SHAPE 2006 - Child Survey for Children 0 to 17 Years Old
(Answered by the adult in the sampled household most knowledgeable about the child)

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The University of Minnesota School of Public Health
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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: ________

*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.*
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:

A1  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?

MONTH of birth: □  □
   01 Jan  05 May  09 Sept
   02 Feb  06 June 10 Oct
   03 Mar  07 July 11 Nov
   04 April 08 Aug 12 Dec

   97 DON’T KNOW
   99 REFUSED

YEAR of birth: □  □  □  □ {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
10. 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
99 REFUSED

Ask only if child’s age range is 0-5 years:
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
3 Not at all confident
7 DON’T KNOW
9 REFUSED
Ask only if child’s age range is 0-5 years:
B3 How much does [insert the child’s first name] weigh without shoes?
{Weight may be entered in pounds and ounces or kilograms.}

□ □ □ POUNDS and □ □ OUNCES (0-16)

OR

□ □ □ KILOGRAMS

97 DON’T KNOW
99 REFUSED

Ask only if child’s age range is 0-5 years:
B3.a How confident are you about the weight you just reported for [insert the child’s first name]?

1 Very confident
2 Somewhat confident
3 Not at all confident
7 DON’T KNOW
9 REFUSED

Ask all respondents:
B4 Do you consider [insert the child's first name] to be overweight, underweight, or about the right weight?

1 Overweight
2 Underweight
3 About the right weight
7 DON’T KNOW
9 REFUSED
Ask only if child’s age range is 3-17 years:

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

96 Preschool / HEAD START / ECFE (Age: 3-5)
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)
7 Seventh Grade (Age: 12-13)
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)
11 Eleventh Grade/Junior in High School (Age: 16-17)
12 Twelfth Grade/Senior in High School (Age: 17-18)
13 Above 12th Grade
14 Child does not attend school
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)

1 Health insurance through (his/her) parents’ employer or union; or someone else’s employer or union
2 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:
C3 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 care
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:
C14 Has a doctor 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 TO EMERGENCY ROOM OR URGENT CARE
97 DON'T KNOW
99 REFUSED
Ask only if child’s age range is 2-17 years:
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”:
C26 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.
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:
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.
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:

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.
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:
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.
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:
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
6 DON’T KNOW
7 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
6 DON’T KNOW
7 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.
Would you say never, rarely, sometimes, usually, or always?

1 Never
2 Rarely
3 Sometimes
4 Usually
5 Always
6 DON’T KNOW
7 REFUSED
Ask only if child’s age range is 4-17 years:
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:
C27o 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). 
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:
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

Ask only if child’s age is 0-5 years:
D1 Was [insert the child's first name] ever breastfed or fed breast milk?

1 Yes
2 No
7 DON'T KNOW
9 REFUSED

Ask only if D1 is “Yes”:
D2 How old was [insert the child's first name] when he/she completely stopped breastfeeding or being fed breast milk?

□ □ DAYS
□ □ WEEKS
□ □ MONTHS
□ YEARS
96 STILL BREASTFEEDING
97 DON'T KNOW
99 REFUSED

Ask only if child’s age 2-17 years:
D3 The next questions are about foods [insert the child’s first name] ate yesterday, including meals and snacks. Did he/she eat breakfast or a morning meal yesterday?

1 Yes
2 No
7 DON'T KNOW
9 REFUSED
Ask all respondents:
D3a 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)
- [ ] DON'T KNOW
- [ ] REFUSED

Ask only 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
- [ ] DON'T KNOW
- [ ] REFUSED

Ask only 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
- [ ] DON’T KNOW
- [ ] REFUSED

Ask only 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
- 2 Somewhat Confident
- 3 Not At All Confident
- 7 DON’T KNOW
- 9 REFUSED
Ask only if child’s age is 2-12 years:
D6  Yesterday, how many servings of vegetables like corn, green beans, green salad, or other vegetables did he/she have?  \textit{[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 [\textit{insert the child's first name}] ate [\textit{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:
D7  On how many days in the past 7 days was [\textit{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.

☐ ☐ 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 [\textit{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 too 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:

<table>
<thead>
<tr>
<th>Description</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Playing electronic games, watching TV or videos, or using the computer for recreational purposes.</td>
<td></td>
</tr>
<tr>
<td>None</td>
<td>0</td>
</tr>
<tr>
<td>1-14 Minutes</td>
<td>1</td>
</tr>
<tr>
<td>15-29 Minutes</td>
<td>2</td>
</tr>
<tr>
<td>30-44 Minutes</td>
<td>3</td>
</tr>
<tr>
<td>45-59 Minutes</td>
<td>4</td>
</tr>
<tr>
<td>1 Hour</td>
<td>5</td>
</tr>
<tr>
<td>1 1/2 Hours</td>
<td>6</td>
</tr>
<tr>
<td>2 Hours</td>
<td>7</td>
</tr>
<tr>
<td>2 1/2 Hours</td>
<td>8</td>
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<tr>
<td>3 Hours</td>
<td>9</td>
</tr>
<tr>
<td>3 1/2 Hours</td>
<td>10</td>
</tr>
<tr>
<td>4 Hours</td>
<td>11</td>
</tr>
<tr>
<td>4 1/2 Hours</td>
<td>12</td>
</tr>
<tr>
<td>5 or More Hours</td>
<td>13</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>97</td>
</tr>
<tr>
<td>REFUSED</td>
<td>99</td>
</tr>
</tbody>
</table>

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:

