CHIS 2009
Child Questionnaire
Version 5 (Chinese)
November

(Children Ages 0-11 Answered by Adult Proxy Respondent)

Collaborating Agencies:
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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 2009 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

GENDER

PROGRAMMING NOTE QC09_A1:
SET CADATE = CURRENT DATE (YYYYMMDD)
IF AR = MKA AND GENDER OF CHILD IS KNOWN, SKIP TO QC09_A2;
ELSE CONTINUE WITH QC09_A1

QC09_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.
某些問題是基於{}的個人特徵而提出的，例如{}的年齡。因此，我會首先向您提出幾個簡單的背景問題。

Is (CHILD) male or female?
{}是男性還是女性？

CA1

MALE................................................................................1
FEMALE.......................................................................2
REFUSED....................................................................-7

AGE

QC09_A2 What is {his/her} date of birth?
請給我 {他/她} 的出生年月日。

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


REFUSED.................................................................-7
DON'T KNOW.........................................................-8
PROGRAMMING NOTE QC09_A3:
IF QC09_A2 = -7 or -8 (REFUSED/DON'T KNOW) CONTINUE WITH QC09_A3;
ELSE SKIP TO QC09_A4

QC09_A3  How old is {he/she}?
{他/她}今年幾歲？

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

BIRTHWEIGHT

QC09_A4  How much did {he/she} weigh at birth?
{ }出生時體重是多少？

CA13P/CA13O

_____ POUNDS _____ OUNCES

CA13K/CA13G

_____ KILOGRAMS ___GRAMS

CAFMT

POUNDS/OUNCES.............................................1
KILOGRAMS/GRAMS.......................................2
REFUSED......................................................-7
DON'T KNOW................................................-8

HEIGHT AND WEIGHT

QC09_A5  About how tall is (CHILD) now without shoes?
{他/她} 目前有沒有任何問題會限制或妨礙{他/她}正常的去上學？

CA4F/CA4I

[IF NEEDED, SAY: “Your best guess is fine.”]

_____ FEET      _____ INCHES

CA4M/CA4C

_____ METERS     _____ CENTIMETERS

CA4FMT

FEET/INCHES....................................................1
METERS/CENTIMETERS.....................................2
REFUSED.....................................................-7
DON'T KNOW...............................................-8
QC09_A6  About how much does (CHILD) weigh now without shoes?
{他/她} 目前有沒有任何的問題會限制或妨礙{他/她} 正常的做功課？

[IF NEEDED, SAY: “Your best guess is fine.”]

CA5P

_____ POUNDS

CA5K

_____ KILOGRAMS

CA5FMT

POUNDS.................................................................1
KILOGRAMS.........................................................2
REFUSED.............................................................-7
DON’T KNOW.....................................................-8

SCHOOL ATTENDANCE

PROGRAMMING NOTE QC09_A7:
IF CAGE < 5 YEARS GO TO QC09_A9;
ELSE CONTINUE WITH QC09_A7 AND IF CAGE = 5 YRS DISPLAY “Not including pre-school or nursery school,”

QC09_A7  {Not including pre-school or nursery school,} Did (CHILD) attend school last week?
{CHILD NAME /AGE/SEX} 上週是否上學?

CA42

YES.................................................................1  [GO TO QC09_A9]
NO.................................................................2
ON VACATION....................................................3
HOME SCHOOLED..............................................4  [GO TO QC09_A9]
REFUSED..........................................................-7
DON’T KNOW....................................................-8

PROGRAMMING NOTE QC09_A8:
IF CAGE = 5 YRS DISPLAY “Not including pre-school or nursery school,”

QC09_A8  {Not including pre-school or nursery school,} Did (CHILD) attend school during the last school year?
{CHILD NAME /AGE/SEX} 上個學年是否上學?

