

SHAPE 2006 - Child Survey for Children 0 to 17 Years Old

(Answered by the adult in the sampled household most knowledgeable about the child)

Collaborators:

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SHAPE 2006

Child Questionnaire for Children 0 to 17 years old Condensed Version – adapted from Computer Aided Telephone Interviewing (CATI) programming format.

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INTRODUCTION

Hello. My name is _____ and I'm calling from the University of Minnesota, School of Public Health. A week/few weeks ago someone from your household completed a health survey for the SHAPE Study being done in Hennepin County. I want to thank you or the person who completed that form. I am calling your house because there is a small second part to the study. **We would also like** to talk to the adult who is most knowledgeable about the children in the household. Would that be you, or is that someone else? [When would be a good time to call back? And who should I ask for?]

This study takes between 12-15 minutes. Your participation is voluntary. In any reports we write about this study, we will not reveal information that would allow anyone to identify who took part. There aren't any direct benefits to you, but the information will help us understand more about the health of children in Hennepin county.

Before we start, let me tell you that **everything you say will be kept confidential.** Your name or phone number will not be linked to your answers. Your answers will be combined with those of other children in Hennepin County and only researchers doing the study will have access to the interview data.

The researcher in charge of this study is Dr. Todd Rockwood and you may have his phone number if you wish (612/624-7437). He would be able to answer any questions you have, or if you have questions now, I can answer them for you. If you would like to contact someone at the Research Subjects' Advocates line, I can give you that number too (612/625-1650).

START INTERVIEW*

To be able to randomly choose the child for this study, I need just the ages of all the children in your household who are 17 years old or younger. Then the computer will randomly select one.

CHILD 1:	CHILD 9:
CHILD 2:	CHILD 10:
CHILD 3:	CHILD 11:
CHILD 4:	CHILD 12:
CHILD 5:	CHILD 13:
CHILD 6:	CHILD 14:
CHILD 7:	CHILD 15:
CHILD 8:	CHILD 16:

2

^{*} NOTE: These interviews are being conducted with the aid of a computer program (CATI) that automatically inserts the child's first name or first initial into the script at the appropriate places and, based on the information about the child's gender, automatically inserts the appropriate pronouns for the child. The computer program also uses information collected about the child's age to select only the questions that are appropriate for the stated age group. Additionally, some questions are "skipped" depending on the responses obtained in prior items. These optional items are marked and indented in this script for greater clarity.

{Computer makes the random selection of the child and the interview continues.}

The computer has randomly selected the [insert child's age] year old child.

Just to make it easier to refer to this child during the interview, could I have this **child's first name only or first initial**? The name will not be linked to any answers you give, or connected to any other information, it's just for reference while we are talking:

[Insert the child's first name or initial]

SECTION A: AGE, GENDER AND GUARDIANSHIP QUESTIONS

Ask all respondents	Ask
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- Al Is [insert the child's first name] a boy or a girl?
 - 1 Male
 - 2 Female
 - 9 REFUSED {If "Refused," discontinue and see special handling instructions.}

Before we begin, I need to put your child's age in the computer. The computer will then skip questions that do not apply to your child's age group.

Ask only if child's age range is 0-5 years:

A2 For young children 5 and under, we would like to ask month and year of birth, so the computer will then skip questions that do not apply to their age group.

What is [insert the child's first name]'s month and year of birth?

MON	TH of birth:			
	01 Jan	05 May	09 Se	ept
	02 Feb	06 June	10 O	et
	03 Mar	07 July	11 No	V
	04 April	08 Aug	12 De	c
	97 DON'T	KNOW		99 REFUSED
YEAF	R of birth: \Box			{Enter year between 1988 – 2006}
	9797 DON	'T KNOW		9999 REFUSED

Ask only if child's age range is 0-23 months:

- A2.a So, as of today, [insert the child's first name] is [insert number] month(s) old. Is that correct?
 - 1 Yes
 - 2 No {Discontinue and see special handling instructions.}
 - 7 DON'T KNOW
 - 9 REFUSED (Discontinue and see special handling instructions.)

Ask all respondents:

- A3 What is your relationship to [insert the child's first name]?
 - 1 Mother (biological, step, foster, adoptive)
 - 2 Father (biological, step, foster, adoptive)
 - 3 Sister (step, foster, half, adoptive)
 - 4 Brother (step, foster, half, adoptive)
 - 5 Aunt
 - 6 Uncle
 - 7 Grandparent
 - 8 Other family member
 - 9 Other non-relative
 - Female guardian
 - 11 Male guardian
 - 97 Don't Know
 - 99 Refused

Ask only if OPTION 3 (Sister) or OPTION 4 (Brother) was selected in A3:

- A3.a And just to double check, are you 18 or over?
 - 1 Yes
 - 2 No {See special handling instructions.}
 - 7 DON'T KNOW {See special handling instructions.}
 - 9 REFUSED {See special handling instructions.}

Ask only if A3.a is "YES":

- A3.b Are you the most knowledgeable person to answer questions about [insert the child's first name]?
- 1 Yes
- 2 No {See special handling instructions.}
- 7 DON'T KNOW {See special handling instructions.}
- 9 REFUSED (See special handling instructions.)

Ask only if A3.a or A3.b is "No," "Don't Know" or "Refused":

- A3.c May I speak with [insert the child's first name] 's parent or the **adult** in the household who is the most knowledgeable about [insert the child's first name].
- 1 Yes {continue with question}
- 2 No, not available right now {Discontinue and see special handling instructions.}
- 7 DON'T KNOW {Discontinue and see special handling instructions.}
- 9 REFUSED (Discontinue and see special handling instructions.)

