The Fragile Families and Child Wellbeing Study
(SURVEY OF NEW PARENTS)

Mothers’ Five-Year Follow-Up Survey
Public Use Version

April 2013

Surveys were conducted by MPR under contract with the Center for Research on Child Wellbeing at Princeton University and the Social Indicator Survey Center at Columbia University.
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SECTION A: FAMILY CHARACTERISTICS

First, I’d like to ask you some questions about (CHILD).

A1. NOT FOR PUBLIC RELEASE


   All or most of the time, ........................................... 1 → GO TO A4
   About half of the time, ......................................... 2 → GO TO A3F
   Some of the time, or ............................................... 3 → GO TO A3
   None of the time? .................................................. 4 → GO TO A3
   VOLUNTEERED-CHILD DECEASED ..................... 5
   VOLUNTEERED-CHILD ADOPTED ....................... 6 → GO TO A3
   ONLY ON WEEKENDS .......................................... 7 → GO TO A3
   REFUSED .................................................................. -1 → GO TO A4

A2A. NOT FOR PUBLIC RELEASE
A2B. NOT FOR PUBLIC RELEASE

A3. How many months ago did (he/she) stop living with you (most of the time)?

|___|___| MONTHS AGO

NOT APPLICABLE: NEVER LIVED WITH CHILD ALL OR MOST OF THE TIME........................................-10 ➔ GO TO A3A2

A3A1. What was the main reason (he/she) stopped living with you (most of the time)? IF MORE THAN ONE REASON, PROBE FOR MAIN REASON.

CIRCLE ONE

LEGALLY LOST CUSTODY..........................1
CHILD PROTECTIVE SERVICES/OTHER AGENCY/COURT REMOVED CHILD...........2
FINANCIAL PROBLEMS...........................3
OWN HEALTH PROBLEMS .....................4
CHILD’S HEALTH PROBLEMS ...............5
NEIGHBORHOOD SAFETY.........................6
OTHER PARENT TOOK CHILD/ KIDNAPPED..................................................7
CHILD DECEASED.................................8 ➔ RECODE A2 AND FOLLOW NEW PATH

OTHER (NOT SPECIFIED).........................9

MOTHER INCARCERATED.........................101
AWAY AT SCHOOL.................................102
MOTHER/CHILD PREFERENCE...............103
A3A. CODE WITHOUT ASKING IF KNOWN.
Who does (CHILD) (usually) live with?
IF MORE THAN ONE ARRANGEMENT, PROBE FOR PERSON CHILD SPENDS THE MOST TIME WITH.

CIRCLE ONE

1. BIOLOGICAL FATHER ........................................ 1 → GO TO A3C
2. MATERNAL GRANDPARENT(S) .................. 2 → GO TO A3B1A
3. PATERNAL GRANDPARENT(S) .............. 3 → GO TO A3B1A
4. OTHER RELATIVE(S) ................................. 4 → GO TO A3B1A
5. FRIEND .......................................................... 5 → GO TO A3B1A
6. FOSTER CARE .............................................. 6
7. ADOPTIVE PARENT ................................. 7 → UPDATE ADDRESS, THANK MOTHER; END INTERVIEW AND CODE CASE ADOPTED.

CHILD DECEASED .................................................. -1 → RECODE A2 AND FOLLOW NEW PATH

OTHER (NOT SPECIFIED) .............................. 8 → GO TO A3C

A3B. Are (CHILD’s) foster parents related to you?

YES ................................................................. 1
NO ................................................................. 2

GO TO A3C

A3B1A. Does (PERSON IN A3A2) receive any kind of payment for taking care of (CHILD)?

YES ................................................................. 1
NO ................................................................. 2 → GO TO A3C
DON’T KNOW .................................................. -2 → GO TO A3C
REFUSED .......................................................... -1 → GO TO A3C
A3B1B. Who provides this payment?

<table>
<thead>
<tr>
<th></th>
<th>CIRCLE ALL THAT APPLY</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A3B1B_1</strong></td>
<td>RESPONDENT/CHILD’S MOTHER 1</td>
</tr>
<tr>
<td><strong>A3B1B_2</strong></td>
<td>CHILD’S FATHER 2</td>
</tr>
<tr>
<td><strong>A3B1B_3</strong></td>
<td>OTHER RELATIVE OF CHILD 3</td>
</tr>
<tr>
<td><strong>A3B1B_4</strong></td>
<td>FRIEND 4</td>
</tr>
<tr>
<td><strong>A3B1B_5</strong></td>
<td>GOVERNMENT AGENCY 5</td>
</tr>
<tr>
<td><strong>A3B1B_6</strong></td>
<td>OTHER (NOT SPECIFIED) 6</td>
</tr>
</tbody>
</table>

A3C. About how many months has (CHILD) been living there?

|___|___ MONTHS

LESS THAN ONE MONTH 0

A3D. Do you expect (CHILD) to live with you (again) during the coming year?

YES 1

NO 2

A3E. About how many days did you see (CHILD) in the past 30 days?

|___|___ NUMBER OF DAYS

NONE 0

GO TO A4
A3F.  Who does (CHILD) live with when (he/she) is not living with you?  
IF MORE THAN ONE ARRANGEMENT, PROBE FOR PERSON CHILD SPENDS THE MOST TIME WITH.

CIRCLE ONE

BIOLOGICAL FATHER ........................1
MATERNAL GRANDPARENT(S) .............2
PATERNAL GRANDPARENT(S) .............3
OTHER RELATIVE(S) .......................4
FRIEND ........................................5
OTHER (NOT SPECIFIED) ..................6

____________________________________

A3G.  How many days did (CHILD) live with you out of the past 30 days?

PROBE:  By live, we mean that (he/she) slept or stayed overnight in your home.

|__|__| DAYS
NONE ............................................ 0

NO A3H THIS VERSION

A3I.  What is the main reason (he/she) doesn’t live with you all of the time?  
IF MORE THAN ONE REASON, PROBE FOR MAIN REASON.

CIRCLE ONE

LEGAL CUSTODY AGREEMENT ............1
CHILD PROTECTIVE SERVICES/OTHER  
AGENCY/COURT ORDERED LIVING 
ARRANGEMENT ...............................2
FINANCIAL PROBLEMS .....................3
OWN HEALTH PROBLEMS .................4
CHILD’S HEALTH PROBLEMS ............5
NEIGHBORHOOD SAFETY ..................6
INFORMAL AGREEMENT WITH OTHER  
CUSTODIAN ...................................7
OTHER (NOT SPECIFIED) ..................8

______________________________

INCARCERATED ..............................101
AWAY AT SCHOOL ............................102
A4. Next, I have a few questions about your relationship with (CHILD’s) father, (FATHER).

What is your relationship with (FATHER) now? Are you . . .

Married, ............................................................. 1  ➔ GO TO A4A1
Romantically involved, ......................................... 2
Separated, .......................................................... 3
Divorced, ............................................................ 4  ➔ GO TO A7
Just friends, or ................................................... 5
Not in any kind of a relationship ............................... 6  ➔ GO TO A4E
FATHER NOT KNOW .............................................-13  ➔ GO TO A10A
FATHER DECEASED, VOLUNTEERED...............-14  ➔ GO TO A4C
REFUSED ...........................................................-1  ➔ GO TO A10A

A4A. Would you say you are romantically involved on a steady basis, or are you in an on-again - off-again relationship?

STEADY ........................................................................1
ON-AGAIN, OFF-AGAIN .............................................2

A4A1. CODE WITHOUT ASKING IF KNOWN:
Are you and (FATHER) currently living together . . .

All or most of the time,.................................1
Some of the time, ...........................................2
Rarely, or ......................................................3
Never? ..........................................................4

A4A2. ARE MOTHER AND FATHER MARRIED AND LIVING TOGETHER ALL OR MOST OF THE TIME?
(A4=1 AND A4A1=1)

YES .................................................................1  ➔ GO TO A5
NO .................................................................2
A4B. How many nights a week do you and (FATHER) usually spend the night together?

[___] NIGHTS ➔ GO TO A5

NONE ......................................................... 0
REFUSED .................................................. -1

A4B1. During the past two years, did you and (FATHER) ever live together for a month or more?

YES ............................................................... 1
NO ............................................................... 2 ➔ GO TO A5

A4B2. For how many months over the past two years did you and (FATHER) live together?

[___][___][___][___] MONTHS

NONE ......................................................... 0
REFUSED .................................................. -1

GO TO A5

OFFER CONDOLENCES:

A4C. When did (FATHER) die?

[___][___][___][___]

YEAR
(A4C2)
CODE WITHOUT ASKING IF KNOWN:

A4D. What was the cause of his death?

WON'T DISCUSS.................................................. 1
ILLNESS (NOT SPECIFIED)................................. 2

ACCIDENT (NOT SPECIFIED)......................... 3

OTHER (NOT SPECIFIED)............................ 4

DON'T KNOW ..............................................-2

GO TO A10

A4E. Do you know who the father is?

YES .................................................................1

NO .................................................................2 \rightarrow GO TO A10A

A5. WERE MOTHER AND FATHER UNMARRIED AT LAST INTERVIEW, BUT MARRIED NOW?
(CHECK LAST INTERVIEW RELATIONSHIP STATUS ON CONTACT SHEET AND A4=1)

YES .................................................................1

NO .................................................................2 \rightarrow GO TO A6

A5A. When did you and (FATHER) get married?

CONFIRM THAT DATE MARRIAGE BEGAN IS BETWEEN DATE OF LAST INTERVIEW AND TODAY.

\[ \text{MONTH} (A5A1) / \text{YEAR} (A5A2) \]
A6. WERE MOTHER AND FATHER LIVING APART AT LAST INTERVIEW, BUT LIVING TOGETHER NOW?  
(CHECK LAST INTERVIEW COHABITATION STATUS ON CONTACT SHEET AND A4A1=1 OR 2)  

YES ...........................................................................1  
NO ...........................................................................2 ➔ GO TO A7

A6A. When did you and (FATHER) start living together?  
CONFIRM THAT DATE COHABITATION BEGAN IS BETWEEN DATE OF LAST INTERVIEW AND TODAY.  

|___|___| / |___|___|___|___| ➔ GO TO A8C  
MONTH           YEAR  
(A6A1)          (A6A2)

A7. WERE MOTHER AND FATHER MARRIED AT LAST INTERVIEW, BUT SEPARATED OR DIVORCED NOW?  
(CHECK LAST INTERVIEW RELATIONSHIP STATUS ON CONTACT SHEET AND A4=3 OR 4)  

YES ...........................................................................1  
NO ...........................................................................2 ➔ GO TO A8

A7A. When did you and (FATHER) get (separated/divorced)?  

|___|___| / |___|___|___|___| ➔ GO TO A8B  
MONTH           YEAR  
(A7A1)          (A7A2)
A8. WERE MOTHER AND FATHER ROMANTICALLY INVOLVED (NOT MARRIED) AT LAST INTERVIEW, BUT NOT IN A RELATIONSHIP NOW? (CHECK LAST INTERVIEW RELATIONSHIP STATUS ON CONTACT SHEET AND A4=5 OR 6)

YES .......................................................................................... 1
NO ........................................................................................... 2  ➔ GO TO A8C
FATHER DIED ............................................................................-14 ➔ GO TO A10

A8A. When did your romantic relationship with (FATHER) end?

|___|___| / |___|___|___|___|
MONTH       YEAR
(A8A1)       (A8A2)

A8B. Please tell me why your (marriage/romantic relationship) ended.

CIRCLE ALL THAT APPLY

FINANCIAL REASONS (DON’T HAVE WORK/MONEY) ................................................. 1
DISTANCE (DON’T LIVE IN SAME TOWN) ...2
MOTHER’S INCARCERATION .........................3
FATHER’S INCARCERATION ......................4
RELATIONSHIP REASONS (DON’T GET ALONG, TOO YOUNG, NOT IN LOVE, NOT MATURE ENOUGH, TOO DIFFERENT, JUST GREW APART) .................................5
DRUG OR ALCOHOL PROBLEM ..................6
VIOLENT/ABUSIVE  .................................7
OTHER (NOT SPECIFIED) ..........................8

________________________________________

INFIDELITY .................................................................101
A8C. DO MOTHER AND FATHER LIVE TOGETHER ALL OR MOST OF THE TIME OR DO THEY SPEND 7 NIGHTS PER WEEK TOGETHER? (A4A1=1 OR A4B=7)

YES ................................................................. 1 \( \Rightarrow \) GO TO A10

NO ................................................................. 2

A9. How often do you and (FATHER) see or talk to each other? Is it . . .

| 1 | Every day or nearly every day, .......................... 1 |
| 2 | A few times a week, ....................................... 2 |
| 3 | A few times a month, ...................................... 3 |
| 4 | Only a few times in the past year, or ................. 4 |
| 5 | Hardly ever? ................................................. 5 |
| 0 | NEVER .......................................................... 0 |
| 14| FATHER DECEASED, VOLUNTEERED...........-14 |

A10. Next I’d like to ask a question about the children you’ve had.

Including (CHILD), how many children do you have altogether. Please include children you’ve had with other fathers and children who do not live with you as well as children who do.

| ____| ____| ____| CHILDREN

CHILD IS THE ONLY ONE........................................ 1 \( \Rightarrow \) GO TO A11
<table>
<thead>
<tr>
<th>A10B. Is the father of (CHILD IN A10B) also the father of (CHILD)?</th>
<th>CHILD 01</th>
<th>CHILD 02</th>
<th>CHILD 03</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES (GO TO A10I, CHILD 02)</td>
<td>YES (GO TO A10I, CHILD 03)</td>
<td>YES (GO TO A11)</td>
<td></td>
</tr>
<tr>
<td>NO</td>
<td>NO</td>
<td>NO</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>A10C. Is the father of (CHILD 02) also the father of (CHILD 01/CHILD 03)?</th>
<th>CHILD 01</th>
<th>CHILD 02</th>
<th>CHILD 03</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td></td>
</tr>
<tr>
<td>NO</td>
<td>NO</td>
<td>NO</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>A10D. Is the father of (CHILD 03) also the father of (CHILD 02)?</th>
<th>CHILD 01</th>
<th>CHILD 02</th>
<th>CHILD 03</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td></td>
</tr>
<tr>
<td>NO</td>
<td>NO</td>
<td>NO</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>A10E. What was your relationship with the father of (CHILD IN A10B) at the time of that child's birth? Were you...</th>
<th>CHILD 01</th>
<th>CHILD 02</th>
<th>CHILD 03</th>
</tr>
</thead>
<tbody>
<tr>
<td>Married,</td>
<td>Married,</td>
<td>Married,</td>
<td></td>
</tr>
<tr>
<td>Separated,</td>
<td>Separated,</td>
<td>Separated,</td>
<td></td>
</tr>
<tr>
<td>Divorced,</td>
<td>Divorced,</td>
<td>Divorced,</td>
<td></td>
</tr>
<tr>
<td>Cohabiting,</td>
<td>Cohabiting,</td>
<td>Cohabiting,</td>
<td></td>
</tr>
<tr>
<td>Romantic, but not living together, or</td>
<td>Romantic, but not living together, or</td>
<td>Romantic, but not living together, or</td>
<td></td>
</tr>
<tr>
<td>Not romantic?</td>
<td>Not romantic?</td>
<td>Not romantic?</td>
<td></td>
</tr>
<tr>
<td>FATHER NOT KNOWN (GO TO A10I)...</td>
<td>FATHER NOT KNOWN (GO TO A10I)...</td>
<td>FATHER NOT KNOWN (GO TO A11)...</td>
<td></td>
</tr>
<tr>
<td>VOLUNTEERED, FATHER DIED (GO TO A10I)...</td>
<td>VOLUNTEERED, FATHER DIED (GO TO A11)...</td>
<td>VOLUNTEERED, FATHER DIED (GO TO A11)...</td>
<td></td>
</tr>
<tr>
<td>REFUSED (GO TO A10I)...</td>
<td>REFUSED (GO TO A10I)...</td>
<td>REFUSED (GO TO A11)...</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>A10F. Does (CHILD IN A10B)'s father provide any financial support?</th>
<th>CHILD 01</th>
<th>CHILD 02</th>
<th>CHILD 03</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td></td>
</tr>
<tr>
<td>NO</td>
<td>NO</td>
<td>NO</td>
<td></td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>A10G. How old is (CHILD IN A10B)'s father?</th>
<th>CHILD 01</th>
<th>CHILD 02</th>
<th>CHILD 03</th>
</tr>
</thead>
<tbody>
<tr>
<td>___ ___ YEARS</td>
<td>___ ___ YEARS</td>
<td>___ ___ YEARS</td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>DON'T KNOW</td>
<td>DON'T KNOW</td>
<td></td>
</tr>
<tr>
<td>REFUSED</td>
<td>REFUSED</td>
<td>REFUSED</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>A10H. What is (CHILD IN A10B)'s father currently doing? Is he...</th>
<th>CHILD 01</th>
<th>CHILD 02</th>
<th>CHILD 03</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employed full-time,</td>
<td>Employed full-time,</td>
<td>Employed full-time,</td>
<td></td>
</tr>
<tr>
<td>Employed part-time,</td>
<td>Employed part-time,</td>
<td>Employed part-time,</td>
<td></td>
</tr>
<tr>
<td>Attending school,</td>
<td>Attending school,</td>
<td>Attending school,</td>
<td></td>
</tr>
<tr>
<td>In jail, or</td>
<td>In jail, or</td>
<td>In jail, or</td>
<td></td>
</tr>
<tr>
<td>Something else? (SPECIFY)</td>
<td>Something else? (SPECIFY)</td>
<td>Something else? (SPECIFY)</td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>DON'T KNOW</td>
<td>DON'T KNOW</td>
<td></td>
</tr>
<tr>
<td>REFUSED</td>
<td>REFUSED</td>
<td>REFUSED</td>
<td></td>
</tr>
<tr>
<td>DISABLED</td>
<td>DISABLED</td>
<td>DISABLED</td>
<td></td>
</tr>
<tr>
<td>MILITARY</td>
<td>MILITARY</td>
<td>MILITARY</td>
<td></td>
</tr>
<tr>
<td>DECEASED</td>
<td>DECEASED</td>
<td>DECEASED</td>
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</tr>
<tr>
<td>UNEMPLOYED</td>
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<td>UNEMPLOYED</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>A10I. CHECK A10B, NEXT COLUMN. IS THERE ANOTHER CHILD TO ASK ABOUT?</th>
<th>CHILD 01</th>
<th>CHILD 02</th>
<th>CHILD 03</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES (GO TO A10B, CHILD 02)</td>
<td>YES (GO TO A10B, CHILD 03)</td>
<td>YES (GO TO A11)</td>
<td></td>
</tr>
<tr>
<td>NO (GO TO A11)</td>
<td>NO (GO TO A11)</td>
<td>NO (GO TO A11)</td>
<td></td>
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</tbody>
</table>
A11. WERE MOTHER AND CHILD’S FATHER EVER MARRIED?  
(CHECK MARRIAGE HISTORY ON CONTACT SHEET AND A4)

YES ................................................................. 1
NO ................................................................... 2  ➔ GO TO A11B

A11A. Were you ever married to someone other than (FATHER)?

YES ..................................................................... 1  ➔ GO TO A11C
NO ..................................................................... 2  ➔ GO TO A12E

A11B. Were you ever married?

YES ..................................................................... 1
NO ..................................................................... 2  ➔ GO TO A12E

A11C. In total, how many times have you been married?

|   |   |

ONCE ..................................................................... 1
A12A. What was the date of your (first/second/third) marriage (to someone other than [FATHER])?

<table>
<thead>
<tr>
<th>MARRIAGE 01</th>
<th>MARRIAGE 02</th>
<th>MARRIAGE 03</th>
</tr>
</thead>
<tbody>
<tr>
<td>MONTH/ YEAR</td>
<td>MONTH/ YEAR</td>
<td>MONTH/ YEAR</td>
</tr>
<tr>
<td>(A12A1A) (A12A1C)</td>
<td>(A12A2A) (A12A2C)</td>
<td>(A12A3A) (A12A3C)</td>
</tr>
</tbody>
</table>

IF MORE THAN THREE MARRIAGES, LIST THE THREE MOST RECENT.

A12B. Did you divorce this man?

<table>
<thead>
<tr>
<th>YES</th>
<th>YES</th>
<th>YES</th>
</tr>
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<tbody>
<tr>
<td>................................</td>
<td>................................</td>
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<table>
<thead>
<tr>
<th>NO</th>
<th>NO</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>(GO TO A12C) ....2</td>
<td>(GO TO A12C) ....2</td>
<td>(GO TO A12C) ....2</td>
</tr>
</tbody>
</table>

A12C. On what date were you divorced from this man?

<table>
<thead>
<tr>
<th>YES</th>
<th>YES</th>
<th>YES</th>
</tr>
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<td>................................</td>
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<tbody>
<tr>
<td>(GO TO A12E) ....2</td>
<td>(GO TO A12E) ....2</td>
<td>(GO TO A12E) ....2</td>
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</tbody>
</table>

A12D. CHECK A12A NEXT COLUMN. IS THERE ANOTHER MARRIAGE TO ASK ABOUT?

<table>
<thead>
<tr>
<th>YES</th>
<th>YES</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td>(GO TO A12B MARRIAGE 02) .1</td>
<td>(GO TO A12B MARRIAGE 03) .1</td>
<td>(GO TO A12B MARRIAGE 03) .1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NO</th>
<th>NO</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>(GO TO A12E) ....2</td>
<td>(GO TO A12E) ....2</td>
<td>(GO TO A12E) ....2</td>
</tr>
</tbody>
</table>

A12E. ARE MOTHER AND FATHER CURRENTLY MARRIED AND/OR LIVING TOGETHER ALL OR MOST OF THE TIME? (A4=1 OR A4A1=1)

<table>
<thead>
<tr>
<th>YES</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td>................................</td>
<td>................................</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NO</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>................................</td>
<td>................................</td>
</tr>
</tbody>
</table>

A13. (Since [DATE OF LAST INTERVIEW]/During the last two years), about how many romantic relationships have you had that lasted for at least one month?

<table>
<thead>
<tr>
<th>RELATIONSHIPS</th>
<th>关系</th>
</tr>
</thead>
<tbody>
<tr>
<td>NONE</td>
<td>0</td>
</tr>
<tr>
<td>ONLY WITH FATHER</td>
<td>-10</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>-2</td>
</tr>
<tr>
<td>REFUSED</td>
<td>-1</td>
</tr>
</tbody>
</table>
A13A. I just need to have a range. Can you tell me if it was . . .

One or two relationships, .......................... 1
Three or four relationships, ......................... 2
Four to six relationships, or ........................ 3
More than six relationships? ........................ 4
DON’T KNOW ........................................-2

A14. (Since [DATE OF LAST INTERVIEW]/During the last two years), have you lived together with (this partner/any of your partners) in (this relationship/these relationships) for one month or more?

YES .........................................................1
NO ............................................................2 → GO TO A15

A14A. (Since [DATE OF LAST INTERVIEW]/During the last two years), how many different partners have you lived with for one month or more?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>PARTNERS</td>
<td></td>
</tr>
</tbody>
</table>

ONE ......................................................1

A15. Did you ever get pregnant in (this relationship/any of these relationships)?

YES .........................................................1
NO ............................................................2
DON’T KNOW ...............................................-2
REFUSED ....................................................-1

A16. CODE WITHOUT ASKING IF KNOWN:
(Since [DATE OF LAST INTERVIEW]/During the last two years), have you had any pregnancies that ended in either miscarriage, stillbirth, or abortion?

YES .........................................................1
NO ............................................................2 → GO TO A17
A16A. **CODE WITHOUT ASKING IF KNOWN:**
Did you have a miscarriage or stillbirth, an abortion, or both a miscarriage and abortion?

- MISCARRIAGE/STILLBIRTH ......................... 1
- ABORTION ............................................... 2
- BOTH ...................................................... 3
SECTION B: CHILD WELL-BEING AND MOTHERING

B0. DOES CHILD LIVE WITH MOTHER AT LEAST HALF OF THE TIME?  
   \((A2=1\ OR\ 2)\)

   YES, LIVES WITH MOTHER AT LEAST  
   HALF OF THE TIME..........................1

   NO, LIVES MOSTLY WITH  
   SOMEONE ELSE..............................2 \(\Rightarrow\) GO TO B20A

QUESTIONS FOR MOTHERS WHO LIVE WITH CHILD AT LEAST HALF OF THE TIME:

B1. Please think about how you feel about yourself as a mother to (CHILD).  
   Would you say you are . . .

   An excellent mother,..............................1
   A very good mother, ..............................2
   A good mother, or.................................3
   Not a very good mother? ..........................4

B2. Now, I’d like to ask you some questions about (CHILD’s) health and  
   development and how (he/she) is doing. In general, would you say (CHILD’s)  
   health is . . .

   Excellent, ........................................1
   Very good, ........................................2
   Good, ..............................................3
   Fair, or ..........................................4
   Poor? .............................................5
B2A. Has a doctor or other health professional ever told you that (CHILD) has asthma?

YES ................................................................. 1
NO ........................................................................... 2
DON’T KNOW ......................................................-1  \(\Rightarrow\) GO TO B3
REFUSED .............................................................-2

B2B. During the past twelve months, has (CHILD) had an episode of asthma or an asthma attack?

YES ................................................................. 1
NO ........................................................................... 2
DON’T KNOW ......................................................-2  \(\Rightarrow\) GO TO B3
REFUSED .............................................................-1

B2C. During the past twelve months, did (CHILD) have to visit an emergency room or urgent care center because of asthma?

YES ................................................................. 1
NO ........................................................................... 2
DON’T KNOW ......................................................-2
REFUSED .............................................................-1

B3. (Since [DATE OF LAST INTERVIEW]/In the last two years), how many times have you and (CHILD) been separated for a week or more?

|___|___| TIMES

NEVER ............................................................... 0  \(\Rightarrow\) GO TO B4
DON’T KNOW ....................................................-2
REFUSED ...........................................................-1
B3A. For how many days were you and (CHILD) separated during (that/the most recent) separation?

