>	<i>What I am Like</i>	<i>Digit Span</i>				<i>Testing Conditions</i>	<i>HOME Obs</i>	<i>Interviewer Remarks</i>
Age Range/ Age (yrs)	0-14 yrs	0-14 yrs	0-3 yrs	0-3 yrs	0-3 yrs	0-14 yrs	12-14 yrs	7-11 yrs	5-14 yrs	4-5 and 10-11 yrs	6-14 yrs	4-14 yrs	0-14 yrs	0-14 yrs
<1														
1														
2														
3														
4			In Mother Supplement	In Mother Supplement										
5			In Mother Supplement	In Mother Supplement										
6			In Mother Supplement	In Mother Supplement										
7			In Mother Supplement											
8			In Mother Supplement											
9			In Mother Supplement											
10			In Mother Supplement											
11			In Mother Supplement											
12			In Mother Supplement											
13			In Mother Supplement											
14			In Mother Supplement											



Administered Sections



Interviewer Response Only



Not Administered

Appendix C-2: NLSY79 Child CAPI Assessments – Variation in Administration by Survey Year

Assessment	Eligible Ages by Survey Year ¹							
	1986	1988	1990	1992	1994 ³	1996	1998	2000
Child Supplement								
Parts of the Body	1 – 2	1 – 2	–	–	–	–	–	–
Memory for Locations ²	8 mos – 3 yrs	(8 mos – 3 yrs)	–	–	–	–	–	–
McCarthy Verbal Memory Subscale ²	3 – 6	(3 – 6)	(4 – 6)	(3 – 6)	(3 – 6)	–	–	–
What I Am Like (Self-Perception Profile)	8 and older	8 and older	8 and older	8 and older	8 – 14	12 – 14	12 – 14	12 – 14
WISC-R Digit Span Subscale ²	7 and older	10 – 11 (7 and older)	10 – 11 (7 and older)	10 – 11 (7 and older)	10 – 11 (7 – 14)	7 – 11	7 – 11	7 – 11
PIAT Math and Reading	5 and older	5 and older	5 and older	5 and older	5 – 14	5 – 14	5 – 14	5 – 14
PPVT-R ²	3 and older	10 – 11 (3 and older)	10 – 11 (4 and older)	3 and older	10 – 11 (3 – 14)	10 – 11 (4 – 14)	4 – 5, 10 – 11	4 – 5, 10 – 11
HOME Observations	All Ages	All Ages	All Ages	All Ages	0 – 14	0 – 14	0 – 14	0 – 14
Mother Supplement								
The HOME ⁴	All Ages	All Ages	All Ages	All Ages	0 – 14	0 – 14	0 – 14	0 – 3 in CS, 4 – 14 in MS
How My Child Usually Acts ⁴	0 – 6	0 – 6	0 – 6	0 – 6	0 – 6	0 – 6	0 – 6	0 – 3 in CS, 4 – 6 in MS
Motor & Social Development ⁴	0 – 3	0 – 3	0 – 3	0 – 3	0 – 3	0 – 3	0 – 3	0 – 3 in CS
Behavior Problems Index	4 and older	4 and older	4 and older	4 and older	4 – 14	4 – 14	4 – 14	4 – 14 in MS

¹ Age in years unless otherwise noted.² Parentheses indicate age eligibility for children with no previous valid score. For example, in 1990, all 10- and 11-year olds were eligible for the PPVT-R; a 6-year old with no previous score was also eligible, but a 6-year old with a previous valid score from 1988 was not eligible.³ Beginning in 1994, assessments were no longer given to children who attained age 15 by the end of that calendar year.⁴ Administered in Child Supplement CAPI instrument for children under age 4, starting in 2000; CS=Child Supplement, MS=Mother Supplement.