<table>
<thead>
<tr>
<th>Description</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Being responsible for herself/himself after school when there is no adult or babysitter around.</td>
<td></td>
</tr>
<tr>
<td>None</td>
<td>0</td>
</tr>
<tr>
<td>1-14 Minutes</td>
<td>1</td>
</tr>
<tr>
<td>15-29 Minutes</td>
<td>2</td>
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<tr>
<td>30-44 Minutes</td>
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<td>2 Hours</td>
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<td>2 1/2 Hours</td>
<td>8</td>
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<td>3 Hours</td>
<td>9</td>
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<tr>
<td>3 1/2 Hours</td>
<td>10</td>
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<td>4 Hours</td>
<td>11</td>
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<tr>
<td>4 1/2 Hours</td>
<td>12</td>
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<tr>
<td>5 or more Hours</td>
<td>13</td>
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<tr>
<td>DON’T KNOW</td>
<td>97</td>
</tr>
<tr>
<td>REFUSED</td>
<td>99</td>
</tr>
</tbody>
</table>
Ask only 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 only if child is in Grade 7-12:
D11b 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

Ask only if child is in Grade 7-12:
D11c 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

Ask only if child is in Grade 7-12:
D11d 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
97 DON’T KNOW
99 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:
E1d 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:
E1e 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:
E1f 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:

E1g  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
Ask only if child’s age is 6-17 years:
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
Ask only if child’s age is 6-17 years:
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:
F2  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”:
F10 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

Ask all respondents:
H1 Finally, I have some questions about you, to help our staff interpret the results.

Were you born in the United States?

1 Yes
2 No
7 DON'T KNOW
9 REFUSED

Ask only if H1 is “No”:
H2 What Country were you born in?

__________________________

Ask only if H1 is “No”:
H3 How many years have you lived in the United States?

□ □ NUMBER of years
97 DON'T KNOW
99 REFUSED

Ask all respondents:
H4 And how about [insert the child's first name]?

Was [insert the child's first name] born in the United States?

1 Yes
2 No
7 DON'T KNOW
9 REFUSED

Ask only if H4 is “No”:
H5 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 on age of Child}
97 DON’T KNOW
99 REFUSED

Ask only if number of years in H6 is greater than Age (e.g., “mismatch”):
H6.10 I may have something wrong here. I have [insert the child’s first name] as [insert AGE] years old. Is that right?

1 Yes
2 No {See special handling instructions for mismatched ages.}
7 DON’T KNOW {See special handling instructions for mismatched ages.}
9 REFUSED {See special handling instructions for mismatched ages.}

Ask all respondents:
H6a Do you consider [insert the child’s first name] to be Hispanic or Latino?

1 No, not Hispanic/Latino
2 Yes, is Hispanic/Latino
7 DON’T KNOW
9 REFUSED

Ask only if OPTION 2 (“Yes, is Hispanic/Latino”) was selected in H6a:
H6b Is [insert the child’s first name] …… ?

1 Mexican-American
2 Ecuadorian
3 Mexican
4 Puerto Rican
5 NONE OF THE ABOVE
7 DON’T KNOW
9 REFUSED

Ask all respondents:
H7 Is [insert the child's first name] … ?
{Check all that apply.}

1 Asian
2 Black or African American
3 White
4 American Indian or Alaskan Native
5 Native Hawaiian or other Pacific Islander
6 Other, please specify: _______________
97 DON’T KNOW
99 REFUSED
Ask only if OPTION 1 (Asian) was selected in H7:
H7a Is [insert the child's first name] … ?  
{Check all that apply.}

<p>| | |</p>
<table>
<thead>
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<tbody>
<tr>
<td>11</td>
<td>Cambodian</td>
</tr>
<tr>
<td>12</td>
<td>Hmong</td>
</tr>
<tr>
<td>13</td>
<td>Laotian</td>
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<tr>
<td>14</td>
<td>Vietnamese</td>
</tr>
<tr>
<td>15</td>
<td>NONE OF THE ABOVE</td>
</tr>
<tr>
<td>97</td>
<td>DON’T KNOW</td>
</tr>
<tr>
<td>99</td>
<td>REFUSED</td>
</tr>
</tbody>
</table>

Ask only if OPTION 2 (Black or African) was selected in H7:
H7b Is [insert the child’s first name] … ?  
{Check all that apply.}

<p>| | |</p>
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<tbody>
<tr>
<td>21</td>
<td>Somali</td>
</tr>
<tr>
<td>22</td>
<td>Oromo</td>
</tr>
<tr>
<td>23</td>
<td>Amharic</td>
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<tr>
<td>24</td>
<td>Liberian</td>
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<tr>
<td>25</td>
<td>Nigerian</td>
</tr>
<tr>
<td>26</td>
<td>NONE OF THE ABOVE</td>
</tr>
<tr>
<td>97</td>
<td>DON’T KNOW</td>
</tr>
<tr>
<td>99</td>
<td>REFUSED</td>
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</tbody>
</table>

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}

<p>| | |</p>
<table>
<thead>
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<tbody>
<tr>
<td>1</td>
<td>Asian</td>
</tr>
<tr>
<td>2</td>
<td>Black or African American</td>
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<td>3</td>
<td>White</td>
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<tr>
<td>4</td>
<td>American Indian or Alaskan Native</td>
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<tr>
<td>5</td>
<td>Native Hawaiian or other Pacific Islander</td>
</tr>
<tr>
<td>6</td>
<td>Multi-racial</td>
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<tr>
<td>7</td>
<td>Other, please specify: ________________</td>
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<tr>
<td>97</td>
<td>DON’T KNOW</td>
</tr>
<tr>
<td>99</td>
<td>REFUSED</td>
</tr>
</tbody>
</table>

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