**PROBE:** (Since [DATE OF LAST INTERVIEW]/In the last two years).

**ACCEPT ESTIMATE.**

| ____|____|____|DAYS

DON'T KNOW .........................................-2

REFUSED .................................................-1

B3B. Where did (CHILD) stay during (that/the most recent) separation?

**PROBE:** Any other places?

**CIRCLE ALL THAT APPLY**

- B3B_1 WITH CHILD’S BIOLOGICAL FATHER ........1
- B3B_2 WITH MATERNAL GRANDPARENT ............2
- B3B_3 WITH PATERNAL GRANDPARENT ............3
- B3B_4 WITH OTHER RELATIVE/FRIEND ..........4
- B3B_5 WITH FOSTER PARENT ......................5
- B3B_6 IN INSTITUTION/GROUP HOME ............6
- B3B_7 IN HOSPITAL .................................7
- B3B_8 OTHER (NOT SPECIFIED) .................8

________________________________________
B3C. Thinking about (that/the most recent) separation, why were you and (CHILD) separated?

**IF MORE THAN ONE REASON, PROBE FOR MAIN REASON.**

**CIRCLE ONE**

- CHILD OR PARENT’S ILLNESS ..................... 1
- COURT OR AGENCY REMOVED CHILD FROM HOME ......................... 2
- MOTHER’S WORK SCHEDULE .................... 3
- MOTHER IN JAIL/PRISON ......................... 4
- MOTHER ON VACATION ......................... 5
- CHILD VISITED FATHER ......................... 6
- CHILD VISITED RELATIVES ..................... 7
- OTHER (NOT SPECIFIED) ......................... 8

______________________________________________

- FAMILY ISSUES .................................... 101
- PERSONAL PROBLEMS .............................. 102

B3D. **WAS THERE MORE THAN ONE SEPARATION EPISODE?**

(B3 = 2 OR MORE)

- YES ......................................................... 1
- NO ............................................................ 2 ➔ GO TO B4
B3D1. For how many days were you and (CHILD) separated during the second most recent separation?

**PROBE:** The time before the one we just talked about.

**PROBE:** (Since [DATE OF LAST INTERVIEW] / In the last two years.)

**ACCEPT ESTIMATE.**

|___|___|___| DAYS

DON'T KNOW ...........................................-2

REFUSED .................................................-1

B3E. Where did (CHILD) stay during the second most recent separation?

**PROBE:** Any other places?

**CIRCLE ALL THAT APPLY**

B3E_1  WITH CHILD’S BIOLOGICAL FATHER ...........1

B3E_2  WITH MATERNAL GRANDPARENT .............2

B3E_3  WITH PATERNAL GRANDPARENT ..........3

B3E_4  WITH OTHER RELATIVE/FRIEND ..........4

B3E_5  WITH FOSTER PARENT ..................5

B3E_6  IN INSTITUTION/GROUP HOME ............6

B3E_7  IN HOSPITAL ..................................7

B3E_8  OTHER (NOT SPECIFIED) .................8
B3F. Thinking about the second most recent separation, why were you and (CHILD) separated?

**IF MORE THAN ONE REASON, PROBE FOR MAIN REASON.**

CIRCLE ONE

- CHILD’S OR PARENT’S ILLNESS..............1
- COURT OR AGENCY REMOVED
  CHILD FROM HOME ........................2
- MOTHER’S WORK SCHEDULE .................3
- MOTHER IN JAIL/PRISON .....................4
- MOTHER ON VACATION .......................5
- CHILD VISITED FATHER ......................6
- CHILD VISITED RELATIVES ..................7
- OTHER (NOT SPECIFIED) .....................8

______________________________________
B4A. Now I would like to ask you some questions about things you may do with (CHILD).

Please tell me how many days you do each of these activities in a typical week.

How many days a week do you (READ ITEM)?

**RECORD “NEVER” AS “0”**.

<table>
<thead>
<tr>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>DAYS PER WEEK</strong></td>
</tr>
<tr>
<td>B4A1. Sing songs or nursery rhymes with (CHILD)</td>
</tr>
<tr>
<td>B4A2. Read stories to (CHILD)</td>
</tr>
<tr>
<td>B4A3. Tell stories to (him/her)</td>
</tr>
<tr>
<td>B4A4. Play inside with toys such as blocks or legos with (CHILD)</td>
</tr>
<tr>
<td>B4A5. Tell (CHILD) that you appreciated something (he/she) did</td>
</tr>
<tr>
<td>B4A6. Play outside in the yard, park, or a playground with (CHILD)</td>
</tr>
<tr>
<td>B4A7. Take (CHILD) on an outing, such as shopping, or to a restaurant,</td>
</tr>
<tr>
<td>church, museum, or special activity or event</td>
</tr>
<tr>
<td>B4A8. Watch TV or a video together</td>
</tr>
</tbody>
</table>
(18 CITIES ONLY – 2 CITIES NOT ASKED)

B4B. The next questions are about (CHILD) and how (he/she) behaves.

For each item I read, please tell me if this is not true, somewhat or sometimes true, very true or often true for (CHILD)? (READ ITEM)

<table>
<thead>
<tr>
<th></th>
<th>NOT TRUE</th>
<th>SOMEWHAT OR SOMETIMES TRUE</th>
<th>VERY TRUE OR OFTEN TRUE</th>
</tr>
</thead>
<tbody>
<tr>
<td>B4B1.</td>
<td>(He/She) can’t concentrate, can’t pay attention for long</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>B4B2.</td>
<td>(He/She) can’t sit still; (he/she) is restless or hyperactive</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>B4B3.</td>
<td>(He/She) clings to adults or is too dependent</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>B4B4.</td>
<td>(He/She) cries a lot</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>B4B5.</td>
<td>(He/She) is disobedient</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>B4B6.</td>
<td>(He/She) doesn’t get along with other children</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>B4B7.</td>
<td>(He/She) doesn’t seem to feel guilty after misbehaving</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>B4B8.</td>
<td>(He/She) has trouble getting to sleep</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>B4B9.</td>
<td>(He/She) is nervous, high strung, or tense</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>B4B10.</td>
<td>(He/She) has a speech problem</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>B4B11.</td>
<td>(He/She) is stubborn, sullen, or irritable</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>B4B12.</td>
<td>(He/She) has sudden changes in mood or feelings</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>B4B13.</td>
<td>(He/She) has temper tantrums or a hot temper</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>B4B14.</td>
<td>(He/She) is too fearful or anxious</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>B4B15.</td>
<td>(He/She) is unhappy, sad, depressed</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>B4B16.</td>
<td>(He/She) wants a lot of attention</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>B4B17.</td>
<td>(He/She) is withdrawn; (he/she) doesn’t get involved with others</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>B4B18.</td>
<td>(He/She) feels worthless or inferior</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>B4B19.</td>
<td>(He/She) acts too young for (his/her) age</td>
<td>0</td>
<td>1</td>
</tr>
</tbody>
</table>
Sometimes children behave pretty well and sometimes they don’t. In the past month, have you spanked (CHILD) because (he/she) was misbehaving or acting up?

- YES ..............................................................1
- NO .................................................................2 ➔ GO TO B6

Did you do this . . .

- Every day or nearly every day, ......................1
- A few times a week,....................................2
- A few times this past month, or .................3
- Only once or twice? ....................................4

Now I’m going to read some statements about being a parent. Please tell me how much you agree or disagree with each statement.

Being a parent is harder than I thought it would be. Do you . . .

- Strongly agree, ...........................................1
- Somewhat agree, ........................................2
- Somewhat disagree, or...............................3
- Strongly disagree?......................................4

I feel trapped by my responsibilities as a parent. Do you . . .

- Strongly agree, ...........................................1
- Somewhat agree, ........................................2
- Somewhat disagree, or...............................3
- Strongly disagree?......................................4
B6C. I find that taking care of my child(ren) is much more work than pleasure. Do you . . .

- Strongly agree, ...........................................1
- Somewhat agree, ..........................................2
- Somewhat disagree, or.................................3
- Strongly disagree?.....................................4

B6D. I often feel tired, worn out, or exhausted from raising a family. Do you . . .

- Strongly agree, ...........................................1
- Somewhat agree, ..........................................2
- Somewhat disagree, or.................................3
- Strongly disagree?.....................................4

B7.  CODE WITHOUT ASKING IF KNOWN:
Are the public schools in your area on summer break?

- YES .....................................................................1 ➔ ASK B8-B20A ABOUT JANUARY 1-MAY 31
- NO .....................................................................2

(18 CITIES ONLY – 2 CITIES NOT ASKED)

B7A.  CODE WITHOUT ASKING IF KNOWN:
Is (CHILD) currently in kindergarten

- YES .....................................................................1 ➔ ASK B8-B20A ABOUT JANUARY 1-MAY 31
- NO .....................................................................2 ➔ ASK B8-B20A ABOUT NOW

B7A – SKIP ERROR
B8. The next questions are about the preschools, schools, or centers that (CHILD) (is currently attending/attended between the beginning of January through the end of May of this year). I only want to know about schools or centers. I will be asking a separate question about places or people who (take/took) care of (CHILD) when (he/she) (is/was) not attending a school or center.

(Is [CHILD] currently attending/Between the beginning of January and the end of May), did [CHILD] attend), a day care center, nursery school, preschool, Head Start, or pre-kindergarten program on a regular basis?

**DO NOT COUNT KINDERGARTEN.**

YES .................................................................1

NO .................................................................2 ➔ GO TO B9

B8A. What type of program (does/did) (he/she) attend most?

**IF MORE THAN ONE CATEGORY, SELECT CATEGORY WITH THE HIGHEST NUMBER.**

CIRCLE ONE

DAY CARE CENTER ............................................1

NURSERY SCHOOL .............................................2

PRESCHOOL .......................................................3

HEAD START PROGRAM ........................................4

PRE-KINDERGARTEN ..........................................5

JUNIOR KINDERGARTEN ......................................6

KINDERGARTEN ..................................................7 (2 CITIES ONLY)

B8B. During a typical week, how many hours per week (does/did) (CHILD) attend the (PROGRAM IN B8A)?

**CONFIRM NUMBER IS HOURS PER WEEK, NOT HOURS PER DAY.**

[ ] [ ] [ ] HOURS PER WEEK
B8C. Where (is/was) the (PROGRAM IN B8A) located? For example, (is/was) it in a school, a church or synagogue, or in it’s own building?

<table>
<thead>
<tr>
<th>Location</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>IT’S OWN BUILDING</td>
<td>1</td>
</tr>
<tr>
<td>PUBLIC SCHOOL BUILDING</td>
<td>2</td>
</tr>
<tr>
<td>PRIVATE SCHOOL BUILDING</td>
<td>3</td>
</tr>
<tr>
<td>YMCA OR YWCA</td>
<td>4</td>
</tr>
<tr>
<td>COLLEGE/UNIVERSITY</td>
<td>5</td>
</tr>
<tr>
<td>CHURCH/SYNAGOGUE</td>
<td>6</td>
</tr>
<tr>
<td>COMMUNITY CENTER</td>
<td>7</td>
</tr>
<tr>
<td>PUBLIC LIBRARY</td>
<td>8</td>
</tr>
<tr>
<td>OTHER (NOT SPECIFIED)</td>
<td>9</td>
</tr>
</tbody>
</table>

B8D. (Does/Did) any person or any agency give you money, a voucher, or a scholarship to help pay for the (PROGRAM IN B8A)?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>2</td>
</tr>
<tr>
<td>NO CHARGE FOR PROGRAM</td>
<td>10</td>
</tr>
</tbody>
</table>

GO TO B8G
On the average, how much (do/did) you pay out-of-pocket on a weekly basis for all day care, preschool or any other program you (currently use/used during the last school year)? Do not include money from other people or agencies.

Would you say . . .

Less than $50 per week, .................................1
$51 - $100 per week,..................................2
$101 - $150 per week,................................3
$151 - $200 per week,.................................4
$201 - $250 per week,.................................5
$251 - $300 per week, or............................6
More than $300 per week?.......................7

_____________________________________
PAYS NOTHING .....................................0

CHILD CARE PROVIDED IN EXCHANGE FOR OTHER SERVICES ..........................17

How many children, including (CHILD), (are/were) covered in this amount?

|___|___| CHILDREN

CHILD ONLY ......................................1

CODE WITHOUT ASKING IF KNOWN
Is (CHILD) currently enrolled in this program?

YES ..............................................1
NO ..............................................2
B8H. IS/WAS CHILD IN SCHOOL/PROGRAM IN B8A FOR EIGHT OR MORE HOURS? (B8B = 8 OR MORE)

YES .................................................................1 ➔ GO TO SECTION C
NO .................................................................2

B9. (Besides the [PROGRAM IN B8A] that [CHILD] attends,) Is (he/she) currently being cared for by someone other than you (or [his/her] father) for at least eight hours every week for a month or more? Please include relatives and friends.

THIS ITEM REFERS TO CARE PROVIDED BY ANYONE OTHER THAN THE CUSTODIAL PARENT(S).

YES .................................................................1
NO .................................................................2 ➔ GO TO SECTION C

B9A. Including all the different child care arrangements that you use, (but not including time [he/she] spends in any of the schools or centers we asked about earlier,) how many hours a week is (he/she) in care?

|__|__| HOURS PER WEEK

B9B. (Not including any of the schools or centers we asked about earlier,) How many different childcare arrangements are you currently using for (CHILD)?

|__|__| ARRANGEMENTS
ONE .................................................................1
B10A. What is the primary type of child care arrangement you are using now? By primary, I mean the arrangement where (CHILD) spends the most time.

<table>
<thead>
<tr>
<th>CIRCLE PRIMARY ARRANGEMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHILD'S FATHER (NOT LIVE-IN)</td>
</tr>
<tr>
<td>MOTHER'S PARTNER OR BOYFRIEND</td>
</tr>
<tr>
<td>CHILD'S SIBLING</td>
</tr>
<tr>
<td>CHILD'S MATERNAL GRANDPARENT</td>
</tr>
<tr>
<td>OTHER RELATIVE ON MOTHER'S SIDE</td>
</tr>
<tr>
<td>CHILD'S PATERNAL GRANDPARENT</td>
</tr>
<tr>
<td>OTHER RELATIVE ON FATHER'S SIDE</td>
</tr>
<tr>
<td>FATHER'S PARTNER</td>
</tr>
<tr>
<td>MOTHER'S PARTNER'S RELATIVE</td>
</tr>
<tr>
<td>NON-RELATIVE/FAMILY CHILD CARE</td>
</tr>
<tr>
<td>CHILD CARE CENTER</td>
</tr>
<tr>
<td>FRIEND MOTHER LIVES WITH</td>
</tr>
<tr>
<td>OTHER (NOT SPECIFIED)</td>
</tr>
</tbody>
</table>

B11. Where does (PROVIDER IN B10A) usually take care of (CHILD)?

- IN CHILD'S HOME .................................................1
- IN PROVIDER'S HOME ...........................................2
- PROVIDER AND (CHILD) LIVE IN SAME HOME ..................3
- OTHER (NOT SPECIFIED) .........................................4
B12. How many hours each week does (CHILD) usually spend being cared for at the (PROVIDER IN B10A)?

|___|___| HOURS PER WEEK

B13. Does any person or any agency give you money, a voucher, or a scholarship to help pay for this childcare?

YES  ................................................................. 1
NO  ................................................................. 2
NO CHARGE FOR CHILD CARE..........................-10 ➔ GO TO B17

B14. On the average, how much do you pay out-of-pocket on a weekly basis for (PROVIDER IN B10A)? Do not include money from other people or agencies. (Do not include the money paid for the program we talked about before.)

Would you say . . .

Less than $50 per week, ..............................1
$51 - $100 per week, ...............................2
$101 - $150 per week, ............................3
$151 - $200 per week, ............................4
$201 - $250 per week, ............................5
$251 - $300 per week, or ..........................6
More than $300 per week? ..........................7

PAYS NOTHING ............................................. 0
CHILD CARE PROVIDED IN EXCHANGE FOR OTHER SERVICES ..................-17 ➔ GO TO B17

B15. How many children, including (CHILD), are covered in this amount?

|___|___| CHILDREN

CHILD ONLY ....................................................1
B17. Approximately how many times in the past month did you have to make special arrangements because your usual childcare arrangement fell through? Please include times when your child care provider(s) (was/were) sick or unavailable due to a holiday or vacation.

<table>
<thead>
<tr>
<th></th>
<th>TIMES</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0</td>
</tr>
</tbody>
</table>

B18. How many times in the past month did you miss work or school because your childcare arrangement fell through?

<table>
<thead>
<tr>
<th></th>
<th>TIMES</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>TIMES</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>10</td>
</tr>
</tbody>
</table>

B19. At any time since ([DATE OF LAST INTERVIEW]/in the last two years), have you had to quit a job, school, or training activity because you had problems arranging child care or keeping a child care arrangement?

<table>
<thead>
<tr>
<th></th>
<th>TIMES</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>TIMES</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2</td>
</tr>
</tbody>
</table>
B20. When (CHILD) is sick, can (any of) your provider(s) take care of (him/her), do you need to make other arrangements, or do you have to miss work or school to take care of (him/her)?

ONE OF CURRENT PROVIDERS CAN CARE FOR CHILD............................. 1

HAS TO MAKE OTHER ARRANGEMENTS............................... 2

MISS WORK/SCHOOL ........................................ 3

SOMETIMES CAN MAKE OTHER ARRANGEMENTS, SOMETIMES HAVE TO MISS WORK OR SCHOOL .......... 4

NOT APPLICABLE: NEITHER WORKS NOR IN SCHOOL.............................-10

GO TO SECTION C

FOR MOTHERS WHO DO NOT LIVE WITH CHILD AT LEAST HALF OF THE TIME:

B20A. Please think about how you feel about yourself as a mother to (CHILD). Would you say you are . . .

An excellent mother,.................................................1
A very good mother, ..............................................2
A good mother, or...................................................3
Not a very good mother? ........................................4
B21. Now, I'd like to ask you some questions about (CHILD’s) health and development and how (he/she) is doing. In general, would you say (CHILD’s) health is . . .

Excellent, .......................................................... 1
Very good, .......................................................... 2
Good, ............................................................... 3
Fair, or ............................................................. 4
Poor? ................................................................. 5
DON’T KNOW .....................................................-2

B22. (Since [DATE OF LAST INTERVIEW]/During the last two years), have you talked to (CHILD’s) doctor about how (he/she) is doing? This could be as part of a visit or a separate call.

YES ............................................................... 1 ➔ GO TO B23
NO ................................................................. 2
CHILD DOESN’T HAVE DOCTOR..................-10 ➔ GO TO B23

B22A. Do you feel you could talk to (CHILD’s) doctor if you wanted to?

YES ............................................................... 1
NO ................................................................. 2

B23. Is (CHILD) currently being cared for by someone other than (PERSON IN A3A2) on a regular basis? By regular, I mean at least once a week for the past month. Please include day care centers, preschools, and relatives and friends.

THIS ITEM REFERS ONLY TO CARE GIVEN BY ANYONE OTHER THAN THE CUSTODIAL CAREGIVERS, INCLUDING MOTHER IF CHILD DOES NOT LIVE WITH HER.

YES ............................................................... 1
NO ................................................................. 2
DON’T KNOW .....................................................-2 ➔ GO TO B25
B24. (Since [DATE OF LAST INTERVIEW]/During the last two years), did you ever talk to (CHILD’s) child care provider about how (he/she) was doing?

IF MORE THAN ONE PROVIDER, ASK ABOUT THE ONE THAT PROVIDES THE MOST HOURS OF CHILD CARE.

YES .........................................................................1 → GO TO B25
NO ..............................................................................2

B24A. Do you feel you could talk to (CHILD’s) child care provider if you wanted to?

YES ..........................................................................1
NO ...........................................................................2

B25. DID MOTHER SEE THE CHILD MORE THAN ONCE IN THE LAST 30 DAYS?
(A3E = 2 OR MORE)

YES .........................................................................1
NO ...........................................................................2 → GO TO SECTION C
Now I would like to ask you some questions about things you may do with (CHILD).

Please tell me how many days you do each of these activities in a typical week.

How many days a week do you (READ ITEM)?

RECORD “NEVER” AS “0.”

<table>
<thead>
<tr>
<th></th>
<th>DAYS PER WEEK</th>
<th>DON’T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>B26A. Sing songs or nursery rhymes with (CHILD)</td>
<td>0 1 2 3 4 5 6 7 -2</td>
<td></td>
</tr>
<tr>
<td>B26B. Read stories to (CHILD)</td>
<td>0 1 2 3 4 5 6 7 -2</td>
<td></td>
</tr>
<tr>
<td>B26C. Tell stories to (him/her)</td>
<td>0 1 2 3 4 5 6 7 -2</td>
<td></td>
</tr>
<tr>
<td>B26D. Play inside with toys such as blocks or legos with (CHILD)</td>
<td>0 1 2 3 4 5 6 7 -2</td>
<td></td>
</tr>
<tr>
<td>B26E. Tell (CHILD) that you appreciated something (he/she) did</td>
<td>0 1 2 3 4 5 6 7 -2</td>
<td></td>
</tr>
<tr>
<td>B26F. Play outside in the yard, park, or playground with (CHILD)</td>
<td>0 1 2 3 4 5 6 7 -2</td>
<td></td>
</tr>
<tr>
<td>B26G. Take (CHILD) on an outing, such as shopping, or to a restaurant, church, museum, or special activity or event</td>
<td>0 1 2 3 4 5 6 7 -2</td>
<td></td>
</tr>
<tr>
<td>B26H. Watch TV or a video together</td>
<td>0 1 2 3 4 5 6 7 -2</td>
<td></td>
</tr>
</tbody>
</table>

B27. About how many, if any, books do you have for (CHILD)? This can include children’s books shared with other children. Would you say (he/she) has . . .

None, ......................................................... 1
One or two, ............................................. 2
Three or four, or ........................................ 3
Five or more? ............................................. 4
DON’T KNOW .............................................. -2

B28. In a typical day, do you eat (MEAL) with (CHILD)?

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>A.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>C.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

39
40

**B29.** The next questions are about (CHILD) and how (he/she) behaves.

For each item I read, please tell me if this is not true, somewhat or sometimes true, very true or often true for (CHILD)?  **(READ ITEM)**

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
<th>Not True</th>
<th>Somewhat or Sometimes True</th>
<th>Very True or Often True</th>
</tr>
</thead>
<tbody>
<tr>
<td>B29A1.</td>
<td>(He/She) can't concentrate, can't pay attention for long</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>B29A2.</td>
<td>(He/She) can't sit still; (he/she) is restless or hyperactive</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>B29A3.</td>
<td>(He/She) clings to adults or is too dependent</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>B29A4.</td>
<td>(He/She) cries a lot</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>B29A5.</td>
<td>(He/She) is disobedient</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>B29A6.</td>
<td>(He/She) doesn't get along with other children</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>B29A7.</td>
<td>(He/She) doesn't seem to feel guilty after misbehaving</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>B29A8.</td>
<td>(He/She) has trouble getting to sleep</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>B29A9.</td>
<td>(He/She) is nervous, high strung, or tense</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>B29A10.</td>
<td>(He/She) has a speech problem</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>B29A11.</td>
<td>(He/She) is stubborn, sullen, or irritable</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>B29A12.</td>
<td>(He/She) has sudden changes in mood or feelings</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>B29A13.</td>
<td>(He/She) has temper tantrums or hot temper</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>B29A14.</td>
<td>(He/She) is too fearful or anxious</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>B29A15.</td>
<td>(He/She) is unhappy, sad, depressed</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>B29A16.</td>
<td>(He/She) wants a lot of attention</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>B29A17.</td>
<td>(He/She) is withdrawn; (he/she) doesn't get involved with others</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>B29A18.</td>
<td>(He/She) feels worthless or inferior</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>B29A19.</td>
<td>(He/She) acts too young for (his/her) age</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>
B30. Sometimes children behave pretty well and sometimes they don’t. In the past month, have you spanked (CHILD) because (he/she) was misbehaving or acting up?

YES .................................................................1

NO .................................................................2 ➔ GO TO B31

B30A. Did you do this . . .

Every day or nearly every day, .................1
A few times a week,.................................2
A few times this past month, or ...............3
Only once or twice? ...............................4

B31. Now I’m going to read some statements about being a parent. Please tell me how much you agree or disagree with each statement.

B31A. Being a parent is harder than I thought it would be. Do you . . .

Strongly agree, ...............................1
Somewhat agree, ...............................2
Somewhat disagree, or .......................3
Strongly disagree? ...............................4

B31B. I feel trapped by my responsibilities as a parent. Do you . . .

Strongly agree, ...............................1
Somewhat agree, ...............................2
Somewhat disagree, or .......................3
Strongly disagree? ...............................4
B31C. I find that taking care of my child(ren) is much more work than pleasure. Do you . . .

Strongly agree, .................................................1
Somewhat agree, ................................................2
Somewhat disagree, or .........................................3
Strongly disagree? ...............................................4

B31D. I often feel tired, worn out, or exhausted from raising a family. Do you . . .

Strongly agree, .................................................1
Somewhat agree, ................................................2
Somewhat disagree, or .........................................3
Strongly disagree? ...............................................4
SECTION C: FATHER-CHILD RELATIONSHIP

C1. ARE MOTHER AND FATHER CURRENTLY LIVING TOGETHER ALL, MOST, OR SOME OF THE TIME?  
(A4A1=1 OR 2)  
YES ........................................................................1 ➔ GO TO C3  
NO .........................................................................2

C1A. IS FATHER DECEASED?  
(A4=-14 OR A9=-14)  
YES ........................................................................1 ➔ GO TO SECTION E  
NO .........................................................................2

C1B. IS FATHER KNOWN?  
(A4=1-5 OR A4E=1)  
YES ........................................................................1  
NO .........................................................................2 ➔ GO TO SECTION E

C1C. DOES FATHER HAVE PRIMARY CUSTODY OF CHILD?  
(A3A2=1)  
YES ........................................................................1 ➔ GO TO C34  
NO .........................................................................2
C2. Now, I’d like to ask you some questions about (FATHER) and his relationship to (CHILD).

