



california
health
interview
survey

CHIS 2016
Child Questionnaire
Version 2.71- Korean
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(Children Ages 0-11 Answered by Adult Proxy Respondent)

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- California Department of Health Care Services
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NOTE: Each question in the CHIS questionnaires (adult, child, and adolescent) has a unique, sequential question number by section that follows the administration of the survey. In addition, the variable name (in the CHIS data file) associated with a question, appears in a box beneath the question number. Please consult the CHIS 2015 Data Dictionaries for additional information on variables, the population universe answering a specific question, and data file content.

SECTION A – DEMOGRAPHICS PART I, HEALTH CONDITIONS

PROGRAMMING NOTE QC15_A1:
SET CADATE = CURRENT DATE (YYYYMMDD);
IF AR = SKA AND GENDER OF CHILD IS KNOWN, SKIP TO QC15_A2;
ELSE CONTINUE WITH QC15_A1

QC15_A1 Some of the questions are based on (CHILD's) personal traits, like his or her age. So I will first ask you a few brief background questions.
 우선 (CHILD) 의 나이 같은 기본적인 인적 사항을 몇 가지 여쭙보겠습니다.

Is (CHILD) male or female?
 (CHILD) 은(는) 남자입니까 아니면 여자입니까?

CA1

MALE1
 FEMALE2
 REFUSED -7

QC15_A2 What is {his/her} date of birth?
 이 아이의 생년월일은 언제입니까?

CA2MON

_____ MONTH [HR: 1-12]

- | | |
|-------------|--------------|
| 1. JANUARY | 7. JULY |
| 2. FEBRUARY | 8. AUGUST |
| 3. MARCH | 9. SEPTEMBER |
| 4. APRIL | 10. OCTOBER |
| 5. MAY | 11. NOVEMBER |
| 6. JUNE | 12. DECEMBER |

CA2DAY

_____ DAY [HR: 1-31]

CA2YR

_____ YEAR [HR: 2004-2015]

REFUSED -7
 DON'T KNOW -8

**PROGRAMMING NOTE QC15_A3:
 IF QC15_A2 = -7 OR -8 (REFUSED/DON'T KNOW) CONTINUE WITH QC15_A3;
 ELSE SKIP TO QC15_A4**

QC15_A3 How old is {he/she}?
 (CHILD) 은(는) 몇 살입니까?

CA3

[INTERVIEWER NOTE: FOR AGES ABOVE 4 YRS OR 48 MO, DO NOT RECORD MONTHS OR PARTIAL YRS]

_____ YEARS

_____ MONTHS

REFUSED -7
 DON'T KNOW -8

QC15_A4 About how tall is (CHILD) now without shoes?
 (CHILD) 은(는) 현재 신발을 신지 않았을 때 신장이 대략 얼마나 됩니까?

CA4F/CA4I

**[IF NEEDED, SAY: "Your best guess is fine."]
 [IF NEEDED, SAY: "정확히 모르시겠으면 비슷하게라도 말씀해 주시면 됩니다."]**

_____ FEET _____ INCHES

CA4M/CA4C

_____ METERS _____ CENTIMETERS

CA4FMT

FEET/INCHES1
 METERS/CENTIMETERS2
 REFUSED -7
 DON'T KNOW -8

QC15_A5 About how much does (CHILD) weigh now without shoes?
 (CHILD) 은(는) 현재 신발을 신지 않았을 때 체중이 대략 얼마나 됩니까?

CA5P

**[IF NEEDED, SAY: "Your best guess is fine."]
 [IF NEEDED, SAY: "정확히 모르시겠으면 비슷하게라도 말씀해 주시면 됩니다."]**

_____ POUNDS

CA5K

_____ KILOGRAMS

CA5FMT

POUNDS1
 KILOGRAMS2
 REFUSED -7
 DON'T KNOW -8

**PROGRAMMING NOTE QC15_A5A:
 IF CAGE ≥ 3 YEARS GO TO PROGRAMMING NOTE QC15_A6;
 ELSE IF CAGE ≤ 3 YEARS CONTINUE WITH Q15QC15_A5A**

QC15_A5A Was (CHILD) ever breastfed or fed breast milk?
 (CHILD) (을/를) 키울 때 우유가 아니라 모유, 즉 엄마 젖을 먹인 적이 있습니까?

CA14

YES1
 NO2 [GO TO QC15_A8]
 REFUSED -7 [GO TO QC15_A8]
 DON'T KNOW -8 [GO TO QC15_A8]

QC15_A5B How old was (CHILD) when { he/she } stopped breastfeeding altogether?
 모유를 끊었을 때 (CHILD) (이)는 몇 살이었습니까?

CA15

_____ DAYS
 _____ WEEKS
 _____ MONTHS
 _____ YEARS

STILL BREASTFEEDING 93
 REFUSED -7
 DON'T KNOW -8

QC15_A5C How old was (CHILD) when you began giving {him/her} baby food or other solid foods?
 귀하가 (CHILD) 에게 이유식이나 고형식을 먹이기 시작한 것은 이 아이가 몇 살 때
 었습니까?

CA16

**[IF NEEDED SAY: "Solid food is anything other than milk, formula, juice, water,
 herbs or teas."]**
**[IF NEEDED SAY, "고형식이란 우유, 분유, 주스, 물, 약초 또는 차를 제외한 기타 식품을
 말합니다."]**

_____ MONTHS

NO SOLID FOOD YET 93
 REFUSED -7
 DON'T KNOW -8

PROGRAMMING NOTE QC15_A6:
IF CAGE < 5 YEARS GO TO QC15_A8;
ELSE CONTINUE WITH QC15_A6 AND IF CAGE = 5 YRS DISPLAY “Not including pre-school or nursery school,”

QC15_A6 {Not including pre-school or nursery school,} Did (CHILD) attend school last week?
 {프리스쿨이나 유아원은 제외하고} (CHILD) (이)는 지난 주에 학교에 다녔습니까?

- | | | | |
|-------------|---------------------|----|------------------------|
| CA42 | YES | 1 | [GO TO QC15_A8] |
| | NO | 2 | |
| | ON VACATION | 3 | |
| | HOME SCHOOLED | 4 | [GO TO QC15_A8] |
| | REFUSED | -7 | |
| | DON'T KNOW | -8 | |

PROGRAMMING NOTE QC15_A7:
IF CAGE = 5 YRS DISPLAY “Not including pre-school or nursery school,”

QC15_A7 {Not including pre-school or nursery school,} Did (CHILD) attend school during the last school year?
 {프리스쿨이나 유아원은 제외하고} (CHILD) (이)는 지난 학년도에 학교에 다녔습니까?

- | | | |
|-------------|--------------------|----|
| CA43 | YES | 1 |
| | NO | 2 |
| | HOMESCHOOLED | 3 |
| | REFUSED | -7 |
| | DON'T KNOW | -8 |

QC15_A8 In general, would you say (CHILD)'s health is excellent, very good, good, fair or poor?
 전반적으로 (CHILD) (이)의 건강 상태는 굉장히 좋습니다, 상당히 좋습니다, 좋은 편입니까? 그런대로 괜찮습니다, 아니면 좋지 않습니다?

- | | | |
|------------|------------------|----|
| CA6 | EXCELLENT | 1 |
| | VERY GOOD | 2 |
| | GOOD | 3 |
| | FAIR | 4 |
| | POOR | 5 |
| | REFUSED | -7 |
| | DON'T KNOW | -8 |

QC15_A9 Has a doctor ever told you that (CHILD) has asthma?
 의사로부터 (CHILD) (이)/가 천식이 있다는 말을 들은 적이 있습니까?

CA12

- YES1
- NO2 **[GO TO QC15_A25]**
- REFUSED -7 **[GO TO QC15_A25]**
- DON'T KNOW -8 **[GO TO QC15_A25]**

QC15_A10 Does {he/she} still have asthma?
 (CHILD) (이)/는 아직도 천식이 있습니까?

CA31

- YES1
- NO2
- REFUSED -7
- DON'T KNOW -8

QC15_A11 During the past 12 months, has {he/she} had an episode of asthma or an asthma attack?
 지난 12개월 동안, 이 아이가 천식 증상이 있었던 적이 있습니까?

CA32

- YES1
- NO2
- REFUSED -7
- DON'T KNOW -8

PROGRAMMING NOTE QC15_A12:
IF QC15_A10 = 2, -7, OR -8 (NO, REFUSED, DON'T KNOW) AND QC15_A11 = 2, -7, OR -8 (NO, REFUSED, DON'T KNOW) GO TO QC15_A16;
ELSE CONTINUE WITH QC15_A12

QC15_A12 During the past 12 months, how often has (CHILD) had asthma symptoms such as coughing, wheezing, shortness of breath, chest tightness, or phlegm? Would you say:
 지난 12개월 동안, (CHILD) 에게 기침, 쉼근거림, 숨가쁨, 가슴 답답함 또는 가래와 같은 천식 증상이 얼마나 자주 발생했습니까? 다음 중 선택해 주십시오.

CA12B

- Not at all,1
- 아무 증상도 없었습니까,1
- Less than every month,2
- 매 달 한 번도 안됐습니까,2
- Every month,3
- 매달,3
- Every week, or4
- 매주, 아니면4
- Every day?5
- 매일 있었습니까?5
- REFUSED -7
- DON'T KNOW -8

QC15_A13 During the past 12 months, has (CHILD) had to visit a hospital emergency room because of {his/her} asthma?
 지난 12 개월 동안, (CHILD) (이)/가 천식 때문에 병원 응급실에 간 적이 있습니까?

CA33

- YES1
- NO.....2 **[GO TO QC15_A15]**
- REFUSED -7 **[GO TO QC15_A15]**
- DON'T KNOW -8 **[GO TO QC15_A15]**

QC15_A14 Did you take (CHILD) to a hospital emergency room for {his/her} asthma because you were unable to see {his/her} doctor?
 (CHILD) (이)/가 천식 증세가 있을 때 귀하가 아이의 주치의나 전문의를 볼 수 없었기 때문에 병원 응급실로 데려간 적이 있습니까?

CA48

[ENTER 3 ONLY IF R VOLUNTEERS THAT HE/SHE DOESN'T HAVE A DOCTOR. DO NOT PROBE.]

- YES1
- NO.....2
- DOESN'T HAVE DOCTOR.....3
- REFUSED -7
- DON'T KNOW -8

QC15_A15 During the past 12 months, was {he/she} admitted to the hospital overnight or longer for {his/her} asthma?
 지난 12 개월 동안 이 아이가 천식 때문에 하룻밤 이상 병원에 입원한 적이 있습니까?

CA44

- YES1
- NO.....2
- REFUSED -7
- DON'T KNOW -8

QC15_A16 Is (CHILD) now taking a daily medication to control {his/her} asthma that was prescribed or given to you by a doctor?
 (CHILD) (이)/가 천식을 다스리기 위해 의사가 처방하거나 제공해 준 약을 현재 매일 복용하고 있습니까?

CA12A

[IF NEEDED, SAY: "This includes both oral medicine and inhalers. This is different from inhalers used for quick relief."]

[IF NEEDED, SAY: "입으로 복용하는 약과 코로 들이마시는 약을 둘 다 포함해서 말씀해 주십시오. 하지만, 즉각적인 효과를 보기 위해 사용하는 흡입제와는 다릅니다."]

- YES1
- NO.....2
- REFUSED -7
- DON'T KNOW -8

PROGRAMMING NOTE QC15_A17:
IF QC15_A10 = 1 (YES, STILL HAS ASTHMA) OR QC15_A11 = 1 (YES, EPISODE IN LAST 12 MOS),
GO TO QC15_A21;
ELSE CONTINUE WITH QC15_A17

QC15_A17 During the past 12 months, how often has (CHILD) had asthma symptoms such as coughing, wheezing, shortness of breath, chest tightness, or phlegm? Would you say:
 지난 12개월 동안, (CHILD) 에게 기침, 씨근거림, 숨가쁨, 가슴 답답함 또는 가래와 같은 천식 증상이 얼마나 자주 발생했습니까? 다음 중에서 선택해 주십시오.

CA40

- Not at all,1
전혀 발생하지 않았음.....1
- Less than every month,.....2
몇 달에 한 번2
- Every month,.....3
매달3
- Every week, or4
매주4
- Every day?5
매일5
- REFUSED -7
- DON'T KNOW -8

QC15_A18 During the past 12 months, has (CHILD) had to visit a hospital emergency room because of {his/her} asthma?
 지난 12개월 동안, (CHILD) (이) 의 천식 증세로 병원 응급실에 간 적이 있습니까?

CA41

- YES1
- NO2 **[GO TO QC15_A20]**
- REFUSED -7 **[GO TO QC15_A20]**
- DON'T KNOW -8 **[GO TO QC15_A20]**

QC15_A19 Did you take (CHILD) to a hospital emergency room for {his/her} asthma because you were unable to see {his/her} doctor?
 (CHILD) (이)가 천식 증세가 있을 때 귀하가 아이의 주치의나 전문의를 볼 수 없었기 때문에 병원 응급실로 데려간 간 적이 있습니까?

CA49

[ENTER 3 ONLY IF R VOLUNTEERS THAT HE/SHE DOESN'T HAVE A DOCTOR. DO NOT PROBE.]

- YES1
- NO2
- DOESN'T HAVE DOCTOR.....3
- REFUSED -7
- DON'T KNOW -8

QC15_A20 During the past 12 months, was {he/she} admitted to the hospital overnight or longer for {his/her} asthma?
 지난 12 개월 동안 (CHILD) (은)/는 천식 때문에 하룻밤 이상 병원에 입원한 적이 있습니까?

CA45

YES1
 NO.....2
 REFUSED -7
 DON'T KNOW -8

QC15_A21 During the past 12 months, how many days of day care or school did (CHILD) miss due to asthma?
 지난 12 개월 동안, 천식 때문에 (CHILD) (이)가 데이 케어나 학교에 나가지 못했던 게 며칠이나 됩니까?