CA43

YES.................................................................1
NO.................................................................2
REFUSED..........................................................-7
DON’T KNOW....................................................-8
GENERAL HEALTH
QC09_A9  In general, would you say (CHILD)'s health is excellent, very good, good, fair or poor?
(CHILD NAME /AGE/SEX) 的問題是屬於身體、行為或精神上的？

CA6

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

ASTHMA
QC09_A10  Has a doctor ever told you that (CHILD) has asthma?
是否有醫生曾經告訴您 (CHILD NAME /AGE/SEX) 患有哮喘？

CA12

YES.........................................................................................1
NO..........................................................................................2
REFUSED..............................................................................-7
DON'T KNOW........................................................................-8

QC09_A11  Does (he/she) still have asthma?
{ }是否依然患有哮喘病？

CA31

YES.........................................................................................1
NO..........................................................................................2
REFUSED..............................................................................-7
DON'T KNOW........................................................................-8

QC09_A12  During the past 12 months, has (he/she) had an episode of asthma or an asthma attack?
在過去十二個月中，{ }是否曾經有過哮喘發作？

CA32

YES.........................................................................................1
NO..........................................................................................2
REFUSED..............................................................................-7
DON'T KNOW........................................................................-8
PROGRAMMING NOTE QC09_A13
IF QC09_A11 = 2, -7, OR -8 (NO, REFUSED, DON'T KNOW) AND QC09_A12 = 2, -7, OR -8 (NO, REFUSED, DON'T KNOW) GO TO QC09_A17;
ELSE CONTINUE WITH QC09_A13

QC09_A13 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:

在過去十二個月中，{}每隔多久會出現哮喘症狀，例如咳嗽、氣喘、氣短、胸悶或粘痰？您認為是...

CA12B
Not at all..........................................................1
過去十二個月中無任何症狀..........................1
Less than every month.......................................2
每月少於一次................................................2
Every month....................................................3
每月..............................................................3
Every week, or.................................................4
每週，或........................................................4
Every day?......................................................5
每天?.............................................................5
REFUSED........................................................-7
DON'T KNOW...............................................-8

QC09_A14 During the past 12 months, has (CHILD) had to visit an emergency room because of {his/her} asthma?
在過去十二個月中，{CHILD NAME /AGE/SEX} 是否曾經因 {his/her}哮喘前往急診室就診？

CA33
YES.................................................................1
NO.................................................................2 [GO TO QC09_A16]
REFUSED........................................................-7 [GO TO QC09_A16]
DON'T KNOW...............................................-8 [GO TO QC09_A16]

QC09_A15 Did you take (CHILD) to an emergency room for {his/her} asthma because you were unable to see {his/her} doctor?
您是否曾經由於無法約見{CHILD NAME /AGE/SEX} 的醫生因哮喘病將{him/her}送往急診室就診？

CA48
[INTERVIEWER NOTE: ENTER 3 ONLY IF R VOLUNTEERS THAT HE/SHE DOESN'T HAVE A DOCTOR. DO NOT PROBE.]

YES.................................................................1
NO...................................................................2
DOESN'T HAVE DOCTOR....................................3
REFUSED........................................................-7
DON'T KNOW...............................................-8
QC09_A16  During the **past 12 months**, was {he/she} admitted to the hospital overnight or longer for {his/her} asthma?
在過去十二個月中，{he/she} 曾經因哮喘住院一天或更長時間嗎？

CA44

YES.................................................................................1
NO.................................................................................2
REFUSED.......................................................................7
DON'T KNOW..................................................................8

QC09_A17  Is (CHILD) now taking a daily medication to control {his/her} asthma that was prescribed or given to you by a doctor?
{ } 目前是否每天服用控制哮喘的醫生處方藥物或醫生給的藥物？

CA12A

[IF NEEDED, SAY: “This includes both oral medicine and inhalers. This is different from inhalers used for quick relief.
[IF NEEDED, SAY: “包括口服藥和吸入劑，但不是用於快速緩解症狀的吸入剤”]

YES.................................................................................1
NO.................................................................................2
REFUSED.......................................................................7
DON'T KNOW..................................................................8

PROGRAMMING NOTE QC09_A18:
IF QC09_A11 = 1 (YES, STILL HAS ASTHMA) OR QC09_A12 = 1 (YES, EPISODE IN LAST 12 MOS),
GO TO QC09_A22;
ELSE CONTINUE WITH QC09_A18

QC09_A18  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:
在過去 12 個月中，{CHILD NAME/AGE/SEX}出現哮喘症狀的頻率有多高？例如，咳嗽、喘鳴、氣短、胸悶或黏痰。您認為是...