Has (FATHER) seen (CHILD) (since [DATE OF LAST INTERVIEW]/during the last two years)?

YES ..........................................................1
NO .............................................................2  ➔ GO TO C8
FATHER DOESN’T KNOW ABOUT CHILD ....3  ➔ GO TO SECTION E

C2A. During the past 30 days, on how many days has (FATHER) seen (CHILD)?

NUMBER OF DAYS ..................................................|____|____|  ➔ GO TO C2C
NONE ...............................................................0

C2B. When did (FATHER) last see (CHILD)?

|____|____| / |____|____|____|____|
MONTH             YEAR
(C2B1)             (C2B2)

C2C. Has (CHILD) stayed overnight with (FATHER) (since [DATE OF LAST INTERVIEW]/during the last two years)?

YES .............................................................1
NO .............................................................2  ➔ GO TO C2E

C2D. How many nights altogether has (CHILD) spent with (FATHER) (since [DATE OF LAST INTERVIEW]/during the last two years)?

ENCOURAGE AN ESTIMATE.

|____|____|____|____| NIGHTS  ➔ GO TO C2E
DON’T KNOW .....................................................-2
C2D1. I just need a range. Would you say…

1 - 3 nights, ......................................................1
4 - 11 nights, .....................................................2
12 - 24 nights, or .................................................3
25 or more nights? ................................................4

C2E. DID FATHER SEE CHILD MORE THAN ONCE DURING THE PAST MONTH?
(C2A≥2 OR MORE)
YES ..............................................................1
NO .................................................................2 ➔ GO TO C5A

C2F. Please think about the kind of father you feel that (FATHER) is to (CHILD). Would you say that he is . . .

An excellent father, .............................................. 1
A very good father, .............................................. 2
A good father, or ................................................. 3
Not a good father? .............................................. 4
FATHER DOESN'T KNOW ABOUT CHILD (VOLUNTEERED) ............-14 ➔ GO TO SECTION E
Now I would like to ask you some questions about things (FATHER) may do with (CHILD).

Please tell me how many days a week he does each of these activities in a typical week.

How many days a week does he (READ ITEM)?

**RECORD “NEVER” AS “0”.

<table>
<thead>
<tr>
<th></th>
<th>DAYS PER WEEK</th>
<th>DON’T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>C3A.</td>
<td>Sing songs or nursery rhymes with (CHILD)........</td>
<td>0 1 2 3 4 5 6 7</td>
</tr>
<tr>
<td>C3B.</td>
<td>Read stories to (CHILD)......</td>
<td>0 1 2 3 4 5 6 7</td>
</tr>
<tr>
<td>C3C.</td>
<td>Tell stories to (him/her) ........</td>
<td>0 1 2 3 4 5 6 7</td>
</tr>
<tr>
<td>C3D.</td>
<td>Play inside with toys such as blocks or legos with (CHILD).........</td>
<td>0 1 2 3 4 5 6 7</td>
</tr>
<tr>
<td>C3E.</td>
<td>Tell (CHILD) that he appreciated something (he/she) did........</td>
<td>0 1 2 3 4 5 6 7</td>
</tr>
<tr>
<td>C3F.</td>
<td>Play outside in the yard, park, or playground with (CHILD)...............</td>
<td>0 1 2 3 4 5 6 7</td>
</tr>
<tr>
<td>C3G.</td>
<td>Take (CHILD) on an outing, such as shopping, or to a restaurant, church, museum, or special activity or event...............</td>
<td>0 1 2 3 4 5 6 7</td>
</tr>
<tr>
<td>C3H.</td>
<td>Watch TV or a video together..........................</td>
<td>0 1 2 3 4 5 6 7</td>
</tr>
</tbody>
</table>
C4. Sometimes children behave pretty well and sometimes they don’t. In the past month, has (FATHER) spanked (CHILD) because (he/she) was misbehaving or acting up?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>2</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>-2</td>
</tr>
</tbody>
</table>

GO TO C5

C4A. Did he do this . . .

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Every day or nearly every day</td>
<td>1</td>
</tr>
<tr>
<td>A few times a week</td>
<td>2</td>
</tr>
<tr>
<td>A few times this past month</td>
<td>3</td>
</tr>
<tr>
<td>Only once or twice?</td>
<td>4</td>
</tr>
</tbody>
</table>

C5. In the past month, how often has (FATHER) spent one or more hours a day with (CHILD)? Was it . . .

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Every day or nearly every day</td>
<td>1</td>
</tr>
<tr>
<td>A few times a week</td>
<td>2</td>
</tr>
<tr>
<td>A few times this past month</td>
<td>3</td>
</tr>
<tr>
<td>Once or twice, or</td>
<td>4</td>
</tr>
<tr>
<td>Not at all?</td>
<td>5</td>
</tr>
</tbody>
</table>

C5A. DOES FATHER SEE CHILD FREQUENTLY?

(C5=1 or 2)

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>2</td>
</tr>
</tbody>
</table>

GO TO C6
C5B. What is the main reason (FATHER) doesn’t see (CHILD) more often?

**IF MORE THAN ONE REASON, PROBE FOR MAIN REASON.**

**CIRCLE ONE**

- MOTHER DOESN’T WANT FATHER TO SEE CHILD ........................................1
- FATHER DOES NOT WANT TO SEE/ACKNOWLEDGE CHILD .................................2
- CHILD DOESN’T WANT TO SEE FATHER ..................................................3
- FATHER LIVES TOO FAR AWAY .........................................................4
- FATHER DOESN’T HAVE ENOUGH TIME OR HAS TIME CONFLICTS ...............5
- FATHER DOESN’T HAVE ENOUGH MONEY ...........................................6
- PARENTS DON’T GET ALONG ..........................................................7
- FATHER’S CURRENT PARTNER OBJECTS ........................................ 8
- MOTHER’S CURRENT PARTNER OBJECTS ........................................... 9
- OTHER (NOT SPECIFIED) ......................................................... 10

_____________________________________

- FATHER IN JAIL .......................................................... 101
- VISITATION/CUSTODY ..................................................... 102
- COURT/PROTECTIVE ORDER ................................................ 103
- ILLNESS .............................................................................. 104
- FATHER ON ALCOHOL/DRUGS ............................................. 105
- FAMILY PROBLEMS ......................................................... 106

C6. Have you ever asked (FATHER) to spend more time with (CHILD)?

- YES .............................................................................. 1
- NO .................................................................................. 2
C6A. Have you ever refused to let (FATHER) see (CHILD)?

YES .................................................................1
NO .................................................................2 \(\Rightarrow\) GO TO C7

C6A1. How many times have you refused to let (FATHER) see (CHILD) (since [DATE OF LAST INTERVIEW]/during the last two years)?

[___] [___] TIMES

HAS NOT REFUSED SINCE
DATE OF LAST INTERVIEW/
DURING THE LAST TWO YEARS .................-10 \(\Rightarrow\) GO TO C7

C6A2. Why do you refuse to let (FATHER) see (CHILD)?

INCONVENIENT/TIME CONFLICT .............. 1
CHILD ILL.......................................................... 2
CHILD DIDN’T WANT TO VISIT FATHER ...... 3
FATHER NOT GOOD WITH CHILD............. 4
FATHER DRUNK, VIOLENT, ABUSIVE ....... 5
OTHER (NOT SPECIFIED)......................... 6

_____________________________________

FATHER INCARCERATED...........................101
FATHER DOESN’T SHOW .........................102
COURT ORDER/CUSTODY BATTLE ............103
SAFETY, HOUSING, LIFESTYLE ..............104
FATHER’S NEW FAMILY .........................105
PARENTS DON’T GET ALONG ..................106
NO CHILD SUPPORT .........................107
(18 CITIES ONLY – CONSTRUCTED FOR 2 CITIES)

C7. HAS FATHER NOT SPENT ONE OR MORE HOURS WITH (CHILD) IN THE PAST MONTH?
(C5 = 5)

YES .................................................................1  GO TO C7E
NO .................................................................2

Fathers can help in many different ways. Please tell me how often (FATHER) helps you with the following:

(READ ITEM). Would you say he helps you with this often, sometimes, rarely, or never?

<table>
<thead>
<tr>
<th></th>
<th>OFTEN</th>
<th>SOMETIMES</th>
<th>RARELY</th>
<th>NEVER</th>
</tr>
</thead>
<tbody>
<tr>
<td>C7A. How often does he look after (CHILD) when you need to do things?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>C7B. How often does he run errands (for you) like picking things up from the store?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>C7C. How often does he fix things around your home, paint, or help make it look nicer in other ways?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>C7D. How often does he take (CHILD) places (he/she) needs to go, such as to daycare or the doctor?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

C7E. DID CHILD LIVE WITH FATHER AT BIRTH AND IS CHILD CURRENTLY LIVING WITH FATHER?
(CHECK BASELINE STATUS AND A2=1 OR 2 AND A4A1=1 OR 2, OR A3A2=1)

YES .................................................................1
NO .................................................................2  GO TO C8

C7F. Was (FATHER) ever separated from (CHILD) for any period of two weeks or more?

YES .................................................................1
NO .................................................................2  GO TO C8
C7G. How many times were (FATHER) and (CHILD) separated?

|___|___| TIMES

C7H. How old was (CHILD) during (this/the first of these) separation period(s)?

|___|___| MONTHS (C7H1)

OR

|___|___| YEARS (C7H2)

C8. WERE MOTHER AND FATHER MARRIED AT LAST INTERVIEW?
(CHECK LAST INTERVIEW RELATIONSHIP STATUS ON CONTACT SHEET)

YES, MARRIED...........................................1 ★ GO TO C11

NO .................................................................2

C9. WAS PATERNITY ESTABLISHED AT LAST INTERVIEW?
(CHECK PATERNITY STATUS ON CONTACT SHEET. IF NO PATERNITY INDICATION ON CONTACT SHEET, CONTINUE TO C10).

YES ............................................................. 1 ★ GO TO C11

NO ............................................................... 2

NO PATERNITY INDICATOR .........................-10

C10. My next questions are about the legal arrangements you and (FATHER) have regarding (CHILD).

C10A. Has (FATHER’s) legal paternity been established? That is, did he sign any document that identifies him as the legal father of (CHILD)? Or, has a court ruled that he is the father?

YES, LEGAL PATERNITY...............................1 ★ GO TO C11

NO ...............................................................2
C10A1. What is the primary reason that legal paternity has not been established?

IF MORE THAN ONE REASON, PROBE FOR MAIN REASON.

CIRCLE ONE

DON’T WANT THE STATE/LEGAL SYSTEM INVOLVED/PREFER TO RECEIVE PAYMENTS DIRECTLY ..............1 ➔ GO TO C11

MOTHER DOESN’T WANT THE FATHER INVOLVED..................................2

FATHER DOESN’T WANT TO BE INVOLVED ........................................3 ➔ GO TO C11

OTHER (NOT SPECIFIED) ........................................4

________________________________________

IN PROCESS ..................................................101

FATHER DECEASED ........................................102

Paternity Test .................................................103

FATHER INCARCERATED .................................104

C10A2. Why don’t you want the father involved?

FINANCIAL REASONS/FATHER NOT ABLE TO PROVIDE SUPPORT ..............1

MOTHER DOESN’T GET ALONG WITH FATHER .................................2

FATHER NOT A GOOD PARENT/ FATHER A BAD INFLUENCE ..............3

CAN’T LOCATE FATHER ........................................4

OTHER (NOT SPECIFIED) ........................................5

________________________________________

IN PROCESS ..................................................101

FATHER DECEASED ........................................102

Paternity Test .................................................103

FATHER INCARCERATED .................................104
C11. ARE MOTHER AND FATHER MARRIED AND LIVING TOGETHER? (A4=1 AND A4A1=1 OR 2)

YES .................................................................1 ➔ GO TO C27
NO .................................................................2

C12. DID MOTHER AND FATHER HAVE A LEGAL AGREEMENT OR CHILD SUPPORT ORDER AT LAST INTERVIEW? (CHECK LAST INTERVIEW CHILD SUPPORT ON CONTACT SHEET).

YES .................................................................1
NO .................................................................2 ➔ GO TO C12B

C12A. The last time we interviewed you, you told us that you have a legal agreement or child support order that requires (FATHER) to provide financial support for (CHILD). Have there been any changes to the original agreement since it was reached?

YES .................................................................1 ➔ GO TO C15A
NO .................................................................2 ➔ GO TO C16

(18 CITIES ONLY – CONSTRUCTED FOR 2 CITIES)
C12B. WAS LEGAL PATERNITY ESTABLISHED? (C10=1)

YES .................................................................1
NO .................................................................2 ➔ GO TO C23

C13. Next I have some questions about financial contributions (FATHER) might make to help support (CHILD).

Do you have a legal agreement or child support order that requires (FATHER) to provide financial support to (CHILD)?

YES .................................................................1 ➔ GO TO C13B
NO .................................................................2
C13A1. What is the primary reason that you do not have a child support order?

IF MORE THAN ONE REASON, PROBE FOR MAIN REASON.

CIRCLE ONE

DON'T WANT THE STATE/LEGAL SYSTEM INVOLVED/PREFER TO RECEIVE PAYMENTS DIRECTLY ..............1 ➔ GO TO C13A3

MOTHER DOESN'T WANT THE FATHER INVOLVED .........................................................2

THE FATHER DOESN'T WANT TO BE INVOLVED .......................................................3 ➔ GO TO C13A3

OTHER (NOT SPECIFIED) .................................................................4

-----------------------------------------------

LIVING TOGETHER .................................................101

FATHER UNLOCATED .............................................102

MUTUAL UNDERSTANDING .................................103

FATHER INCARCERATED .............................................104

CUSTODY ISSUES ..................................................105

PENDING .................................................................106

C13A2. Why don’t you want the father involved?

FINANCIAL REASONS/FATHER NOT ABLE TO PROVIDE SUPPORT .......................1

MOTHER DOESN'T GET ALONG WITH FATHER .............................................2

FATHER NOT A GOOD PARENT/ FATHER A BAD INFLUENCE .................................3

CAN'T LOCATE FATHER ..................................................4

OTHER (NOT SPECIFIED) ........................................5

-----------------------------------------------
C13A3. Have you ever contacted a child support enforcement office, a department of social services, welfare office, or any government agency to find out about child support?

YES ..............................................................................1
NO ..............................................................................2

GO TO C23

C13B. When was that legal agreement first reached?

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>/</th>
<th></th>
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<th></th>
</tr>
</thead>
</table>
MONTH (C13B1)  YEAR (C13B2)

C13C. NOT FOR PUBLIC RELEASE

C14. DOES MOTHER HAVE ANY OTHER CHILDREN BY FATHER? (ANY A10C=1)

YES, MORE THAN ONE ..............................................1
NO, FOCAL CHILD ONLY ...........................................2  ➔ GO TO C15

C14A. Is your legal agreement just for (CHILD) or is it for (any of) your other child(ren) as well?

JUST FOR CHILD .......................................................1
FOR OTHER CHILDREN AS WELL .........................2

C15. Have there been any changes to the original agreement since it was reached?

YES ..............................................................................1
NO ..............................................................................2  ➔ GO TO C16
C15A. Why was the original agreement changed?

CIRCLE ALL THAT APPLY

TO INCLUDE ANOTHER CHILD ..................1
CHANGE IN FATHER’S ECONOMIC
CIRCUMSTANCES ...............................2
CHANGE IN MOTHER’S ECONOMIC
CIRCUMSTANCES ...............................3
OTHER (NOT SPECIFIED) .......................4

MOVED IN TOGETHER ..........................101
FELL BEHIND/STOPPED PAYMENTS ..........102
AGREEMENT TERMINATED .....................103
FATHER INCARCERATED .......................104
FATHER DOESN’T SEE CHILD ...............105
AGREEMENT NEVER WENT THROUGH ......106

C15B. When was the original agreement changed?

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>/</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>MONTH</td>
<td>YEAR</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
(C15B1) (C15B2)

C15C. NOT FOR PUBLIC RELEASE
C16. How much are the payments supposed to be per month?

$[____|____|____|____] PER (C16P)

WEEK .................................................................1
EVERY 2 WEEKS .....................................................2
MONTH .................................................................3
OTHER (NOT SPECIFIED) .................................4

____________________________________
NONE/PAYMENTS LEGALLY TERMINATED ......................0

C17. DO MOTHER AND FATHER LIVE TOGETHER?
(A4A1=1 OR 2)

YES .................................................................1 ➔ GO TO C19
NO .................................................................2

C18. Are payments supposed to be received directly from (FATHER), from the court, from a welfare or child support agency, or from some other source?

FATHER .................................................................1
COURT .................................................................2
WELFARE OR CHILD SUPPORT AGENCY ..........3
OTHER (NOT SPECIFIED) .................................4

____________________________________


All of the time, .........................................................1
More than half of the time, ......................................2
About half the time, .................................................3
Less than half the time, or ........................................4
Never? .................................................................5
C20. How much of this legally agreed upon child support has (FATHER) actually paid—USE MOST RECENT: (since [DATE IN C13B/since [DATE IN C15B/ in the past two years)? Would you say he has paid….

   All of the amount agreed upon ...................... 1 ➔ GO TO C20B
   Some of the amount agreed upon, or............ 2
   None of the amount agree upon............... 3 ➔ GO TO C20B
   DON'T KNOW .................................................-2
   REFUSED ..........................................................-1

C20A. Can you tell me approximately how much he has paid? Was it . . .

   Less than $500,............................... 1
   $500 to $1,000, ............................... 2
   $1,001 to $2,000, ............................ 3
   $2,001 to $3,000, ............................ 4
   $3,001 to $4,000, ............................ 5
   $4,001 to $5,000, ............................ 6
   $5,001 to $10,000, or ...................... 7
   More than $10,000? ........................... 8
   DON'T KNOW .................................................-2
   REFUSED ..........................................................-1

C20B. USE MOST RECENT: (Since DATE IN C13B)/Since [DATE IN C15B]/In the past two years,) Has (FATHER) given money or other financial support to you directly (instead of/in addition to) paying formal child support?

   YES .................................................................1
   NO .................................................................2 ➔ GO TO C21
C20C. (Not including money that (FATHER) paid as part of the formal child support,)
How much money did you receive from (FATHER) (since DATE IN C13B)/since [DATE IN C15B]/in the past 2 years?)

$ |___|___|,|___|___|  \( \rightarrow \) GO TO C21

DON'T KNOW ..................................................-2
REFUSED ..........................................................-1

C20D. I just need a range. Can you tell me if it was . . .

Less than $500, ............................................... 1
$500 to $1,000, ............................................... 2
$1,001 to $2,000, ......................................... 3
$2,001 to $3,000, ......................................... 4
$3,001 to $4,000, ......................................... 5
$4,001 to $5,000, ......................................... 6
$5,001 to $10,000, or .................................... 7
More than $10,000? ................................. 8
DON'T KNOW ..................................................-2
REFUSED ..........................................................-1

C21. Does (FATHER) have any arrears on the child support that he is supposed to pay to you, or does he owe anything to the welfare department for unpaid monthly support or for reimbursing birthing costs?

**PROBE:** Arrears is unpaid child support that the father owes to the mother or to the child support agency.

YES ............................................................... 1
NO ................................................................. 2
DON'T KNOW ..................................................-2  \( \rightarrow \) GO TO C22
C21A. What is the amount of the arrears?

\$ [ ] [ ] [ , ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] \[ \rightarrow \text{GO TO C21C} \]

DON’T KNOW .........................................................-2
REFUSED ............................................................-1

C21B. I just need to have a range. Can you tell me if it is . . .

Less than $500, .................................................... 1
$500 to $1,000, .................................................... 2
$1,001 to $2,000, .................................................. 3
$2,001 to $3,000, .................................................. 4
$3,001 to $4,000, .................................................. 5
$4,001 to $5,000, .................................................. 6
$5,001 to $10,000, or ......................................... 7
More than $10,000? .............................................. 8
DON’T KNOW .........................................................-2
REFUSED ............................................................-1

C21C. Has any action been taken by a welfare office, court, or judge to try to get (FATHER) to pay the child support he owes?

YES ................................................................. 1
NO ................................................................. 2 \[ \rightarrow \text{GO TO C22} \]
DON’T KNOW .........................................................-2
C21D. What action has been taken?

CIRCLE ALL THAT APPLY

GARNISHED FATHER’S WAGES ..................1
SEIZED FATHER’S INCOME TAX REFUND .....................2
SUSPENDED FATHER’S DRIVER’S LICENSE ........................3
SEIZED FATHER’S LIQUID ASSETS ..................4
PUT A LIEN ON FATHER’S PERSONAL PROPERTY ..................5
SUSPENDED FATHER’S BUSINESS, PROFESSIONAL OR OCCUPATIONAL LICENSE ..................................................6
SENT FATHER TO PRISON OR JAIL ............7
PUT FATHER ON PROBATION .....................8
OTHER (NOT SPECIFIED) ..........................9

............................................................

WARRANT ..................................................101
COURT CASE .............................................102
SENT LETTERS/PAPERS ..............................103
FATHER MUST GET JOB .............................104
FATHER UNLOCATED .................................105
FATHER MUST PAY MORE .......................106

C22. DO MOTHER AND FATHER LIVE TOGETHER?
(A4A1=1 OR 2)

YES ..........................................................1 ➔ GO TO C23
NO .............................................................2
C22A. Does the child support agreement specify anything about visits between (CHILD) and (FATHER)?

YES ........................................................................ 1
NO ........................................................................ 2 \(\Rightarrow\) GO TO C23

C22B. How many days per month is (CHILD) supposed to spend with (FATHER)?

|____|____| DAYS

NONE ............................................................... 0
OTHER (NOT SPECIFIED) ............................... 9

EVERY OTHER WEEK .................................... 101
WHENEVER HE WANTS ............................... 102
HOLIDAY VACATION .................................... 103

C23. ARE MOTHER AND FATHER CURRENTLY MARRIED?
(A4=1)

YES ............................................................... 1 \(\Rightarrow\) GO TO C25C
NO ....................................................................... 2

C24. DOES MOTHER HAVE A FORMAL AGREEMENT WITH FATHER?
(C12=1 OR C13=1)

YES ............................................................... 1 \(\Rightarrow\) GO TO C25C
NO ....................................................................... 2

FOR UNMARRIED PARENTS WHO DO NOT HAVE A FORMAL AGREEMENT:

C25. Has (FATHER) paid anything toward ([CHILD’s]/your children’s) support in the past twelve months?

YES ........................................................................ 1
NO ........................................................................ 2 \(\Rightarrow\) GO TO C25C
C25A. How much (have you received from him/was paid) for ([CHILD’s]/your children’s) support in the past twelve months?

\[ \_|\_|\_|\_|\_|\_|\_| \rightarrow \text{GO TO C25C} \]

DON’T KNOW ........................................-2
REFUSED ..............................................-1

C25B. I just need to have a range. Can you tell me if it is . . .

Less than $500, ........................................ 1
$500 to $1,000, ........................................ 2
$1,001 to $2,000, ....................................... 3
$2,001 to $3,000, ....................................... 4
$3,001 to $4,000, ....................................... 5
$4,001 to $5,000, ....................................... 6
$5,001 to $10,000, or .................................... 7
More than $10,000? ...................................... 8
DON’T KNOW ...........................................-2
REFUSED ..............................................-1

C25C. DO MOTHER AND FATHER LIVE TOGETHER ALL OR MOST OF THE TIME?
(A4A1=1)

YES ....................................................................... 1 \rightarrow \text{GO TO C27}
NO ........................................................................... 2
C26. I am going to read you a list of things that children need. Please tell me how often (FATHER) buys these for (CHILD).

How often does (FATHER) buy (ITEM)? Is it often, sometimes, rarely or never?

<table>
<thead>
<tr>
<th></th>
<th>OFTEN</th>
<th>SOMETIMES</th>
<th>RARELY</th>
<th>NEVER</th>
</tr>
</thead>
<tbody>
<tr>
<td>C26A.</td>
<td>Clothes for (CHILD)</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>C26B.</td>
<td>Toys for (CHILD)</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>C26C.</td>
<td>Medicine for (CHILD)</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>C26D.</td>
<td>Food for (CHILD)</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>C26E.</td>
<td>Anything else (NOT SPECIFIED)</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

C27. DOES MOTHER HAVE ANY CHILDREN BY SOMEONE OTHER THAN FATHER?
(ANY A10B=2)

YES .........................................................1
NO ..........................................................2 ➔ GO TO C30

C28. You mentioned before that you have (a child/some children) with someone other than (FATHER). Do you receive any child support for (that child/those children)?

YES ..........................................................1
NO ..........................................................2 ➔ GO TO C30

C29. About how much child support did you receive from (the father/those fathers) in the past twelve months?

$ |___|___|___|___|___|___|___|___|___|___|___|___|...

DON'T KNOW .............................................-2
REFUSED ..................................................-1

64
C29A. I just need to have a range. Can you tell me if it was . . .

- Less than $500, ........................................ 1
- $500 to $1,000, ................................. 2
- $1,001 to $2,000, ............................. 3
- $2,001 to $3,000, .............................. 4
- $3,001 to $4,000, .............................. 5
- $4,001 to $5,000, .............................. 6
- $5,001 to $10,000, or ......................... 7
- More than $10,000? ............................. 8
- DON'T KNOW ....................................-2
- REFUSED ..........................................-1

C30. Has father had any children with another woman (since [DATE OF LAST INTERVIEW/during the last two years)?