CA34

_____ NUMBER OF DAYS
 CHILD NOT IN DAYCARE OR SCHOOL..... 93
 REFUSED -7
 DON'T KNOW -8

QC15_A22 Have (CHILD'S) doctors or other medical providers worked with you to develop a plan so that you know how to take care of {his/her} asthma?
 (CHILD) (이)의 담당 의사나 다른 의료 제공자가 자녀분의 천식을 관리하는 방법을 알려주기 위해 귀하와 함께 천식 관리 계획서를 작성한 적이 있습니까?

CA35

YES1
 NO.....2 [GO TO QC15_A24]
 REFUSED -7 [GO TO QC15_A24]
 DON'T KNOW -8 [GO TO QC15_A24]

QC15_A23 Do you have a written or printed copy of this plan?
 이 천식 관리계획서 사본을 갖고 계십니까?

CA50

[IF NEEDED, SAY: "This can be an electronic or hard copy."
 [IF NEEDED, SAY: "전자 사본, 인쇄 사본 모두 해당됩니다."]

YES1
 NO.....2
 REFUSED -7
 DON'T KNOW -8

QC15_A24 How confident are you that you can control and manage (CHILD’s) asthma? Would you say you are very confident, somewhat confident, not too confident, or not at all confident?
 귀하는 (CHILD) (이)의 천식을 억제 또는 관리하는 데 얼마나 자신이 있습니까? 매우 자신이 있다, 약간 자신이 있다, 별로 자신이 없다, 전혀 자신이 없다
 중에서 선택해 주십시오.

CA51

- VERY CONFIDENT1
- SOMEWHAT CONFIDENT2
- NOT TOO CONFIDENT3
- NOT AT ALL CONFIDENT4
- REFUSED -7
- DON'T KNOW -8

QC15_A25 Does (CHILD) currently have any physical, behavioral, or mental conditions that limit or prevent {him/her} from doing childhood activities usual for {his/her} age?
 (CHILD) (이)는 자기 나이에 맞는 정상 활동을 어렵게 하거나 지장을 주는 신체적, 정신적, 또는 행동 상의 증세를 갖고 있습니까?

CA7

- YES1
- NO2 **[GO TO QC15_B1]**
- REFUSED -7 **[GO TO QC15_B1]**
- DON'T KNOW -8 **[GO TO QC15_B1]**

QC15_A26 What condition does (CHILD) have?
 어떤 증세입니까?

CA10A

[CODE ALL THAT APPLY]
[PROBE: “Any others?”]
[PROBE: “다른 건강 상태도 있습니까?”]

- ADD/ADHD1
- ASPERGER’S SYNDROME2
- AUTISM.....3
- CEREBRAL PALSY4
- CONGENITAL HEART DISEASE5
- CYSTIC FIBROSIS6
- DIABETES7
- DOWN’S SYNDROME8
- EPILEPSY9
- DEAFNESS OR OTHER HEARING PROBLEM ... 10
- MENTAL RETARDATION, OTHER THAN
 DOWN’S..... 11
- MUSCULAR DYSTROPHY 12
- NEUROMUSCULAR DISORDER 13
- ORTHOPEDIC PROBLEM (BONES OR JOINTS) 14
- SICKLE CELL ANEMIA 15
- BLINDNESS OR OTHER VISION PROBLEM..... 16
- OTHER (SPECIFY: _____) 91
- REFUSED -7
- DON'T KNOW -8

QC15_A27 Have (CHILD's) doctors or other medical providers worked with you to develop a plan so that you know how to take care of {his/her} (INSERT CONDITION(S) FROM QC15_A26)?
 (CHILD) (이)의 담당 의사나 다른 의료 제공자들이 자녀분의(INSERT CONDITION(S) 4-91 FROM QC15_A27) 증상을 관리하는 방법을 알려주기 위해 귀하와 함께 관리 계획을 세운 적이 있습니까?

CA55

- YES1
- NO.....2 **[GO TO QC15_A29]**
- REFUSED -7 **[GO TO QC15_A29]**
- DON'T KNOW -8 **[GO TO QC15_A29]**

QC15_A28 Do you have a written or printed copy of this plan?
 이 관리계획서 사본을 갖고 계십니까?

CA56

[IF NEEDED, SAY: "This can be an electronic or hard copy."]
[IF NEEDED, SAY: "전자 사본, 인쇄 사본 모두 해당됩니다."]

- YES1
- NO.....2
- REFUSED -7
- DON'T KNOW -8

QC15_A29 How confident are you that you can control and manage (CHILD's) (INSERT CONDITION(S) FROM QC15_A26)? Would you say you are very confident, somewhat confident, not too confident, or not at all confident?
 귀하께서는 (CHILD)(이)의 (INSERT CONDITION(S) FROM QC15_A27) 증상을 억제하고 관리하는 데 얼마나 자신이 있으십니까? 매우 자신이 있다, 약간 자신이 있다, 별로 자신이 없다, 전혀 자신이 없다 중에서 선택해 주십시오.

CA57

- VERY CONFIDENT1
- SOMEWHAT CONFIDENT2
- NOT TOO CONFIDENT3
- NOT AT ALL CONFIDENT4
- REFUSED -7
- DON'T KNOW -8

SECTION B – DENTAL HEALTH

PROGRAMMING NOTE QC15_B1:

IF CAGE > 2 YEARS, GO TO QC15_B2 AND DISPLAY “Now I’m going to ask about (CHILD)’s dental health”;
ELSE CONTINUE WITH QC15_B1

QC15_B1 These questions are about (CHILD)’s dental health. Does (CHILD) have any teeth yet?
 다음 질문들은(CHILD) (이)의 치아 건강에 관한 겁니다. (CHILD) (이)는 치아가 있습니까?

CC1

- YES1
- NO2 **[GO TO SECTION C]**
- REFUSED -7 **[GO TO SECTION C]**
- DON'T KNOW -8 **[GO TO SECTION C]**

QC15_B2 {Now I’m going to ask about (CHILD)’s dental health.}
 지금부터는 (CHILD) (이)의 치아 건강에 관해 질문을 드리겠습니다.

About how long has it been since your child last visited a dentist or dental clinic? Include dental hygienists and all types of dental specialists.

자녀분이 가장 최근에 치과 의사에게 진료받거나 치과 클리닉을 다녀온 지 얼마나 지났습니까? 치위생사 등 치과 계통 전문가를 모두 포함해서 대답해 주십시오.

CC5

- HAS NEVER VISITED0
- 6 MONTHS AGO OR LESS1
- MORE THAN 6 MONTHS UP TO 1YEAR AGO2
- MORE THAN 1 YEAR UP TO 2 YEARS AGO3
- MORE THAN 2 YEARS UP TO 5 YEARS AGO4
- MORE THAN 5 YEARS AGO5
- REFUSED -7
- DON'T KNOW -8

PROGRAMMING NOTE QC15_B3:
IF QC15_B2 = 0 (HAD NEVER VISTED) or ≥ 3 (VISITED MORE THAN A YEAR AGO) CONTINUE WITH QC15_B3;
ELSE SKIP TO QC15_B4;
IF QC15_B2 = 0 (HAS NEVER VISITED), DISPLAY “never”;
ELSE IF QC15_B2 ≥ 3 DISPLAY “not” AND “in the past year”

QC15_B3 What is the main reason your child has {never/not} visited a dentist {in the past year}?
 {지난 한 해 동안} 자녀분이 한 번도 치과에 가지 않은 주된 이유는 무엇 때문이었습니까?

CB23

- NO REASON TO GO/NO PROBLEMS1
- NOT OLD ENOUGH2
- COULD NOT AFFORD IT/TOO EXPENSIVE/NO INSURANCE 3
- FEAR, DISLIKES GOING4
- DO NOT HAVE/KNOW A DENTIST5
- CANNOT GET TO THE OFFICE/CLINIC6
- NO DENTIST AVAILABLE/NO APPOINTMENTS AVAILABLE 7
- DIDN'T KNOW WHERE TO GO8
- HOURS NOT CONVENIENT9
- SPEAK A DIFFERENT LANGUAGE 10
- OTHER..... 91
- REFUSED -7
- DON'T KNOW -8

QC15_B4 Do you now have any type of insurance that pays for part or all of your child's dental care?

CC7A

귀하는 현재 (CHILD)(이)의 치과 진료비의 전부 또는 일부를 부담하는 의료보험이 아무 종류라도 있으십니까?

[IF NEEDED: “Include dental insurance, prepaid dental plans such as HMOs, or government plans such as Medi-Cal or Healthy Families.”]

[IF NEEDED: “치과 보험, HMO 같은 선불 치과 플랜, Medi-Cal 또는 Healthy Families 같은 정부 플랜을 포함시키십시오.”]

- YES1
- NO2 **[GO TO QC15_B6]**
- REFUSED -7
- DON'T KNOW -8

QC15_B5 During the past 12 months, was there any time when {he/she} had no dental insurance at all?
 지난 12 개월 동안, 이 아이에게 치과 보험이 전혀 없던 때가 있었습니까?

CB25

- YES1
- NO2 **[GO TO QC15_B7]**
- REFUSED -7 **[GO TO QC15_B7]**
- DON'T KNOW -8 **[GO TO QC15_B7]**

PROGRAMMING NOTE QC15_B6:
IF QC15_B4=2 (NO CURRENT DENTAL INSURANCE) OR QC15_B5 = 1 (HAD NO DENTAL INSURANCE AT SOME TIME IN THE PAST 12 MONTHS) CONTINUE WITH QC15_B6;
ELSE GO TO QC15_B7

QC15_B6 What is the ONE MAIN reason (CHILD) {does not have any insurance/did not have any dental insurance during the time {he/she} wasn't covered}?
 보험이 없던 기간 중, (CHILD) (이)가 아무런 {보험 혜택도 받지 못했던/ 치과 보험 혜택도 받지 못했던} 가장 주된 이유는 무엇이었습니까?

CB26

- CAN'T AFFORD/TOO EXPENSIVE1
- NOT ELIGIBLE DUE TO WORKING STATUS/
 CHANGED EMPLOYER/LOST JOB2
- NOT ELIGIBLE DUE TO HEALTH OR OTHER
 PROBLEMS3
- NOT ELIGIBLE DUE TO CITIZENSHIP/
 IMMIGRATION STATUS4
- FAMILY SITUATION CHANGED5
- DON'T BELIEVE IN INSURANCE6
- SWITCHED INSURANCE COMPANIES, DELAY
 BETWEEN7
- CAN GET HEALTH CARE FOR FREE/PAY FOR
 OWN CARE8
- OTHER (SPECIFY: _____) 91
- REFUSED -7
- DON'T KNOW -8

QC15_B7 During the past 12 months, was there any time when (CHILD) needed dental care, including checkups, but didn't get it?
 지난 12 개월 동안 (CHILD)가 정기 검사를 포함해서 치과 진료를 받아야 했지만 그렇지 못했던 적이 한 번이라도 있었습니까?

CB27

- YES1
- NO2 **[GO TO QC15_B9]**
- REFUSED -7 **[GO TO QC15_B9]**
- DON'T KNOW -8 **[GO TO QC15_B9]**

QC15_B8 What is the ONE MAIN reason {he/she} didn't get the dental care?
 지난 12 개월 동안 (CHILD)가 정기 검사를 포함해서 치과 진료를 받아야 했지만 그렇지 못했던 적이 한 번이라도 있었습니까?

CB28

- COULDN'T GET APPOINTMENT1
- MY INSURANCE NOT ACCEPTED2
- INSURANCE DID NOT COVER3
- LANGUAGE PROBLEMS4
- TRANSPORTATION PROBLEMS.....5
- HOURS NOT CONVENIENT6
- NO CHILD CARE FOR CHILDREN AT HOME7
- FORGOT OR LOST REFERRAL.....8
- I DIDN'T HAVE TIME9
- COULDN'T AFFORD/COST TOO MUCH 10
- NO INSURANCE..... 11
- OTHER (SPECIFY: _____)..... 91
- REFUSED -7
- DON'T KNOW -8

QC15_B9 During the past 12 months, did (CHILD) have to visit a hospital emergency room because of a dental problem?
 지난 12 개월 동안, (CHILD)(이)가 치과 관련 문제 때문에 병원 응급실에 가야 했던 적이 있었습니까?

CB29

- YES1
- NO2
- REFUSED -7
- DON'T KNOW -8

QC15_B10 During the past 12 months, did (CHILD) have to visit an urgent care clinic because of a dental problem?
 지난 12 개월 동안, (CHILD)가 치아 관련 문제 때문에 어전트 케어(urgent care) 에 가야 했던 적이 있었습니까?

CB30

- YES1
- NO2
- REFUSED -7
- DON'T KNOW -8

PROGRAMMING NOTE QC15_B11:
IF CAGE ≥ 6, SKIP TO SECTION C;
ELSE CONTINUE WITH QC15_B11

QC15_B11 When (CHILD NAME/AGE/SEX) goes to sleep or takes a nap, does ({he/she}) sleep with a bottle in {his/her} mouth?
 이 아이는 밤에 자거나 낮잠을 잘 때, 젖병을 물고 잡니까?

CB31

- YES1
- NO2 **[SKIP TO SECTION C]**
- REFUSED -7 **[SKIP TO SECTION C]**
- DON'T KNOW -8 **[SKIP TO SECTION C]**

QC15_B12 What is usually in the bottle; for example, mother's milk, regular milk, chocolate milk, water, juice, or another drink with sugar in it?
 그 젖병 안에는 보통 무엇이 들어있습니까? 모유나 일반 우유, 초콜렛 우유, 물, 주스, 아니면 가당 음료수 같은 것들을 예로 들 수 있습니다.