CA40

Not at all,..........................................................................1
過去十二個月中無任何症狀.........................1
Less than every month,........................................2
每月少於一次.........................................................2
Every month.........................................................3
每月.................................................................3
Every week, or.....................................................4
每月，或...............................................................4
Every day?.........................................................5
每天？.................................................................5
REFUSED..................................................................7
DON'T KNOW......................................................8
QC09_A19 During the past 12 months, has (CHILD) had to visit an emergency room because of (his/her) asthma?
在過去十二個月中，(CHILD NAME /AGE/SEX) 是否曾經因為(his/her)哮喘病前往急診室就診？

CA41

YES.................................................................1
NO...............................................................2  [GO TO QC09_A21]
REFUSED....................................................-7  [GO TO QC09_A21]
DON'T KNOW.............................................-8  [GO TO QC09_A21]

QC09_A20 Did you take (CHILD) to an emergency room for (his/her) asthma because you were unable to see (his/her) doctor?
您是否曾經由於無法約見(CHILD NAME /AGE/SEX) 的醫生因哮喘病將(him/her)送往急診室就診？

CA49

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

YES......................................................................1
NO........................................................................2
DOESN'T HAVE DOCTOR.....................................3
REFUSED...........................................................-7
DON'T KNOW....................................................-8

QC09_A21 During the past 12 months, was (he/she) admitted to the hospital overnight or longer for (his/her) asthma?
在過去十二個月中，(he/she)曾經因哮喘住院一天或更長時間嗎？

CA45

YES......................................................................1
NO........................................................................2
REFUSED...........................................................-7
DON'T KNOW....................................................-8

QC09_A22 During the past 12 months, how many days of day care or school did (CHILD) miss due to asthma?
在過去十二個月中，(CHILD)因為哮喘病有多少天沒有上日託所或上學？

CA34

_________ NUMBER OF DAYS

CHILD NOT IN DAYCARE OR SCHOOL........... 93
REFUSED...........................................................-7
DON'T KNOW....................................................-8
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 NAME /AGE/SEX} 的醫生或其他醫療服務提供者是否曾經與您一起制定一項計劃，以便讓您瞭解如何護理{his/her}糖尿病？

**CA35**

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>-7</td>
<td>-8</td>
</tr>
</tbody>
</table>

Do you have a written or printed copy of this plan?

您是否有一份這項計劃的書面或列印副本？

**CA50**

[IF NEEDED, SAY: “This can be an electronic or hard copy.”]

[IF NEEDED, SAY: “可以是電子或列印副本。”]

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>-7</td>
<td>-8</td>
</tr>
</tbody>
</table>

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?

您對自己能夠控制與管理{CHILD NAME /AGE/SEX}的哮喘信心有多高？您認為是很有信心、較有信心、不太有信心還是毫無信心？

**CA51**

<table>
<thead>
<tr>
<th>VERY CONFIDENT</th>
<th>SOMEWHAT CONFIDENT</th>
<th>NOT TOO CONFIDENT</th>
<th>NOT AT ALL CONFIDENT</th>
<th>REFUSED</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>-7</td>
<td>-8</td>
</tr>
</tbody>
</table>

Other Conditions

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 NAME /AGE/SEX} 目前是否有任何其他限制或阻止 {him/her} 從事適合 {his/her} 年齡的兒童活動的身體、行為或精神症狀？

**CA7**

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>-7</td>
<td>-8</td>
</tr>
</tbody>
</table>
**QC09_A27** What condition does (CHILD) have?

{CHILD NAME /AGE/SEX} 患有哪種病症？

**CA10A**

[C ode ALL THAT APPLY. CTRL-P TO EXIT.]