- YES ...................................................... 1
- NO ...................................................... 2
- DON'T KNOW ....................................-2

GO TO C34

C31. How many children did (FATHER) have with other women (since [DATE OF LAST INTERVIEW/during the last two years)?

- [ ] [ ] OTHER CHILDREN
- DON'T KNOW ....................................-2
- REFUSED ..........................................-1

C31A. Does father live with any of the children he’s had with other women?

- YES ...................................................... 1
- NO ...................................................... 2
- DON'T KNOW ....................................-2
C32. Does he pay child support for (that/any of these) child(ren)?

   YES .................................................................................................. 1
   NO ................................................................................................. 2
   DON'T KNOW ............................................................................... -2

C33. IS MOTHER LIVING WITH FATHER ALL, MOST, OR SOME OF THE TIME?
     (A4A1=1 OR 2)

   YES .................................................................................................. 1 ➔ GO TO C36
   NO ................................................................................................. 2

C34. Is (FATHER) living with or married to another woman?

   YES .................................................................................................. 1
   NO ................................................................................................. 2
   DON'T KNOW ............................................................................... -2

C35. NOT FOR PUBLIC RELEASE

C35A. Approximately how many miles from your home does (FATHER) live?

   0 – 10 MILES............................................................................... 1
   11 – 30 MILES........................................................................... 2
   31 – 60 MILES........................................................................... 3
   61 – 100 MILES......................................................................... 4
   101 MILES OR MORE................................................................. 5
C36. What was (FATHER) doing most of last week—working at a regular job, going to school, or something else?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>WORKING AT A REGULAR JOB</td>
<td>1</td>
</tr>
<tr>
<td>LOOKING FOR WORK</td>
<td>2</td>
</tr>
<tr>
<td>IN SCHOOL</td>
<td>3</td>
</tr>
<tr>
<td>UNABLE TO WORK</td>
<td>4</td>
</tr>
<tr>
<td>IN JAIL/PRISON</td>
<td>5</td>
</tr>
<tr>
<td>STAY AT HOME PARENT/HOMEMAKER</td>
<td>6</td>
</tr>
<tr>
<td>WORKING AND IN SCHOOL</td>
<td>7</td>
</tr>
<tr>
<td>OTHER (NOT SPECIFIED)</td>
<td>8</td>
</tr>
<tr>
<td>NOTHING</td>
<td>0</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>-2</td>
</tr>
<tr>
<td>ON DISABILITY</td>
<td>101</td>
</tr>
<tr>
<td>HALFWAY HOUSE/REHAB</td>
<td>102</td>
</tr>
<tr>
<td>MILITARY</td>
<td>103</td>
</tr>
<tr>
<td>RETIRED</td>
<td>104</td>
</tr>
<tr>
<td>ON VACATION</td>
<td>105</td>
</tr>
</tbody>
</table>

C37. Has (FATHER) spent any time in jail (since [DATE OF LAST INTERVIEW]/in the past two years)?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>2</td>
</tr>
<tr>
<td>FATHER IS CURRENTLY IN JAIL</td>
<td>3</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>-2</td>
</tr>
</tbody>
</table>
C37A. What (is/was) (FATHER) in jail for?

**PROBE:** What else?

**INTERVIEWER:** IF “ASSAULT,” PROBE FOR SIMPLE OR AGGRAVATED ASSAULT.

<table>
<thead>
<tr>
<th>Category</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>AGGRAVATED ASSAULT/RAPE/MURDER (An attack on a person with a weapon or hands, e.g., battery, rape, aggravated assault, manslaughter)</td>
<td>1</td>
</tr>
<tr>
<td>ROBBERY/THEFT/LARCENY (Taking something from someone with or without using a weapon; forgery, fraud, embezzlement, bad checks; shoplifting)</td>
<td>2</td>
</tr>
<tr>
<td>POSSESSION, USE, OR SALE OF MARIJUANA, COCAINE, OR OTHER ILLICIT DRUGS</td>
<td>3</td>
</tr>
<tr>
<td>MAJOR TRAFFIC OFFENSE (Driving under the influence of alcohol or other drug, DWI, DUI, reckless driving, driving without a license)</td>
<td>4</td>
</tr>
<tr>
<td>NON-PAYMENT OF CHILD SUPPORT</td>
<td>5</td>
</tr>
<tr>
<td>PAROLE OR PROBATION VIOLATION</td>
<td>6</td>
</tr>
<tr>
<td>SIMPLE ASSAULT</td>
<td>7</td>
</tr>
<tr>
<td>OTHER (NOT SPECIFIED)</td>
<td>8</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>-2</td>
</tr>
<tr>
<td>REFUSED</td>
<td>-1</td>
</tr>
<tr>
<td>DOMESTIC VIOLENCE</td>
<td>101</td>
</tr>
<tr>
<td>WEAPONS POSSESSION</td>
<td>102</td>
</tr>
<tr>
<td>TRAFFIC TICKETS</td>
<td>103</td>
</tr>
<tr>
<td>PROPERTY OFFENSE</td>
<td>104</td>
</tr>
<tr>
<td>ALCOHOL RELATED</td>
<td>105</td>
</tr>
<tr>
<td>IMMIGRATION</td>
<td>106</td>
</tr>
</tbody>
</table>
C37B. IS FATHER CURRENTLY IN JAIL?
(C42=5 OR C43=2)

YES ........................................................................1 ➔ GO TO C37D
NO ...........................................................................2

C37C. How long did he spend in (jail/prison)?

INTERVIEWER: ACCEPT ESTIMATE.

|.___|.___| OR |.___|.___| OR |.___|.___| OR |.___|.___|
YEARS (C37C1) MONTHS (C37C2) WEEKS (C37C3) DAYS (C37C4)

DON'T KNOW ...........................................................................-2

GO TO C38

C37D. When did (FATHER) go to (jail/prison)?

|.___|.___|.___|
YEAR (C37D2)

DON'T KNOW ...........................................................................-2

C37E. When will (FATHER) be released from (jail/prison)?

|.___|.___|.___|
YEAR (C37E2)

DON'T KNOW ...........................................................................-2

C37F. NOT FOR PUBLIC RELEASE

C37G. NOT FOR PUBLIC RELEASE

C37H. NOT FOR PUBLIC RELEASE
C38. Does (FATHER) have any physical or mental health conditions that limit the kind or amount of work he can do?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>-2</td>
</tr>
</tbody>
</table>

C39. Does (FATHER) have problems such as keeping a job or getting along with family and friends because of alcohol or drug use?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>-2</td>
</tr>
</tbody>
</table>
C40. Next, I'm going to read some statements that describe how (FATHER) may behave. For each statement, please tell me whether you strongly agree, agree, disagree, or strongly disagree that this is like (FATHER).

INTERVIEWER: IF MOTHER REPORTS THAT SHE HASN'T SEEN FATHER, ASK HER TO BASE HER ANSWER ON THE LAST TIME SHE DID SEE HIM.

<table>
<thead>
<tr>
<th>Statement</th>
<th>STRONGLY AGREE</th>
<th>AGREE</th>
<th>DISAGREE</th>
<th>STRONGLY DISAGREE</th>
<th>DON'T KNOW</th>
<th>REFUSED</th>
</tr>
</thead>
<tbody>
<tr>
<td>C40A. He often says and does things without considering the consequences</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>-2</td>
<td>-1</td>
</tr>
<tr>
<td>C40B. He often gets into trouble because he doesn’t think before he acts</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>-2</td>
<td>-1</td>
</tr>
</tbody>
</table>

C41. Next I’m going to read activities that may describe (FATHER). Please tell me whether each statement is very true, somewhat true, or not true of (FATHER).

INTERVIEWER: IF MOTHER REPORTS THAT SHE HASN'T SEEN FATHER, ASK HER TO BASE HER ANSWER ON THE LAST TIME SHE DID SEE HIM.

<table>
<thead>
<tr>
<th>Statement</th>
<th>VERY TRUE</th>
<th>SOMewhat TRUE</th>
<th>NOT TRUE</th>
<th>DON'T KNOW</th>
<th>REFUSED</th>
</tr>
</thead>
<tbody>
<tr>
<td>C41A. He does things that may cause trouble with the law</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>-2</td>
<td>-1</td>
</tr>
<tr>
<td>C41B. He lies or cheats</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>-2</td>
<td>-1</td>
</tr>
<tr>
<td>C41C. He frequently gets into fights</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>-2</td>
<td>-1</td>
</tr>
<tr>
<td>C41D. He doesn’t seem to feel guilty when he misbehaves</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>-2</td>
<td>-1</td>
</tr>
</tbody>
</table>

(18 CITIES ONLY – 2 CITIES NOT ASKED)

C42A. Sometimes couples have problems because one of the partners has cheated on the other by getting involved sexually with someone else.

(During the time you were together as a couple,) Do you think (FATHER) ever cheated on you with another person after (CHILD's) birth?

YES ................................................. 1
NO ..................................................... 2
DON'T KNOW ....................................... -2
REFUSED ......................................... -1
(18 CITIES ONLY – 2 CITIES NOT ASKED)

C42B. Did you ever cheat on (FATHER) with another person after (CHILD’s) birth?

YES ................................................................. 1
NO ................................................................. 2
DON’T KNOW ..................................................-2
REFUSED ..........................................................-1

C43A. Since (CHILD) was born, has there been a time when (FATHER) felt sad, blue or depressed, or lost interest in most things that usually give him pleasure?

INTERVIEWER: IF MOTHER REPORTS THAT SHE HASN’T SEEN FATHER, ASK HER TO BASE HER ANSWER ON THE LAST TIME SHE DID SEE HIM.

YES ................................................................. 1
NO ................................................................. 2
DON’T KNOW ..................................................-2

GO TO C44A

C43B. Has (FATHER) felt sad, blue or depressed, or lost interest in things within the last twelve months?

YES ................................................................. 1
NO ................................................................. 2
DON’T KNOW ..................................................-2

C44A. Since (CHILD) born, has (FATHER) had a period lasting one month or longer when most of the time he felt worried, tense or anxious?

YES ................................................................. 1
NO ................................................................. 2
DON’T KNOW ..................................................-2

GO TO SECTION D

C45B. During the past twelve months, did (FATHER) have a period lasting one month or longer when most of the time he felt worried, tense or anxious?

YES ................................................................. 1
NO ................................................................. 2
DON’T KNOW ..................................................-2
SECTION D: MOTHER’S RELATIONSHIP WITH FATHER  
(FOR MOTHERS WHO ARE OR WERE IN A RELATIONSHIP)

D0. IS FATHER DEAD OR UNKNOWN?  
(A4=-13 OR -14 OR A9=-14)

YES .........................................................................1 ➔ GO TO SECTION E
NO ...........................................................................2

D1. DOES FATHER HAVE ANY CONTACT WITH CHILD?  
(C1D=1 OR C2=1)

YES .........................................................................1
NO ...........................................................................2 ➔ GO TO D4
D1A-H. The following questions are about how parents work together in raising a child. Please tell me how often the following statements are true for you and (FATHER).

(READ ITEM). Would you say it’s always true, sometimes true, rarely true, or never true?

<table>
<thead>
<tr>
<th></th>
<th>ALWAYS TRUE</th>
<th>SOMETIME TRUE</th>
<th>RARELY TRUE</th>
<th>NEVER TRUE</th>
<th>REFUSED</th>
</tr>
</thead>
<tbody>
<tr>
<td>D1A. When (FATHER) is with (CHILD), he acts like the father you want for your child………..</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>-1</td>
</tr>
<tr>
<td>D1B. You can trust (FATHER) to take good care of (CHILD)…..</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>-1</td>
</tr>
<tr>
<td>D1C. He respects the schedules and rules you make for (CHILD)…..</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>-1</td>
</tr>
<tr>
<td>D1D. He supports you in the way you want to raise (CHILD)…..</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>-1</td>
</tr>
<tr>
<td>D1E. You and (FATHER) talk about problems that come up with raising (CHILD)…..</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>-1</td>
</tr>
<tr>
<td>D1F. You can count on (FATHER) for help when you need someone to look after (CHILD) for a few hours…..</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>-1</td>
</tr>
<tr>
<td>D1G. You respect (FATHER)’s wishes about how (CHILD) should be raised…..</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>-1</td>
</tr>
<tr>
<td>D1H. You are critical of the things (FATHER) does with (CHILD)…..</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>-1</td>
</tr>
</tbody>
</table>
D1I. **IS RELATIONSHIP WITH FATHER REFUSED?**

(A4= -1)

YES ................................................................. 1 ➔ GO TO SECTION E

NO ........................................................................... 2

D2. If you had to go away for one week and could not take (CHILD) with you, how much would you trust (FATHER) to take care of your child? Would you trust him very much, somewhat, or not at all?

VERY MUCH ....................................................... 1

SOMewhat ........................................................... 2

NOT AT ALL ............................................................ 3

D3. Could you trust anyone else to look after (CHILD)?

YES ......................................................................... 1

NO ......................................................................... 2

D4. Now I’d like to ask you some questions about your relationship with (FATHER). In general, would you say that your relationship with him is excellent, very good, good, fair, or poor?

EXCELLENT ......................................................... 1

VERY GOOD ......................................................... 2

GOOD ........................................................................ 3

FAIR ......................................................................... 4

POOR ........................................................................ 5

NEVER SEE HIM .....................................................-10

D4A. (Since [DATE OF LAST INTERVIEW/During the last two years), have you participated in a program or received counseling to help or improve your relationship with (FATHER)?

YES ......................................................................... 1

NO ......................................................................... 2
D5. **ARE MOTHER AND FATHER CURRENTLY MARRIED OR ROMANTICALLY INVOLVED WITH EACH OTHER?**
(A4=1 OR 2)

YES .................................................................1
NO .................................................................2 → GO TO D8

(18 CITIES ONLY – 2 CITIES NOT ASKED)

D6. Next I’m going to read some statements that you may or not agree with. After I read each statement, please tell me whether or not you strongly disagree, disagree, neither agree nor disagree, agree, or strongly agree. First . . .

(READ ITEM). Would you say you strongly disagree, disagree, neither agree nor disagree, agree, or strongly agree?

<table>
<thead>
<tr>
<th></th>
<th>STRONGLY DISAGREE</th>
<th>DISAGREE</th>
<th>NEITHER AGREE NOR DISAGREE</th>
<th>AGREE</th>
<th>STRONGLY AGREE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>D6A.</strong> My relationship with (FATHER) is more important to me than almost anything else in my life..................</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td><strong>D6B.</strong> I may not want to be with (FATHER) a few years from now ...............</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td><strong>D6C.</strong> I like to think of (FATHER) and me more as a couple than as two separate people.......................</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td><strong>D6D.</strong> I want this relationship to stay strong no matter what rough times we may encounter.......................</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td><strong>D6E.</strong> I am happy with my sexual relationship with (FATHER).............</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td><strong>D6F.</strong> I can trust that (FATHER) will not cheat on me with other people.............</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>
Sometimes couples have serious problems in their relationship and have thoughts of breaking up. Even people who get along well with their partner sometimes wonder whether their relationship is working out. For the next set of statements, please tell me how often each is true about your relationship with (FATHER) over the past year.

First, (READ ITEM) Would you say that over the past year this was often, sometimes or never true?

<table>
<thead>
<tr>
<th></th>
<th>OFTEN</th>
<th>SOMETIMES</th>
<th>NEVER</th>
</tr>
</thead>
<tbody>
<tr>
<td>D6G. (HOW OFTEN HAVE) you thought your relationship with (FATHER) might be in trouble?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>D6H. You and (FATHER) discussed ending your relationship?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>D6I. You talked to a close friend or relative about breaking up with (FATHER)?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>
D7. Now, think about how (FATHER) behaves towards you. For each statement I read, please tell me how often he behaves this way.

(First) (READ ITEM). Does (FATHER) behave this way often, sometimes, or never?

<table>
<thead>
<tr>
<th></th>
<th>OFTEN</th>
<th>SOMETIMES</th>
<th>NEVER</th>
</tr>
</thead>
<tbody>
<tr>
<td>D7A. He is fair and willing to compromise when you have a disagreement</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>D7B. He expresses affection or love for you</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>D7C. He insults or criticizes you or your ideas</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>D7D. He encourages or helps you to do things that are important to you</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>D7E. He tries to keep you from seeing or talking with your friends or family</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>D7F. He tries to prevent you from going to work or school</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>D7G. He withholds money, makes you ask for money, or takes your money</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>D7H. He slaps or kicks you</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>D7I. He hits you with a fist or an object that could hurt you</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>D7J. He tries to make you have sex or do sexual things you don’t want to do</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>D7K. He withholds sex to try to control your behavior</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>D7L. He insults or criticizes you for not taking good enough care of the child or your home</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>D7M. He throws something at you</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>D7N. He pushes, grabs, or shoves you</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>D7O. He listens to you when you need someone to talk to</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>D7P. He really understands your hurts and joys</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>
D8. WERE PARENTS MARRIED OR ROMANTICALLY INVOLVED AT EITHER BASELINE, OR AT 12 MONTHS, OR AT 36 MONTHS, BUT NOT CURRENTLY?
(A4=3, 4, 5 OR 6 AND CHECK CONTACT SHEET FOR RELATIONSHIP STATUS AT BASELINE, 12-MONTH, AND 36-MONTH)

YES ........................................................................................................1
NO .........................................................................................................2 ➔ GO TO D10

D9. Now, think about how (FATHER) behaved towards you during the last month of your relationship. For each statement I read, please tell me how often he behaved this way.

(First) (READ ITEM). Did (FATHER) behave this way often, sometimes, or never?

<table>
<thead>
<tr>
<th>D9A. He was fair and willing to compromise when you have a disagreement</th>
<th>OFTEN</th>
<th>SOMETIMES</th>
<th>NEVER</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>D9B. He expressed affection or love for you</th>
<th>OFTEN</th>
<th>SOMETIMES</th>
<th>NEVER</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
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<td></td>
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</table>

<table>
<thead>
<tr>
<th>D9C. He insulted or criticized you or your ideas</th>
<th>OFTEN</th>
<th>SOMETIMES</th>
<th>NEVER</th>
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<tbody>
<tr>
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<td>2</td>
<td>3</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>D9D. He encouraged or helped you to do things that are important to you</th>
<th>OFTEN</th>
<th>SOMETIMES</th>
<th>NEVER</th>
</tr>
</thead>
<tbody>
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<td>1</td>
<td>2</td>
<td>3</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>D9E. He tried to keep you from seeing or talking with your friends or family</th>
<th>OFTEN</th>
<th>SOMETIMES</th>
<th>NEVER</th>
</tr>
</thead>
<tbody>
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<table>
<thead>
<tr>
<th>D9F. He tried to prevent you from going to work or school</th>
<th>OFTEN</th>
<th>SOMETIMES</th>
<th>NEVER</th>
</tr>
</thead>
<tbody>
<tr>
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<td>2</td>
<td>3</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>D9G. He withheld money, made you ask for money, or took your money</th>
<th>OFTEN</th>
<th>SOMETIMES</th>
<th>NEVER</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
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<table>
<thead>
<tr>
<th>D9H. He slapped or kicked you</th>
<th>OFTEN</th>
<th>SOMETIMES</th>
<th>NEVER</th>
</tr>
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<tr>
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<td>3</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>D9I. He hit you with a fist or an object that could hurt you</th>
<th>OFTEN</th>
<th>SOMETIMES</th>
<th>NEVER</th>
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<tr>
<th>D9J. He tried to make you have sex or do sexual things you don't want to do</th>
<th>OFTEN</th>
<th>SOMETIMES</th>
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<td>3</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>D9K. He withheld sex to try to control your behavior</th>
<th>OFTEN</th>
<th>SOMETIMES</th>
<th>NEVER</th>
</tr>
</thead>
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<td>3</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>D9L. He insulted or criticized you for not taking good enough care of the child or your home</th>
<th>OFTEN</th>
<th>SOMETIMES</th>
<th>NEVER</th>
</tr>
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<tbody>
<tr>
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<td>2</td>
<td>3</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>D9M. He threw something at you</th>
<th>OFTEN</th>
<th>SOMETIMES</th>
<th>NEVER</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>D9N. He pushed, grabbed, or shoved you</th>
<th>OFTEN</th>
<th>SOMETIMES</th>
<th>NEVER</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>D9O. He listened to you when you need someone to talk to</th>
<th>OFTEN</th>
<th>SOMETIMES</th>
<th>NEVER</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>D9P. He really understood your hurts and joys</th>
<th>OFTEN</th>
<th>SOMETIMES</th>
<th>NEVER</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td></td>
</tr>
</tbody>
</table>
D10. Now I have some questions about events that may have happened since ([DATE OF LAST INTERVIEW]) in the last two years.

Have you and (FATHER) had a physical fight in front of (CHILD) since ([DATE OF LAST INTERVIEW]) in the last two years?

YES ................................................................. 1
NO ............................................................... 2

NO CONTACT WITH FATHER DURING PERIOD (VOLUNTEERED) ..................................-14 ➔ GO TO SECTION E

D10A. Have you been seriously hurt in a fight with (FATHER) since ([DATE OF INTERVIEW]) in the last two years?

YES ................................................................. 1
NO ............................................................... 2

NO CONTACT WITH FATHER DURING PERIOD (VOLUNTEERED) ..................................-14 ➔ GO TO SECTION E

D10B. Did you go to the hospital for any of these injuries?

YES ................................................................. 1
NO ............................................................... 2

D10C. Did you report the incident to the police?

YES ................................................................. 1
NO ............................................................... 2
D10D. Did you tell anyone else about this, such as a friend, a minister, a social worker, or someone else?

YES ..............................................................................1
NO ...............................................................................2

D10E. Did (FATHER) hurt you in front of (CHILD)?

YES ..............................................................................1
NO ...............................................................................2
SECTION E: CURRENT PARTNER

E1. ARE MOTHER AND FATHER LIVING TOGETHER ALL, MOST, OR SOME OF THE TIME? (A4A1=1 OR 2)
   YES .................................................................................1 ➔ GO TO SECTION F
   NO ...............................................................................2

E2. Are you currently involved in a romantic relationship with someone (other than [FATHER])?
   YES ............................................................................. 1
   NO ............................................................................. 2
   REFUSED ......................................................................-1 ➔ GO TO SECTION F

E2A. NOT FOR PUBLIC RELEASE

E2A1. ARE MOTHER AND FATHER MARRIED? (A4=1)
   YES ...............................................................................1 ➔ GO TO E2D
   NO ...............................................................................2

E2A2. NOT FOR PUBLIC RELEASE

E2B. Are you married to (CURRENT PARTNER)?
   YES ...............................................................................1
   NO ...............................................................................2 ➔ GO TO E2D
E2C. When did you and (CURRENT PARTNER) get married?

|   |   |   |   |   |   |
MONTH | YEAR
(E2C1) | (E2C2)

E2D. Do you and (CURRENT PARTNER) live together most of the time?

YES .................................................................1
NO .................................................................2 ➔ GO TO E2F

E2E. When did you and (CURRENT PARTNER) start living together?

|   |   |   |   |   |   |
MONTH | YEAR
(E2E1) | (E2E2)

E2F. And, how long have you and (CURRENT PARTNER) been romantically involved?

|   |   |   |   |   |   | YEARS
(E2F1)
|   |   |   |   |   |   | MONTHS
(E2F2)

E2G. CHECK CONTACT SHEET: DID RESPONDENT HAVE A PARTNER AT LAST INTERVIEW?

YES .......................................................................1
NO .......................................................................2 ➔ GO TO E3

E2H. Is this partner the same partner that you reported at ([DATE OF LAST INTERVIEW]/two years ago)?

YES .......................................................................1 ➔ GO TO E7
NO .......................................................................2
E3. Now I’d like to ask you some questions about (CURRENT PARTNER).

First, how old is (CURRENT PARTNER)?

**PROBE:** Your best estimate is fine.

| ____ | ____ | YEARS OLD
| DON’T KNOW | _________________ | -2
| REFUSED | _________________ | -1

GO TO E5

E4. **NOT FOR PUBLIC RELEASE**

E5. Which of the following best describes (CURRENT PARTNER)’s race? Is (he/she) . . .

- White, ________________________________ | 1
- Black or African American, ______________________ | 2
- Asian or Pacific Islander, or _______ | 3
- Native American or Alaskan Native? ________ | 4
- OTHER (NOT SPECIFIED) _____________________ | 5

| _________________ | DON’T KNOW | -2
| REFUSED | _________________ | -1
| HISPANIC | _____________________ | 101
| MULTI-RACIAL | _____________________ | 102

E5A. Is (CURRENT PARTNER) of Hispanic or Latino origin or descent?

| YES | _____________________ | 1
| NO | _____________________ | 2
| DON’T KNOW | _____________________ | -2
| REFUSED | _________________ | -1

GO TO E6
E5B. Is (he/she) Mexican, Puerto Rican, Cuban, or Other Hispanic?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mexican, Mexican American</td>
<td>1</td>
</tr>
<tr>
<td>Puerto Rican</td>
<td>2</td>
</tr>
<tr>
<td>Cuban</td>
<td>3</td>
</tr>
<tr>
<td>Other Hispanic/Latino (Not Specified)</td>
<td>4</td>
</tr>
</tbody>
</table>

DON'T KNOW ...............................................-2
REFUSED ..........................................................  