Ask all respondents:

- A4 In this household, which adult or adults does [insert the child's first name] live with? {Check all that apply.}
 - 1 Biological, adoptive, or step-mother
 - 2 Biological, adoptive, or step-father
 - 3 Other relative
 - 4 Other non-relative, specify:
 - 7 DON'T KNOW
 - 9 REFUSED

SECTION B: GENERAL HEALTH

Ask all respondents:

- B1 How would you describe [insert the child's first name]'s health? In general, would you say his/her health is excellent, very good, good, fair, or poor?
 - 1 Excellent
 - 2 Very Good
 - 3 Good
 - 4 Fair
 - 5 Poor
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if child's age range is 0-5 years:

B2 How tall is [insert the child's first name] without shoes? {Height may be entered in inches, feet and inches, or in centimeters.}

	☐ INCHES OR
	☐ FEET and ☐ ☐ INCHES OR
	□ □ CENTIMETERS
97	DON'T KNOW

Ask only if child's age range is 0-5 years:

99

- B2.a How confident are you about the height you just reported for [insert the child's first name]?
 - 1 Very confident
 - 2 Somewhat confident

REFUSED

- 3 Not at all confident
- 7 DON'T KNOW
- 9 REFUSED

Ask or B3	How much	age range is 0-5 years: does [insert the child's first name] weigh without shoes? be entered in pounds and ounces or kilograms.}
		□ □ POUNDS and □ □ OUNCES (0-16)
		OR
		□ □ KILOGRAMS
	97 99	DON'T KNOW REFUSED
Ask or B3.a	-	age range is 0-5 years: lent are you about the weight you just reported for [insert the child's first
	1 2 3 7 9	Very confident Somewhat confident Not at all confident DON'T KNOW REFUSED
Ask al B4	Il responden Do you con the right we	sider [insert the child's first name] to be overweight, underweight, or about
	1 2 3 7 9	Overweight Underweight About the right weight DON'T KNOW REFUSED

B5 What grade or year of school is [insert the child's first name] in?

Preschool / HEAD START / ECFE (Age: 3-5) 96 0 Kindergarten (Age: 5-6) 1 First Grade (Age: 6-7) 2 Second Grade (Age: 7-8) 3 Third Grade (Age: 8-9) 4 Fourth Grade (Age: 9-10) 5 Fifth Grade (Age: 10-11) 6 Sixth Grade (Age: 11-12) Seventh Grade (Age: 12-13) 7 8 Eight Grade (Age: 13-14) 9 Ninth Grade/Freshman in High School (Age: 14-15) 10 Tenth Grade/Sophomore in High School (Age: 15-16) Eleventh Grade/Junior in High School (Age: 16-17) 11 12 Twelth Grade/Senior in High School (Age: 17-18) Above 12th Grade 13 Child does not attend school 14 97 DON'T KNOW 99 **REFUSED**

SECTION C: HEALTH INSURANCE COVERAGE/HEALTH CARE ACCESS/USE

Ask all respondents:

- C1 Does [insert the child's first name] have any of the following types of health coverage? {CHECK ALL THAT APPLY}
 - Health insurance through (his/her) parents' employer or union; or someone else's employer or union
 - Health insurance bought directly by you, (his/her) parents, or someone else
 - 3 Medicare or railroad retirement plan
 - 4 Veterans affairs, military health, TRICARE or CHAMPUS
 - 5 MinnesotaCare (State Sponsored Medical Insurance program)
 - 6 Medicaid, MA, GAMC, or PMAP (MA=Medical Assistance; GAMC=General Assistance Medical Care; PMAP=Prepaid Medical Assistance Program)
 - 7 Indian health services
 - 8 Child has no insurance
 - 9 Others, please specify:
 - 10 Assured Access / 75% Discount Card
 - 97 DON'T KNOW
 - 99 REFUSED

Ask all respondents:

C2 During the past 12 months did [insert the child's first name] have health insurance for the entire year, only part of the year or was [insert the child's first name] uninsured for the entire year?

{OR, if child is still an infant ask:}

Since [insert the child's first name] was born, did (he/she) have health insurance for the entire time, only part of the time or was [insert the child's first name] uninsured for the entire time?

- 1 Insured the entire year/time
- 2 Insured only part of the entire year/time
- 3 Uninsured for the entire year/time
- 7 DON'T KNOW
- 9 REFUSED

Ask all respondents	Ask	all	resp	ond	lents
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- When [insert the child's first name] is sick or needs medical care, where does (he/she) usually go? {CHECK ONLY ONE. If the child goes to more than one place, ask: "Where is the one place he/she goes most often?"}
 - 1 A doctor's office, clinic, public health or community clinic
 - 2 A hospital emergency room
 - 3 School-based clinic
 - 4 An urgent care center
 - 5 A clinic located in a drug or grocery store
 - 6 Some other kind of place, specify
 - 7 No usual place
 - 97 DON'T KNOW
 - 99 REFUSED

The next questions are about three different types of visits to health care professionals.

Ask all respondents:

C4	During the past 12 months how many times did [insert the child's first name] go to a
	hospital emergency room?

{OR, if child is an infant ask...}

Since [insert the child's first name] was born, how many times did (he/she) go to a hospital emergency room?

This includes emergency room visits that resulted in a hospital admission.

EMERGENCY ROOM VISITS

- 97 DON'T KNOW
- 99 REFUSED

Ask all respondents:

C5	During the past 12 months/Since (he/she) was born, how many times did [insert the
	child's first name] see a doctor or other health care professional for preventive medical
	care? By preventive care we mean, care that [insert the child's first name] gets when
	he/she is not sick, such as, (well-baby care), a check-up, vaccination, or a shot.