CB32

[CODE ALL THAT APPLY]

- MOTHER'S MILK1
- REGULAR MILK2
- CHOCOLATE MILK, JUICE, OR OTHER
- SUGARY DRINK3
- WATER4
- OTHER 91
- REFUSED -7
- DON'T KNOW -8

SECTION C – DIET, PHYSICAL ACTIVITY, PARK USE

**PROGRAMMING NOTE QC15_C1:
IF CAGE < 2 YEARS, GO TO PROGRAMMING NOTE QC15_C18;
ELSE CONTINUE WITH QC15_C1**

QC15_C1 Now I'm going to ask you about the foods your child ate yesterday, including meals and snacks.

지금부터는 자녀분이 어제 먹은 음식에 대해 질문을 드리겠습니다. 주식과 간식을 모두 포함해서 대답해 주십시오

Yesterday, how many servings of fruit, such as an apple or a banana, did {he/she} eat?
이 아이는 어제 사과 또는 바나나 같은 과일을 몇 인분이나 먹었습니까?

CC13

[IF NEEDED, SAY: “Servings are self-defined. A serving is the child’s regular portion of this food.”]

[IF NEEDED, SAY: “일인분”의 양은 사람에 따라 다릅니다. 일인분은 자녀가 보통 이 식품을 한 번에 먹는 분량을 말합니다.]

_____ SERVINGS [HR: 0-20; SR 0-9]

REFUSED -7

DON'T KNOW -8

QC15_C2 Yesterday, how many servings of vegetables like green salad, green beans, or potatoes did {he/she} have? Do not include fried potatoes.

이 아이는 어제, 야채 샐러드, 초록색 깍지콩(그린빈)이나 감자 같은 채소를 몇 인분이나 먹었습니까? 감자 튀김은 포함시키지 마십시오.

CC31

_____ SERVINGS [HR: 0-20; SR 0-4]

QC15_C3 [Yesterday,] how many glasses or cans of soda that contain sugar, such as Coke, did your child drink? Do not include diet soda.
 [어제,] 이 아이는 콜라 등 설탕이 들어있는 소다, 즉 탄산 음료를 몇잔 또는 몇 캔이나 마셨습니까? 다이어트 소다는 포함시키지 마십시오.

CC49

[IF NEEDED, SAY: “Do not include canned or bottled juices or teas.”]
[IF NEEDED, SAY: “캔 또는 병에 들어 있는 주스나 차는 포함시키지 마십시오.”]

_____ GLASSES, CANS OR BOTTLES

REFUSED -7
 DON'T KNOW -8

QC15_C4 [Yesterday,] how many glasses or cans of sweetened fruit drinks, sports, or energy drinks, did your child drink?
 [어제,] 귀하의 자녀는 가당 과일 음료, 스포츠 또는 에너지 음료를 몇 잔 또는 몇 캔이나 마셨습니까?

CC50

[IF NEEDED, SAY: “Such as lemonade, Gatorade, Snapple, or Red Bull.”]
[IF NEEDED, SAY: “레모네이드, 게토레이드, 스내플 또는 레드불 같은 음료.”]

[DO NOT READ. FOR INTERVIEWER INFORMATION ONLY. THIS ALSO INCLUDES DRINKS SUCH AS: FRUIT JUICES OR DRINKS YOU MADE AT HOME AND ADDED SUGAR TO, KOOL-AID, TAMPICO, HAWAIIAN PUNCH, CRANBERRY COCKTAIL, HI-C, SNAPPLE, SUGAR CANE JUICE, AND VITAMIN WATER. DO NOT INCLUDE: 100% FRUIT JUICES OR SODA, YOGURT DRINKS, CARBONATED WATER, OR FRUIT-FLAVORED TEAS.]

_____ GLASSES, CANS, OR BOTTLES

REFUSED -7
 DON'T KNOW -8

QC15_C5 Now think about the *past week*. In the past 7 days, how many times did {he/she} eat fast food? Include fast food meals eaten at school or at home, or at fast food restaurants, carryout, or drive thru.
 지금부터는 지난 한 주에 대해서 생각해 주십시오. 지난 7 일 동안, 자녀분은 패스트 푸드를 몇 번이나 먹었습니까? 학교나 가정, 또는 패스트 푸드 식당에서 먹거나, 캐리아웃 또는 드라이브 스루를 통해서 사먹은 패스트푸드 음식을 포함시키십시오.

CC32

[IF NEEDED, SAY: “Such as food you get at McDonald’s, KFC, Panda Express or Taco Bell.”]
[IF NEEDED, SAY: “맥도널즈, KFC, 팬더 익스프레스, 타코벨 등에서 사 먹은 음식 같은.”]

_____ TIMES [HR: 0-20; SR 0-4]

REFUSED -7
 DON'T KNOW -8

PROGRAMMING NOTE QC15_C6:
IF QC15_A6 = 4 (HOME SCHOOLED LAST WEEK) OR IF QC15_A7= 3 (HOME SCHOOLED LAST YEAR), GO TO PROGRAMMING NOTE QC15_C13;
ELSE IF QC15_A6 = 1 (ATTENDED SCHOOL LAST WEEK), CONTINUE WITH QC15_C6 AND DISPLAY “How many days in the past week”;
IF QC15_A7 = 1 (ATTENDED SCHOOL LAST YEAR), CONTINUE WITH QC15_C6 AND DISPLAY “During the school year, on how many days during a typical week”;
ELSE GO TO PROGRAMMING NOTE QC15_C13

QC15_C6 Now I’m going to ask you about physical activity.
 지금부터는 신체 활동에 대해 질문 드리겠습니다.

{How many days in the past week/During the school year, on how many days during a typical week} did (CHILD) walk home from school?
 {지난 주에 (CHILD) 이(가) 걸어서 학교에서 집으로 온 날이 며칠이나 됩니까? 이번 학년도(school year) 동안, (CHILD) 이(가) 학교에서 집으로 걸어서 온 날이 보통 한 주에 며칠이나 됩니까?}

CC40

[IF R SAYS CHILD BIKES OR SKATEBOARDS HOME, SAY, “I’ll ask about those next.”]

[IF R SAYS CHILD BIKES OR SKATEBOARDS HOME, SAY, “그것들에 대해서는 다음에 질문 드리겠습니다.”]

[IF CHILD DOES NOT GO DIRECTLY HOME FROM SCHOOL, INCLUDE # OF DAYS WALKED, ETC. TO CHILDCARE, RELATIVE’S HOME, AFTER-SCHOOL PROGRAM, ETC.]

_____ DAYS
 REFUSED -7
 DON'T KNOW -8

PROGRAMMING NOTE QC15_C7:
IF QC15_C6= 0 (DAYS), -7, OR -8, GO TO QC15_C8;
ELSE IF QC15_C6 > 0 (DAYS) CONTINUE WITH QC15_C7;
IF QC15_A6 = 1 (ATTENDED SCHOOL LAST WEEK) DISPLAY “does”;
IF QC15_A7 = 1 (ATTENDED SCHOOL LAST YEAR) DISPLAY “did”

QC15_C7 About how many minutes {did/does} it take {him/her} without any stops?
 자녀분이 중간에 한 번도 쉬지 않고 온 경우, 대략 몇 분 정도 {걸렸습니까/ 걸립니까?}

CC41

_____ MINUTES
 REFUSED -7 [GO TO QC15_C9]
 DON'T KNOW -8 [GO TO QC15_C9]

QC15_C8 Could {he/she} walk home from school in 30 minutes or less?
 이 아이는 걸어서 학교에서 집까지 30분 이내에 올 수 있습니까?

CC42

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QC15_C9 {How many days in the past week/During the school year, on how many days during a typical week} did (CHILD) bike or skateboard home from school?
 {지난 한 주 동안/이번 학년도 동안} (CHILD) (이)가 자전거 또는 스케이트 보드를 타고 학교에서 집으로 온 날은 {며칠이나/ 보통 한 주에 며칠이나} 됩니까?

CC43

[INTERVIEWER NOTE: THIS INCLUDES KIDS WHO RIDE ROLLERBLADES, ROLLERSHOES OR NON-MOTORIZED SCOOTERS HOME FROM SCHOOL.]

[IF CHILD DOES NOT GO DIRECTLY HOME FROM SCHOOL, INCLUDE # OF DAYS WALKED, ETC. TO CHILDCARE, RELATIVE'S HOME, AFTER-SCHOOL PROGRAM, ETC.]

_____ DAYS

REFUSED -7
 DON'T KNOW -8

PROGRAMMING NOTE QC15_C10:
IF QC15_C9 = 0 (DAYS), -7 OR -8, GO TO PROGRAMMING NOTE QC15_C11;
ELSE IF QC15_C9 > 0 DAYS, CONTINUE WITH QC15_C10;
IF QC15_A6 = 1, DISPLAY "does";
ELSE IF QC15_A7 = 1, DISPLAY "did"

QC15_C10 About how many minutes {did/does} it take {him/her} without any stops?
 자녀분이 중간에 한 번도 쉬지 않고 온 경우, 대략 몇 분 정도 {걸렸습니까/ 걸립니까}?

CC44

[IF NEEDED, SAY: "To bicycle or skateboard home from school."]
[IF NEEDED, SAY: "자전거 또는 스케이트보드를 타고 학교에서 집으로 오는 경우."]

_____ MINUTES **[GO TO PN QC15_C15]**

REFUSED -7 **[GO TO PN QC15_C12]**
 DON'T KNOW -8 **[GO TO PN QC15_C12]**

PROGRAMMING NOTE QC15_C11:
IF QC15_C7 ≤ 30 MINUTES OR QC15_C8 = 1 THEN GO TO PROGRAMMING NOTE QC15_C12;
ELSE CONTINUE WITH QC15_C11

QC15_C11 Could {he/she} bike or skateboard home from school in 30 minutes or less?
 자녀분은 자전거 또는 스케이트보드를 타고 학교에서 집까지 30분 이내에 올 수 있습니까?

CC45

YES1
 NO.....2
 REFUSED -7
 DON'T KNOW -8

PROGRAMMING NOTE QC15_C12:
IF QC15_A6 = 1 (ATTENDED SCHOOL LAST WEEK) OR QC15_A7 = 1 (ATTENDED SCHOOL LAST YEAR) THEN CONTINUE WITH QC15_C12;
ELSE SKIP TO PROGRAMMING NOTE QC15_C13

QC15_C12 What is the name of the school (CHILD) goes to or last attended?
 (CHILD) 이(가) 현재 다니고 있거나 마지막으로 다녔던 학교의 이름은 무엇입니까?

CB22

[INTERVIEWER NOTE: RECORD VERBATIM, ASK FOR SPELLING IF NECESSARY]

_____ NAME OF SCHOOL

CHILD NOT IN SCHOOL0
 PRE-SCHOOL/DAYCARE1
 KINDERGARTEN.....2
 ELEMENTARY3
 INTERMEDIATE4
 JUNIOR HIGH.....5
 MIDDLE SCHOOL6
 CHARTER.....7
 OTHER (SPECIFY: _____)..... 91
 REFUSED -7
 DON'T KNOW -8

PROGRAMMING NOTE QC15_C13:
IF CAGE < 5, SKIP TO PN QC15_C15;
ELSE CONTINUE WITH QC15_C15

QC15_C13 Not including school PE, on how many days of the past 7 days was (CHILD) physically active for at least 60 minutes total?
 (CHILD) 이(가) 학교 체육시간(PE)을 제외하고, 지난 7일 동안 하루에 총 60분 이상 신체 활동을 한 날은 며칠이나 됩니까?

CC35

_____ DAYS [HR: 0-7]

REFUSED -7
 DON'T KNOW -8

QC15_C14 During a typical week, on how many days is (CHILD) physically active for at least 60 minutes total per day? Do not include PE.
 보통 한 주 동안, (CHILD) (이)가 하루에 총 60분 이상 신체 활동을 하는 날은 며칠이나 됩니까? 체육 수업은 포함시키지 마십시오.

CC51

[IF NEEDED, SAY: “Add up the time (he/she) was active for each day of the past 7. Then tell me how many days (he/she) active for at least 60 minutes.”]

[IF NEEDED, SAY: “지난 7일 동안, 이 자녀가 하루에 신체 활동을 한 시간을 더하십시오. 그 다음에 60분 이상 신체 활동을 한 일수를 말씀해 주십시오.”]

_____ DAYS [HR: 0-7]

REFUSED -7
 DON'T KNOW -8

PROGRAMMING NOTE QC15_C15
IF CAGE ≤ 1 YEAR GO TO PROGRAMMING NOTE QC15_C16
ELSE IF CAGE > 1 YEAR, CONTINUE WITH QC15_C15

QC15_C15 The next questions are about the time {your child/CHILD} spends mostly sitting when {he/she} is not in school or doing homework. During the weekends, about how much time does {your child/CHILD} spend on a typical or usual weekend day sitting and watching TV, playing computer games, talking with friends or doing other sitting activities?

CC53

다음 질문들은 (CHILD) (이)가 학교에 있지 않거나 숙제를 하고 있지 않을 때 주로 앉아서 보내는 시간에 대한 것입니다. (CHILD) (이)는 주말에 TV 시청, 컴퓨터 게임, 친구들과 이야기, 등을 하면서 앉아서 보내는 시간이 보통 몇시간 정도 됩니까?

_____ HOURS _____ MINUTES

REFUSED -7
 DON'T KNOW -8

PROGRAMMING NOTE QC15_C16:
IF CAGE ≤ 1 YEAR GO TO PN QC15_C17;
ELSE IF CAGE > 1 YEAR, CONTINUE WITH QC15_C16

QC15_C16 During the weekdays, about how much time does {your child/CHILD} spend on a typical or usual week day sitting and watching TV, playing computer games, talking with friends or doing other sitting activities?

CC52

(CHILD) (이)는 주중에 TV 시청, 컴퓨터 게임, 친구들과 이야기, 등을 하면서 앉아서 보내는 시간이 보통 몇시간 정도 됩니까?