E6. What is the highest grade of school (CURRENT PARTNER) has completed, or the highest degree (he/she) has received?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>1</td>
</tr>
<tr>
<td>Elementary, Middle, or Junior High School</td>
<td>2</td>
</tr>
<tr>
<td>Regular High School</td>
<td>3</td>
</tr>
<tr>
<td>ABE or GED Program</td>
<td>4</td>
</tr>
<tr>
<td>Nursing School (LPN or RN)</td>
<td>5</td>
</tr>
<tr>
<td>Business or Secretarial School</td>
<td>6</td>
</tr>
<tr>
<td>Vocational, Technical, or Trade School</td>
<td>7</td>
</tr>
<tr>
<td>Junior/Community College (2-Year)</td>
<td>8</td>
</tr>
<tr>
<td>College (4-Year)</td>
<td>9</td>
</tr>
<tr>
<td>Graduate or Professional School</td>
<td>11</td>
</tr>
<tr>
<td>Some College</td>
<td>12</td>
</tr>
<tr>
<td>Other Type of School (Not Specified)</td>
<td>13</td>
</tr>
</tbody>
</table>

DON'T KNOW ...............................................-2
E7. What was (CURRENT PARTNER) doing most of last week—working at a regular job, going to school, or something else?

WORKING AT A REGULAR JOB ..................1 ➔ GO TO E8
LOOKING FOR WORK ..................................2
IN SCHOOL ...........................................3
UNABLE TO WORK .................................4
IN JAIL/PRISON .....................................5
STAY AT HOME PARENT/HOMEMAKER ....6
WORKING AND IN SCHOOL .....................7 ➔ GO TO E8
OTHER (NOT SPECIFIED) .........................8

_________________________________________________________________
NOTHING ..............................................0
DON'T KNOW .........................................-2
DISABILITY ..........................................101
HALFWAY HOUSE ..................................102
MILITARY .............................................103
ON VACATION .........................................104

E7A. In what month and year did (he/she) last work at a job lasting two consecutive weeks or more, either full or part-time, for which (he/she) received a regular paycheck?

|       |/       |
MONTH  YEAR  (E7A1) (E7A2)

NEVER WORKED FOR TWO CONSECUTIVE WEEKS .......................-10
DON'T KNOW ...........................................-2
REFUSED ..................................................-1
E8. Does (CURRENT PARTNER) engage in any activities (other than regular paid employment) in order to generate income, or in exchange for meals, clothing, a place to live or other basic necessities?

YES ................................................................. 1
NO ................................................................. 2
DON’T KNOW .................................................-2
REFUSED .......................................................-1

E9. Does (CURRENT PARTNER) have any physical or mental health conditions that limit the kind or amount of work (he/she) can do?

YES ................................................................. 1
NO ................................................................. 2
DON’T KNOW .................................................-2
REFUSED .......................................................-1

E10. Does (CURRENT PARTNER) have problems such as keeping a job or getting along with family and friends because of alcohol or drug use?

YES ................................................................. 1
NO ................................................................. 0
DON’T KNOW .................................................-2
REFUSED .......................................................-1

E11. Does (CURRENT PARTNER) have any biological children?

YES ................................................................. 1
NO ................................................................. 2
DON’T KNOW .................................................-2
REFUSED .......................................................-1

GO TO E16
E11A. How many biological children does (he/she) have?

|   |   | CHILDREN

ONLY ONE CHILD ................................ 1 → GO TO E12

E11B. How many different (women) has (CURRENT PARTNER) had biological children with?

|   | WOMEN

DON'T KNOW ......................................-2

E12. **DO MOTHER AND CURRENT PARTNER LIVE TOGETHER?**

(E2D=1)

YES .....................................................1
NO ..........................................................2 → GO TO E14

E13. (Does this child/Do any of these children) live with you?

YES .....................................................1
NO ..........................................................2 → GO TO E13B

E13A. **DOES PARTNER HAVE ONE CHILD?**

(E11A=1)

YES .....................................................1
NO ..........................................................2 → GO TO E14

E13B. Does (CURRENT PARTNER) have any biological children who do not reside with you?

YES ..................................................... 1
NO .......................................................... 2 → GO TO E14
DON'T KNOW .........................................-2
E13C. Are any of these non-resident children under 18 years old?

YES ........................................................................... 1
NO ........................................................................... 2 ➔ GO TO E13E
DON'T KNOW .........................................................-2

E13D. Does (CURRENT PARTNER) pay child support to any of these non-resident children?

YES ........................................................................... 1
NO ........................................................................... 2
DON'T KNOW .........................................................-2

E13E. Does (CURRENT PARTNER) visit (his/her) nonresident children?

YES ...........................................................................1
NO ...........................................................................0
DON'T KNOW .........................................................d

E14. DOES MOTHER HAVE CHILDREN WITH SOMEONE OTHER THAN FATHER?
(ANY A10C=0)

YES ...........................................................................1
NO ...........................................................................2 ➔ GO TO E16

E14A. NOT FOR PUBLIC RELEASE

E15. Are you the biological mother to (this child/any of these children?)

YES ...........................................................................1
NO ...........................................................................2
E16. DO MOTHER AND CURRENT PARTNER LIVE TOGETHER?
(E2D=1)

YES .......................................................1
NO ...........................................................2  ➔ GO TO E21

E17. DOES CHILD LIVE AWAY FROM MOTHER?
(A2=4)

YES .................................................................1  ➔ GO TO E23
NO .................................................................2
E18. Now I would like to ask you some questions about things (CURRENT PARTNER) may do with (CHILD).

Please tell me how many days a week (he/she) does this activity in a typical week.

How many days a week does (he/she) (READ ITEM)?

**RECORD “NEVER” AS “0”**.

<table>
<thead>
<tr>
<th></th>
<th>DAYS PER WEEK</th>
<th>DON’T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>E18A. Sing songs or nursery rhymes with (CHILD)</td>
<td>0 1 2 3 4 5 6 7 -2</td>
<td></td>
</tr>
<tr>
<td>E18B. Read stories to (CHILD)</td>
<td>0 1 2 3 4 5 6 7 -2</td>
<td></td>
</tr>
<tr>
<td>E18C. Tell stories to (him/her)</td>
<td>0 1 2 3 4 5 6 7 -2</td>
<td></td>
</tr>
<tr>
<td>E18D. Play inside with toys such as blocks or legos with (CHILD)</td>
<td>0 1 2 3 4 5 6 7 -2</td>
<td></td>
</tr>
<tr>
<td>E18E. Tell (CHILD) that (he/she) appreciated something (he/she) did</td>
<td>0 1 2 3 4 5 6 7 -2</td>
<td></td>
</tr>
<tr>
<td>E18F. Play outside in the yard, park, or playground with (CHILD), such as</td>
<td>0 1 2 3 4 5 6 7 -2</td>
<td></td>
</tr>
<tr>
<td>E18G. Take (CHILD) on an outing such as shopping, or to a restaurant, church, museum, or to a special activity or event</td>
<td>0 1 2 3 4 5 6 7 -2</td>
<td></td>
</tr>
<tr>
<td>E18H. Watch TV or a video together</td>
<td>0 1 2 3 4 5 6 7 -2</td>
<td></td>
</tr>
</tbody>
</table>

E18I. Please think about the kind of parent you feel that (CURRENT PARTNER) is to (CHILD). Would you say that (he/she) is . . .

- An excellent parent, ..............................1
- A very good parent, ...............................2
- A good parent, or ................................3
- Not a good parent? ...............................4
E19. Sometimes children behave pretty well and sometimes they don’t. In the past month, has (CURRENT PARTNER) spanked (CHILD) because (he/she) was misbehaving or acting up?

YES ..................................................................................1

NO ....................................................................................2 ➔ GO TO E20

E19A. Did (CURRENT PARTNER) do this . . .

Every day or nearly every day, .......................1
A few times a week,.................................2
A few times this past month, or .................3
Only once or twice? ..............................4

E20. Partners can help in many different ways. Please tell me how often (CURRENT PARTNER) helps you with the following . . .

(READ ITEM). Would you say (he/she) helps you with this often, sometimes, rarely, or never?

<table>
<thead>
<tr>
<th>E20A.</th>
<th>How often does (he/she) look after (CHILD) when you need to do things?</th>
<th>OFTEN</th>
<th>SOMETIMES</th>
<th>RARELY</th>
<th>NEVER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>E20B.</th>
<th>How often does (he/she) run errands like picking things up from the store?</th>
<th>OFTEN</th>
<th>SOMETIMES</th>
<th>RARELY</th>
<th>NEVER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>E20C.</th>
<th>How often does (he/she) fix things around your home, paint, or help make it look nicer in other ways?</th>
<th>OFTEN</th>
<th>SOMETIMES</th>
<th>RARELY</th>
<th>NEVER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>E20D.</th>
<th>How often does (he/she) take (CHILD) places (he/she) needs to go, such as to daycare or the doctor?</th>
<th>OFTEN</th>
<th>SOMETIMES</th>
<th>RARELY</th>
<th>NEVER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>
E21. The following questions are about the ways in which partners work together in raising a child. Please tell me how often the following statements are true for you and (CURRENT PARTNER).

(READ ITEM). Would you say it’s always true, sometimes true, or rarely true?

<table>
<thead>
<tr>
<th>ALWAYS TRUE</th>
<th>SOMETIMES TRUE</th>
<th>RARELY TRUE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

E21A. When (CURRENT PARTNER) is with (CHILD), (he/she) acts like the kind of parent you want for your child ..........................

E21B. You can trust (him/her) to take good care of (CHILD) .................................................................

E21C. (He/She) respects the schedules and rules you make for (CHILD) ....................................................

E21D. (He/She) supports you in the way you want to raise (CHILD) ...........................................................

E21E. You and (CURRENT PARTNER) talk about problems that come up with raising (CHILD) ..........................

E21F. You can count on (CURRENT PARTNER) for help when you need someone to look after (CHILD) for a few hours..................................................

E22. If you had to go away for one week and could not take (CHILD) with you, how much would you trust (CURRENT PARTNER) to take care of your child? Would you trust (him/her) very much, somewhat, or not at all?

VERY MUCH .................................................1
SOMETHAT ..................................................2
NOT AT ALL ..................................................3
E23. Now, think about how (CURRENT PARTNER) behaves towards you. For each statement I read, please tell me how often (he/she) behaves this way.

(First) (READ ITEM). Does (CURRENT PARTNER) behave this way often, sometimes, or never?

<table>
<thead>
<tr>
<th></th>
<th>OFTEN</th>
<th>SOMETIMES</th>
<th>NEVER</th>
</tr>
</thead>
<tbody>
<tr>
<td>E23A. (He/She) is fair and willing to compromise when you have a disagreement</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>E23B. (He/She) expresses affection or love for you</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>E23C. (He/She) insults or criticizes you or your ideas</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>E23D. (He/She) encourages or helps you to do things that are important to you</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>E23E. (He/She) tries to keep you from seeing or talking with your friends or family</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>E23F. (He/She) tries to prevent you from going to work or school</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>E23G. (He/She) withholds money, makes you ask for money, or takes your money</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>E23H. (He/She) slaps or kicks you</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>E23I. (He/She) hits you with a fist or an object that could hurt you</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>E23J. (He/She) tries to make you have sex or do sexual things you don’t want to do</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>E23K. (He/She) withholds sex to try to control your behavior</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>E23L. (He/She) insults or criticizes you for not taking good enough care of the child or your home</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>E23M. (He/She) throws something at you</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>E23N. (He/She) pushes, grabs, or shoves you</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>E23O. (He/She) listens to you when you need someone to talk to</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>E23P. (He/She) really understands your hurts and joys</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>
E23Q. Now I have some questions about events that may have happened since ([DATE OF LAST INTERVIEW]/in the past two years).

Have you and (CURRENT PARTNER) had a physical fight in front of (CHILD) since ([DATE OF LAST INTERVIEW]/in the last two years)?

YES .................................................................................1
NO ......................................................................................2

E24. Have you been seriously hurt in a fight with (CURRENT PARTNER) since) ([DATE OF LAST INTERVIEW]/in the last two years)?

YES .................................................................................1
NO ......................................................................................2 ➔ GO TO E25

E24A. Did you go to the hospital for these injuries?

YES .................................................................................1
NO ......................................................................................2

E24B. Did you report the incident to the police?

YES .................................................................................1
NO ......................................................................................2

E24C. Did you tell anyone else about this, such as a friend, a minister, a social worker, or someone else?

YES .................................................................................1
NO ......................................................................................2

E24D. Did (CURRENT PARTNER) ever hurt you in front of (CHILD)?

YES .................................................................................1
NO ......................................................................................2

E25. Has (CURRENT PARTNER) spent any time in jail or prison?

YES .................................................................................1
NO ......................................................................................2
### SECTION F: DEMOGRAPHICS

**F1.** Not including yourself, how many people are currently living with you? *(IF RESPONDENT NOT IN JAIL, SHELTER, OR HOMELESS, READ:)* Please include people who sleep in (your/this) home most nights.

<table>
<thead>
<tr>
<th>PEOPLE RESPONDENT LIVES ALONE</th>
<th>0</th>
<th>GO TO F3</th>
</tr>
</thead>
<tbody>
<tr>
<td>RESPONDENT LIVES IN JAIL</td>
<td>-10</td>
<td></td>
</tr>
<tr>
<td>RESPONDENT LIVES IN A SHELTER OR ON THE STREET</td>
<td>-12</td>
<td></td>
</tr>
</tbody>
</table>

**HOUSEHOLD GRID INSTRUCTIONS:**

**F2A.** I'd like to make a list of these (NUMBER) people who currently live (in your household/with you).

**PUT THE NAMES IN COLUMN “NAME” IN THE GRID.**

**IF ONLY ONE PERSON:** What is the person’s first name or initials?

**IF MORE THAN ONE PERSON:** Please tell me the first names of everyone currently living (in your household/with you), starting with the oldest and ending with the youngest. Please do not include yourself.

**PROBE IF RESPONDENT IS HESITANT:** Initials are fine, I just need to have some way to refer to them.

What is the name of the next oldest person who usually lives (here/with you)?

CONTINUE UNTIL YOU HAVE FINISHED COLLECTING ALL NAMES.

**IF NECESSARY, RECONCILE NUMBER OF PEOPLE IN HOUSEHOLD IN F1 WITH NUMBER OF PEOPLE LISTED:** You told me there are (NUMBER) of people living (in the household/with you), and you have given me (NUMBER) names. Please tell me which I should correct.

**ASK F2B-F2F FOR EACH PERSON LISTED IN COLUMN A.**

**F2B.** CODE WITHOUT ASKING IF OBVIOUS: Is (PERSON) male or female?

**F2C.** What is (his/her) age? ROUND AGE OF CHILDREN BETWEEN 6 MONTHS AND A YEAR TO “01”. ROUND CHILDREN BETWEEN BIRTH AND 5 MONTHS TO “00”.

**CODE EXACT AGE IF GIVEN. IF DON’T KNOW OR REFUSED, ASK:** Is (PERSON) . . .

<table>
<thead>
<tr>
<th>Age</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>newborn to 15 year old</td>
<td>-11</td>
</tr>
<tr>
<td>16 to 21</td>
<td>-12</td>
</tr>
<tr>
<td>22 to 30</td>
<td>-13</td>
</tr>
<tr>
<td>31 to 50</td>
<td>-14</td>
</tr>
<tr>
<td>51 to 65, or</td>
<td>-15</td>
</tr>
<tr>
<td>older than 65</td>
<td>-16</td>
</tr>
</tbody>
</table>

**F2D.** What is (his/her) relationship to you?

**F2E.** IF PERSON IS RESPONDENT’S CHILD, ASK: Is (FATHER) the father of this child?

**F2F.** IF PERSON IS 16 OR OLDER, ASK: Is (PERSON) currently working?
<table>
<thead>
<tr>
<th>F2B. GENDER</th>
<th>F2C. AGE</th>
<th>F2D. RELATIONSHIP</th>
<th>F2E.</th>
<th>F2F. EMPLOYED</th>
</tr>
</thead>
<tbody>
<tr>
<td>CODE WITHOUT ASKING, IF KNOWN</td>
<td></td>
<td></td>
<td>IF PERSON IS A CHILD:</td>
<td>IF AGE=16 OR OLDER</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Is (FATHER) the father of this (child/person)?</td>
<td>Is (PERSON) currently working?</td>
</tr>
<tr>
<td>MALE</td>
<td>FEMALE</td>
<td>AGE</td>
<td>SPOUSE</td>
<td>PARTNER (BOY/GIRLFRIEND)</td>
</tr>
<tr>
<td>Circle One</td>
<td>Circle One</td>
<td>Circle One</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
F3. Do you have any children living apart from you?

    YES .........................................................1
    NO ..........................................................2 ➔ GO TO SECTION H

F3A. How many children do you have living apart from you?

    [___] CHILDREN

F3A1. Who (is [he/she]/are they) currently living with?

    CIRCLE ALL THAT APPLY

    THEIR BIOLOGICAL FATHER.........................1
    GRANDPARENT(S).................................2
    FOSTER PARENT(S).................................3
    ADOPTIVE PARENTS(S)............................4
    OTHER (NOT SPECIFIED).........................5

    ___________________________________________________________________

    OTHER FAMILY .......................................101
    ON THEIR OWN .......................................102
    INCARCERATED .......................................103
    AWAY AT SCHOOL ....................................104
F3A2. What is the reason they are no longer living with you?

CIRCLE ALL THAT APPLY

REMOVED BY CHILD PROTECTIVE SERVICES/OTHER AGENCY/COURT ........1
OTHER PARTY GIVEN LEGAL CUSTODY ...........................................2
VOLUNTARILY GAVE UP CHILD ..............................................3
FINANCIAL PROBLEMS ...........................................................4
MOTHER’S HEALTH PROBLEMS .............................................5
CHILD’S HEALTH PROBLEMS ...............................................6
MOTHER IN BAD NEIGHBORHOOD .........................................7
DISTANCE FROM SCHOOL .......................................................8
OTHER (NOT SPECIFIED) .......................................................9

ADULT .............................................................................101
ADOPTED .........................................................................102
AWAY AT SCHOOL ...............................................................103
OTHER FAMILY ................................................................104
OUT OF COUNTRY ...............................................................105
INCARCERATED ................................................................106
NOT ENOUGH ROOM .........................................................107
F3B. How old (is that child/are those [NUMBER IN F3A] children)? RECORD AGES. ROUND BIRTH TO 5 MONTHS AS “00” AND 6 MONTHS TO 1 YEAR AS “01”.

<table>
<thead>
<tr>
<th>AGE (F3B1)</th>
<th>AGE (F3B2)</th>
<th>AGE (F3B3)</th>
<th>AGE (F3B4)</th>
<th>AGE (F3B5)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>AGE (F3B6)</td>
<td>AGE (F3B7)</td>
<td>AGE (F3B8)</td>
<td>AGE (F3B9)</td>
<td>AGE (F3B10)</td>
</tr>
<tr>
<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

F4A. Did you have any children that have died?

YES .................................................................1

NO .................................................................2 ➔ GO TO SECTION H

F4B. How many of your children died?

| ___ | CHILDREN |
SECTION H: MOTHER’S FAMILY BACKGROUND AND SUPPORT

Next, I have a few questions about your parents, your background, and the help you can get from other people.

H1. WAS MOTHER INTERVIEWED AT EITHER 12 MONTHS OR 36 MONTHS? (CHECK CONTACT SHEET FOR PREVIOUS FOLLOW-UP INTERVIEW STATUS)

YES .................................................................1 ➔ GO TO H1G
NO .................................................................2

H1A. In what country or territory was your father born?

UNITED STATES .............................................. 1
AFRICA .......................................................... 101
ASIA .............................................................. 102
EUROPE .......................................................... 103
LATIN AMERICA – MEXICO ............................... 104
NON-LATIN AMERICA ................................. 105
DON’T KNOW ..................................................-2

H1B. In what country or territory was your mother born?

UNITED STATES .............................................. 1
AFRICA .......................................................... 101
ASIA .............................................................. 102
EUROPE .......................................................... 103
LATIN AMERICA – MEXICO ............................... 104
NON-LATIN AMERICA ................................. 105
DON’T KNOW ..................................................-2
H1C. WERE BOTH PARENTS BORN IN THE UNITED STATES?  
(H1A=1 AND H1B=1)  

YES .............................................................. 1  ➔ GO TO H1E  
NO ............................................................... 2  
DON'T KNOW ..................................................-2

H1D. Are you a United States citizen?  

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

H1E. What is the highest grade of school that your biological mother completed?  

NONE .............................................................1  
ELEMENTARY, MIDDLE, OR JUNIOR HIGH SCHOOL ..............2  
REGULAR HIGH SCHOOL .......................................3  ➔  GRADE COMPLETED:  
ABE OR GED PROGRAM .......................................4  
NURSING SCHOOL (LPN OR RN) ..............................5  
BUSINESS OR SECRETARIAL SCHOOL .........................6  
VOCATIONAL, TECHNICAL, OR TRADE SCHOOL ..............7  
JUNIOR/COMMUNITY COLLEGE (2-YEAR) ......................8  
COLLEGE (4-YEAR) ............................................9  
GRADUATE OR PROFESSIONAL SCHOOL .....................11  
SOME COLLEGE ................................................12  
OTHER TYPE OF SCHOOL (NOT SPECIFIED) .................13

DON'T KNOW ..................................................-2  
REFUSED .........................................................-1
H1F. What is the highest grade of school that your biological father completed?

NONE ..........................................................1
ELEMENTARY, MIDDLE, OR
JUNIOR HIGH SCHOOL .................................2
REGULAR HIGH SCHOOL ...............................3
ABE OR GED PROGRAM .................................4
NURSING SCHOOL (LPN OR RN) ......................5
BUSINESS OR SECRETARIAL
SCHOOL ..........................................................6
VOCATIONAL, TECHNICAL, OR
TRADE SCHOOL .............................................7
JUNIOR/COMMUNITY
COLLEGE (2-YEAR) ..............................8
COLLEGE (4-YEAR) ......................................9
GRADUATE OR PROFESSIONAL
SCHOOL ..........................................................11
SOME COLLEGE ..............................................12
OTHER TYPE OF
SCHOOL (NOT SPECIFIED) ............................13

__________________________________________
DON’T KNOW .............................................-2
REFUSED .....................................................-1

H1G  (Now I have a few questions about your parents.)
Are both of your parents living?

YES, BOTH LIVING.................................1
NO, FATHER DECEASED ...............................2
NO, MOTHER DECEASED ...............................3
NO, BOTH PARENTS DECEASED ....................4
DON’T KNOW .............................................-2

GO TO H1I

GO TO H1M
H1H. Are your parents currently living together?

YES ......................................................... 1
NO .......................................................... 2
DON’T KNOW .............................................-2

H1I. How do you get along with your (parents/mother/father)? Would you say you get along . . .

IF ONLY ONE PARENT LIVING, CODE FOR THE LIVING PARENT

Very well, .................................................. 1
Somewhat well, or ................................. 2
Not very well? ........................................... 3
MOTHER HAS NO CONTACT/NEVER SEES HER OWN PARENT(S) .................-10 ➔ GO TO H1L

H1J. CHECK: DOES MOTHER HAVE ANY TYPE OF RELATIONSHIP WITH FATHER?
(A4=1, 2, 3, 4, OR 5)

YES ...........................................................1
NO .............................................................2 ➔ GO TO H1L

H1K. How well does (FATHER) get along with your (parents/mother/father)? Would you say he gets along with them . . .

Very well, .................................................. 1
Somewhat well, or ................................. 2
Not very well? ........................................... 3
FATHER HAS NO CONTACT WITH/NEVER SEES MOTHER’S PARENT(S) ..............-10
H1L. How often does (CHILD) see your (parents/mother/father)?
Would you say . . .

IF ONLY ONE GRANDPARENT LIVING, CODE FOR THE LIVING ONE. IF CHILD SEES ONE GRANDPARENT MORE THAN THE OTHER, CODE FOR THE MOST FREQUENT ONE.

Once a week or more, ................................1
A few times a month, ..................................2
A few times a year, .....................................3
Less often than that, or .................................4
Never? ....................................................5

H1M. DOES MOTHER HAVE ANY TYPE OF RELATIONSHIP WITH CHILD’S FATHER?
(A4=1, 2, 3, 4, OR 5)

YES .......................................................1
NO .......................................................2 ➔ GO TO H2

H1N. Now I have a few questions about (FATHER’S) parents.
Are both of his parents living?

YES, BOTH LIVING..................................... 1
NO, FATHER DECEASED................................. 2 ➔ GO TO H1P
NO, MOTHER DECEASED............................. 3 ➔ GO TO H2
NO, BOTH PARENTS DECEASED ............... 4
DON’T KNOW ...........................................-2

H1O. Are (FATHER’S) parents currently living together?

YES .......................................................1
NO ....................................................... 2
DON’T KNOW .........................................-2
H1P. How do you get along with (FATHER’S) (parents/mother/father)? Would you say you get along . . .

**IF ONLY ONE PARENT LIVING, CODE FOR THE LIVING PARENT**

- Very well, ............................................... 1
- Somewhat well, or ....................................... 2
- Not very well? ........................................... 3

**MOTHER HAS NO CONTACT WITH/NEVER SEES FATHER’S PARENT(S).........-10**

H1Q. How well does (FATHER) get along with his (parents/mother/father)? Would you say he gets along with them . . .

- Very well, ............................................... 1
- Somewhat well, or ....................................... 2
- Not very well? ........................................... 3

**FATHER HAS NO CONTACT WITH/NEVER SEES HIS OWN PARENT(S).........-10**

H1R. How often does (CHILD) see (FATHER’S) (parents/mother/father)? Would you say . . .

**IF ONLY ONE GRANDPARENT LIVING, CODE FOR THE LIVING ONE. IF CHILD SEES ONE GRANDPARENT MORE THAN THE OTHER, CODE FOR THE ONE MOST FREQUENTLY SEEN.**

- Once a week or more, ....................................1
- A few times a month, .....................................2
- A few times a year, .......................................3
- Less often than that, or .................................4
- Never? ......................................................5

H2. In the past twelve months, have you received any financial help or money from anyone other than (FATHER)? Please include your relatives and friends, and his relatives and friends, but don’t include help from any government or private agency.

- YES .............................................................1
- NO ..............................................................2 ➔ **GO TO H3**
H2A. Who gave you financial help or money?  

PROBE: Anyone else?  