☐ ☐ VISITS for preventive ca	ıre
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- 97 DON'T KNOW
- 99 REFUSED

Ask all respondents:

C6 During the past 12 months, how many times did [insert the child's first name] go to see a doctor, nurse, or other health care professional due to sickness or injury? Do not include emergency room visits or hospitalizations.

{Or, if child is an infant ask ...}

Since [insert the child's first name] was born, how many times did (he/she) go to see a doctor, nurse, or other health care professional due to sickness or injury? Do not include emergency room visits or hospitalizations.

☐ VISITS due to sickness or injury

97 DON'T KNOW

99 REFUSED

Ask if child's age range is 3-17 years:

C7 These next questions are about [insert the child's first name]'s dental health.

Does [insert the child's first name] currently have any insurance that pays for all or part of his/her dental care?

- 1 Yes
- 2 No
- 7 DON'T KNOW
- 9 REFUSED

Ask if child's age range is 3-17 years:

- C8 About how long has it been since [insert the child's first name] last visited a dentist or dental clinic for any reason? Include dental hygienists, orthodontists, and all types of dental specialists.
 - 1 Less than 6 months ago
 - 2 6 months up to 1 year ago
 - 3 More than 1 year up to 2 years ago
 - 4 More than 2 years up to 5 years ago
 - 5 More than 5 years ago
 - 6 Has never visited
 - 7 DON'T KNOW
 - 9 REFUSED

Ask all respondents:

- C9 Does [*insert the child's first name*] currently have any physical, behavioral or mental conditions that limit or prevent his/her ability to do childhood activities usual for his/her age?
 - 1 Yes
 - 2 No
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if C9 is "YES":

- C10 Is [insert the child's first name]'s condition physical, behavioral, or mental?
 - 1 Physical
 - 2 Behavioral/Mental
 - 3 Both (Physical and Behavioral/Mental)
 - 4 Other, please specify: _____
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if C9 is "YES":

- C11 Have any of these conditions lasted or are expected to last 12 months or longer?
 - 1 Yes
 - 2 No
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if C9 is "YES" and if child's age range is 5-17 years:

- C12 Does [*insert the child's first name*] have any conditions that limit or prevent his/her ability to attend school regularly?
 - 1 Yes
 - 2 No
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if C9 is "YES" and if child's age range is 5-17 years:

- C13 Does he/she currently have any conditions that limit or prevent his/her ability to do regular schoolwork?
 - 1 Yes
 - 2 No
 - 7 DON'T KNOW
 - 9 REFUSED

Ask all respondents	Ask	all	resp	ond	lents
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C14	Has a do	octor or other health professional ever told you that [insert the child's first
	name	has any of the following conditions?

Asthma?

- 1 Yes
- 2 No
- 7 DON'T KNOW
- 9 REFUSED

Ask only if C14 is "No":

- C15 Has a doctor or other health professional ever told you that [insert the child's first name] has Reactive Airway Disease?
 - 1 Yes
 - 2 No
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if C14 or C15 is "YES":

- C16 Does [insert the child's first name] still have asthma?
 - 1 Yes
 - 2 No
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if C14 or C15 is "YES":

- C17 During the past 12 months (or Since he/she was born), has [*insert the child's first name*] had an episode of asthma or an asthma attack?
 - 1 Yes
 - 2 No
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if C17 is "YES":

C18	During the past 12 months (or Since he/she was born), how many times did [insert
	the child's first name] visit an emergency room or urgent care center because of
	asthma?

		VISITS	ТО	EMER	GENCY	ROOM	OR	URGENT	CARE
--	--	---------------	----	-------------	--------------	------	----	---------------	-------------

- 97 DON'T KNOW
- 99 REFUSED

C19 Has a doctor or other health professional ever told you that [*insert the child's first name*] has any of the following health conditions?

How about Attention Deficit Disorder or Attention Deficit Hyperactive Disorder, (that is ADD or ADHD)?

- 1 Yes
- 2 No
- 7 DON'T KNOW
- 9 REFUSED

Ask only if child's age range is 2-17 years:

C20 Has a doctor or other health professional ever told you that [insert the child's first name] has any of the following health conditions?

How about depression or anxiety problems?

- 1 Yes
- 2 No
- 7 DON'T KNOW
- 9 REFUSED

Ask all respondents:

C21 Has a doctor or other health professional ever told you that [*insert the child's first name*] has any of the following health conditions?

How about diabetes or sugar disease?

- 1 Yes
- 2 No
- 7 DON'T KNOW
- 9 REFUSED

Ask all respondents:

C22 Has a doctor or other health professional ever told you that [*insert the child's first name*] has any of the following health conditions?

Autism?

- 1 Yes
- 2 No
- 7 DON'T KNOW
- 9 REFUSED

Ask all respondents:

- C22a Has a doctor or other health professional recently told you that [insert the child's first name] weighs too much, too little, or is at the right weight?
 - 1 Child weighs too much
 - 2 Child weighs too little
 - 3 Child is at right weight
 - 4 Child has never seen a doctor
 - 5 Doctor has never said anything about child's weight
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if child's age range is 6-17 years:

- C23 During the past 12 months, did a family member, friend or neighbor tell you that [*insert the child's first name*] needed help from a professional for emotional or behavioral problems?
 - 1 Yes
 - 2 No
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if child's age range is 6-17 years:

- C24 During the past 12 months did a teacher, school counselor or doctor ever tell you that [insert the child's first name] needed professional help for emotional or behavioral problems?
 - 1 Yes
 - 2 No
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if C23 or C24 is "YES":

- C25 Did [insert the child's first name] get the care she/he needed?
 - 1 Yes
 - 2 No
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if C23 or C24 is "YES":

C25a Did you delay getting the care?