_____ HOURS _____ MINUTES

REFUSED -7
 DON'T KNOW -8

**PROGRAMMING NOTE QC15_C17:
IF CAGE < 1 GO TO QC15_D1;
ELSE CONTINUE WITH QC15_C**

QC15_C17 Has (CHILD) been to a park, playground, or open space in the past 30 days?
(CHILD) (이)는 지난 30일 동안, 공원이나 놀이터, 또는 공터에 간 적이 있습니까?

CC37

YES1
NO2
REFUSED -7
DON'T KNOW -8

QC15_C18 Is there a park, playground, or open space within 30 minutes walking distance of your home?
집에서 걸어갈 수 있는 거리에 공원이나 놀이터나 공터가 있습니까?

CC36

YES1
NO2
REFUSED -7
DON'T KNOW -8

QC15_C19 Do you strongly agree, agree, disagree, or strongly disagree with the following statement?
제가 읽어드릴 문장에 대해, 전적으로 동의함, 동의함, 동의하지 않음, 전혀 동의하지 않음
중에서 하나를 선택해 주십시오.

The park or playground closest to where I live is safe during the day.
우리 집에서 가장 가까운 곳에 있는 공원이나 놀이터는 낮시간에 안전하다.

CC39

STRONGLY AGREE1
AGREE2
DISAGREE3
STRONGLY DISAGREE4
DON'T KNOW -7
REFUSED -8

QC15_C20

The park or playground closest to where I live is safe at night.
우리 집에서 가장 가까운 곳에 있는 공원이나 놀이터는 밤에 안전하다.

CC46

[IF NEEDED, SAY: “Do you strongly agree, agree, disagree, or strongly disagree?”]
[IF NEEDED, SAY: “전적으로 동의, 동의, 동의하지 않음, 전혀 동의하지 않음 중에서 하나를 선택해 주십시오.”]

- STRONGLY AGREE.....1
- AGREE.....2
- DISAGREE.....3
- STRONGLY DISAGREE.....4
- REFUSED -7
- DON'T KNOW -8

SECTION D – HEALTH CARE ACCESS AND UTILIZATION

QC15_D1 The next questions are about where (CHILD) goes for health care.
 지금부터는 (CHILD)(이)의 의료기관 방문에 관해 질문을 드리겠습니다.

Is there a place you usually take {him/her} to when {he/she} is sick or you need advice about {his/her} health?
 자녀분이 아프거나 건강에 관한 조언이 필요할 때 보통 귀하가 아이를 데리고 가는 곳이 있습니까?

CD1

- YES1
- NO2 **[GO TO QC15_D3]**
- DOCTOR/(HIS/HER) DOCTOR3
- KAISER4
- MORE THAN ONE PLACE5
- REFUSED -7
- DON'T KNOW -8

PROGRAMMING NOTE QC15_D2:
IF QC15_D1 = 1, 5, -7, OR -8, DISPLAY “What kind of place do you take {him/her} to most often —a medical”;
ELSE IF QC15_D1 = 3 DISPLAY “Is {his/her} doctor in a private”;
ELSE IF QC15_D1 = 4, FILL QC15_D2 = 1 AND GO TO PN QC15_D3

QC15_D2 {What kind of place do you take {him/her} to most often—a medical/Is {his/her} doctor a private} doctor’s office, a clinic or hospital clinic, an emergency room, or some other place?
 {자녀분을 가장 자주 데려가시는 곳은 개인 닥터 오피스, 클리닉, 종합병원, 응급실, 또는 기타 다른 곳 중 어디입니까? / 자녀분의 주치의는 개인 닥터 오피스, 클리닉, 종합병원, 응급실, 기타 다른 곳 중 어디에 소속되어 있습니까?}

CD3

- DOCTOR’S OFFICE/KAISER/OTHER HMO1
- CLINIC/HEALTH CENTER/HOSPITAL CLINIC2
- EMERGENCY ROOM.....3
- SOME OTHER PLACE (SPECIFY: _____) ... 91
- NO ONE PLACE 94
- REFUSED -7
- DON'T KNOW -8

PROGRAMMING NOTE QC15_D3:
IF QC15_A13 = 1 (YES WENT TO ER PAST 12 MONTHS FOR ASTHMA) OR IF QC15_A18 = 1 (YES WENT TO ER PAST 12 MONTHS FOR ASTHMA) OR IF QC15_A27 = 1 (YES WENT TO ER PAST 12 MONTHS FOR OTHER CONDITION), MARK YES ON QC15_D3 AND GO TO QC15_D4;
ELSE CONTINUE WITH QC15_D3

QC15_D3 During the past 12 months, did (CHILD) visit a hospital emergency room?
 지난 12 개월 동안, (CHILD) (이)가 병원 응급실에 간 적이 있습니까?

CD12

- YES1
- NO2
- REFUSED -7
- DON'T KNOW -8

QC15_D4 During the past 12 months, how many times has (CHILD) seen any kind of medical doctor?
 지난 12 개월 동안, (CHILD) (이)가 종류와 상관없이 의사의 진료를 받은 것은 몇 번입니까?

CD6

- _____ TIMES
- REFUSED -7
 - DON'T KNOW -8

PROGRAMMING NOTE QC15_D5:
IF QC15_D4 > 0, GO TO PROGRAMMING NOTE QC15_D6;
ELSE IF QC15_D4 = 0, -7, OR -8, CONTINUE WITH QC15_D5

QC15_D5 About how long has it been since {he/she} last saw a medical doctor?
 마지막으로 자녀분이 의사를 만난 것은 대략 얼마 전입니까?

CD7

- ONE YEAR AGO OR LESS1
- MORE THAN 1 YEAR UP TO 2 YEARS AGO2
- MORE THAN 2 YEARS UP TO 3 YEARS AGO3
- MORE THAN 3 YEARS AGO4
- NEVER5
- REFUSED -7
- DON'T KNOW -8

PROGRAMMING NOTE QC15_D6:
IF QC15_D1 = 1 OR 3 OR 4 OR 5 (HAS A USUAL SOURCE OF CARE), CONTINUE WITH QC15_D6;
ELSE SKIP TO PROGRAMMING NOTE QC15_D7

QC15_D6 Does (he/she) have a personal doctor or medical provider who is {his/her} main provider?
 이 자녀분의 담당 의료 제공자 역할을 하는 개인 의사나 의료 제공자가 있습니까?

CD33

[IF NEEDED, SAY: “This can be a general doctor, a specialist doctor, a physician assistant, a nurse, or other health provider.”]

[IF NEEDED, SAY: “여기에는 일반의, 전문의, 의사 보조원, 간호사, 또는 기타 의료제공자가 포함될 수 있습니다.”]

- YES1
- NO.....2
- REFUSED -7
- DON'T KNOW -8

PROGRAMMING NOTEQC15_D7:
IF QC15_D6 = 1 (HAS A PERSONAL DOCTOR), THEN CONTINUE WITH QC15_D7;
ELSE SKIP TO QC15_D9A

QC15_D7 How often does (CHILD)'s doctor or medical provider listen carefully to you? Would you say...
 (CHILD) (이)의 담당 의사나 의료 제공자가 귀하의 말을 경청하는 경우는 얼마나 자주 있었습니까?

CD43

- Never,.....1
- Sometimes,2
- Usually, or3
- Always?4
- 전혀 없었음1
- 가끔2
- 보통3
- 항상4
- REFUSED -7
- DON'T KNOW -8

QC15_D8 How often does (CHILD's) doctor or medical provider explain clearly what you need to do to take care of (CHILD)'s health? Would you say...
 (CHILD) (이)의 담당의사나 의료 제공자가 귀하가 (CHILD) (이)의 건강을 돌보기 위해 할 일에 대해 분명하게 설명해 준 경우는 얼마나 자주 있었습니까?

CD44

- Never,.....1
- Sometimes,2
- Usually, or3
- Always?4
- 전혀 없었음1
- Sometimes,2
- 가끔2
- Usually, or3
- 보통3
- Always?4
- 항상4
- REFUSED -7
- DON'T KNOW -8

**PROGRAMMING NOTEQC15_D9A:
IF CAGE<1, SKIP TO QC15_D10;
ELSE IF CAGE ≥ 1, CONTINUE WITH QC15_D9A**

QC15_D9A Many professionals such as health providers, teachers and counselors do developmental screening tests. Tests check how a child is growing, learning and behaving compared with children of the same age.
 의사나 교사, 카운셀러 등 많은 전문가들은 발달 단계 검사를 하고 있습니다. 발달 단계 검사란 아이가 성장, 학습, 행동적인 면에 있어서 또래의 다른 아이들과 비교해서 어떻게 성장하고 있는지를 평가하는 것입니다.

Did (CHILD)'s doctor, other health providers, teachers or school counselors ever do an assessment or tests of (CHILD)'s development?
 (CHILD) (이)의 담당 의사나 다른 의료 제공자, 또는 교사나 학교의 카운셀러가 (CHILD) (이)의 발달에 대한 평가나 검사를 적이 있습니까?

CF40

- YES1
- NO2
- REFUSED -7
- DON'T KNOW -8

QC15_D9B Did {his/her} doctor, other health providers, teachers or school counselors ever have (CHILD) rollover, pick up small objects, stack blocks, throw a ball, or recognize different colors?
 (CHILD) (이)의 담당 의사나 다른 의료제공자, 또는 교사나 학교의 카운셀러가 (CHILD) (이)에게 구르거나, 작은 물건을 집거나, 블록을 쌓거나, 공을 던지거나, 색깔을 구별해 보라고 시킨 적이 있습니까?

CF41

- YES1
- NO2
- REFUSED -7
- DON'T KNOW -8

QC15_D9C Did they ever have you fill out a checklist about concerns you have about {his/her} learning, development, or behavior?
 그러한 전문가들이 귀하에게 이 아이의 학습, 발달 또는 행동과 관련된 문제점에 대해 체크리스트를 작성하게 한 적이 있습니까?

CF42

- YES1
- NO2
- REFUSED -7
- DON'T KNOW -8

QC15_D9D Did they ever have you fill out a checklist of activities that (CHILD) can do, such as certain physical tasks, whether {her/she} can draw certain objects, or ways {he/she} can communicate with you?
 그러한 전문가들이 귀하에게 (CHILD) (이)가 할 수 있는 활동, 즉 이 아이가 특정한 물건을 그리는 것 같은 신체적인 작업, 또는 아이가 귀하와 의사소통을 하는 방법에 대한 체크리스트를 작성하게 한 적이 있습니까?

CF43

YES1
 NO.....2
 REFUSED -7
 DON'T KNOW -8

QC15_D9E Did they ever ask if you have concerns about {his/her} learning, development, or behavior?
 그러한 전문가들이 자녀분의 학습, 발달 또는 행동과 관련된 문제점에 대해 물어본 적이 있습니까?

CF44

YES1
 NO.....2
 REFUSED -7
 DON'T KNOW -8

PROGRAMMING NOTE QC15_D9F:
IF QC15_A26 =1 (ADD/ADHD) OR 2 (ASPERGER'S) OR 3 (AUTISM) OR 8 (DOWN'S SYNDROME) OR 11 (NON-DOWN'S MENTAL RETARDATION) GO TO QC15_D9G;
ELSE CONTINUE WITH QC15_D9F

QC15_D9F Did a doctor or other professional ever note a concern about (CHILD) that should be monitored carefully?
 의사나 다른 전문가가 (CHILD) (이) 에 대해 좀더 유심히 지켜보아야 할 문제가 있다고 우려를 표시한 적이 있습니까?

CF45

YES1
 NO.....2
 REFUSED -7
 DON'T KNOW -8

QC15_D9G Did they ever refer {him/her} to a specialist regarding his development?
 의사나 다른 전문가가 자녀분의 성장 발달과 관련하여 전문의를 만나보라고 추천해 준 적이 있습니까?

CF46

YES1
 NO.....2
 REFUSED -7
 DON'T KNOW -8

QC15_D9H Did they ever refer {him/her} for speech, language or hearing testing?
 의사나 다른 전문가가 자녀분의 말하기, 언어 발달, 또는 청력 테스트와 관련하여
 전문의를 만나보라고 추천해 준 적이 있습니까?

CF47

- YES1
- NO.....2
- REFUSED -7
- DON'T KNOW -8

PROGRAMMING NOTE QC15_D10:
IF CHINSURE ≠ 2 (INSURED OR INSURANCE STATUS UNKNOWN) OR QC15_D1 = 1, 3, 4, OR 5
(HAS A USUAL SOURCE OF CARE) THEN CONTINUE WITH QC15_D10;
ELSE GO TO PROGRAMMING NOTE QC15_D12

QC15_D10 In the past 12 months, did you try to get an appointment to see (CHILD)'s doctor or
 medical provider within two days because (CHILD) was sick or injured?
 지난 12 개월 동안, (CHILD) (이)가 아프거나 다쳐서 담당의사 또는 의료 제공자와 이틀
 이내에 진료 예약을 잡으려고 시도했던 적이 있으셨습니까?

CD55

[IF NEEDED, SAY: "Do not include emergencies."]
[IF NEEDED, SAY: "응급 상황은 포함시키지 마십시오."]

- YES1
- NO.....2 **[GO TO QC15_D12]**
- REFUSED -7 **[GO TO QC15_D12]**
- DON'T KNOW -8 **[GO TO QC15_D12]**

QC15_D11 How often were you able to get an appointment within two days? Would you say...
 예약을 이틀 이내에 할 수 있었던 경우가 얼마나 자주 있었습니까?