<table>
<thead>
<tr>
<th>CIRCLE ALL THAT APPLY</th>
</tr>
</thead>
<tbody>
<tr>
<td>H2A_1</td>
</tr>
<tr>
<td>RESPONDENT’S PARENTS ..................................1</td>
</tr>
<tr>
<td>H2A_2</td>
</tr>
<tr>
<td>OTHER RELATIVES OF MOTHER ................................2</td>
</tr>
<tr>
<td>H2A_3</td>
</tr>
<tr>
<td>FATHER’S PARENTS ........................................3</td>
</tr>
<tr>
<td>H2A_4</td>
</tr>
<tr>
<td>OTHER RELATIVES OF FATHER ................................4</td>
</tr>
<tr>
<td>H2A_5</td>
</tr>
<tr>
<td>FRIEND(S) ..................................................5</td>
</tr>
<tr>
<td>H2A_6</td>
</tr>
<tr>
<td>BOYFRIEND/PARTNER .........................................6</td>
</tr>
<tr>
<td>H2A_7</td>
</tr>
<tr>
<td>PARTNER’S FAMILY ...........................................7</td>
</tr>
<tr>
<td>H2A_8</td>
</tr>
<tr>
<td>OTHER (NOT SPECIFIED) .......................................8</td>
</tr>
</tbody>
</table>

H2B. About how much financial help or money were you given in the past twelve months?  

$ |___|___| |___|___|___| GO TO H3  

DON’T KNOW .........................................................-2  
REFUSED ............................................................-1  

H2C. I just need to know a range. Can you tell me if it was . . .  

Less than $500, ................................................. 1  
$501 to $1,000, ..................................................... 2  
$1,001 to $2,000, ................................................... 3  
$2,001 to $3,000, ................................................... 4  
$3,001 to $4,000, ................................................... 5  
$4,001 to $5,000, ................................................... 6  
$5,001 to $10,000, or .............................................. 7  
More than $10,000? ............................................... 8  
DON’T KNOW ..........................................................-2  
REFUSED ............................................................-1
H3. Next, I want to ask you about help you could get during this next year if you needed it.

If you needed help during the next year, could you count on someone to . . .

Loan you $200?

YES ................................................................. 1
NO ................................................................. 2 ➔ GO TO H4

H3A. What about $1,000?

YES ................................................................. 1
NO ................................................................. 2

H4. Is there someone you could count on to provide you with a place to live?

YES ................................................................. 1
NO ................................................................. 2

H5. Is there someone you could count on to help you with emergency child care?

YES ................................................................. 1
NO ................................................................. 2
NO CHILD(REN)/NO NEED FOR CARE ........ -10

H6. Is there someone you could count on to co-sign for a bank loan with you for $1,000?

YES ................................................................. 1
NO ................................................................. 2 ➔ GO TO SECTION I

H6A. What about co-signing for $5,000?

YES ................................................................. 1
NO ................................................................. 2
SECTION I: ENVIRONMENT AND PROGRAMS

I0.  IS/WAS CHILD IN A DAYCARE CENTER, HEAD START PROGRAM, PRESCHOOL, NURSERY SCHOOL, OR KINDERGARTEN?  
     (B07=1)

     YES ........................................................................1
     NO ........................................................................2 \( \rightarrow \) GO TO I0J

I0A.  The next questions are about the (PROGRAM IN B07A) that (CHILD) (attends/attended).

     (Is/Was) (CHILD’s) (school/center/program) within five miles of your home?

     IF CHILD NO LONGER IN PROGRAM PROBE TO DETERMINE IF WITHIN FIVE MILES WHEN ATTENDING.

     YES ........................................................................1
     NO ........................................................................2

I0B.  (Does/Did) the (school/center/program) that (CHILD) attend(s/ed) have a parent group, parent advisory committee (PAC), a PTA, or other parental organization?

     YES ........................................................................... 1
     NO ........................................................................... 2
     DON’T KNOW ..............................................................-2 \( \rightarrow \) GO TO I0E

I0C.  How often (does/did) the parent group have meetings?  Would you say . . .

     Every month or more, .................................................. 1
     Every few months, ....................................................... 2
     Only once or twice a year, or ...................................... 3
     Never? ......................................................................... 4
     DON’T KNOW ..............................................................-2 \( \rightarrow \) GO TO I0E
I0D. How often (do/did) you attend the parent group meetings? Would you say . . .

Always or almost always, ................................ 1
Sometimes, .................................................. 2
Rarely, or ........................................................ 3
Never? ............................................................. 4

I0E. (Have/Did) you ever attended any workshops, talks or information sessions at (CHILD’s) (school/center/program)?

YES ...................................................................... 1
NO ...................................................................... 2 ➔ GO TO I0G

I0F. (Have/Did) you attended workshops or sessions at (CHILD’s) (school/center/program) on any of the following topics? How about . . .

READ EACH CATEGORY AND CODE YES OR NO FOR EACH

<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child rearing including discipline</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Nutrition and health</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Finding jobs or job training</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Legal issues, including legal aid</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Educational issues, including ESL, computers, and reading</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Anything else (NOT SPECIFIED)</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>PARENT-TEACHER/PTA</td>
<td>101</td>
<td></td>
</tr>
<tr>
<td>VIOLENCE/CHILD ABUSE</td>
<td>102</td>
<td></td>
</tr>
<tr>
<td>NEIGHBORHOOD</td>
<td>103</td>
<td></td>
</tr>
<tr>
<td>VOLUNTEER/COMMUNITY</td>
<td>104</td>
<td></td>
</tr>
<tr>
<td>ARTS AND CRAFTS</td>
<td>105</td>
<td></td>
</tr>
</tbody>
</table>
I0G. Do you currently have any friends whom you’ve met through (CHILD’s) (school/center/program)?

YES .................................................................1
NO .......................................................................2 ➔ GO TO I0J

I0H. About how many friends do you have that you’ve met through (CHILD’s) (school/center/program)?

|___|___| FRIENDS MET THROUGH CHILD’S SCHOOL

I0I. And how many of them are close friends? By close friends we mean someone you spend time with or talk to outside of the (school/center/program) on a frequent basis.

ONE TO TWO ......................................................1
THREE TO SIX ......................................................2
MORE THAN SIX ......................................................3
NONE .......................................................................4

I0J. In general, how many close friends do you have overall, (including friends that you didn’t meet through [CHILD]’s [school/center/program])? Your best estimate is fine.

|___|___| CLOSE FRIENDS

I0K. Is there any special person you know that you feel very close with—someone you share confidences and feelings with; someone you can depend on?

YES .......................................................................1
NO .......................................................................2
I10L. How many of the families on your block would you say that you know well? Would you say you know . . .

Almost all, .................................................................1
Most, ..............................................................................2
Some, ...........................................................................3
Very few, or .................................................................4
None? ............................................................................5

I10M. The next question is about the people living in your neighborhood. For each item I read, please tell me how likely it would be for your neighbors to intervene or get involved.

(READ ITEM). Would you say it is very likely they would intervene, somewhat likely, not very likely, or very unlikely?

<table>
<thead>
<tr>
<th></th>
<th>VERY LIKELY</th>
<th>SOMEWHAT LIKELY</th>
<th>NOT VERY LIKELY</th>
<th>VERY UNLIKELY</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>If children were skipping school and hanging out on the street</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>-2</td>
</tr>
<tr>
<td>If children were spray painting buildings with graffiti</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>-2</td>
</tr>
<tr>
<td>If children were showing disrespect to an adult</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>-2</td>
</tr>
<tr>
<td>If a fight broke out in front of the house</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>-2</td>
</tr>
<tr>
<td>If the fire station closest to the neighborhood was threatened and its budget was cut</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>-2</td>
</tr>
</tbody>
</table>
10N. Now I'm going to read some statements about your neighborhood and the people who live there. For each statement, please tell me if you strongly agree, agree, disagree, or strongly disagree.

(READ ITEM). Do you strongly agree, agree, disagree, or strongly disagree?

<table>
<thead>
<tr>
<th>People around here are willing to help their neighbors</th>
<th>STRONGLY AGREE</th>
<th>AGREE</th>
<th>DISAGREE</th>
<th>STRONGLY DISAGREE</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>-2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>This is a close-knit neighborhood</th>
<th>STRONGLY AGREE</th>
<th>AGREE</th>
<th>DISAGREE</th>
<th>STRONGLY DISAGREE</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>-2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>People in this neighborhood generally don’t get along with each other</th>
<th>STRONGLY AGREE</th>
<th>AGREE</th>
<th>DISAGREE</th>
<th>STRONGLY DISAGREE</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>-2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>People in this neighborhood do not share the same values</th>
<th>STRONGLY AGREE</th>
<th>AGREE</th>
<th>DISAGREE</th>
<th>STRONGLY DISAGREE</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>-2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gangs are a problem in this neighborhood</th>
<th>STRONGLY AGREE</th>
<th>AGREE</th>
<th>DISAGREE</th>
<th>STRONGLY DISAGREE</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>-2</td>
</tr>
</tbody>
</table>

10O. Have you ever been afraid to let (CHILD) go outside because of violence in your neighborhood.

YES .......................................................... 1

NO ............................................................ 2

CHILD DOES NOT STAY WITH MOTHER/
NO CONTACT WITH CHILD..............................-10

10P. Do you participate in any groups such as a senior center, social or work group, church related group, charity, public service or community group?

YES .......................................................... 1

NO ............................................................ 2
Now I would like to ask you some questions about your housing situation.

I1. Have you moved since ([DATE OF LAST INTERVIEW])/in the last two years?

    YES .................................................................1
    NO .................................................................2 ➔ GO TO I7A

I1A. How many times have you moved since ([DATE OF LAST INTERVIEW])/in the last two years)?

    |___|___| MOVES
I2. What is your current housing situation? Please stop me when I read the statement that describes your situation. Do you . . .

CIRCLE ONE

Rent your own apartment or house, ..................1
Live with family or friends and contribute part of the rent, ...........................................2
Live with family or friends and do not pay rent, .................................................................3 ➔ GO TO I5
Own your own home, ........................................4 ➔ GO TO I3
Live in a house or condo owned by another family member, ...........................................5
Live in temporary housing or a group shelter, or .................................................................6
Do you live in some other housing arrangement? (NOT SPECIFIED) ....................7 ➔ GO TO I7A

HALFWAY HOUSE/TREATMENT FACILITY.........................................................8
JAIL/PRISON .................................................................9
ON THE STREET, HOMELESS .................................................10
MILITARY ........................................................................101
FEDERAL PROGRAM ..................................................102
TEMPORARY HOUSING .................................................103

I3. Approximately, how much do you think (you/they) could sell this home for today?

PROBE FOR APPROXIMATE AMOUNT.

$ |___|___|___|___|___|___|___|___|

DON'T KNOW .............................................................-2
REFUSED .................................................................-1

I3A. Approximately, how much do (you/they) owe on this house?

$ |___|___|___|___|___|___|___|___|

DON'T KNOW .............................................................-2
REFUSED .................................................................-1

115
I3B. What are (your/their) monthly mortgage payments? Please include taxes and any insurance payments that are included in the monthly payments.

$ |___|___|___|___|___|
DON’T KNOW ...........................................-2
REFUSED .....................................................-1

I3B1. Whose name is on the mortgage for this house?

CIRCLE ONE

MOTHER’S NAME ONLY.................................1
FATHER’S OR CURRENT PARTNER’S NAME ONLY .............................................2
BOTH MOTHER’S NAME AND FATHER’S OR CURRENT PARTNER’S NAMES...........3
FAMILY MEMBER(S) ON THE MOTHER’S SIDE .................................................4
FAMILY MEMBER(S) ON THE FATHER’S OR CURRENT PARTNER’S SIDE ...............5
OTHER (NOT SPECIFIED) ...............................................6

__________________________________________
DON’T KNOW ...........................................-2
REFUSED .....................................................-1

I3C. DOES RESPONDENT LIVE IN A HOUSE OR CONDO OWNED BY ANOTHER FAMILY MEMBER? (I2=5)

YES .............................................................1
NO ..............................................................2 ➔ GO TO I7A

I4. How much rent do you pay each month?

$ |___|___|___|___|___| PER MONTH
NONE ........................................................... 0
DON’T KNOW ..................................................-2
REFUSED .........................................................-1

116
I4A. Whose name is on the lease for this (apartment/house/condo)?

MOTHER'S NAME ONLY .................................................1
FATHER'S OR CURRENT PARTNER'S NAME ONLY .................................................2
BOTH MOTHER'S NAME AND FATHER'S OR CURRENT PARTNER'S NAMES ..................3
FAMILY MEMBER(S) ON THE MOTHER'S SIDE .........................................................4
FAMILY MEMBER(S) ON THE FATHER'S OR CURRENT PARTNER'S SIDE .................5
OTHER (NOT SPECIFIED) ....................................................6

NOT APPLICABLE—DOES NOT HAVE A LEASE ..................................................10
DON'T KNOW ..............................................................2
REFUSED .................................................................1
OTHER FAMILY MEMBER ................................................101
FRIEND .................................................................102

I4B. Are you required to report your income and assets to your landlord on an annual basis?

YES ..............................................................................1
NO .............................................................................2

CODE WITHOUT ASKING IF KNOWN:

I5. Is this home in a public housing project?

YES ..............................................................................1
NO .............................................................................2

I5A. DOES RESPONDENT LIVE WITH FAMILY OR FRIENDS, BUT PAY NO RENT?
(I2=3, OR I2=5 AND I4=0)

YES ..............................................................................1 ➔ GO TO I7A
NO .............................................................................2
I6. Is the federal, state, or local government helping to pay for your rent?

PROBE: This help can be in the form of additional money added to your benefits, as a voucher that you give your landlord, or as assistance from Section 8.

YES .................................................................1
NO .................................................................2

I7. My next questions are about help you may have received from some agencies and government programs.

In the past twelve months, have you received help from any of the following agencies or programs?

<table>
<thead>
<tr>
<th>CIRCLE YES OR NO FOR EACH</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
</tr>
<tr>
<td>---</td>
</tr>
<tr>
<td>I7A. An agency to help you collect child support ............</td>
</tr>
<tr>
<td>I7B. Head Start or Early Head Start..............................</td>
</tr>
<tr>
<td>I7C. A child care referral agency..................................</td>
</tr>
<tr>
<td>I7D. W.I.C. ..................................................................</td>
</tr>
<tr>
<td>I7E. An Employment Office..........................................</td>
</tr>
<tr>
<td>I7F. A welfare office or welfare job placement..................</td>
</tr>
</tbody>
</table>

NO I7G THIS VERSION
I7H. Have you heard of or attended any marriage promotion programs?

YES ......................................................................................1
NO ......................................................................................2

I8. In the last twelve months, have you or anyone else in your household received income from any of the following programs?

I8A. Have you received income from (ITEM)?

**FIRST, CODE “YES” OR “NO” FOR EACH PROGRAM. THEN, FOR EACH PROGRAM CODED “YES”, ASK:**

I8B. How many months did you receive help from (PROGRAM) in the last twelve months?

I8C. Approximately how much did you receive (last month/the last month you received [BENEFIT])?

<table>
<thead>
<tr>
<th>I8A.</th>
<th>I8B.</th>
<th>I8C.</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>NO</td>
<td>MONTHS RECEIVED</td>
</tr>
<tr>
<td>1.</td>
<td>Welfare or TANF ........................................ 1</td>
<td>2</td>
</tr>
<tr>
<td>2.</td>
<td>Food Stamps .............................................. 1</td>
<td>2</td>
</tr>
<tr>
<td>3.</td>
<td>Other assistance such as Unemployment Insurance, or Worker's Compensation (NOT SPECIFIED) .... 1</td>
<td>2</td>
</tr>
</tbody>
</table>
I9. **DID MOTHER RECEIVE WELFARE OR TANF IN THE LAST 12 MONTHS?**
   (I8A1=1)
   
   YES ..................................................1
   NO ...................................................2 ➔ GO TO I12

**CODE WITHOUT ASKING IF KNOWN:**

I10. Are you currently receiving welfare or TANF?
   
   YES ..................................................1
   NO ...................................................2 ➔ GO TO I13

I11. For how long have you been receiving welfare this time?
   
   |___|___| YEARS (I11A) |___|___| MONTHS (I11B)
   
   DON'T KNOW .....................................-2
   REFUSED ..........................................-1

   GO TO I15

I12. Have you ever received welfare or TANF?
   
   YES ..................................................1
   NO ...................................................2 ➔ GO TO I15

I13. When did you last receive welfare or TANF?
   
   |___|___| / |___|___|___|___|
   MONTH (I13A) YEAR (I13B)

I14. When you stopped receiving welfare or TANF benefits, was it your decision to leave welfare or did the welfare department stop your cash grant?
   
   OWN DECISION .....................................1
   CUT BY WELFARE DEPT. ..........................2 ➔ GO TO I14B
Why did you decide to stop receiving cash aid?

IF MORE THAN ONE REASON GIVEN, PROBE FOR MAIN REASON.

CIRCLE ONE

GOT A JOB ......................................................... 1
GOT A DIFFERENT OR BETTER JOB .......... 2
WORKED MORE HOURS OR GOT A RAISE OR GOT MORE EARNINGS ............ 3
MARRIED/REMARIED ........................................ 4
MOVED IN WITH PARTNER WHO HELPED SUPPORT FAMILY .................. 5
MOVED IN WITH FAMILY ................................. 6
MOVED TO ANOTHER COUNTY OR STATE ........................................... 7
WANTED TO SAVE UP SOME MONTHS ON THE TIME CLOCK .................. 8
WANTED TO AVOID THE WORK OR OTHER PARTICIPATION REQUIREMENTS..9
COULDN’T STAND THE HASSLES ............. 10
OTHER (NOT SPECIFIED) ................................. 11

________________________________________

DON’T KNOW ..................................................... 2
REFUSED .......................................................... 1
DIDN’T WANT ............................................... 101
OTHER SUPPORT ........................................ 102
WASN’T ENOUGH ........................................ 103

GO TO I15

GO TO I15
I14B. Why did the welfare office stop or cut off your cash aid?

IF MORE THAN ONE REASON, PROBE FOR MAIN REASON.

CIRCLE ONE

EARNINGS INCREASED AND MADE FAMILY INELIGIBLE .............................................. 1
ASSETS WERE TOO HIGH......................................................... 2
REACHED END OF WELFARE TIME LIMIT .......................................................... 3
DID NOT FOLLOW PROGRAM RULES AND WAS CUT OFF/SANCTIONED............. 4
MARRIED/REMARRIED/MOVED IN WITH PARTNER ........................................ 5
MOVED IN WITH FAMILY .......................................................... 6
MOVED TO ANOTHER COUNTY OR STATE .................................................. 7
OTHER (NOT SPECIFIED) .......................................................... 9

DON’T KNOW ................................................................. -2
REFUSED .............................................................................. -1
RECEIVED CHILD SUPPORT ................................................. 101
RECEIVED SSI ................................................................. 102
RECEIVED UNEMPLOYMENT .................................................. 103
PAPERWORK DID NOT GO THROUGH ......... 104
INCARCERATED ................................................................. 105

I15. WAS RESPONDENT ON WELFARE/TANF IN THE LAST 12 MONTHS?
(I8A1=1)

YES ......................................................................................... 1
NO ......................................................................................... 2 ➔ GO TO I18
I16. Were you required to do anything, such as work, go to school, look for a job, or name the father of your child in return for your welfare benefits?

   YES .................................................. 1
   NO .................................................. 2  ➔ GO TO I18D

I16A. What were you required to do?

   PROBE: Anything else?

   CIRCLE ALL THAT APPLY

   I16A_1 LOOK FOR A JOB.............................................. 1
   I16A_2 WORK IN A PAID JOB...................................... 2
   I16A_3 WORK IN AN UNPAID JOB ............................... 3
   I16A_4 ATTEND SCHOOL OR TRAINING ....................... 4
   I16A_5 NAME THE FATHER OF CHILD......................... 5
   I16A_6 OTHER (NOT SPECIFIED) ................................. 6

I17. Were your welfare benefits reduced or cut at any time in the past twelve months because you did not fulfill these requirements?

   YES .................................................. 1
   NO .................................................. 2

   ➔ GO TO I18D

I18. Was there ever a time in the past twelve months that you thought you might be eligible for welfare?

   YES .................................................. 1
   NO .................................................. 2  ➔ GO TO I18D
I18A. Did you apply for welfare in the past twelve months?

YES, APPLIED ..................................................1

NO, DID NOT APPLY (OR DID NOT FINISH APPLYING) .......................2 ➔ GO TO I18C

I18B. What happened with the application? Was it turned down, did you get the benefits, or are you still waiting to hear?

CIRCLE ONE

TURNED DOWN .............................................1
RECEIVED BENEFITS ........................................2
STILL WAITING TO HEAR ....................................3
DON'T KNOW ..............................................-2
REFUSED .....................................................-1

GO TO I18D

I18C. Why didn’t you apply for welfare? Was it because you didn’t know how to apply, you did not want to go on welfare, or some other reason?

CIRCLE ONE

DIDN'T KNOW HOW ........................................1
DON'T WANT WELFARE ...................................2
NEVER GOT AROUND TO IT ..............................3
OTHER (NOT SPECIFIED) .................................4

DON'T KNOW ..............................................-2
REFUSED .....................................................-1
DON'T KNOW ..............................................-2
REFUSED .....................................................-1
I18D. Have you or (CHILD) received Supplemental Security Income (SSI) in the past twelve months?

YES .................................................................1
NO .................................................................2 ➔ GO TO I19

I18E. Who has received SSI in the past twelve months?

CIRCLE ONE

RESPONDENT ......................................................1
CHILD .................................................................2
BOTH RESPONDENT AND CHILD ..................3
OTHER (NOT SPECIFIED) .................................4

OTHER FAMILY MEMBER .................................101

I18F. How many months did (you/[CHILD]/you and [CHILD]/[OTHER]) receive SSI in the past twelve months?

|__|__| MONTHS

I18G. Approximately how much did (you/[CHILD]/you and [CHILD]/[OTHER]) receive each month?

$ |__|__|__|

I19. DID MOTHER RECEIVE FOOD STAMPS IN THE PAST 12 MONTHS? (I8A2=1)

YES .................................................................1 ➔ GO TO I21
NO .................................................................2
I20. Was there ever a time in the past twelve months that you thought you might be eligible for food stamps?

YES .................................................................1

NO .................................................................2 ➔ GO TO I21

I20A. Did you apply for food stamps in the past twelve months?

YES, APPLIED .................................................1

NO, DID NOT APPLY (OR DID NOT FINISH APPLYING) .................................2 ➔ GO TO I21

I20B. What happened with the application? Was it turned down, did you get the food stamps, or are you still waiting to hear?

CIRCLE ONE

TURNED DOWN .................................................1

RECEIVED BENEFITS .........................................2

STILL WAITING TO HEAR ...................................3

OTHER (NOT SPECIFIED) ................................. 4

______________________________________________

DON’T KNOW ..................................................2

REFUSED .......................................................1

DIDN’T APPLY ..................................................101

I21. Did you fill out a federal tax return for 2002 or 2003?

YES .................................................................1

NO .................................................................2 ➔ GO TO I23

NOT YET, BUT WILL .........................................3
I22. As part of filling out your federal tax return the last time, did you fill out a special form to claim the Earned Income Credit, called Schedule EIC?

**PROBE IF DON’T KNOW WHAT EIC IS:** The federal government has a special rule that allows working people who make less than about $29,000 a year to get a tax refund. It’s called the Earned Income Credit or EIC. Sometimes, if the IRS thinks that someone is eligible for the EIC they send out a letter asking that person to fill out a special form so that they can claim the EIC.

YES ................................................................. 1
NO ................................................................. 2
DON’T KNOW .................................................-2
We are also interested in some of the problems that families face making ends meet. In the past twelve months, did you do any of the following because there wasn't enough money?

**NOTE: REPEAT AS NEEDED** “because there wasn’t enough money”

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>I23A.</td>
<td>In the past twelve months, did you receive free food or meals?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>I23B.</td>
<td>(In the past twelve months,) Was (CHILD/ were the children) ever hungry, but you just couldn’t afford more food?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>I23C.</td>
<td>(In the past twelve months,) were you ever hungry, but didn’t eat because you couldn’t afford enough food?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>I23D.</td>
<td>(In the past twelve months,) Did you not pay the full amount of rent or mortgage payments?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>I23E.</td>
<td>(In the past twelve months,) Were you evicted from your home or apartment for not paying the rent or mortgage?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>I23F.</td>
<td>(In the past twelve months,) Did you not pay the full amount of a gas, oil, or electricity bill?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>I23G.</td>
<td>(In the past twelve months,) Was your gas or electric service ever turned off, or the heating oil company did not deliver oil, because there wasn’t enough money to pay the bills</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>I23H.</td>
<td>(In the past twelve months,) Did you borrow money from friends or family to help pay bills?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>I23I.</td>
<td>(In the past twelve months,) Did you move in with other people even for a little while because of financial problems</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>I23J.</td>
<td>(In the past twelve months,) Did you stay at a shelter, in an abandoned building, an automobile or any other place not meant for regular housing, even for one night?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>I23K.</td>
<td>(In the past twelve months,) Was there anyone in your household who needed to see a doctor or go to the hospital but couldn’t go because of the cost?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>I23L.</td>
<td>(In the past twelve months,) Have you cut back on buying clothes for yourself?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>I23M.</td>
<td>(In the past twelve months,) Have you worked overtime or taken a second job?</td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>
I23N. In the past twelve months, was your telephone service ever disconnected by the telephone company because there wasn’t enough money to pay the bill?

YES ................................................................. 1
NO ................................................................. 2

I23O. About how many days in the past twelve months were you without phone service?

[___] [___] [___] DAYS

I23P. Next I’m going to read some opinions other people have expressed about welfare. For each statement, please tell me whether you strongly agree, agree, disagree or strongly disagree with it.