- 1 Yes
- 2 No
- 7 DON'T KNOW
- 9 REFUSED

Ask only if C25a is "YES":

- What was the main reason you delayed or did not get the care that [insert the child's first name] needed?
 - 1 Lack of insurance
 - 2 Because of cost
 - 3 Could not get an appointment
 - 4 An appointment has been scheduled, but it hasn't come up yet
 - 5 Don't like, don't trust or don't believe in doctors
 - 6 Didn't think the child needed care
 - 7 Didn't know where to go
 - 8 Didn't think I could find help that would be respectful of my culture
 - 9 No interpreter services
 - 10 Family responsibilities prevented
 - 11 Transportation problems
 - 12 Didn't think it would help
 - 13 Fear of stigma or judgment
 - 14 OTHER, please specify:
 - 97 DON'T KNOW
 - 99 REFUSED

Ask only if child's age range is 4-17 years:

C27a Now, I am going to ask some questions about positive and negative behaviors that sometimes describe children. It would help us if you answered all items as best as you can even if you are not absolutely certain. For each item, please tell me how often this is true for [insert the child's first name] during the past month.

He/She is happy and cheerful.

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Usually
- 5 Always
- 7 DON'T KNOW
- 9 REFUSED

C27b Please tell me how often this is true for [insert the child's first name] during the past month.

He/She is creative and imaginative.

Would you say never, rarely, sometimes, usually, or always?

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Usually
- 5 Always
- 7 DON'T KNOW
- 9 REFUSED

Ask only if child's age range is 4-17 years:

C27c Please tell me how often this is true for [insert the child's first name] during the past month.

He/She shows respect for teachers and neighbors.

Would you say never, rarely, sometimes, usually, or always?

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Usually
- 5 Always
- 7 DON'T KNOW
- 9 REFUSED

Ask only if child's age range is 4-17 years:

C27d Please tell me how often this is true for [insert the child's first name] during the past month.

He/She gets along well with other children.

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Usually
- 5 Always
- 7 DON'T KNOW
- 9 REFUSED

C27e Please tell me how often this is true for [insert the child's first name] during the past month.

He/She argues too much.

Would you say never, rarely, sometimes, usually, or always?

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Usually
- 5 Always
- 7 DON'T KNOW
- 9 REFUSED

Ask only if child's age range is 4-17 years:

C27f Please tell me how often this is true for [insert the child's first name] during the past month.

He/She bullies, or is cruel or mean to others.

Would you say never, rarely, sometimes, usually, or always?

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Usually
- 5 Always
- 7 DON'T KNOW
- 9 REFUSED

Ask only if child's age range is 4-17 years:

C27g Please tell me how often this is true for [insert the child's first name] during the past month.

He/She is disobedient.

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Usually
- 5 Always
- 7 DON'T KNOW
- 9 REFUSED

C27h Please tell me how often this is true for [insert the child's first name] during the past month.

He/She is stubborn, sullen or irritable.

Would you say never, rarely, sometimes, usually, or always?

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Usually
- 5 Always
- 7 DON'T KNOW
- 9 REFUSED

Ask only if child's age range is 4-17 years:

C27i Please tell me how often this is true for [insert the child's first name] during the past month.

He/She tries to understand other people's feelings.

Would you say never, rarely, sometimes, usually, or always?

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Usually
- 5 Always
- 7 DON'T KNOW
- 9 REFUSED

Ask only if child's age range is 4-17 years:

C27j Please tell me how often this is true for [insert the child's first name] during the past month.

He/She tries to resolve conflicts with classmates, family or friends.

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Usually
- 5 Always
- 7 DON'T KNOW
- 9 REFUSED

C27k Please tell me how often this is true for [insert the child's first name] during the past month.

He/She feels worthless or inferior.

Would you say never, rarely, sometimes, usually, or always?

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Usually
- 5 Always
- 7 DON'T KNOW
- 9 REFUSED

Ask only if child's age range is 4-17 years:

C27l Please tell me how often this is true for [insert the child's first name] during the past month.

He/She is unhappy, sad or depressed.

Would you say never, rarely, sometimes, usually, or always?

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Usually
- 5 Always
- 7 DON'T KNOW
- 9 REFUSED

Ask only if child's age range is 4-17 years:

C27m Please tell me how often this is true for [insert the child's first name] during the past month.

He/She is withdrawn, and does not get involved with others.

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Usually
- 5 Always
- 7 DON'T KNOW
- 9 REFUSED

C27n Please tell me how often this is true for [insert the child's first name] during the past month.

He/She enjoys relationships with family and friends.

Would you say never, rarely, sometimes, usually, or always?

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Usually
- 5 Always
- 7 DON'T KNOW
- 9 REFUSED

Ask only if child's age range is 4-17 years:

C270 Please tell me how often this is true for [insert the child's first name] during the past month.

He/She is hopeful and positive.

Would you say never, rarely, sometimes, usually, or always?

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Usually
- 5 Always
- 7 DON'T KNOW
- 9 REFUSED

Ask only if child's age range is 4-17 years:

C27p Please tell me how often this is true for [insert the child's first name] during the past month.

He/She appears happy with (him/herself).

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Usually
- 5 Always
- 7 DON'T KNOW
- 9 REFUSED

C27q Please tell me how often this is true for [insert the child's first name] during the past month.