CD45

- Never,.....1
- 전혀 없었음1
- Sometimes,2
- 가끔2
- Usually, or3
- 보통3
- Always?4
- 항상?4
- REFUSED -7
- DON'TDON'T KNOW -8

PROGRAMMING NOTE QC15_D12:
IF [QC15_D4 > 0 (HAD A DOCTOR VISIT IN THE PAST 12 MONTHS) OR QC15_D5 = 1 OR 2 (SEEN A DOCTOR IN LAST 12 MONTHS OR 1-2 YEARS AGO)], CONTINUE WITH QC15_D12;
ELSE GO TO QC15_D17

QC15_D12 The last time you saw a doctor for (CHILD), did you have a hard time understanding the doctor?
 지난 번에 (CHILD) (이) 때문에 의사를 보았을 때 귀하께서는 의사가 하는 말이 알아 듣기 힘들었습니까?

CD25

- YES 1 **[GO TO QC15_D14]**
- NO 2
- NEVER ACCOMPANIED CHILD TO DOCTOR 3
- REFUSED -7
- DON'T KNOW -8

PROGRAMMING NOTE QC15_D13:
IF QC15_D12 = 2 (DID NOT HAVE A HARD TIME UNDERSTANDING THE DOCTOR) AND [INTERVIEW NOT CONDUCTED IN ENGLISH OR QA13_G4 > 1 (ADULT R SPEAKS LANGUAGE OTHER THAN ENGLISH AT HOME)], CONTINUE WITH QC15_D13;
SET CD31ENGL = ENGLSPAN TO STORE INTERVIEW LANGUAGE AT TIME QC15_D15D13 WAS ASKED;
ELSE SKIP TO QC15_D14;

QC15_D13 In what language does (CHILD)'s doctor speak to you?
 자녀의 담당의사가 귀하와 대화할 때 어떤 언어를 사용합니까?

CD31

- ENGLISH1 **[GO TO QC15_D15]**
- SPANISH2 **[GO TO QC15_D17]**
- CANTONESE3 **[GO TO QC15_D17]**
- VIETNAMESE4 **[GO TO QC15_D17]**
- TAGALOG5 **[GO TO QC15_D17]**
- MANDARIN6 **[GO TO QC15_D17]**
- KOREAN7 **[GO TO QC15_D17]**
- ASIAN INDIAN LANGUAGES8 **[GO TO QC15_D17]**
- RUSSIAN9 **[GO TO QC15_D17]**
- OTHER1 (SPECIFY: _____)91 **[GO TO QC15_D17]**
- REFUSED -7 **[GO TO QC15_D17]**
- DON'T KNOW -8 **[GO TO QC15_D17]**

PROGRAMMING NOTE QC15_D14:
IF QC15_D12 = 1 (HAD A HARD TIME UNDERSTANDING DOCTOR), CONTINUE WITH QC15_D14;
ELSE SKIP TO QC15_D17;

QC15_D14 Was this because you and the doctor spoke different languages?
 그게 귀하와 의사가 서로 다른 언어를 사용하기 때문이었습니까?

CD26

- YES1
- NO2
- REFUSED -7
- DON'T KNOW -8

QC15_D15 Did you need someone to help you understand the doctor?
 의사가 하는 말을 알아듣기 위해 누군가의 도움이 필요했습니까?

CD27

- YES1
 - NO2
 - REFUSED -7
 - DON'T KNOW -8
- [GO TO QC15_D17]
 [GO TO QC15_D17]
 [GO TO QC15_D17]

QC15_D16 Who was this person who helped you understand the doctor?
 의사의 말을 이해하도록 도와준 사람은 누구였습니까?

CD28

- MINOR CHILD (UNDER AGE 18)1
- AN ADULT FAMILY MEMBER OR FRIEND
OF MINE2
- NON-MEDICAL OFFICE STAFF3
- MEDICAL STAFF INCLUDING NURSES AND
DOCTORS4
- PROFESSIONAL INTERPRETER (BOTH IN
PERSON AND ON THE TELEPHONE)5
- OTHER (PATIENTS, SOMEONE ELSE)6
- DID NOT HAVE SOMEONE TO HELP7
- REFUSED -7
- DON'T KNOW -8

QC15_D17 During the past 12 months, did you either delay or not get a medicine that a doctor prescribed for (CHILD)?
 지난 12개월 동안 의사가 (CHILD) (이)에게 처방해준 약을 사는 것을 미루거나 아예 사지 않으신 적이 있습니까?

CE1

- YES1
 - NO2
 - REFUSED -7
 - DON'T KNOW -8
- [GO TO QC15_D19]
 [GO TO QC15_D19]
 [GO TO QC15_D19]

QC15_D18 Was cost or lack of insurance a reason why you delayed or did not get the prescription?
 비용 문제나 보험이 없던 것이 처방약을 늦게 받거나 받지 못한 이유였습니까?

CE12

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QC15_D19 During the past 12 months, did you delay or not get any other medical care you felt (CHILD) needed—such as seeing a doctor, a specialist, or other health professional?
 지난 12개월 동안 의사, 전문의, 또는 다른 의료 전문가를 찾아가는 것 같이, 귀하가 (CHILD) (이)에게 필요하다고 느끼신 진료를 미루거나 받지 않으신 적이 있습니까?

CE7

YES1
 NO2 [GO TO PN QC15_D24]
 REFUSED -7 [GO TO PN QC15_D24]
 DON'T KNOW -8 [GO TO PN QC15_D24]

QC15_D20 Did (CHILD) get the care eventually?
 (CHILD)(이)는 결국 진료를 받았습니까?

CD66

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QC15_D21 Was cost or lack of insurance a reason why you delayed or did not get the medical care you felt (he/she) needed?
 비용 문제나 보험이 없던 것이 (CHILD) (이)가 필요한 진료를 연기했거나 받지 못한 이유였습니까?

CE13

YES1
 NO2 [GO TO PN QC15_D23]
 REFUSED -7 [GO TO PN QC15_D23]
 DON'T KNOW -8 [GO TO PN QC15_D23]

QC15_D22 Was that the main reason?
 그것이 주된 이유였습니까?

CD67

YES1 [GO TO PN QC15_D24]
 NO2
 REFUSED -7 [GO TO PN QC15_D24]
 DON'T KNOW -8 [GO TO PN QC15_D24]

QC15_D27 What was the one main reason why you delayed getting the care you felt (he/she) needed?
 귀하가 자녀에게 필요하다고 생각한 진료를 연기한 한 가지 주된 이유는 무엇이었습니까?

CD68

- COULDN'T GET APPOINTMENT1
- MY INSURANCE NOT ACCEPTED2
- INSURANCE DID NOT COVER3
- LANGUAGE PROBLEMS4
- TRANSPORTATION PROBLEMS.....5
- HOURS NOT CONVENIENT6
- NO CHILD CARE FOR CHILDREN AT HOME7
- FORGOT OR LOST REFERRAL.....8
- I DIDN'T HAVE TIME9
- COULDN'T AFFORD/COST TOO MUCH 10
- NO INSURANCE..... 11
- OTHER (SPECIFY _____)..... 91
- REFUSED -7
- DON'T KNOW -8

QC15_D24 During the past 12 months, did you have any trouble finding a general doctor or provider who would see your child?
 지난 12개월 동안, 귀하의 자녀를 진료해 줄 일반의를 찾는 데 문제가 있었습니까?

CD69

- YES1
- NO2
- REFUSED -7
- DON'T KNOW -8

QC15_D31 During the past 12 months, were you told by a doctor's office or clinic that they would not accept your child as a new patient?
 지난 12개월 동안, 닥터 오피스나 클리닉에서 귀하의 자녀를 새 환자로 받아 주지 않겠다는 말을 들은적이 있습니까?

CD70

- YES1
- NO2
- REFUSED -7
- DON'T KNOW -8

QC15_D32 During the past 12 months, were you told by a doctor's office or clinic that they did not accept your child's health care coverage?
 지난 12개월 동안, 닥터 오피스나 클리닉에서 귀하 자녀의 의료보험을 받지 않는다는 말을 들은 적이 있습니까?

CD71

- YES1
- NO2
- REFUSED -7
- DON'T KNOW -8

**PROGRAMMING NOTE QC15_D27:
IF CAGE < 6 MONTHS, GO TO QC15_D28;
ELSE IF CAGE ≥ 6 MONTHS, CONTINUE WITH QC15_D27**

QC15_D27 During the past 12 months, did (CHILD) get a flu shot or the nasal flu vaccine, called “Flumist”?
지난 12개월 동안, (CHILD) (이)가 독감 예방 주사를 맞았거나 플루미스트라는 독감 백신을 코에 뿌린 적이 있습니까?

CD30

[IF NEEDED, SAY: “A flu shot is usually given in the Fall and protects against influenza for the flu season.”]
[IF NEEDED, SAY: “독감 예방주사는 보통 가을에 맞고 독감 시즌에 독감에 걸리는 것을 예방합니다.”]

NO.....2
REFUSED -7
DON'T KNOW -8

**PROGRAMMING NOTE QC15_D28:
IF SKAID=ADULTID AND AJ108 ≠ 1 THEN AUTOCODE QC15_D28 = AJ108 AND GO TO QC15_E1;
ELSE CONTINUE WITH QC15_D28;**

QC15_D34 The next questions are about using the Internet to get health information
다음의 질문들은 인터넷을 사용하여 건강 정보를 얻는 것에 대한 것입니다.

Do you ever go on-line to use the Internet?
인터넷을 사용하기 위해 온라인으로 접속한 적이 있으십니까?

CD46

YES1
NO.....2 **[GO TO QC15_E1]**
REFUSED -7 **[GO TO QC15_E1]**
DON'T KNOW -8 **[GO TO QC15_E1]**

QC15_D35 In the past 12 months, have you gone on-line to look for information that would help you with ... (CHILD)'s health?
귀하는 지난 12개월 동안 (CHILD)의 건강을 돌보는 데 도움이 되는 정보를 온라인으로 찾아본 적이 있으십니까?

CD47

YES1
NO.....2
REFUSED -7
DON'T KNOW -8

QC15_D30 [In the past 12 months, have you gone on-line to look for information that would help you with...]
 [도움이 될 만한 정보를 찾기 위해 지난 12개월 동안 인터넷을 이용한 적이 있습니까]

...how {he/she} is developing physically?
 이 아이가 신체적으로 잘 발달하고 있는지와 관련해?

CD48

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QC15_D31 [In the past 12 months, have you gone on-line to look for information that would help you with...]
 [도움이 될 만한 정보를 찾기 위해 지난 12개월 동안 인터넷을 이용한 적이 있습니까]

...{his/her} speech?
 이 아이의 말하기에 관련해?

CD49

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QC15_D32 [In the past 12 months, have you gone on-line to look for information that would help you with...]
 [도움이 될 만한 정보를 찾기 위해 지난 12개월 동안 인터넷을 이용한 적이 있습니까]

...how well {he/she} can hear?
 이 아이의 청력과 관련해?

CD50

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QC15_D33 [In the past 12 months, have you gone on-line to look for information that would help you with...]
 [도움이 될 만한 정보를 찾기 위해 지난 12개월 동안 인터넷을 이용한 적이 있습니까?]

...{his/her} diet or nutrition?
 이 아이의 식생활과 영양섭취와 관련해?

CD51

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QC15_D34 [In the past 12 months, have you gone on-line to look for information that would help you with...]
 [도움이 될 만한 정보를 찾기 위해 지난 12개월 동안 인터넷을 이용한 적이 있습니까]

...{his/her} physical activity?
 이 아이의 신체 활동과 관련해?

CD52

- YES1
- NO2
- REFUSED -7
- DON'T KNOW -8

QC15_D35 [In the past 12 months, have you gone on-line to look for information that would help you with...]
 [도움이 될 만한 정보를 찾기 위해 지난 12개월 동안 인터넷을 이용한 적이 있습니까]

...{his/her} behavior?
 이 아이의 행동과 관련해?

CD53

- YES1
- NO2
- REFUSED -7
- DON'T KNOW -8

PROGRAMMING NOTE QC15_D36:
IF QC15_D29= 2 AND QC15_D30 = 2 AND QC15_D31 = 2 AND QC15_D32 = 2 AND QC15_D33 = 2 AND QC15_D34= 2 AND QC15_D35 = 2, GO TO PROGRAMMING NOTE QC15_E1;
ELSE CONTINUE WITH QC15_D36

QC15_D36 In the past 12 months, did you talk to a doctor or other medical provider about child health information you found on-line?
 지난 12개월 동안, 귀하가 인터넷에서 찾은 자녀분에 대한 건강 정보에 대해 의사나 기타 의료 제공자와 상의한 적이 있으십니까?

CD54

- YES1
- NO2
- DID NOT FIND INFORMATION ON-LINE3
- REFUSED -7
- DON'T KNOW -8

SECTION E – PUBLIC PROGRAMS

**PROGRAMMING NOTE SECTION E:
 IF POVERTY = 1, 2, 3, OR 5 (INCOME LESS THAN OR EQUAL TO 300% OF POVERTY LEVEL) AND
 KIDS1ST <> "Y" OR KIDS1ST = "Y", CONTINUE WITH QC15_E1;
 ELSE SKIP TO QC15_F1**

QC15_E1 Is (CHILD) now on TANF or CalWORKs?
 (CHILD) (이)가 현재 탠프(TANF)나 캘웍스(CalWORKs)를 받고 있습니까?

CE11

[IF NEEDED, SAY: "TANF means 'Temporary Assistance to Needy Families,' and CalWORKs means 'California Work Opportunities and Responsibilities to Kids.' Both replaced AFDC, California's old welfare entitlement program."]

[IF NEEDED, SAY: "TANF 는 빈곤 가정 임시 지원 프로그램의 약자이고 CalWORKS 는 캘리포니아 근로 기회 및 자녀에 대한 책임 프로그램의 약자입니다. 이 두 프로그램은 이전의 캘리포니아 주 복지 제공 프로그램인 AFDC 를 대체한 것입니다."]

- YES1
- NO2
- REFUSED -7
- DON'T KNOW -8

QC15_E2 Is (CHILD) receiving Food Stamp benefits, also known as CalFresh?
 (CHILD) (이)는 Cal Fresh 라고 하는 푸드스탬프 혜택을 받고 있습니까?