Welfare.....(READ ITEM).

<table>
<thead>
<tr>
<th></th>
<th>STRONGLY AGREE</th>
<th>AGREE</th>
<th>DISAGREE</th>
<th>STRONGLY DISAGREE</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>I23P1.</td>
<td>Makes people work less than they would if there wasn’t a welfare system ........................................</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>I23P2.</td>
<td>Helps people get on their feet when facing difficult situations such as unemployment, a divorce, or a death in the family ..................</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>I23P3.</td>
<td>Encourages young women to have babies before marriage ..................</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>I23P4.</td>
<td>Helps keep people’s marriage together in times of financial problem</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>I23P5.</td>
<td>Helps to prevent hunger and starvation ........................................</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>I23P6.</td>
<td>Discourages young women who get pregnant from marrying the father of the child ..........................</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>
I23Q. The next two statements have to do with applying for welfare. Again, for each statement, please tell me whether you strongly agree, agree, disagree, or strongly disagree with it.

<table>
<thead>
<tr>
<th>Statement</th>
<th>STRONGLY AGREE</th>
<th>AGREE</th>
<th>DISAGREE</th>
<th>STRONGLY DISAGREE</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>I23Q1. The application process to apply for welfare is humiliating........</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>-2</td>
</tr>
<tr>
<td>I23Q2. The rules of the welfare program take away personal freedom ..........</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>-2</td>
</tr>
</tbody>
</table>

I24. My next questions are about some experiences you may have had (since [DATE OF LAST INTERVIEW] / in the last two years).

(Since [DATE OF LAST INTERVIEW] / During the last two years), other than for a minor traffic violation, have you been stopped by the police, but not picked up or arrested?

YES .................................................................1

NO .................................................................2

I25. And, (Since [DATE OF LAST INTERVIEW] / During the last two years), not counting minor traffic offenses, have you ever been booked or charged with breaking a law, either by the police or by someone connected with the courts? Please include juvenile offenses.

YES .................................................................1

NO .................................................................2 ➔ GO TO SECTION J

I26. Do you currently have any charges pending against you?

YES .................................................................1

NO .................................................................2 ➔ GO TO I27

I26A. How many charges do you currently have pending?

|___|___| CHARGES
I26B. What charges do you currently have pending?

**PROBE:** What other charges?

**INTERVIEWER:** IF “ASSAULT,” PROBE FOR SIMPLE OR AGGRAVATED ASSAULT.

<table>
<thead>
<tr>
<th>Charge</th>
<th>Circle All That Apply</th>
</tr>
</thead>
<tbody>
<tr>
<td>AGGRAVATED ASSAULT/RAPE/MURDER (An attack on a person with a weapon or hands, e.g., battery, rape, aggravated assault, manslaughter)</td>
<td>1 (I26B_1)</td>
</tr>
<tr>
<td>ROBBERY/THEFT/LARCENY (Taking something from someone with or without using a weapon; forgery, fraud, embezzlement, bad checks; shoplifting)</td>
<td>2 (I26B_2)</td>
</tr>
<tr>
<td>POSSESSION, USE, OR SALE OF MARIJUANA, COCAINE, OR OTHER ILLICIT DRUGS</td>
<td>3 (I26B_3)</td>
</tr>
<tr>
<td>MAJOR TRAFFIC OFFENSE (Driving under the influence of alcohol or other drug [DWI], reckless driving, driving without a license)</td>
<td>4 (I26B_4)</td>
</tr>
<tr>
<td>NON-PAYMENT OF CHILD SUPPORT</td>
<td>5 (I26B_5)</td>
</tr>
<tr>
<td>PAROLE OR PROBATION VIOLATION</td>
<td>6 (I26B_6)</td>
</tr>
<tr>
<td>SIMPLE ASSAULT</td>
<td>7 (I26B_7)</td>
</tr>
<tr>
<td>OTHER (NOT SPECIFIED)</td>
<td>8 (I26B_8)</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>-2</td>
</tr>
<tr>
<td>REFUSED</td>
<td>-1</td>
</tr>
</tbody>
</table>

I27. And, (Since [DATE OF LAST INTERVIEW]/during the last two years), have you been **convicted** of any charges? Do not count minor traffic violations.

YES .....................................................1

NO .....................................................2 ➔ **GO TO I29**
I27A. How many times have you been convicted of something (since [DATE OF LAST INTERVIEW]/during the last two years)?

| TIMES |

I28. Please tell me the charges you were convicted of (since [DATE OF LAST INTERVIEW]/during the last two years).

**PROBE:** What other charges?

**INTERVIEWER:** IF “ASSAULT,” PROBE FOR SIMPLE OR AGGRAVATED ASSAULT.

<table>
<thead>
<tr>
<th>CHARGE</th>
<th>CIRCLE ALL THAT APPLY</th>
</tr>
</thead>
<tbody>
<tr>
<td>AGGRAVATED ASSAULT/RAPE/MURDER (An attack on a person with a</td>
<td>1 (I28B_1)</td>
</tr>
<tr>
<td>weapon or hands, e.g., battery, rape, aggravated assault, manslaughter)</td>
<td></td>
</tr>
<tr>
<td>ROBBERY/THEFT/LARCENY (Taking something from someone with or</td>
<td>2 (I28B_2)</td>
</tr>
<tr>
<td>without using a weapon; forgery, fraud, embezzlement, bad checks;</td>
<td></td>
</tr>
<tr>
<td>shoplifting)</td>
<td></td>
</tr>
<tr>
<td>POSSESSION, USE, OR SALE OF MARIJUANA, COCAINE, OR OTHER</td>
<td>3 (I28B_3)</td>
</tr>
<tr>
<td>ILLICIT DRUGS</td>
<td></td>
</tr>
<tr>
<td>MAJOR TRAFFIC OFFENSE (Driving under the influence of alcohol or other</td>
<td>4 (I28B_4)</td>
</tr>
<tr>
<td>drug [DWI], reckless driving, driving without a license)</td>
<td></td>
</tr>
<tr>
<td>NON-PAYMENT OF CHILD SUPPORT</td>
<td>5 (I28B_5)</td>
</tr>
<tr>
<td>PAROLE OR PROBATION VIOLATION</td>
<td>6 (I28B_6)</td>
</tr>
<tr>
<td>SIMPLE ASSAULT</td>
<td>7 (I28B_7)</td>
</tr>
<tr>
<td>OTHER (NOT SPECIFIED)</td>
<td>8 (I28B_8)</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>-2</td>
</tr>
<tr>
<td>REFUSED</td>
<td>-1</td>
</tr>
</tbody>
</table>
I29. Were you ever required to perform community service or have you been on probation?

YES .................................................................................................1
NO .................................................................................................2
SECTION J: HEALTH AND HEALTH BEHAVIOR

J0. My next question is about how satisfied you are with your life overall. In general, would you say you are . . .

Very satisfied with your life overall,..................1
Somewhat satisfied, ..................................2
Somewhat dissatisfied, or...............................3
Very dissatisfied? .......................................4

J1. Now I’d like to ask you some questions about your health and how you’ve been feeling in the past twelve months.

In general, how is your health? Would you say it is . . .

Excellent, .........................................................1
Very good, .........................................................2
Good, .............................................................3
Fair, or .............................................................4
Poor? ............................................................5

J2. Do you have a serious health problem that limits the amount or kind of work you can do?

YES ..............................................................1
NO ...............................................................2 ➔ GO TO J2B
J2A. What is this health problem?

J2A_1 DIABETES .................................1
J2A_2 ASTHMA .................................2
J2A_3 HIGH BLOOD PRESSURE .............3
J2A_4 PAIN ......................................4
J2A_5 SEIZURES/EPILEPSY ..................5
J2A_6 HEART DISEASE .......................6
J2A_7 BACK PROBLEMS .....................7
J2A_8 OTHER (NOT SPECIFIED) .............8

ALLERGIES ....................................101
THYROID .......................................102
HEART/STROKE ..............................103
GASTROINTESTINAL .......................104
MIGRAINES ....................................105
MENTAL HEALTH ...........................106
CANCER .......................................107
OTHER PROBLEM ............................108

J2B. Do you regularly take any prescribed medication for physical or mental health problems?

YES ..............................................1
NO ..............................................2 ➔ GO TO J2C
J2B1. For which of the following conditions do you take prescribed medication? Do you take them for . . .

CIRCLE YES OR NO FOR EACH

<table>
<thead>
<tr>
<th>Condition</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>J2B1_1 Diabetes?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>J2B1_2 Asthma?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>J2B1_3 High Blood Pressure?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>J2B1_4 Depression?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>J2B1_5 Anxiety?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>J2B1_6 Attention Deficit?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>J2B1_7 Pain?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>J2B1_8 Seizures or Epilepsy?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>J2B1_9 Anything else? (NOT SPECIFIED)</td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

ALLERGIES ................................. 101
THYROID ..................................... 102
HEART/STROKE .............................. 103
GASTROINTESTINAL ....................... 104
MIGRAINES .................................. 105
MENTAL HEALTH ............................ 106
CANCER .................................... 107
OTHER PROBLEM ............................ 108
DON'T KNOW .................................. -2
REFUSED .................................... -1

J2C. In the past twelve months, have you stayed overnight in a hospital or gone to the emergency room? (Please do not include hospital stays related to giving birth.)

YES ............................................. 1
NO .............................................. 2 ➔ GO TO J2E
J2D. How many times have you stayed overnight in a hospital in the past twelve months?

**PROBE:** Count each stay—even if it lasted more than one overnight—as just one stay.

|   |   | TIMES
|---|---|---
| NONE ......................................................... 0

J2D1. How many times have you gone to the emergency room because of your own injury or illness in the past twelve months?

|   |   | TIMES
|---|---|---
| NONE ......................................................... 0

J2E. How much do you weigh?

**PROBE:** Your best guess is fine.

|   |   |   | POUNDS
|---|---|---
| DON’T KNOW .............................................. -2
| REFUSED .................................................... -1

J2F. How much does (FATHER) weigh?

**PROBE:** Your best guess is fine.

|   |   |   | POUNDS
|---|---|---
| DON’T KNOW .............................................. -2
| REFUSED .................................................... -1

J3. Are you or your child(ren) (who live with you) currently covered by Medicaid (CA: Medi-Cal) or by another public, federal or state assistance program which pays for medical care, or do you belong to a Medicaid HMO?

YES ................................................................. 1

NO ................................................................. 2 ➔ **GO TO J4**
J3A. Who is covered by this program? Is it . . .

CIRCLE ONE

You only, ..................................................1
Your child(ren) only, or .................................2
Both you and your child(ren)? .......................3 ➔ GO TO J5

J4. Are you or your child(ren) currently covered by a private health insurance plan?

YES ..............................................................1
NO ..............................................................2 ➔ GO TO J5

J4A. Who is covered by private insurance? Is it . . .

CIRCLE ONE

You only, ..........................................................1
Your child(ren) only, or .................................2
Both you and your child(ren)? .......................3

J4B. Did you purchase the plan yourself, did someone else purchase it, or did you get it through an employer?

PROBE: Any others?

CIRCLE ALL THAT APPLY

J4B_1 PURCHASED BY SELF .............................1
J4B_2 PURCHASED BY OTHER .......................2
J4B_3 THROUGH RESPONDENT'S EMPLOYER ....3
J4B_4 THROUGH CHILD'S FATHER'S EMPLOYER ..........4
J4B_5 THROUGH PARTNER'S EMPLOYER ..........5
J4B_6 OTHER (NOT SPECIFIED) .....................6
J5. During the past twelve months, has there ever been a time when you felt sad, blue, or depressed for two or more weeks in a row?

YES ................................................................. 1
NO ................................................................. 2
NO, ON MEDICATION/ ANTI-DEPRESSANTS (VOLUNTEERED) ......-14

→ GO TO J9

J6. For the next two questions, please think of the two-week period during the past twelve months when these feelings were worst. During that time, did the feelings of being sad, blue, or depressed usually last . . .

All day long, ...................................................... 1
Most of the day, .................................................. 2
About half of the day, or ..................................... 3
Less than half the day? ....................................... 4

→ GO TO J9

J7. During those two weeks, did you feel this way . . .

Every day, ......................................................... 1
Almost every day, or ........................................... 2
Less often? ....................................................... 3

→ GO TO J9
J8. During those two weeks did you lose interest in most things like hobbies, work, or activities that usually give you pleasure?

YES .................................................................1
NO .................................................................2

GO TO J12

J9. During the past twelve months, has there ever been a time lasting two weeks or more when you lost interest in most things like hobbies, work, or activities that usually give you pleasure?

YES .................................................................1
NO .................................................................2
NO, ON MEDICATION/ ANTI-DEPRESSANTS (VOLUNTEERED) ......-14

GO TO J18

J10. For the next few questions, please think of the two-week period during the past twelve months when you had the most complete loss of interest in things. During that two-week period, did the loss of interest usually last . . .

All day long, .........................................................1
Most of the day, .......................................................2
About half of the day, or ...........................................3
Less than half the day? ..............................................4 ➔ GO TO J18

J11. Did you feel this way every day, almost every day, or less often during the two weeks?

EVERY DAY .........................................................1
ALMOST EVERY DAY .............................................2
LESS OFTEN ......................................................3 ➔ GO TO J18
J12. Thinking about those same two weeks, did you feel more tired out or low on energy than is usual for you?

YES ................................................................. 1
NO ................................................................. 2

J13. During these two weeks, did you gain or lose weight without trying, or did you stay about the same?

PROBE: We are still talking about the same two weeks.

GAIN ................................................................. 1
LOSE ................................................................. 2
IF VOLUNTEERED: BOTH GAINED AND LOST WEIGHT ................. 3
STAYED ABOUT THE SAME ....................... 4
IF VOLUNTEERED: WAS ON A DIET .......... 5

GO TO J15

J13A. About how much did (you gain/you lose/your weight change) during these two weeks?

INTERVIEWER: IF RESPONDENT OFFERS A RANGE, TAKE THE NUMBER AT THE LOWER END.

| ____ | ____ | POUNDS

DON'T KNOW .................................................. -2
REFUSED ......................................................... -1

J14. Did you have more trouble falling asleep than you usually do during those two weeks?

YES ................................................................. 1
NO ................................................................. 2 \( \Rightarrow \) GO TO J15
J14A. Did that happen every night, nearly every night, or less often during those two weeks?

EVERY NIGHT ........................................1
NEARLY EVERY NIGHT ...............................2
LESS OFTEN ..............................................3

J15. During those two weeks, did you have a lot more trouble concentrating than usual?

YES .................................................................1
NO .................................................................2

J16. People sometimes feel down on themselves, no good, or worthless. During that two week period, did you feel this way?

YES .................................................................1
NO .................................................................2

J17. Did you think a lot about death--either your own, someone else's, or death in general during those two weeks?

YES .................................................................1
NO .................................................................2

J18. In the past month, did you smoke cigarettes?

YES .................................................................1
NO .................................................................2 ➔ GO TO J20
J19. How many packs per day do you usually smoke?

LESS THAN HALF A PACK A DAY ..................1
ABOUT A PACK..............................................2
A PACK AND A HALF .....................................3
ABOUT 2 PACKS...........................................4
MORE THAN TWO PACKS ..............................5

J20. The next questions are about how frequently you drink alcoholic beverages. By a “drink” we mean either a bottle of beer, a wine cooler, a glass of wine, a shot of liquor, or a mixed drink. With these definitions in mind, what is the largest number of drinks you had in any single day during the past twelve months—none, between one and three, four to ten, eleven to twenty, or more than twenty drinks in a single day?

NOTE: IF RESPONDENT VOLUNTEERS “I never drink,” ACCEPT THE ANSWER AND CODE AS “NONE.”

NONE .........................................................0
1-3 .............................................................1
4-10 ...........................................................2
11-20 ..........................................................3
MORE THAN 20 ..........................................4

IF NEEDED:

ALCOHOL EQUIVALENTS

<table>
<thead>
<tr>
<th>Beer</th>
<th>Hard Liquor</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 12 or 16 oz bottle</td>
<td>1 highball</td>
</tr>
<tr>
<td>1 case of beer</td>
<td>1 shot glass</td>
</tr>
<tr>
<td></td>
<td>½ pint of liquor</td>
</tr>
<tr>
<td></td>
<td>1 pint of liquor</td>
</tr>
<tr>
<td>1 4 oz. glass of wine</td>
<td>1 fifth of liquor</td>
</tr>
<tr>
<td>1 liter or quart bottle</td>
<td>1 quart of liquor</td>
</tr>
<tr>
<td>1 wine cooler</td>
<td>1 drink</td>
</tr>
</tbody>
</table>

GO TO J22
J20A. In the past twelve months, how often did you have four or more drinks in one day? Was it . . .

   Every day or almost every day, ......................... 1
   A few times a week, ................................... 2
   A few times a month, ................................... 3
   About once a month, or ................................. 4
   Less than once a month? ................................. 5
   DON'T KNOW ............................................-2
   REFUSED ..................................................-1

J21. In the past twelve months, was there ever a time when your drinking or being hung over interfered with your work at school, or a job, or at home?

   YES ..........................................................1
   NO .............................................................2
   I AM A CASUAL/SOCIAL DRINKER (VOLUNTEERED) ...............3
The next questions are about your use of drugs on your own. By “on your own,” we mean either without a doctor’s prescription, in larger amounts than prescribed, or for a longer period than prescribed. With this definition in mind, did you use any of these drugs on your own during the past twelve months?

During the past twelve months did you use . . .

<table>
<thead>
<tr>
<th></th>
<th>CIRCLE YES OR NO FOR EACH</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>YES</td>
</tr>
<tr>
<td>J22A.</td>
<td>Sedatives, including either barbiturates or sleeping pills on your own? (e.g., Seconal, Halcion, Methaqualone)</td>
</tr>
<tr>
<td>J22B.</td>
<td>Tranquilizers or “nerve pills” on your own? (e.g., Librium, Valium, Ativan, Meprobamate, Xanax)</td>
</tr>
<tr>
<td>J22C.</td>
<td>Amphetamines or other stimulants on your own? (e.g., Methamphetamine, Preludin, Dexedrine, Ritalin, “Speed”)</td>
</tr>
<tr>
<td>J22D.</td>
<td>Analgesics or other prescription painkillers on your own? (NOTE: This does not include normal use of aspirin, Tylenol without codeine, etc. but does include use of Tylenol with codeine and other Rx painkillers like Demerol, Darvon, Percodan, Codeine, Morphine, and Methadone)</td>
</tr>
<tr>
<td>J22E.</td>
<td>Inhalants that you sniff or breathe to get high or to feel good? (e.g., Amylnitrate, Freon, Nitrous Oxide (“Whippets”), Gasoline, Spray paint)</td>
</tr>
<tr>
<td>J22F.</td>
<td>Marijuana or hashish?</td>
</tr>
<tr>
<td>J22G.</td>
<td>Cocaine or crack or free base?</td>
</tr>
<tr>
<td>J22H.</td>
<td>LSD or other hallucinogens? (e.g., PCP, angel dust, peyote, ecstasy (MDMA), mescaline)?</td>
</tr>
<tr>
<td>J22I.</td>
<td>Heroin?</td>
</tr>
</tbody>
</table>
J22J. **DID RESPONDENT USE ONE OR MORE DRUGS?**  
(J22A-J22I = 1)  

YES ................................................................. 1  \( \Rightarrow \text{GO TO J24A} \)

NO ........................................................................ 2

J22K. In the past twelve months, how often did you use ([DRUG]/any of those drugs)? Was it . . .

- Every day or almost every day, .................... 1
- A few times a week, ..................................... 2
- A few times a month, ................................. 3
- About once a month, or ............................. 4
- Less than once a month? ............................ 5
- DON'T KNOW ................................................. -2
- REFUSED .........................................................-1

J23. In the past twelve months, did your use of (NAME OF DRUG/any of these substances) ever interfere with your work at school, or a job, or at home?

YES ................................................................. 1

NO ......................................................................... 2

J24A. In the past twelve months, have you received counseling, therapy, or other treatment for personal problems, for example, feelings of depression, worry, alcohol, or drug use problems?

YES ................................................................. 1

NO ..................................................................... 2  \( \Rightarrow \text{GO TO J25A} \)
J24B. Was this counseling or therapy for . . .

CIRCLE ALL THAT APPLY

| J24B_1  | Depression? ........................................1 |
| J24B_2  | Anxiety? ............................................2 |
| J24B_3  | Attention problems? ................................3 |
| J24B_4  | Alcohol problems? ......................................4 |
| J24B_5  | Drug use problems? ......................................5 |
| J24B_6  | Anything else?  (SPECIFY) ...............................6 |

DON'T KNOW ..............................................-2
REFUSED .......................................................-1
MARRIAGE COUNSELING .................................101

J25A. Now I am going to read you some statements that describe how people sometimes behave. Please tell me whether you strongly agree, agree, disagree, or strongly disagree with each statement.

| J25A1. | I often say and do things without considering the consequences .......... | STRONGLY AGREE | AGREE | DISAGREE | STRONGLY DISAGREE |
|        |                                                                       | 1 | 2 | 3 | 4 |
| J25A2. | I often get into trouble because I don’t think before I act ............... | 1 | 2 | 3 | 4 |

J25B. For the next statements, please tell me whether this is very true, somewhat true, or not true.

| J25B1. | I do things that may cause trouble with the law......................... | VERY TRUE | SOMEWHA| TRUE | NOT TRUE |
|        |                                                                       | 1 | 2 | 3 |
| J25B2. | I lie or cheat ........................................................................... | 1 | 2 | 3 |
| J25B3. | I frequently get into fights...................................................... | 1 | 2 | 3 |
| J25B4. | I don’t seem to feel guilty when I misbehave .................................. | 1 | 2 | 3 |
(CONSTRUCTED FOR 2 CITIES)

J25C. WAS RESPONDENT INTERVIEWED AT THREE-YEAR?

YES ............................................................. 1 ➔ GO TO SECTION R
NO ............................................................. 2

J26. Now I have some questions about your biological father.

Did your biological father ever have periods lasting two weeks or more when he was depressed, down in the dumps, or blue most of the time?

YES............................................................. 1
NO ............................................................. 2 ➔ GO TO J27

VOLUNTEERED: NO KNOWLEDGE
ABOUT FATHER ..............................................-14 ➔ GO TO J31
DON’T KNOW .............................................-2 ➔ GO TO J27
REFUSED......................................................-1

J26A. Did he ever get professional treatment for depression?

YES............................................................. 1
NO ............................................................. 2 ➔ GO TO J27
DON’T KNOW .............................................-2
REFUSED......................................................-1

J26B. Was he ever hospitalized for depression?

YES............................................................. 1
NO ............................................................. 2
DON’T KNOW .............................................-2
REFUSED......................................................-1

J27. Did your biological father have periods of a month or more when he was constantly nervous, edgy, or anxious?

YES............................................................. 1
NO ............................................................. 2 ➔ GO TO J28
DON’T KNOW .............................................-2
REFUSED......................................................-1
J27A. Did he ever get professional treatment for his nervousness?

YES................................................................. 1
NO ................................................................. 2
DON’T KNOW ....................................................-2
REFUSED..........................................................-1

GO TO J28

J27B. Was he ever hospitalized for his nervousness?

YES................................................................. 1
NO ................................................................. 2
DON’T KNOW ....................................................-2
REFUSED..........................................................-1

J28. Did your biological father ever have a problem with drinking?

YES................................................................. 1
NO ................................................................. 2
DON’T KNOW ....................................................-2
REFUSED..........................................................-1

J28A. Did he ever abuse prescription drugs such as valium, sleeping pills, or diet pills?

YES................................................................. 1
NO ................................................................. 2
DON’T KNOW ....................................................-2
REFUSED..........................................................-1
J28B. Did he ever have a problem with illegal drugs?

YES................................................................. 1
NO ............................................................... 2
DON’T KNOW ..................................................-2
REFUSED...........................................................-1

J29. DID BIOLOGICAL FATHER HAVE PROBLEMS WITH DRINKING OR DRUGS?
(J28 OR J28A OR J28B = 1)

YES................................................................. 1
NO ............................................................... 2
ALL REFUSED ..................................................-1

GO TO J30

J29A. Did he ever get professional treatment for his (drinking/(or)/drug) problem(s)?

YES................................................................. 1
NO ............................................................... 2
DON’T KNOW ..................................................-2
REFUSED...........................................................-1

GO TO J30

J29B. Was he ever hospitalized for his (drinking/(or)/drug use)?

YES................................................................. 1
NO ............................................................... 2
DON’T KNOW ..................................................-2
REFUSED...........................................................-1
J30. **NOT FOR PUBLIC RELEASE**

J30A. **NOT FOR PUBLIC RELEASE**

J31. The next questions are about your biological mother.

Did your biological mother ever have periods lasting two weeks or more when she was depressed, blue, or down in the dumps most of the time?

- YES................................................................. 1
- NO ................................................................. 2 ➔ GO TO J32
- **VOLUNTEERED:** NO KNOWLEDGE ABOUT MOTHER.................................-14 ➔ GO TO SECTION R
- DON’T KNOW .............................................-2 ➔ GO TO J32
- REFUSED..................................................-1 ➔ GO TO J32

J31A. Did she ever get professional treatment for depression?

- YES................................................................. 1
- NO ................................................................. 2 ➔ GO TO J32
- DON’T KNOW .............................................-2 ➔ GO TO J32
- REFUSED..................................................-1
J31B. Was she ever hospitalized for depression?

YES................................................................. 1
NO ................................................................. 2
DON’T KNOW .................................................. -2
REFUSED........................................................ -1

J32. Did your biological mother have periods of a month or more when she was constantly nervous, edgy, or anxious?

YES................................................................. 1
NO ................................................................. 2
DON’T KNOW .................................................. -2
REFUSED........................................................ -1

GO TO J33

J32A. Did she ever get professional treatment for her nervousness?