He/She is picked on, teased, or bullied by other children (or youth). Would you say never, rarely, sometimes, usually, or always?

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Usually
- 5 Always
- 7 DON'T KNOW
- 9 REFUSED

Ask only if child's is in Grade (K-12):

- C27r During the past school year, how often was [insert the child's first name] afraid of going to school because (he/she) was picked on, teased, or bullied by other students? Would you say never, rarely, sometimes, usually, or always?
 - 1 Never
 - 2 Rarely
 - 3 Sometimes
 - 4 Usually
 - 5 Always
 - 7 DON'T KNOW
 - 9 REFUSED

SECTION D: BEHAVIORS: NUTRITION, PHYSICAL ACTIVITY, SEDENTARY BEHAVIORS, AND SAFETY

nly if child'	s age is 0-5 years:						
Was [insert the child's first name] ever breastfed or fed breast milk?							
1 2 7 9	Yes No DON'T KNOW REFUSED						
A alz only i	FD1 is 66Vas??•						
D2 Ho	w old was [insert the child's first name] when he/she completely stopped astfeeding or being fed breast milk?						
	□ DAYS						
	□ WEEKS						
	☐ MONTHS						
	YEARS						
96 97 99	STILL BREASTFEEDING DON'T KNOW REFUSED						
•	s age 2-17 years:						
-	uestions are about foods [insert the child's first name] ate yesterday, neals and snacks. Did he/she eat breakfast or a morning meal yesterday?						
1 2 7 9	Yes No DON'T KNOW REFUSED						
	Was [inserting of the content of the						

Ask al D3a	Il respondents: During the past week, on how many days did most or all of the family members who live in the household eat a meal together?
	□ □ NUMBER OF DAYS (00-07)
	97 DON'T KNOW 99 REFUSED
	nly if child's age range is 2-17 years:
D4	Yesterday, did [insert the child's first name] drink any beverages sweetened with sugar such as pop, soda, soft drinks, fruit punches, Koolaid, lemonade, or fruit-flavored drinks? Do not include chocolate milk or strawberry milk. [If respondent mentions beverages sweetened with sugar such as Tea, Iced-Tea, Cranberry cocktail, or Fruit-flavored syrups, count the response as "YES"}
	1 Yes
	2 No 7 DON'T KNOW
	9 REFUSED
	Ask only if D4 is "Yes": D4a Yesterday, how many glasses, bottles, cans, or cartons did (he/she) drink? [Part of a]
	glass counts as one glass. Estimate the number of glasses if drinking from a Bottle, Can or Carton.}
	☐ NUMBER of Glasses, Cans or Bottles
	97 DON'T KNOW
	99 REFUSED
Ask o	nly if child's age is 2-12 years:
D5	Yesterday, how many servings of fruit such as an apple or banana or 100% fruit juice did he/she have? (A "serving" is the child's regular portion of this food.)
	☐ NUMBER of servings
	97 DON'T KNOW
	99 REFUSED
Ask o	nly if child's age is 2-12 years:
D5a	How confident are you that [insert the child's first name] ate [insert the calculated number] servings/serving yesterday?

- 1
- Very Confident Somewhat Confident 2
- 3 Not At All Confident
- 7 DON'T KNOW
- 9 REFUSED

Ask	only	if	child	's	age	is	2-12	years:

Yesterday, how many servings of vegetables like corn, green beans, green salad, or other vegetables did he/she have? {A "serving" is the child's regular portion of this food.}

☐ NUMBER OF SERVINGS

97 DON'T KNOW

99 REFUSED

Ask only if child's age is 2-12 years:

D6a How confident are you that [insert the child's first name] ate [insert the calculated number] servings/serving yesterday?

- 1 Very Confident
- 2 Somewhat Confident
- 3 Not At All Confident
- 7 DON'T KNOW
- 9 REFUSED

Ask only if child is in Grade 1-12:

On how many days in the past 7 days was [insert the child's first name] physically active for at least 60 minutes in a given day? By physical activity we mean taking part in activities that increase his/her heart rate and make him/her breath harder some of the time. The sixty minutes does not have to be all at one time.

 \square NUMBER OF DAYS

97 DON'T KNOW

99 REFUSED

Ask only if child is in Grade 1-6:

D8 When weather permits, how often does [*insert the child's first name*] walk, ride a bike, or skate to or from school during a typical school week? Would you say this is almost always, sometimes, rarely, or never?

- 1 Almost always
- 2 Sometimes
- 3 Rarely
- 4 Never
- 7 DON'T KNOW
- 9 REFUSED

Ask only if D8 is "Sometimes," "Rarely" or "Never":

- D9 What is the main reason [*insert the child's first name*] does not walk, ride a bike, or skate to or from school more often when the weather permits?
 - 1 Child rides the school bus
 - 2 Child goes to a program before or after school
 - 3 Child lives too far from school
 - 4 Traffic conditions are unsafe
 - 5 The neighborhood is unsafe
 - 6 Child is too young to ride a bike or walk to school alone
 - 7 Child's health condition does not permit him/her to walk to or from school
 - 8 The sidewalks, paths, trails are not in good condition
 - 9 It is to dark in the morning
 - 10 Child is home-schooled
 - 11 OTHER
 - 97 DON'T KNOW
 - 99 REFUSED

Ask only if child is in Grade 1-12:

D10a On a typical school day, how much time does [insert the child's first name] spend doing the following activity:

Homework or reading.