CE11A

[IF NEEDED, SAY: "You receive benefits through an EBT card. EBT stands for Electronic Benefit Transfer card and is also known as the Golden State Advantage Card."]

[IF NEEDED, SAY: "이 혜택은 EBT 카드를 통해서 받을 수 있습니다. EBT 는 Electronic Benefits Transfer card (전자식 혜택 이체 카드)의 약자이고 골든 스테이트 어드밴티지 카드라고도 합니다."]

- YES1
- NO2
- REFUSED -7
- DON'T KNOW -8

**PROGRAMMING NOTE QC15_E3:
 IF CAGE > 6, GO TO QC15_F1;
 ELSE CONTINUE WITH QC15_E3**

QC15_E3 Is (CHILD) on WIC now?
 (CHILD)(이)/가 현재 WIC(웍) 혜택을 받고 있습니까?

CE11C

[IF NEEDED, SAY: "WIC means 'Supplemental Food Program for Women, Infants and Children.']

[IF NEEDED, SAY: "WIC(웍)은 여성, 유아 및 아동을 위한 식품 보조 프로그램입니다."]

- YES1
- NO2
- REFUSED -7
- DON'T KNOW -8

SECTION F – PARENTAL INVOLVEMENT

**PROGRAMMING NOTE QC15_F1:
IF CAGE > 5 YEARS GO TO PROGRAMMING NOTE QC15_F3A;
ELSE CONTINUE WITH QC15_F1**

QC15_F1 In a usual week, about how many days do you or any other family members read stories or look at picture books with (CHILD)?
보통 일주일에 며칠이나 귀하나 다른 가족 구성원이 (CHILD) 와(과) 함께 동화책을 읽거나 그림책을 보니까?

CG14

- EVERY DAY1
- 3-6 DAYS2
- 1-2 DAYS3
- NEVER4
- REFUSED -7
- DON'T KNOW -8

QC15_F2 [In a usual week, about how many days do you or any other family member] play music or sing songs with (CHILD)?
[귀하나 가족 중에 다른 어떤 분이 보통 한 주에 며칠이나] (CHILD) (이) 와 음악을 같이 연주하거나 노래를 불러 줍니까?

CG15

- EVERY DAY1
- 3-6 DAYS2
- 1-2 DAYS3
- NEVER4
- REFUSED -7
- DON'T KNOW -8

QC15_F3 [In a usual week, about how many days do you or any other family member] take (CHILD) out somewhere, for example, to the park, store, or playground?
[귀하나 가족 중에 다른 어떤 분이 보통 한 주에 며칠이나] (CHILD) (이) 를 공원, 상점, 놀이터 같은 곳에 데리고 갑니까?

CG16

- EVERY DAY1
- 3-6 DAYS2
- 1-2 DAYS3
- NEVER4
- REFUSED -7
- DON'T KNOW -8

**PROGRAMMING NOTE QC15_F3A:
IF CAGE < 5 YEARS OR HOUSEHOLD HAS CHILDREN < 5 YEARS, CONTINUE WITH QC15_F3A;
ELSE GO TO QC15_G1**

QC15_F3A Have you seen or heard messages encouraging you to talk, read and sing with your child?
아이와 이야기를 하거나 함께 책을 읽는 것, 또는 아이와 노래 부르는 것 등을 권장하는 문구나 메시지를 보거나 들은 적이 있습니까?

CF64

- YES1
- NO2 **[GO TO QC15_G1]**
- REFUSED -7 **[GO TO QC15_G1]**
- DON'T KNOW -8 **[GO TO QC15_G1]**

QC15_F3B Would you say that you talk with your child less, about the same amount, or more after hearing that message?
이 메시지를 들은 뒤, 아이와 이야기 나누는 것을 예전보다 덜 하시게 되었습니까, 별로 차이가 없으셨습니까, 아니면 더 많이 하시게 되었습니까?

CF65

- LESS1
- ABOUT THE SAME2
- MORE3
- REFUSED -7
- DON'T KNOW -8

QC15_F3C Would you say that you sing with your child less, about the same amount, or more after hearing that message?
이 메시지를 들은 뒤, 아이와 함께 노래부르는 것을 예전보다 덜 하시게 되었습니까, 별로 차이가 없으셨습니까, 아니면 더 많이 하시게 되었습니까?

CF66

- LESS1
- ABOUT THE SAME2
- MORE3
- REFUSED -7
- DON'T KNOW -8

QC15_F3D Would you say that you read with your child less, about the same amount, or more after hearing that message?
이 메시지를 들은 뒤, 아이와 함께 책을 읽는 것을 예전보다 덜 하시게 되었습니까, 별로 차이가 없으셨습니까, 아니면 더 많이 하시게 되었습니까?

CF67

- LESS1
- ABOUT THE SAME2
- MORE3
- REFUSED -7
- DON'T KNOW -8

SECTION G – CHILD CARE AND SOCIAL COHESION

**PROGRAMMING NOTE QC15_G1:
IF CAGE ≥ 7, DO NOT DISPLAY LAST SENTENCE OF FIRST PARAGRAPH**

QC15_G1 These next questions are about childcare. By childcare we mean any arrangement where someone other than the parents, legal guardian, or stepparents takes care of (CHILD). {This includes preschool and nursery school, but not kindergarten.}
 다음의 질문은 어린 아이를 맡기는 차일드 케어(childcare)에 대한 것입니다. 여기서 아이를 맡긴다는 말은 부모나 법적 보호자, 양부모가 아닌 다른 사람이나 기관이 아이를 돌보는 상황을 말합니다. {프리스쿨이나 유아원(널서리 스쿨) 등은 여기에 포함되지만, 유치원, 즉 킨더가든(kindergarten)은 해당하지 않습니다.}

Do you currently have any kind of regular childcare arrangements for (CHILD) for 10 hours or more per week?
 현재 일주일에 10 시간 이상 (CHILD) (이)를 정기적으로 맡기시는 곳이 있습니까?

CG1

- YES1
- NO2 **[GO TO QC15_G13]**
- REFUSED -7 **[GO TO QC15_G13]**
- DON'T KNOW -8 **[GO TO QC15_G13]**

QC15_G2 Altogether, how many hours is (CHILD) in childcare during a typical week? Include all combinations of care arrangements.
 (CHILD) (이)가 이런 기관에서 혹은 부모와 함께 지내는 시간은 보통 일주일에 총 몇 시간이나 됩니까? 귀하가 이 아이를 맡기는 모든 방법을 생각한 후 그 시간을 합해 주십시오.

CG2

- _____ HOURS [SR: 10-168 HRS]
- REFUSED -7 **[GO TO QC15_G13]**
 - DON'T KNOW -8 **[GO TO QC15_G13]**

**PROGRAMMING NOTE QC15_G3:
IF QC15_G2 < 10 (HOURS IN CHILDCARE), GO TO QC15_G11;
ELSE CONTINUE WITH QC15_G3**

QC15_G3 During a typical week does (CHILD) receive childcare from...a grandparent or other family member?
 보통 주중에 (CHILD) (이) (는) 할아버지, 할머니 또는 다른 가족 구성원이 돌봐줍니까?

CG3A

- YES1
- NO2
- REFUSED -7
- DON'T KNOW -8

QC15_G4 [Does (CHILD) receive childcare from]...a non-family member who cares for (CHILD) in your home?
 [보통 주중에 (CHILD) (이) (는)] 가족은 아닌데 아이를 봐주시는 분이 귀하의 집에 와서 돌봐 줍니까?

CG3E

- YES1
- NO2
- REFUSED -7
- DON'T KNOW -8

QC15_G5 [Does (CHILD) receive childcare from]...a non-family member who cares for (CHILD) in his or her home?
 [보통 주중에 (CHILD) (이) (는)] 가족은 아닌데 아이를 봐주시는 분이 그 분 집에서 돌봐 줍니까?

CG3F

- YES1
- NO2
- REFUSED -7
- DON'T KNOW -8

QC15_G6 [Does (CHILD) receive childcare from]...a childcare center that is not in someone's home?
 [보통 주중에 (CHILD) (이) (는)] 일반 가정집이 아닌 데이케어나 보육 기관에서 돌봐줍니까?

CG3D

- YES1
- NO2
- REFUSED -7
- DON'T KNOW -8

PROGRAMMING NOTE QC15_G7:
IF CAGE ≥ 7 YEARS, GO TO PROGRAMMING NOTE QC15_G13;
ELSE CONTINUE WITH QC15_G7

QC15_G7 [Does (CHILD) receive childcare from]...a Head Start or state preschool program?
 [보통 주중에 (CHILD) (이) (는)] 헤드 스타트 (Head Start) 프로그램이나 주립 프리스쿨에서 돌봐줍니까?

CG3B

- YES1
- NO2
- REFUSED -7
- DON'T KNOW -8

QC15_G8 [Does (CHILD) receive childcare from]...some other preschool or nursery school?
 [보통 주중에 (CHILD) (이) (를)] 다른 프리 스쿨이나 유아원(널서리 스쿨)에서 돌봐줍니까?

CG3C

- YES1
- NO2
- REFUSED -7
- DON'T KNOW -8

PROGRAMMING NOTE QC15_G9:
IF QC15_G6 = 1 OR QC15_G7 = 1 OR QC15_G8 = 1, CONTINUE WITH QC15_G9;
ELSE GO TO PROGRAMMING NOTE QC15_G10

QC15_G9 Please tell me if you strongly agree, agree, disagree, strongly disagree, or you're not sure about the following statements.
 제가 읽어드릴 문장에 대해, 전적으로 동의, 동의, 동의하지 않음, 전혀 동의하지 않음 중에서 하나를 선택해 주십시오.

Your child's preschool is doing a good job at preparing children for their futures.
 귀하의 자녀가 다니는 프리스쿨은 아이의 미래를 잘 준비해준다.

CG47

- STRONGLY AGREE1
- AGREE2
- DISAGREE3
- STRONGLY DISAGREE4
- NOT SURE5

PROGRAMMING NOTE QC15_G10:
IF [QC15_G3 OR QC15_G4 = 1 (CHILD RECEIVES CHILDCARE FROM GRANDPARENT OR NON-FAMILY MEMBER IN CHILD'S HOME)] OR IF [QC15_G5 ≠ 1 AND QC15_G6 ≠ 1 AND QC15_G7 ≠ 1 AND QC15_G8 ≠ 1 (NOT IN HEAD START, PRESCHOOL PROGRAM, OR IN CARE IN NON-FAMILY MEMBER HOME)], GO TO QC15_G11;
ELSE CONTINUE WITH QC15_G10;
IF ONLY ONE OF QC15_G5, QC15_G6, QC15_G7, OR QC15_G8 = 1, DISPLAY "Is this" AND "provider";
ELSE DISPLAY, "Are all of these" AND "providers"

QC15_G10 {Is this/Are all of these} child care provider{s} licensed by the state of California?
 {아이를 봐주시는 이 분/ 아이를 돌봐주는 이 기관}은 캘리포니아 주 정부로부터 라이선스를 받은 분들입니까?

CG3G

- YES (ALL LICENSED)1
- NO (NONE LICENSED)2
- SOME LICENSED AND SOME NOT3
- REFUSED -7
- DON'T KNOW -8

QC15_G11 In the past 12 months, was there a time when you could not find childcare when you needed it for (CHILD) for a week or longer?
 지난 12 개월 동안, (CHILD) (이)를 맡겨야 하는데도, 적당한 사람이나 기관을 일주일 이상 찾지 못한 적이 있었습니까?

CG5

- YES1
- NO.....2 **[GO TO QC15_G13]**
- REFUSED -7 **[GO TO QC15_G13]**
- DON'T KNOW -8 **[GO TO QC15_G13]**

QC15_G12 What is the main reason you were unable to find childcare for (CHILD) at that time?
 그 당시, (CHILD) (이)를 맡길 만한 적당한 사람이나 기관을 구할 수 없었던 주된 이유는 무엇이었습니까?

CG6

[IF NEEDED, SAY: “Main reason is the most important reason.”]
[IF NEEDED, SAY: “제일 주된 이유란 가장 중요한 이유 하나만을 말하는 겁니다.”]

- COULDN'T AFFORD ANY CHILD CARE.....1
- COULDN'T FIND A PROVIDER WITH A SPACE2
- THE HOURS AND LOCATION DIDN'T FIT MY NEEDS3
- COULDN'T AFFORD THE QUALITY OF CHILDCARE I WANTED.....4
- COULDN'T FIND THE QUALITY OF CHILDCARE I WANTED.....5
- OTHER REASON 91
- REFUSED -7
- DON'T KNOW -8

PROGRAMMING NOTE QC15_G13:
IF QC15_G13 THROUGH QC15_G17 NOT ANSWERED IN ADULT INTERVIEW (AM19, AM20, AM21, AM35, AK28), CONTINUE WITH QC15_G13;
ELSE SKIP TO QC15_H1

QC15_G13 These next questions are about your neighborhood.
 다음의 질문들은 귀하가 지금 사시는 동네에 관한 것입니다.

Tell me if you strongly agree, agree, disagree or strongly disagree with the following statements:

제가 읽어드릴 문장에 대해, 전적으로 동의, 동의, 동의하지 않음, 전혀 동의하지 않음 중에서 하나를 선택해 주십시오.

People in my neighborhood are willing to help each other.
 우리 동네 사람들은 서로 돕고 지내고 싶어한다.

CG39

[IF NEEDED, SAY: “Do you strongly agree, agree, disagree, or strongly disagree?”]
[IF NEEDED, SAY: “전적으로 동의, 동의, 동의하지 않음, 전혀 동의하지 않음 중에서 하나를 선택해 주십시오.”]

[DO NOT PROBE A “DON’T KNOW” RESPONSE.]