YES................................................................. 1
NO ................................................................. 2
DON’T KNOW .................................................. -2
REFUSED........................................................ -1

GO TO J33

J32B. Was she ever hospitalized for her nervousness?

YES................................................................. 1
NO ................................................................. 2
DON’T KNOW .................................................. -2
REFUSED........................................................ -1
J33. Did your biological mother ever have a problem with drinking?

YES................................................................. 1
NO ................................................................. 2
DON’T KNOW ...................................................-2
REFUSED ...........................................................-1

J33A. Did she ever abuse prescription drugs such as valium, sleeping pills, or diet pills?

YES................................................................. 1
NO ................................................................. 2
DON’T KNOW ...................................................-2
REFUSED ...........................................................-1

J33B. Did she ever have a problem with illegal drugs?

YES................................................................. 1
NO ................................................................. 2
DON’T KNOW ...................................................-2
REFUSED ...........................................................-1

J34. DID BIOLOGICAL MOTHER HAVE PROBLEMS WITH DRINKING OR DRUGS?
(J33 OR J33A OR J33B = 1)

YES................................................................. 1
NO ................................................................. 2
ALL REFUSED ....................................................-1

GO TO J35
J34A. Did she ever get professional treatment for her (drinking/(or)/drug) problem(s)?

YES............................................................... 1
NO ............................................................... 2
DON’T KNOW ..................................................-2
REFUSED.........................................................-1

GO TO J35

J34B. Was she ever hospitalized for her (drinking/(or)/drug use)?

YES............................................................... 1
NO ............................................................... 2
DON’T KNOW ..................................................-2
REFUSED.........................................................-1

J35. NOT FOR PUBLIC RELEASE

J35A. NOT FOR PUBLIC RELEASE
SECTION R: RELIGION

Now I’d like to ask you about your religious beliefs and practices.

R1. My religious faith is an important guide for my daily life. Do you . . .

   Strongly agree, .................................................1
   Somewhat agree, ..................................................2
   Somewhat disagree, or ...........................................3
   Strongly disagree? ................................................4

R2. How often do you attend religious services? Do you attend services . . .

   Every day, ..........................................................1
   A few times a week, ...............................................2
   Once a week, .......................................................3
   A few times a month, .............................................4
   A few times a year, .................................................5
   Less often than that, or ............................................6
   Never? .................................................................7

R3. (Since [DATE OF LAST INTERVIEW]/During the last two years), have you had any religious experiences that transformed your life?

   YES........................................................................1
   NO.......................................................................2
SECTION K: EDUCATION AND EMPLOYMENT

K1. Now I’d like to ask you a few questions about your education and employment.

Are you currently attending any school or participating in any training programs or taking any classes? Please include regular high school, GED classes, vocational or trade school, Job Corps, college or other types of school as well as training programs to learn job skills.

YES ..........................................................1
NO ............................................................2 ➔ GO TO K3
K2. What kind of school or program are you attending?

CIRCLE ALL THAT APPLY

K2_1 REGULAR HIGH SCHOOL.................................1
K2_2 GENERAL EQUIVALENCY DEGREE (GED) OR
ADULT BASIC EDUCATION (ABE) PROGRAM.......2 ➔ Which one?
(K2_2A)
K2_3 ESL PROGRAM........................................3
K2_4 NURSING SCHOOL (LPN OR RN).....................4
GED............ 1
K2_5 BUSINESS OR SECRETARIAL
SCHOOL...........................................................5
ABE ............ 2
K2_6 PROGRAM TO IMPROVE READING ..................6
K2_7 VOCATIONAL, TECHNICAL, OR
TRADE SCHOOL..................................................7
K2_8 JOB CORPS .................................................8
K2_9 JUNIOR/COMMUNITY COLLEGE (2-YEAR)...........9
K2_10 COLLEGE (4-YEAR)......................................10
K2_11 OTHER TYPE OF SCHOOL (NOT SPECIFIED) ......11

K2_12 OTHER TYPE OF TRAINING (NOT SPECIFIED) ....12

K2_13 PROGRAM TO LEARN JOB SKILLS..................13
K2_14 PROGRAM TO HELP GET A JOB....................14
K2_15 GRADUATE/PROFESSIONAL SCHOOL.............15
PROFESSIONAL ..................................................101
CONTINUING ED ...............................................102
HEALTH CARE AIDE...........................................103
CHILD CARE ..................................................104

K3. Have you completed any training programs or any years of schooling (since
[DATE OF LAST INTERVIEW] or during the last two years)?

YES .................................................................1

NO ...............................................................2 ➔ GO TO K3B
K3A. What program or schooling have you completed?

CIRCLE ALL THAT APPLY

<table>
<thead>
<tr>
<th>K3A_1</th>
<th>REGULAR HIGH SCHOOL ..............................................</th>
<th>1</th>
<th>GRADE COMPLETED: ___</th>
<th>(K3A_1A)</th>
</tr>
</thead>
<tbody>
<tr>
<td>K3A_2</td>
<td>GENERAL EQUIVALENCY DEGREE (GED) OR ADULT BASIC EDUCATION (ABE) PROGRAM</td>
<td>2</td>
<td>Which one? (K3A_2A)</td>
<td></td>
</tr>
<tr>
<td>K3A_3</td>
<td>ESL PROGRAM ..........................................................</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>K3A_4</td>
<td>NURSING SCHOOL (LPN OR RN) ........................................</td>
<td>4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>K3A_5</td>
<td>BUSINESS OR SECRETARIAL SCHOOL .....................................</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>K3A_6</td>
<td>PROGRAM TO IMPROVE READING ........................................</td>
<td>6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>K3A_7</td>
<td>VOCATIONAL, TECHNICAL, OR TRADE SCHOOL ............................</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>K3A_8</td>
<td>JOB CORPS .....................................................................</td>
<td>8</td>
<td></td>
<td></td>
</tr>
<tr>
<td>K3A_9</td>
<td>JUNIOR/COMMUNITY COLLEGE (2-YEAR) ...................................</td>
<td>9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>K3A_10</td>
<td>COLLEGE (4-YEAR) ........................................................</td>
<td>10</td>
<td></td>
<td></td>
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<tr>
<td>K3A_11</td>
<td>OTHER TYPE OF SCHOOL (NOT SPECIFIED) ...............................</td>
<td>11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>K3A_12</td>
<td>OTHER TYPE OF TRAINING (NOT SPECIFIED) .............................</td>
<td>12</td>
<td></td>
<td></td>
</tr>
<tr>
<td>K3A_13</td>
<td>PROGRAM TO LEARN JOB SKILLS .........................................</td>
<td>13</td>
<td></td>
<td></td>
</tr>
<tr>
<td>K3A_14</td>
<td>PROGRAM TO HELP GET A JOB ...........................................</td>
<td>14</td>
<td></td>
<td></td>
</tr>
<tr>
<td>K3A_15</td>
<td>SOME COLLEGE ..................................................................</td>
<td>15</td>
<td></td>
<td></td>
</tr>
<tr>
<td>K3A_16</td>
<td>GRADUATE/PROFESSIONAL SCHOOL .......................................</td>
<td>16</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
K3B. (Since [DATE OF LAST INTERVIEW]/During the last two years), have you taken any classes to improve your job skills, such as computer training or literacy classes?

YES .................................................................1
NO .................................................................2

K3C. (Since [DATE OF LAST INTERVIEW]/During the last two years), have you received any kind of employment counseling?

YES .................................................................1
NO .................................................................2

K4. Now I'd like to ask you about your current work status. Last week, did you do any regular work for pay? Include any work you might have done in your own business (or military service) where you got a regular paycheck.

NOTE: IF RESPONDENT WAS ON VACATION IN LAST WEEK, ASK FOR THE WEEK BEFORE VACATION.

YES .................................................................1   GO TO K10
NO .................................................................2

K5. Are you currently looking for a regular job?

YES .................................................................1
NO .................................................................2   GO TO K7

K6. How long have you been looking for a regular job? Would you say . . .

Less than a week, ..............................................1
More than a week, but less than a month, ........................................2
Between a month and six months, .........................3
Between six months and a year, or .....................4
More than a year? ...........................................5

GO TO K8
K7. Why aren’t you looking for a regular job?

OWN BUSINESS ...........................................1
ALREADY HAVE A JOB (ON VACATION, ILL OR ON TEMPORARY LAYOFF) ............2
IN SCHOOL OR TRAINING PROGRAM ......3
DISABLED ......................................................4
DON’T WANT/NEED TO WORK ..............5
PERSONAL/FAMILY REASONS ...............6
BELIEVE NO WORK AVAILABLE ..........7
OTHER (NOT SPECIFIED) ....................... 8

____________________________________________________________________
STAY AT HOME PARENT/HOMEMAKER ....9
GOING BACK TO SCHOOL .........................101
JUST HAD BABY ........................................102
NO CHILD CARE .......................................103
HEALTH REASONS .................................104

GO TO K9

K8. What would the hourly wage have to be in order for you to take a job?

$ |____|____| . |____|____| PER HOUR

DON’T KNOW .............................................-2

WOULD NOT TAKE A JOB AT ANY WAGE RIGHT NOW .........................-1

K9. When did you last work at a regular job lasting two weeks in a row or more, for which you received a regular paycheck?

|____|____| / |____|____|____|____|
MONTH (K9A) YEAR (K9B)

NEVER WORKED FOR TWO CONSECUTIVE WEEKS ......................................-10 ➔ GO TO K25
K10. My next few questions are about your (current/most recent) job.

How many hours (do/did) you usually work per week at (this/that) job? Include regular overtime hours.

**INTERVIEWER:** IF RESPONDENT WORKS/WORKED MORE THAN ONE JOB AT A TIME, ASK ABOUT THE ONE AT WHICH SHE USUALLY WORKS/WORKED THE MOST HOURS.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th>HOURS PER WEEK</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>----------------</td>
</tr>
</tbody>
</table>

K11. (Do/Did) you work for yourself or for someone else in this job?

SELF .................................................................1
SOMEONE ELSE ....................................................2

K12. What (do/did) you do at (this/that) job?

PROFESSIONAL/TECHNICAL .................................101
EXECUTIVE/ADMINISTRATIVE/MANAGERIAL ......102
SALES.................................................................103
ADMINISTRATIVE SUPPORT/CLERICAL ............104
PRECISION/CRAFT/REPAIR .................................105
MACHINE OPERATORS/ASSEMBLERS ...............106
TRANSPORATION/MOVING .................................107
HANDLERS/HELPERS/LABORERS ....................108
SERVICE OCCUPATIONS .................................109
OTHER (NOT SPECIFIED) .................................110
K13. About how much (do/did) you usually earn in (this/that) job, before taxes and deductions?

$ |___|___|___|,|___|___|___|,|___|___| PER (K13P)

HOUR..........................................................1
DAY ............................................................2
WEEK............................................................3
EVERY 2 WEEKS
(26 CHECKS PER YEAR) ............................4
TWICE A MONTH
(24 CHECKS PER YEAR) ............................5
MONTH ..........................................................6
YEAR............................................................7
OTHER (NOT SPECIFIED) ............................8

K14A. (At your primary job,) (Do/Did) you regularly work . . .

CIRCLE YES OR NO FOR EACH

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Weekdays? ............................................. 1</td>
<td>2</td>
</tr>
<tr>
<td>2. Evenings (6 pm-11 pm)? ............................. 1</td>
<td>2</td>
</tr>
<tr>
<td>3. Nights (11 pm-7 am)? ............................... 1</td>
<td>2</td>
</tr>
<tr>
<td>4. Weekends? ............................................. 1</td>
<td>2</td>
</tr>
<tr>
<td>5. Different times each week? ........................ 1</td>
<td>2</td>
</tr>
</tbody>
</table>

K14B. In addition to your regular working shift, (do/did) you sometimes also work . . .

CIRCLE YES OR NO FOR EACH

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Weekdays? ............................................. 1</td>
<td>2</td>
</tr>
<tr>
<td>2. Evenings? ............................................. 1</td>
<td>2</td>
</tr>
<tr>
<td>3. Nights? ................................................ 1</td>
<td>2</td>
</tr>
<tr>
<td>4. Weekends? ............................................. 1</td>
<td>2</td>
</tr>
</tbody>
</table>
K15. HAS MOTHER WORKED SINCE CHILD WAS BORN?  
(K4=1, OR DATE IN K9 IS MORE RECENT THAN DATE OF CHILD'S BIRTH ON CONTACT SHEET)  

YES .................................................................1  
NO .................................................................2 ➔ GO TO K22

K16. Please tell me how true the following statements are.  

(READ ITEM). (Is/Was) this always true, often true, sometimes true, or never true for you?  

<table>
<thead>
<tr>
<th>ALWAYS</th>
<th>OFTEN</th>
<th>SOMETIMES</th>
<th>NEVER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

A. My shift and work schedule (cause/caused) extra stress for me and my child.......................... 1 2 3 4  
B. Where I (work/worked), it (is/was) difficult to deal with child care problems during working hours ........... 1 2 3 4  
C. In my work schedule I (have/had) enough flexibility to handle family needs ........................................ 1 2 3 4

K17. Some people work more than one regular job. Was there ever a time in the past twelve months that you worked more than one regular job at the same time?  

YES .................................................................1  
NO .................................................................2 ➔ GO TO K19

K18. When you were working more than one regular job at the same time, about how many hours per week did you usually work altogether?  

|___|___|___| HOURS PER WEEK
K19. About how much did you earn from (all of) your regular job(s) in the past twelve months? Please do not count earnings from any “off-the-books” or “under-the-table” jobs.

INTERVIEWER: IF AMOUNT IS LESS THAN $1,000 OR MORE THAN $100,000, CONFIRM: You told me you made (AMOUNT) dollars in the last twelve months. Is that correct? CORRECT ANSWER IF APPROPRIATE.

$ |___|___|___| |___|___|___| ➔ GO TO K21

NOTHING/DID NOT WORK
IN THE LAST 12 MONTHS ......................... 0 ➔ GO TO K22
DON’T KNOW .....................................-2
REFUSED ..........................................-1

K20. I just need to have a range. Can you tell me if it was . . .

Less than $5,000,...................................... 1
$5,001 to $10,000, ................................. 2
$10,001 to $15,000, .............................. 3
$15,001 to $20,000, .............................. 4
$20,001 to $25,000, .............................. 5
$25,001 to $30,000, .............................. 6
$30,001 to $40,000, .............................. 7
$40,001 to $60,000, or ......................... 8
More than $60,000? ............................... 9
DON’T KNOW .....................................-2
REFUSED ..........................................-1

K21. In the past twelve months, how many weeks did you work (at your job/at all of your regular jobs)? If you worked the entire year, but used paid vacation time or sick time, you worked 52 weeks.

|___|___| NUMBER OF WEEKS
K22. In the past twelve months, how many regular jobs have you had that lasted two weeks or more?

|   |   | JOBS ➔ GO TO K24

DON'T KNOW ..................................-2

K23. All I need is a range. Would you say it was . . .

1 to 2 jobs,......................................................... 1
3 to 5 jobs,......................................................... 2
5 to 10 jobs,......................................................... 3
10 to 20 jobs, or............................................... 4
More than 20 jobs?................................. 5
DON'T KNOW ...........................................-2
REFUSED ..................................................-1
We are interested in finding out about some ways, other than regular work, in which people make money. This kind of activity may be paid for in cash, or done in exchange for meals, or clothing, a place to live, or something else.

Please tell me if you have done any of the following in the past twelve months.

**RECORD "YES" OR "NO" IN ROW A, THEN ASK B TO F FOR EACH ACTIVITY CODED "YES"**

<table>
<thead>
<tr>
<th>During the past twelve months, did you...</th>
<th>K24</th>
<th>K25</th>
<th>K26</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work in your own business? Please do not include work you already told me about.</td>
<td>YES ..................................................................1</td>
<td>YES ..................................................................1</td>
<td>YES ..................................................................1</td>
</tr>
<tr>
<td>What type of business?</td>
<td>NO ..................................................................0</td>
<td>NO ..................................................(ASK K25) ........2</td>
<td>SPECIFY: ________________ (K26A)</td>
</tr>
<tr>
<td></td>
<td>NO ..................................................(ASK K26) ........2</td>
<td></td>
<td>NO ..................................................</td>
</tr>
</tbody>
</table>

A. **DID ACTIVITY?**

B. In the last twelve months, about how many weeks did you (ACTIVITY)...

C. And, during those (NUMBER FROM B) weeks, about how many hours per week did you (ACTIVITY)...

D. When you did this, were you paid in cash, or did you receive something else such as meals, clothing, or a place to live?

E. **CASH RECEIVED** ............... 1 - ASK K24E

F. **OTHER** ............... 2 - ASK K24F

| | | | |
| | | | |
E. **MONEY:** How much did you receive in the last twelve months for this activity?

<table>
<thead>
<tr>
<th></th>
<th>K24</th>
<th>K25</th>
<th>K26</th>
</tr>
</thead>
<tbody>
<tr>
<td>$</td>
<td>$</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>→ GO TO K24F</td>
<td>→ GO TO K25F</td>
<td>→ GO TO K26F</td>
<td></td>
</tr>
</tbody>
</table>

- DON'T KNOW .................................. -2
- REFUSED ...................................... -1

E1. I just need to know a range. Please tell me if it was . . .

<table>
<thead>
<tr>
<th>Range</th>
<th>K24</th>
<th>K25</th>
<th>K26</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under $500,</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$501 to $1,000,</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$1,001 to $3,000,</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$3,001 to $5,000,</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$5,001 to $10,000,</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$10,001 to $15,000,</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$15,001 to $20,000,</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$20,001 to $25,000,</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$25,001 to $30,000,</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$30,001 to $40,000,</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>More than $40,000</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>-2</td>
<td>-2</td>
<td>-2</td>
</tr>
<tr>
<td>REFUSED</td>
<td>-1</td>
<td>-1</td>
<td>-1</td>
</tr>
</tbody>
</table>

F. **WAS OTHER TYPE OF PAYMENT RECEIVED?**
(K24D = 2 OR 3)

<table>
<thead>
<tr>
<th>YES ................. 1</th>
<th>YES ................. 1</th>
<th>YES ................. 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>NO ................... 2 → GO TO K25A</td>
<td>NO ................... 2 → GO TO K26A</td>
<td>NO ................... 2 → GO TO SECTION L</td>
</tr>
</tbody>
</table>

F_1 - F_5. What (else) did you get in exchange for this?

<table>
<thead>
<tr>
<th>Exchange</th>
<th>CIRCLE ALL THAT APPLY</th>
<th>CIRCLE ALL THAT APPLY</th>
<th>CIRCLE ALL THAT APPLY</th>
</tr>
</thead>
<tbody>
<tr>
<td>MEALS .................. 1</td>
<td>MEALS .................. 1</td>
<td>MEALS .................. 1</td>
<td></td>
</tr>
<tr>
<td>CLOTHING ............... 2</td>
<td>CLOTHING ............... 2</td>
<td>CLOTHING ............... 2</td>
<td></td>
</tr>
<tr>
<td>PLACE TO LIVE .......... 3</td>
<td>PLACE TO LIVE .......... 3</td>
<td>PLACE TO LIVE .......... 3</td>
<td></td>
</tr>
<tr>
<td>OTHER (SPECIFY) ....... 4</td>
<td>OTHER (SPECIFY) ....... 4</td>
<td>OTHER (SPECIFY) ....... 4</td>
<td></td>
</tr>
<tr>
<td>CHILD CARE ............ 5</td>
<td>CHILD CARE ............ 5</td>
<td>CHILD CARE ............ 5</td>
<td></td>
</tr>
</tbody>
</table>

GO TO K25A  GO TO K26A  GO TO SECTION L
L1. In the past twelve months, what was the total income of your household from all sources before taxes and other deductions? Please include your own income and the income of everyone living with you. Please include the money you have told me about from jobs and public assistance programs, as well as any sources we haven’t discussed, such as rent, interest, and dividends.

INTERVIEWER: IF AMOUNT IS LESS THAN $1,000 OR MORE THAN $100,000, CONFIRM: You say your household income was (AMOUNT) in the last twelve months. Is that correct? CORRECT ANSWER IF APPROPRIATE.

$ |___|___|___|,|___|___|___| ➔ GO TO L2

DON’T KNOW ........................................-2
REFUSED ...............................................-1

L1A. I just need to know a range. Can you tell me if it was . . .

Less than $5,000, ........................................ 1
$5,001 to $10,000, ...................................... 2
$10,001 to $15,000, .................................... 3
$15,001 to $20,000, .................................... 4
$20,001 to $25,000, .................................... 5
$25,001 to $30,000, .................................... 6
$30,001 to $40,000, .................................... 7
$40,001 to $60,000, or .................................. 8
More than $60,000? ..................................... 9
DON’T KNOW .........................................-2
REFUSED ...............................................-1
L2. In the past twelve months, have you given or loaned any money to friends or relatives?

YES .................................................................1
NO .................................................................2 ➔ GO TO L3

L2A. All together, during the past twelve months, how much money did you give or loan to friends or relatives?

$ |   |   |   |   |   |

DON’T KNOW ..................................................-2
REFUSED .........................................................-1

L3. IS MOTHER LIVING WITH FATHER OR LIVING WITH A CURRENT PARTNER?
(A4A1=1 OR 2 OR E2D=1)

YES .................................................................1
NO .................................................................2 ➔ GO TO L7

L4. Do you or your (husband/partner) have a bank account?

YES .................................................................1
NO .................................................................2 ➔ GO TO L5
MULTIPLE ACCOUNTS ...........................................3

L4A. (Is the account/Are the accounts) in your name, (his/her) name, or both?

CIRCLE ONE

MOTHER’S NAME ............................................. 1
HUSBAND/PARTNER’S NAME .................. 2
BOTH NAMES (JOINT ACCOUNT) ............. 3
BOTH JOINT AND SEPARATE ACCOUNTS ................................................. 4
SEPARATE ACCOUNTS ........................................ 5
L5. Do you or your (husband/partner) have a credit card? Include major credit cards and department store credit cards, but not gas credit cards.

YES .................................................................1
NO .................................................................2 ➔ GO TO L5B

L5A. Is the card in your name, (his/her) name, or both?

CIRCLE ONE

MOTHER’S NAME ............................................ 1
HUSBAND/PARTNER’S NAME ...................... 2
BOTH NAMES (JOINT CARD)......................... 3
BOTH JOINT AND SEPARATE
CARDS .......................................................... 4
SEPARATE CARDS ........................................... 5

L5B. Couples handle money differently. Which of the following do you do? Do you . . .

CIRCLE ONE

Keep your own money separate, .................. 1
Put some of your money together but keep the rest separate, or ......................... 2
Put all of your money together? ................. 3
DON'T KNOW .................................................. -2
REFUSED ....................................................... -1
L5C. Couples also make different arrangements for handling financial responsibilities, such as paying the rent, mortgage, or other household bills. In your household, who is usually responsible for making sure the bills get paid?

CIRCLE ONE

MOTHER USUALLY PAYS THE BILLS ...... 1
HUSBAND OR PARTNER
USUALLY PAYS THE BILLS................... 2
MOTHER AND HUSBAND OR PARTNER
PAY BILLS TOGETHER OR TAKE
TURNS/ALTERNATE MONTHS ............. 3
MOTHER AND HUSBAND OR PARTNER
HAVE SPECIFIC BILLS EACH IS
RESPONSIBLE FOR PAYING EACH
MONTH .................................................. 4
OTHER (E.G., SOMEONE ELSE IN
THE HOUSEHOLD IS RESPONSIBLE
FOR PAYING THE BILLS) ....................... 5

_________________________________________
DON’T KNOW ........................................ -2
REFUSED .............................................. -1

L5D. Who would you say controls the money in this household?

CIRCLE ONE

RESPONDENT ....................................... 1
HUSBAND/PARTNER ............................. 2
BOTH EQUALLY ................................. 3
OTHER (NOT SPECIFIED) ..................... 4

_________________________________________
DON’T KNOW ........................................ -2
REFUSED .............................................. -1
L6. Do you or your (husband/partner) own a car, truck or van?

YES ................................................................. 1
NO ................................................................. 2  END INTERVIEW
LEASE.............................................................-10

L6A. Can you rely on the (car/truck/van) to get you to school or work, or other places?

IF MORE THAN ONE CAR/TRUCK/VAN, ASK ABOUT THE ONE THAT WORKS THE BEST.

YES ................................................................. 1
NO ................................................................. 2

L6B. How much do you owe on your (car/truck/van)?

$ |___|___|,|___|___|___|

NOTHING.......................................................... 0
DON'T KNOW ...................................................-2
REFUSED .........................................................-1
LEASE.............................................................-10  END INTERVIEW

L6C. About how much could you get if you sold your (car/truck/van) now?

$ |___|___|,|___|___|___|

NOTHING.......................................................... 0
DON'T KNOW ...................................................-2

END INTERVIEW

L7. Do you have a bank account?

YES ..................................................................... 1
NO ..................................................................... 2
L8. Do you have a credit card? Include major credit cards and department store credit cards, but not gas credit cards.

YES ...............................................................1
NO .................................................................2

L9. Do you own a car, truck or van?

YES ...............................................................1
NO ................................................................. 2 ➔ END INTERVIEW
LEASE .................................................................-10

L9A. Can you rely on the (car/truck/van) to get you to school, work or other places?

IF MORE THAN ONE CAR/TRUCK/VAN, ASK ABOUT THE ONE THAT WORKS THE BEST.

YES ...............................................................1
NO .................................................................2

L9B. How much do you owe on your (car/truck/van)?

$ |____|____|____|____|
NOTHING ...................................................... 0
DON’T KNOW ..................................................-2
REFUSED .........................................................-1
LEASE .................................................................-10 ➔ END INTERVIEW

L9C. About how much could you get if you sold your (car/truck/van) now?

$ |____|____|____|____|
NOTHING ...................................................... 0
DON’T KNOW ...................................................d