- 0 None
- 1 1-14 Minutes
- 2 15-29 Minutes
- 3 30-44 Minutes
- 4 45-59 Minutes
- 5 1 Hour
- 6 1 1/2 Hours
- 7 2 Hours
- 8 2 1/2 Hours
- 9 3 Hours
- 10 3 1/2 Hours
- 11 4 Hours
- 12 4 1/2 Hours
- 13 5 Or More Hours
- 97 DON'T KNOW
- 99 REFUSED

Ask only if child is in Grade 1-12:

D10b On a typical school day, how much time does [insert the child's first name] spend doing the following activity:

Playing electronic games, watching TV or videos, or using the computer for recreational purposes.

- 0 None
- 1 1-14 Minutes
- 2 15-29 Minutes
- 3 30-44 Minutes
- 4 45-59 Minutes
- 5 1 Hour
- 6 1 1/2 Hours
- 7 2 Hours
- 8 2 1/2 Hours
- 9 3 Hours
- 10 3 1/2 Hours
- 11 4 Hours
- 12 4 1/2 Hours
- 13 5 Or More Hours
- 97 DON'T KNOW
- 99 REFUSED

Ask only if child is in Grade 1-6:

D10c On a typical school day, how much time does [insert the child's first name] spend doing the following activity:

Being responsible for herself/himself after school when there is no adult or babysitter around.

- 0 None
- 1 1-14 Minutes
- 2 15-29 Minutes
- 3 30-44 Minutes
- 4 45-59 Minutes
- 5 1 Hour
- 6 1 1/2 Hours
- 7 2 Hours
- 8 2 1/2 Hours
- 9 3 Hours
- 10 3 1/2 Hours
- 11 4 Hours
- 12 4 1/2 Hours
- 5 or more Hours
- 97 DON'T KNOW
- 99 REFUSED

Ask o	nly if child is in Grade 7-12:
D11a	During a typical school week, including the weekend, how many hours does [insert the child's first name] spend doing the following activity:
	Community service or volunteer work.
	☐ ☐ NUMBER OF HOURS 97 DON'T KNOW 99 REFUSED
Ask o	nly if child is in Grade 7-12:
	During a typical school week, including the weekend, how many hours does [insert the child's first name] spend doing the following activity:
	Working for pay or working in a family business.
	☐ ☐ NUMBER OF HOURS
	97 DON'T KNOW 99 REFUSED
	nly if child is in Grade 7-12: During a typical school week, including the weekend, how many hours does [insert the child's first name] spend doing the following activity:
	Fine arts activities such as playing music, participating in drama, or participating in the church or school choir.
	□ □ NUMBER of hours
	97 DON'T KNOW
	99 REFUSED
	nly if child is in Grade 7-12: During a typical school week, including the weekend, how many hours does [insert the child's first name] spend doing the following activity:
	Sports activities.
	☐ ☐ NUMBER of hours 97 DON'T KNOW 99 REFUSED

Ask only if child is in Grade 7-12:

D11e During a typical school week, including the weekend, how many hours does [insert the child's first name] spend doing the following activity:

Hang out with friends without adult supervision.

NUMBER of hours

On't know

REFUSED

SECTION E: PARENTAL & FAMILY INVOLVEMENT

Ask only if child's age is 0-5 years:

E1a In a typical week, how often do you or any other family members do the following with [insert the child's first name]?

Tell stories or read books to [insert the child's first name]. Would you say not at all, once or twice, 3-6 times, or everyday?

- 1 Not at all
- 2 Once or twice
- 3 3-6 times
- 4 Everyday
- 7 DON'T KNOW
- 9 REFUSED

Ask only if child's age is 0-5 years:

E1b In a typical week, how often do you or any other family members do the following with [insert the child's first name]?

Sing songs with [insert the child's first name].

Would you say not at all, once or twice, 3-6 times, or everyday?

- 1 Not at all
- 2 Once or twice
- 3 3-6 times
- 4 Everyday
- 7 DON'T KNOW
- 9 REFUSED

Ask only if child's age is 3-5 years:

E1c In a typical week, how often do you or any other family members do the following with [insert the child's first name]?

Practice reading, writing or working with numbers.

Would you say not at all, once or twice, 3-6 times, or everyday?

- 1 Not at all
- 2 Once or twice
- 3 3-6 times
- 4 Everyday
- 7 DON'T KNOW
- 9 REFUSED

Ask only if child's age is 6-11 years:

Eld In a typical week, how often do you or any other family members do the following with [insert the child's first name]?

Read books with [insert the child's first name].

Would you say not at all, once or twice, 3-6 times, or everyday?

- 1 Not at all
- 2 Once or twice
- 3 3-6 times
- 4 Everyday
- 7 DON'T KNOW
- 9 REFUSED

Ask only if child's age is 6-11 years:

Ele In a typical week, how often do you or any other family members do the following with [insert the child's first name]?

Help [insert the child's first name] with homework or school projects.

Would you say not at all, once or twice, 3-6 times, or everyday?

- 1 Not at all
- 2 Once or twice
- 3 3-6 times
- 4 Everyday
- 7 DON'T KNOW
- 9 REFUSED

Ask only if child's age is 6-11 years:

Elf In a typical week, how often do you or any other family members do the following with [insert the child's first name]?

Play games or sports together.

Would you say not at all, once or twice, 3-6 times, or everyday?

- 1 Not at all
- 2 Once or twice
- 3 3-6 times
- 4 Everyday
- 7 DON'T KNOW
- 9 REFUSED

Ask only if child's age is 6-11 years:

Elg In a typical week, how often do you or any other family members do the following with [insert the child's first name]?

Talk to [insert the child's first name]about (his/her) daily activities. Would you say not at all, once or twice, 3-6 times, or everyday?