- STRONGLY AGREE..... 1
- AGREE.....2
- DISAGREE.....3
- STRONGLY DISAGREE.....4
- REFUSED..... -7
- DON'T KNOW -8

QC15_G14 People in this neighborhood generally do NOT get along with each other.
 이 동네 사람들은 보통 서로 친하게 지내지 않는다.

CG40

[IF NEEDED, SAY: “Do you strongly agree, agree, disagree, or strongly disagree?”]
[IF NEEDED, SAY: “전적으로 동의, 동의, 동의하지 않음, 전혀 동의하지 않음 중에서 하나를 선택해 주십시오.”]

[DO NOT PROBE A “DON’T KNOW” RESPONSE.]

- STRONGLY AGREE.....1
- AGREE.....2
- DISAGREE.....3
- STRONGLY DISAGREE.....4
- REFUSED..... -7
- DON'T KNOW -8

QC15_G15 People in this neighborhood can be trusted.
 이 동네 사람들은 믿을 수 있다.

CG41

[IF NEEDED, SAY: “Do you strongly agree, agree, disagree, or strongly disagree?”]
[IF NEEDED, SAY: “전적으로 동의, 동의, 동의하지 않음, 전혀 동의하지 않음 중에서 하나를 선택해 주십시오.”]

[DO NOT PROBE A “DON’T KNOW” RESPONSE.]

- STRONGLY AGREE.....1
- AGREE.....2
- DISAGREE.....3
- STRONGLY DISAGREE.....4
- REFUSED.....-7
- DON'T KNOW.....-8

QC15_G16 You can count on adults in this neighborhood to watch out that children are safe and don't get into trouble.
 나는 이 동네의 어른들이 아이들이 안전한지,문제를 당하지는않는지 지켜봐 준다고 믿는다.

CG34

[IF NEEDED, SAY: “Do you strongly agree, agree, disagree, or strongly disagree?”]
[IF NEEDED, SAY: “전적으로 동의, 동의, 동의하지 않음, 전혀 동의하지 않음 중에서 하나를 선택해 주십시오.”]

[DO NOT PROBE A “DON’T KNOW” RESPONSE.]

- STRONGLY AGREE.....1
- AGREE.....2
- DISAGREE.....3
- STRONGLY DISAGREE.....4
- REFUSED.....-7
- DON'T KNOW.....-8

QC15_G17 Do you feel safe in your neighborhood all of the time, most of the time, some of the time, or none of the time?
 이웃에 대해 어느 정도 안전하다고 느끼십니까? 항상, 대부분, 가끔, 전혀 안전하다고 느끼지 않음 중에서 선택해 주십시오.

CG42

- ALL OF THE TIME.....1
- MOST OF THE TIME.....2
- SOME OF THE TIME.....3
- NONE OF THE TIME.....4
- REFUSED.....-7
- DON'T KNOW.....-8

SECTION H – DEMOGRAPHICS, PART II

So we can be sure we have included children of all races and ethnic groups in California, I need to ask a few questions about (CHILD)'s background.

저는 캘리포니아 주의 모든 인종 그룹에 속한 자녀들이 포함되었는지 확인하기 위해 마지막으로 (CHILD) (이)의 기본적인 인적 사항을 몇가지 여쭙보겠습니다.

QC15_H1 Is (CHILD) Latino or Hispanic?
(CHILD) 은(는) 라티노 또는 히스패닉입니까?

CH1

[IF NEEDED, SAY: “Such as Mexican or Central or South American?”]

[IF NEEDED, SAY: “멕시코계 또는 중남미 계통입니까?”]

YES	1	
NO	2	[GO TO QC15_H3]
REFUSED	-7	[GO TO QC15_H3]
DON'T KNOW	-8	[GO TO QC15_H3]

QC15_H2 And what is {his/her} Latino or Hispanic ancestry or origin? – such as Mexican, Salvadorian, Cuban, Honduran – and if {he/she} has more than one, tell me all of them.
그러면 어떤 라티노나 히스패닉계에 속하십니까? 예를 들자면 멕시코계, 엘살바도르계, 쿠바계, 온두라스계 등이 있겠는데요. 하나 이상에 해당되는 경우에는 모두 말씀해 주십시오.

CH2

[IF NECESSARY GIVE MORE EXAMPLES]

[CODE ALL THAT APPLY]

MEXICAN/MEXICAN AMERICAN/CHICANO	1
SALVADORAN	4
GUATEMALAN	5
COSTA RICAN	6
HONDURAN	7
NICARAGUAN	8
PANAMANIAN	9
PUERTO RICAN	10
CUBAN	11
SPANISH-AMERICAN (FROM SPAIN)	12
OTHER LATINO (SPECIFY: _____)	91
REFUSED	-7
DON'T KNOW	-8

PROGRAMMING NOTE QC15_H3:
IF QC15_H1 = 1 (YES-CHILD IS LATINO), DISPLAY, “You said your child is Latino or Hispanic. Also,”
IF MORE THAN ONE RACE GIVEN, AFTER ENTERING RESPONSES FOR QC15_H3, CONTINUE WITH PROGRAMMING NOTE QC15_H4;
ELSE FOLLOW SKIPS AS INDICATED FOR SINGLE RESPONSES

QC15_H3 {You said your child is Latino or Hispanic. Also,} Please tell me which one or more of the following you would use to describe (CHILD): Would you describe {him/her} as Native Hawaiian, Other Pacific Islander, American Indian, Alaska Native, Asian, Black, African American, or White?
 {자녀분이 라티노 또는 히스패닉계라고 말씀하셨습니다요} 다음 중 (CHILD) (이)에게 해당되는 인종을 하나 혹은 그 이상 선택해 주십시오. 자녀분은 하와이 원주민, 기타 태평양 섬 원주민, 아메리칸 인디언, 알래스카 원주민, 아시아인, 흑인, 아프리카계 미국인 또는 백인 중에서 어느 인종에 속합니까?

CH3

[IF R SAYS “NATIVE AMERICAN” CODE AS “4”]
[IF R GIVES ANOTHER RESPONSE YOU MUST SPECIFY WHAT IT IS]

[CODE ALL THAT APPLY]

- | | | | | |
|-------------------------------------|----|------------------|---|-------------------------------------|
| WHITE..... | 1 | [GO TO QC15_H10] | } | IF
ONLY
ONE
RACE |
| BLACK OR AFRICAN AMERICAN..... | 2 | [GO TO QC15_H10] | | |
| ASIAN..... | 3 | [GO TO QC15_H8] | | |
| AMERICAN INDIAN, ALASKA NATIVE..... | 4 | [GO TO QC15_H4] | | |
| OTHER PACIFIC ISLANDER..... | 5 | [GO TO QC15_H9] | | |
| NATIVE HAWAIIAN..... | 6 | [GO TO QC15_H10] | | |
| OTHER (SPECIFY: _____)..... | 91 | [GO TO QC15_H10] | | |
| REFUSED..... | -7 | [GO TO QC15_H10] | | |
| DON'T KNOW..... | -8 | [GO TO QC15_H10] | | |

**PROGRAMMING NOTE QC15_H4:
 IF QC15_H3 = 4 (AMERICAN INDIAN, ALASKA NATIVE) CONTINUE WITH QC15_H4;
 ELSE GO TO PROGRAMMING NOTE QC15_H8**

QC15_H4 You said American Indian/Alaska Native, and what is (CHILD)'s tribal heritage? If {he/she} has more than one tribe, tell me all of them.
 아메리칸 인디언이나 알래스카 원주민이라고 말씀하셨는데요, (CHILD) (이)는 어떤 부족에 속하십니까? 하나 이상의 부족에 속하신 경우, 모두 말씀해 주십시오.

CH4

[CODE ALL THAT APPLY]

- APACHE1
- BLACKFEET2
- CHEROKEE3
- CHOCTAW4
- MEXICAN AMERICAN INDIAN5
- NAVAJO6
- POMO7
- PUEBLO8
- SIOUX9
- YAQUI 10
- OTHER TRIBE [Ask for spelling]
 (SPECIFY: _____) 91
- REFUSED -7
- DON'T KNOW -8

QC15_H5 Is (CHILD) an enrolled member in a federally or state recognized tribe?
 (CHILD)은(는) 연방정부나 주정부가 인정한 부족으로 정식 등록되어 있습니까?

CH5

- YES1
- NO2 **[GO TO QC15_H8]**
- REFUSED -7 **[GO TO QC15_H8]**
- DON'T KNOW -8 **[GO TO QC15_H8]**

QC15_H6 In which Tribe is (CHILD) enrolled?
(CHILD) 은(는) 어느 부족에 등록되어 있습니까?

CH6

APACHE
 Mescalero Apache, NM1
 Apache (Not Specified)2
 Other Apache (Specify: _____) . 91

BLACKFEET
 Blackfoot / Blackfeet3

CHEROKEE
 Western Cherokee4
 Cherokee (Not Specified)5
 Other Cherokee (Specify: _____) 92

CHOCTAW
 Choctaw Oklahoma6
 Choctaw (Not Specified)7
 Other Choctaw (Specify: _____) . 93

NAVAJO
 Navajo (Not Specified)8

POMO
 Hopland Band, Hopland Rancheria9
 Sherwood Valley Rancheria 10
 Pomo (Not Specified) 11
 Other Pomo (Specify: _____) . 94

PUEBLO
 Hopi..... 12
 Ysleta del Sur Pueblo of Texas..... 13
 Pueblo (Not Specified) 14
 Other Pueblo (Specify: _____) . 95

SIOUX
 Oglala/Pine Ridge Sioux 15
 Sioux (Not Specified) 16
 Other Sioux (Specify: _____) ... 96

YAQUI
 Pascua Yaqui Tribe of Arizona..... 17
 Yaqui (Not Specified) 18
 Other Yaqui (Specify: _____) ... 97

OTHER
 Other (Specify: _____) 98
 Refused -7
 Don't Know -8

QC15_H7 Does (CHILD) get any health care services through the Indian Health Service, a Tribal Health Program, or an Urban Indian clinic?
(CHILD) 은(는) 인디언 건강 서비스, 특정 부족을 위한 건강 프로그램, 또는 도시 거주 인디언 클리닉을 통해 혜택을 받고 있습니까?

CH6A

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

**PROGRAMMING NOTE QC15_H8:
IF QC15_H3 = 3 (ASIAN) CONTINUE WITH QC15_H8;
ELSE GO TO PROGRAMMING NOTE QC15_H9**

QC15_H8 You said Asian, and what specific ethnic group is {he/she}, such as Chinese, Filipino, Vietnamese? If {he/she} is more than one, tell me all of them.
아시아인이라고 말씀하셨는데요, (CHILD) (이)는 중국계라던지, 필리핀계, 또는 베트남계 등, 구체적으로 어느 민족입니까? 둘 이상 해당되는 경우, 모두 말씀해 주십시오.

CH7

[CODE ALL THAT APPLY]

- BANGLADESHI.....1
- BURMESE2
- CAMBODIAN3
- CHINESE4
- FILIPINO5
- HMONG6
- INDIAN (INDIA).....7
- INDONESIAN.....8
- JAPANESE9
- KOREAN 10
- LAOTIAN 11
- MALAYSIAN..... 12
- PAKISTANI 13
- SRI LANKAN..... 14
- TAIWANESE 15
- THAI 16
- VIETNAMESE 17
- OTHER ASIAN (SPECIFY: _____)..... 91
- REFUSED -7
- DON'T KNOW -8

**PROGRAMMING NOTE QC15_H9:
IF QC15_H3 = 5 (PACIFIC ISLANDER) CONTINUE WITH QC15_H9;
ELSE GO TO QC15_H10**

QC15_H9 You said (CHILD) is Pacific Islander. What specific ethnic group is {he/she}, such as Samoan, Tongan, or Guamanian? If {he/she} is more than one, tell me all of them.
(CHILD) (이)가 태평양 섬 원주민이라고 말씀하셨는데요. (CHILD) (이)는 사모아족, 통가족, 또는 괌족 등, 구체적으로 어느 민족입니까? 둘 이상 해당되는 경우, 모두 말씀해 주십시오.

CH7A

- [CODE ALL THAT APPLY]**
- SAMOAN/AMERICAN SAMOAN.....1
 - GUAMANIAN2
 - TONGAN3
 - FIJIAN4
 - OTHER PACIFIC ISLANDER
(SPECIFY: _____) 91
 - REFUSED -7
 - DON'T KNOW -8

PROGRAMMING NOTE QC15_H10:
IF SKA = AR AND AI56C ≠ -1 (THIS QUESTION ALREADY ASKED DURING ADULT SURVEY), SKIP TO QC15_H14;
ELSE CONTINUE WITH QC15_H10

QC15_H10 In what country was (CHILD) born?
 (CHILD)은(는) 어느 나라에서 출생했습니까?

CH8

- UNITED STATES.....1
- AMERICAN SAMOA2
- CANADA3
- CHINA4
- EL SALVADOR5
- ENGLAND.....6
- FRANCE7
- GERMANY8
- GUAM9
- GUATEMALA..... 10
- HUNGARY 11
- INDIA..... 12
- IRAN..... 13
- IRELAND..... 14
- ITALY 15
- JAPAN..... 16
- KOREA..... 17
- MEXICO 18
- PHILIPPINES..... 19
- POLAND 20
- PORTUGAL 21
- PUERTO RICO 22
- RUSSIA..... 23
- TAIWAN 24
- VIETNAM 25
- VIRGIN ISLANDS 26
- OTHER (SPECIFY: _____)..... 91
- REFUSED -7
- DON'T KNOW -8

PROGRAMMING NOTE QC15_H11:
IF QC15_H10 = 1, 2, 9, 22, OR 26 (UNITED STATES OR ITS TERRITORIES), GO TO PROGRAMMING NOTE QC15_H14;
ELSE CONTINUE WITH QC15_H11

QC15_H11 Is (CHILD) a citizen of the United States?
 (CHILD)은(는) 미국 시민권자입니까?