- 1 Not at all
- 2 Once or twice
- 3 3-6 times
- 4 Everyday
- 7 DON'T KNOW
- 9 REFUSED

Ask only if child's age is 6-17 years:

E2a For each of the next questions, please tell me if you or another family member have talked with [insert the child's first name] about it.

Have you or another family member ever talked to [insert the child's first name] about smoking or tobacco use?

- 1 Yes
- 2 No
- 7 DON'T KNOW
- 9 REFUSED

Ask only if E2a is "Yes":

- E2a.1 During the past 12 months, how often did you or another family member talk to [insert the child's first name] about that (smoking or tobacco use) not at all, once, twice, or three or more times?
 - 1 Not at all
 - 2 Once
 - 3 Twice
 - 4 Three or more times
 - 7 DON'T KNOW
 - 9 REFUSED

- E2b How about alcoholic beverages? Have you or another family member ever talked to [insert the child's first name] about drinking alcoholic beverages, such as beer, wine or liquor?
 - 1 Yes
 - 2 No
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if E2b is "YES":

- E2b.1 During the past 12 months, how often did you or another family member talk to [insert the child's first name] about that (drinking alcoholic beverages) not at all, once, twice, or three or more times?
 - 1 Not at all
 - 2 Once
 - 3 Twice
 - 4 Three or more times
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if child's age is 6-17 years:

- E2c Have you or another family member ever talked to [insert the child's first name] about drug use, such as marijuana, inhalants, cocaine, Methamphetamine or "Meth"?
 - 1 Yes
 - 2 No
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if E2c is "YES":

- E2c.1 During the past 12 months, how often did you or another family member talk to [insert the child's first name] about that (drug use such as marijuana, cocaine, Methamphetamine or "Meth") not at all, once, twice, or three or more times?
 - 1 Not at all
 - 2 Once
 - 3 Twice
 - 4 Three or more times
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if child's age is 10-17 years:

- E2d Have you or another family member ever talked to [insert the child's first name] about topics related to sex, such as sexual activity, or sexually transmitted diseases?
 - 1 Yes
 - 2 No
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if E2d is "YES":

- E2d.1 During the past 12 months, how often did you or another family member talk to [insert the child's first name] about that (sex or sexually transmitted diseases) not at all, once, twice, or three or more times?
 - 1 Not at all
 - 2 Once
 - 3 Twice
 - 4 Three or more times
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if child's age is 6-17 years:

- E2e Have you or another family member ever talked to [insert the child's first name] about being cruel or mean to others?
 - 1 Yes
 - 2 No
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if E2e is "YES":

- E2e.1 During the past 12 months, how often did you or another family member talk to [insert the child's first name] about that (being cruel or mean to others) not at all, once, twice, or three or more times?
 - 1 Not at all
 - 2 Once
 - 3 Twice
 - 4 Three or more times
 - 7 DON'T KNOW
 - 9 REFUSED

- E2f Have you or another family member ever talked to [insert the child's first name] about the dangers of being in a gang?
 - 1 Yes
 - 2 No
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if E2f is "YES":

- E2f.1 During the past 12 months, how often did you or another family member talk to [insert the child's first name] about that (the dangers of being in a gang) not at all, once, twice, or three or more times?
 - 1 Not at all
 - 2 Once
 - 3 Twice
 - 4 Three or more times
 - 7 DON'T KNOW
 - 9 REFUSED

SECTION F: CHILD'S ACADEMIC PERFORMANCE & SCHOOL READINESS

Ask only if child is in Grade K-12:

F1 My next questions are about school. During the current school year, how often have you or other adults in your household gone to a regularly scheduled parent-teacher conference with [insert the child's first name]'s teacher?

Would you say all of the time, some of the time, or none of the time?

- 1 All of the time
- 2 Some of the time
- 3 None of the time
- 4 Child's school doesn't have school conferences
- 5 Child is home schooled
- 7 DON'T KNOW
- 9 REFUSED

Ask only if child is in Grade K-12:

- Would you say that [insert the child's first name]'s most recent grades at school were above average, average, or below average? {If the child does not get grades say: "Your best guess will be fine."}
 - 1 Above average
 - 2 Average
 - 3 Below average
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if child's age is 3-5 years:

F3 These next questions are about things that different children do at different ages. These things may or may not be true for [insert the child's first name].

Can [insert the child's first name] identify the colors red, yellow, blue, and green by name?

Would you say...

- 1 All of them
- 2 Some of them, or
- 3 None of them
- 7 DON'T KNOW
- 9 REFUSED

Ask only if child's age is 3-5 years:

- F4 How high can [insert the child's first name] count? Would you say...
 - 1 Not at all
 - 2 Up to five
 - 3 Up to ten
 - 4 Up to twenty
 - 5 Up to fifty, or
 - 6 Up to 100 or more?
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if child's age is 3-5 years:

- F5 Can he/she recognize...
 - 1 All of the letters of the alphabet
 - 2 Most of them
 - 3 Some of them
 - 4 None of them?
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if child's age is 3-5 years:

- F6 Can [*insert the child's first name*] write his/her first name, even if some of the letters are backwards?
 - 1 Yes
 - 2 No
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if child's age is 3-5 years:

- F7 Is [insert the child's first name] able to read story books on his/her own now?
 - 1 Yes
 - 2 No
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if F7 is "YES":

- F8 Does [*insert the child's first name*] actually read the words written in the book, or does he/she look at the book and pretend to read?
 - 1 Reads the written words
 - 2 Pretends to read
 - 3 Does both
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if F7 is "No":

- F9 Although [insert the child's first name] doesn't yet read story books on his/her own, does he/she ever look at a book with pictures and pretend to read?
 - 1 Yes
 - 2 No
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if F8 is "Pretends to read" or "Does both" OR if F9 is "Yes":

- When he/she pretends to read a book, does it sound like a connected story, or does he/she tell what's in each picture without much connection between them?
 - 1 Sounds like a connected story
 - 2 Tells what's in each picture
 - 3 Does both
 - 7 DON'T KNOW
 - 9 REFUSED

SECTION G: CHILD CARE

Ask only if child's age is 0-5 years:

G1 The next questions are about child care.

Does [*insert the child's first name*] regularly receive child care by someone other than a parent or guardian? By regularly I mean at least once per week.

- 1 Yes
- 2 No
- 7 DON'T KNOW
- 9 REFUSED

Ask only if G1 is "YES":

- G2 What type of child care does [insert the child's first name] receive? {Check all options that apply.}
 - 1 Care in a daycare or child care center that is not in someone's home
 - 2 Care in somebody else's home.
 - 3 Child care in your own home by someone other than a parent or guardian.
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if OPTION 1 (day care center) was selected in G2:

- G3a Is the daycare or child care center a licensed child care provider or are you unsure?
 - 1 Yes
 - 2 No
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if OPTION 2 (other's home) was selected in G2:

- G3b Is the care in somebody else's home provided by a licensed child care provider or are you unsure?
 - 1 Yes
 - 2 No
 - 7 DON'T KNOW
 - 9 REFUSED

Ask only if G3b is "NO":

G3b.1 Is the care provided by a relative, friend, neighbor or someone else?

- 1 Relative
- 2 Friend/Neighbor
- 3 Someone else
- 7 DON'T KNOW
- 9 REFUSED

Ask only if OPTION 3 (own home) was selected in G2:

G3c Is the child care in your home provided by a relative, friend, neighbor or someone else?

- 1 Relative
- 2 Friend/Neighbor
- 3 Someone else
- 7 DON'T KNOW
- 9 REFUSED

Ask only if child's age is 0-5 years:

- G4 During the past 12 months, did you or anyone in the family have to change work hours, quit a job, or not take a job, because of problems with child care for [insert the child's first name]? [Does not include maternity or paternity leave.]
 - 1 Yes
 - 2 No
 - 7 DON'T KNOW
 - 9 REFUSED

SECTION H: DEMOGRAPHICS

Were you l 1 2 7 9	Yes No
2 7	No
	DON'T KNOW REFUSED
	f H1 is "No":
H2 Wh	at Country were you born in?
	f H1 is "No": w many years have you lived in the United States? NUMBER of years
97 99	DON'T KNOW REFUSED
l respondei	
	bout [insert the child's first name]? rt the child's first name] born in the United States?
1	Yes
	No DON'T KNOW
9	DON'T KNOW REFUSED
	Ask only in H3 How Property H3 How Property H3 How Property H3 How Property H3 Has I have been supported by the H3 Has I have been support

What Country was [insert the child's first name] born in?

	Ask only if H4 is "No": H6 How many years has [insert the child's first name] lived in the United States						
		NUMBER OF YEARS (Computer verifies the years based) DON'T KNOW REFUSED	on age of Child}				
	H6.10	y if number of years in H6 is greater than Age (e.g., "mism may have something wrong here. I have [insert the child's AGE] years old. Is that right?					
		Yes No {See special handling instructions for mismatched ages.} DON'T KNOW {See special handling instructions for mismatched REFUSED {See special handling instructions for mismatched ages.}	-				
Ask al	ll respo	lents:					
Н6а	Do you	consider [insert the child's first name] to be Hispanic or La No, not Hispanic/Latino Yes, is Hispanic/Latino DON'T KNOW REFUSED y if OPTION 2 ("Yes, is Hispanic/Latino") was selected in His [insert the child's first name]? Mexican-American Ecuadorian Mexican Puerto Rican NONE OF THE ABOVE					
		DON'T KNOW					
		REFUSED					
Ask al	ll respo	lents:					
H7	Is [ins	rt the child's first name] ? that apply.}					
		Asian Black or African American White American Indian or Alaskan Native Native Hawaiian or other Pacific Islander Other, please specify: DON'T KNOW REFUSED					

REFUSED

Ask only if OPTION 1 (Asian) was selected in H7:

H7a Is [insert the child's first name] ...? {Check all that apply.}

- 11 Cambodian
- 12 Hmong
- 13 Laotian
- 14 Vietnamese
- 15 NONE OF THE ABOVE
- 97 DON'T KNOW
- 99 REFUSED

Ask only if OPTION 2 (Black or African) was selected in H7:

H7b Is [insert the child's first name] ...? {Check all that apply.}

- 21 Somali
- 22 Oromo
- 23 Amharic
- 24 Liberian
- 25 Nigerian
- 26 NONE OF THE ABOVE
- 97 DON'T KNOW
- 99 REFUSED

Ask only if more than one answer selected for H7:

H8 Of these, (Asian, White, Black or African American, American Indian or Alaskan Native, Native Hawaiian or other Pacific Islander) which does [insert the child's first name] identify with the most?

{Check only one answer here}

- 1 Asian
- 2 Black or African American
- White
- 4 American Indian or Alaskan Native
- 5 Native Hawaiian or other Pacific Islander
- 6 Multi-racial
- 7 Other, please specify:
- 97 DON'T KNOW
- 99 REFUSED

END OF INTERVIEW: Those are all my questions. Thank you so much for your time.