CH8A

- YES1 **[GO TO QC15_H13]**
- NO.....2
- APPLICATION PENDING3
- REFUSED -7
- DON'T KNOW -8

QC15_H12 Is (CHILD) a permanent resident with a green card?
(CHILD)은(는) 영주권자입니까?

CH9

[IF NEEDED, SAY: “People usually call this a green card but the color can also be pink, blue or white.”]

[IF NEEDED, SAY: “사람들은 이것을 보통 “그린카드”라고 합니다. 그런데 실제 색깔은 분홍색일수도 있고, 파랑색 아니면 하얀색일수도 있습니다.”]

- YES1
- NO2
- APPLICATION PENDING3
- REFUSED -7
- DON'T KNOW -8

QC15_H13 About how many years has (CHILD) lived in the United States?
(CHILD) 은(는) 대략 몇 년 동안 미국에 살았습니까?

CH10

[FOR LESS THAN A YEAR, ENTER 1 YEAR]

_____ NUMBER OF YEARS {OR}

CH10YR

_____ YEAR FIRST CAME TO LIVE IN U.S.

CH10FMT

- NUMBER OF YEARS1
- YEAR FIRST CAME TO LIVE IN US2
- REFUSED -7
- DON'T KNOW -8

PROGRAMMING NOTE QC15_H14:
IF SKA = MOTHER OF CHILD AND AH33 ≠ -1 (ALREADY ASKED IN ADULT QUESTIONNAIRE)
THEN SKIP TO QC15_H18;
ELSE, CONTINUE WITH QC15_H14 AND DISPLAY “was his mother/was her mother”

QC15_H14 In what country {were you/was his mother/was her mother} born?
 {귀하는/ 이 아이의 어머니는} 어느 나라에서 출생하셨습니다?

CH11

[SELECT FROM MOST LIKELY COUNTRIES]

[FOR CHILDREN WHO WERE ADOPTED, QUESTION REFERS TO ADOPTIVE PARENTS]

- UNITED STATES.....1
- AMERICAN SAMOA2
- CANADA3
- CHINA4
- EL SALVADOR5
- ENGLAND.....6
- FRANCE7
- GERMANY8
- GUAM9
- GUATEMALA 10
- HUNGARY 11
- INDIA..... 12
- IRAN..... 13
- IRELAND..... 14
- ITALY 15
- JAPAN..... 16
- KOREA..... 17
- MEXICO 18
- PHILIPPINES 19
- POLAND 20
- PORTUGAL 21
- PUERTO RICO 22
- RUSSIA..... 23
- TAIWAN 24
- VIETNAM 25
- VIRGIN ISLANDS 26
- OTHER (SPECIFY: _____)..... 91

PROGRAMMING NOTE QC15_H15 AND QC15_H16:
IF QC15_H14 = 1, 2, 9, 22, OR 26 (UNITED STATES OR ITS TERRITORIES), GO TO PROGRAMMING NOTE QC15_H18;
ELSE CONTINUE WITH QC15_H15 AND IF RESPONDENT IS MOTHER OF CHILD DISPLAY “Are you”;
ELSE DISPLAY “Is {his/her} mother”

QC15_H15 {Are you/Is {his/her} mother} a citizen of the United States?
 {귀하는/ 이 아이의 어머니는} 미국 시민권자이십니까?

CH11A

[IF R SAYS SHE IS A NATURALIZED CITIZEN, CODE YES]

- YES1 **[GO TO QC15_H17]**
- NO.....2
- APPLICATION PENDING3
- REFUSED -7
- DON'T KNOW -8

QC15_H16 {Are you/Is {his/her} mother} a permanent resident with a green card?
 {귀하는/ 이 아이의 어머니는} 그린 카드가 있는 영주권자이십니까?

CH12

- YES1
- NO.....2
- APPLICATION PENDING3
- REFUSED -7
- DON'T KNOW -8

PROGRAMMING NOTE QC15_H17:
IF RESPONDENT IS MOTHER OF CHILD, CONTINUE WITH QC15_H17 AND DISPLAY “have you”;
ELSE CONTINUE WITH QC15_H17 AND DISPLAY “has {his/her} mother”

QC15_H17 About how many years {have you/has {his/her} mother} lived in the United States?
 {귀하는/ 이 아이의 어머니는} 미국에 거주하신 지 몇 년이나 되셨습니까?

CH13

_____ NUMBER OF YEARS [HR: 0-AGE] {OR}

CH13YR

_____ YEAR FIRST CAME TO LIVE IN U.S.

CH13FMT

- NUMBER OF YEARS1
- YEAR FIRST CAME TO LIVE IN US.....2
- MOTHER DECEASED3
- NEVER LIVED IN U.S.....4
- REFUSED -7
- DON'T KNOW -8

PROGRAMMING NOTE QC15_H18:
IF SKA = FATHER OF CHILD AND AH33 ≠ -1 (ALREADY ASKED IN ADULT QUESTIONNAIRE THEN SKIP TO QC15_H22;
ELSE CONTINUE WITH QC15_H18 AND DISPLAY, “was {his/her} father”

QC15_H18 In what country {were you/was his father/was her father} born?
 {귀하는/ 이 아이의 아버지는} 어느 나라에서 출생하셨습니다까?

CH14

[SELECT FROM MOST LIKELY COUNTRIES]

[FOR CHILDREN WHO WERE ADOPTED, QUESTION REFERS TO ADOPTIVE PARENTS]

- UNITED STATES.....1
- AMERICAN SAMOA2
- CANADA3
- CHINA4
- EL SALVADOR5
- ENGLAND.....6
- FRANCE7
- GERMANY8
- GUAM9
- GUATEMALA 10
- HUNGARY 11
- INDIA..... 12
- IRAN..... 13
- IRELAND..... 14
- ITALY 15
- JAPAN..... 16
- KOREA..... 17
- MEXICO 18
- PHILIPPINES 19
- POLAND 20
- PORTUGAL 21
- PUERTO RICO 22
- RUSSIA..... 23
- TAIWAN 24
- VIETNAM 25
- VIRGIN ISLANDS 26
- OTHER (SPECIFY: _____)..... 91
- REFUSED -7
- DON'T KNOW -8

PROGRAMMING NOTE QC15_H19 AND QC15_H20:
IF QC15_H18 = 1, 2, 9, 22, OR 26 (UNITED STATES OR ITS TERRITORIES), GO TO PROGRAMMING NOTE QC15_H22;
ELSE CONTINUE WITH QC15_H19 AND IF RESPONDENT IS FATHER OF CHILD DISPLAY “Are you”;
ELSE SAY “Is {his/her} father”

QC15_H19 {Are you/Is {his/her} father} a citizen of the United States?
 {귀하는/ 이 아이의 아버지는} 미국 시민권자이십니까?

CH14A

[IF R SAYS HE IS A NATURALIZED CITIZEN, CODE YES]

YES	1	[GO TO PN QC15_H21]
NO	2	
APPLICATION PENDING	3	
REFUSED	-7	
DON'T KNOW	-8	

QC15_H20 {Are you/Is {his/her} father} a permanent resident with a green card?
 {귀하는/ 이 아이의 아버지는} 그린 카드가 있는 영주권자이십니까?

CH15

YES	1
NO	2
APPLICATION PENDING	3
REFUSED	-7
DON'T KNOW	-8

PROGRAMMING NOTE QC15_H21:
IF RESPONDENT IS FATHER OF CHILD, CONTINUE WITH QC15_H21 AND DISPLAY “have you”;
ELSE, CONTINUE WITH QC15_H21 AND DISPLAY “has {his/her} father”

QC15_H21 About how many years {have you/has {his/her} father} lived in the United States?
 {귀하는/ 이 아이의 아버지는} 미국에 거주하신 지 몇 년이나 되셨습니까?

CH16

_____ NUMBER OF YEARS [HR: 0-AGE] {OR}

CH16YR

_____ YEAR FIRST CAME TO LIVE IN U.S.

CH16FMT

NUMBER OF YEARS	1
YEAR FIRST CAME TO LIVE IN U.S.	2
FATHER DECEASED	3
NEVER LIVED IN U.S.	4
REFUSED	-7
DON'T KNOW	-8

PROGRAMMING NOTE QC15_H22:
IF RESPONDENT IS SAMPLED ADULT, GO TO PROGRAMMING NOTE QC15_H23;
ELSE IF RESPONDENT ≠ ADULT RESPONDENT, CONTINUE WITH QC15_H22

QC15_H22 In general, what languages are spoken in (CHILD)'s home?
 (CHILD)의 가정에서는 대체로 어떤 언어들이 사용됩니까?

CH17

[PROBE: "Any others?"]
[PROBE: "또 다른 언어가 있습니까?"]

- ENGLISH1
- SPANISH2
- CANTONESE.....3
- VIETNAMESE4
- TAGALOG5
- MANDARIN6
- KOREAN7
- ASIAN INDIAN LANGUAGES.....8
- RUSSIAN9
- OTHER1 (SPECIFY: _____) 91
- OTHER2 (SPECIFY: _____) 92
- REFUSED -7
- DON'T KNOW -8

PROGRAMMING NOTE QC15_H23:
IF INTERVIEW CONDUCTED IN ENGLISH AND QC15_H22 > 1 (TWO OR MORE LANGUAGES
SPOKEN AT HOME), CONTINUE WITH QC15_H23 AND DISPLAY "Compared to the language
spoken in (CHILD)'s home,";
SET CH18 = ENGLSPAN TO STORE INTERVIEW LANGUAGE AT TIME QC15_H23 WAS ASKED;
ELSE IF QC15_H22 = 1 (ONLY SPEAKS ENGLISH), GO TO PROGRAMMING NOTE QC15_H24

QC15_H23 {Compared to other languages spoken in (CHILD)'s home,} would you say you speak English...
 {(CHILD) (이)의 집에서 사용하는 다른 언어들에 비해} 귀하는 본인이 영어를 얼마나 잘 한다고 생각하십니까?

CH18

- Very well,1
- 매우 잘 한다1
- Fairly well,2
- 잘 한다,2
- Not well, or3
- 잘 못한다, 또는3
- Not at all?4
- 전혀 못한다4
- REFUSED -7
- DON'T KNOW -8

**PROGRAMMING NOTE QC15_H24:
IF RESPONDENT IS NOT SAMPLED ADULT, CONTINUE WITH QC15_H24;
ELSE GO TO PROGRAMMING NOTE QC15_H26**

QC15_H24 What is the highest grade of education you have completed and received credit for?
 귀하는 교육을 어디까지 받으셨습니까?

CH22

GRADE SCHOOL	
1 ST GRADE	1
2 ND GRADE	2
3 RD GRADE	3
4 TH GRADE	4
5 TH GRADE	5
6 TH GRADE	6
7 TH GRADE	7
8 TH GRADE	8
HIGH SCHOOL OR EQUIVALENT	
9 TH GRADE	9
10 TH GRADE	10
11 TH GRADE	11
12 TH GRADE	12
4-YEAR COLLEGE OR UNIVERSITY	
1 ST YEAR (FRESHMAN)	13
2 ND YEAR (SOPHOMORE)	14
3 RD YEAR (JUNIOR)	15
4 TH YEAR (SENIOR)	16
5 TH YEAR	17
GRADUATE OR PROFESSIONAL SCHOOL	
1 ST YEAR GRAD OR PROF SCHOOL	18
2 ND YEAR GRAD OR PROF SCHOOL (MA/MS)	19
3 RD YEAR GRAD OR PROF SCHOOL	20
MORE THAN 3 YEARS GRAD OR PROF SCHOOL (PhD)	21
2-YEAR JUNIOR OR COMMUNITY COLLEGE	
1 ST YEAR	22
2 ND YEAR	23
VOCATIONAL, BUSINESS, OR TRADE SCHOOL	
1 ST YEAR	24
2 ND YEAR	25
MORE THAN 2 YEARS	26
HAD NO FORMAL EDUCATION	30
REFUSED	-7
DON'T KNOW	-8

SECTION H – DEMOGRAPHICS, PART III

**PROGRAMMING NOTE QC15_H25:
IF RESPONDENT IS NOT SAMPLED ADULT, CONTINUE WITH QC15_H25;
ELSE GO TO QC15_H26**

QC15_H25 Based on the questions in this survey about (CHILD), is there another adult in the household who is more knowledgeable about questions we asked about (CHILD)?
지금 하신 아동 조사 내용에 비추어 볼 때, 이 맥에 저희가 (CHILD) (이)에 대해 드렸던 질문들에 더 잘 대답해주실 수 있을 만한 다른 어른이 계십니까?

CH30

- YES1
- NO.....2
- REFUSED -7
- DON'T KNOW -8

QC15_H26 Those are my final questions. I appreciate your patience. Finally, do you think you would be willing to do a follow-up to this survey sometime in the future?
마지막으로, 앞으로 언젠가 이 설문 조사에 대한 후속 조사가 있으면 협조해 주실 수 있습니까?

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- YES1
- MAYBE/PROBABLY YES2
- DEFINITELY NOT.....3
- REFUSED -7
- DON'T KNOW -8

END Thank you. You have helped with a very important statewide survey. If you have any questions, you can contact Dr. Ponce, the Principal Investigator. Do you want that number? **[IF YES, SAY: “Dr. Ponce can be reached toll-free at 1-866-275-2447.” IF NO, SAY: “Goodbye.”]**

감사합니다. 귀하는 주 전역에서 실시되는 매우 중요한 보건 설문 조사에 도움을 주셨습니다. 질문이 있으시면 연구 책임자인 폰스(Ponce) 박사에게 연락하실 수 있습니다. 이 번호를 알려드릴까요? **[IF YES, SAY: “무료 전화 1-866- 275-2447 로 전화하시면 폰스 박사와 통화가 가능하십니다.” IF NO, SAY: “다시 한 번 감사드립니다. 안녕히 계십시오.”]**