[PROBE: “Any others?”]
[PROBE: “還有其他語言嗎？”]

ADD/ADHD............................................................................................1
ASPERGER’S SYNDROME................................................................. 2
AUTISM.................................................................................................. 3
CEREBRAL PALSY........................................................................... 4
CONGENITAL HEART DISEASE................................................. 5
CYSTIC FIBROSIS............................................................................. 6
DIABETES............................................................................................. 7
DOWN’S SYNDROME....................................................................... 8
EPILEPSY............................................................................................... 9
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

**PROGRAMMING NOTE QC09_A28**

IF QC09_A27 = 4 OR 5 OR 6 OR 7 OR 8 OR 9 OR 10 OR 11 OR 12 OR 13 OR 14 OR 15 OR 16 OR 91,
CONTINUE WITH QC09_A28;
ELSE IF QC09_A27 = 1 OR 2 OR 3 ONLY, SKIP TO QC09_A31

**QC09_A28** During the past 12 months, has (CHILD) had to visit an emergency room because of
{his/her} {INSERT CONDITION(S) 4-91 FROM QC09_A27)? 在過去十二個月中，
{CHILD NAME /AGE/SEX} 是否曾經因為 {INSERT CONDITION(S) 4-91 FROM
QC09_A27)去急診室就診？

**CA52**

YES.................................................................................................1
NO............................................................................................... 2 [GO TO QC09_A30]
REFUSED.....................................................................................-7 [GO TO QC09_A30]
DON’T KNOW..................................................................................-8 [GO TO QC09_A30]
**QC09_A29**

Did you take (CHILD) to an emergency room for {his/her} (INSERT CONDITION(S) 4-91 FROM QC09_A27) because you were unable to see {his/her} doctor?

您是否曾經由於無法約見{CHILD NAME /AGE/SEX}的醫生因{INSERT CONDITION(S) 4-91 FROM QC09_A27}將{him/her}送往急診室就診？

**CA53**

[Interviewer Note: Enter 3 only if R volunteers that he/she doesn't have a doctor. Do not probe.]

YES.................................................................1
NO.................................................................2
DOESN'T HAVE DOCTOR........................................3
REFUSED......................................................................-7
DON'T KNOW..........................................................-8

**QC09_A30**

During the past 12 months, was {he/she} admitted to the hospital overnight or longer for {his/her} (INSERT CONDITION(S) 4-91 FROM QC09_A27)?

在過去十二個月中，{he/she}是否曾經因{his/her} (INSERT CONDITION(S) 4-91 FROM QC09_A27)住院一天或更長時間？

**CA54**

YES.................................................................1
NO.................................................................2
REFUSED......................................................................-7
DON'T KNOW..........................................................-8

**QC09_A31**

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 QC09_A27)?

{CHILD NAME /AGE/SEX}的醫生或其他醫療服務提供者是否曾經與您一起制定一項計劃，以便您瞭解如何控制 {his/her} (INSERT CONDITION(S) 4-91 FROM QC09_A27)?

**CA55**

[IF NEEDED, SAY: 「管理計劃是一份印製的表格，告訴您何時改變藥量或藥物類型、何時打電話向醫生洽詢以及何時前往急診室就診。」]

YES.................................................................1
NO.............................................................................2
REFUSED.....................................................................-7
DON'T KNOW..........................................................-8

**QC09_A32**

Do you have a written or printed copy of this plan?

您是否有一份這項計劃的書面或列印副本？

**CA56**

[IF NEEDED, SAY: “This can be an electronic or hard copy.”]

[IF NEEDED, SAY: “可以是電子或列印副本。”]

YES.................................................................1
NO.............................................................................2
REFUSED.....................................................................-7
DON'T KNOW..........................................................-8
How confident are you that you can control and manage (CHILD’s) (INSERT CONDITION(S) FROM QC09_A27)? Would you say you are very confident, somewhat confident, not too confident, or not at all confident?

您對自己能夠控制與管理{CHILD NAME /AGE/SEX}的(INSERT CONDITION(S) 4-91 FROM QC09_A27) 信心有多強？您認為是很有信心、較有信心、不太有信心還是毫無信心？

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>VERY CONFIDENT</td>
<td>1</td>
</tr>
<tr>
<td>SOMEWHAT CONFIDENT</td>
<td>2</td>
</tr>
<tr>
<td>NOT TOO CONFIDENT</td>
<td>3</td>
</tr>
<tr>
<td>NOT AT ALL CONFIDENT</td>
<td>4</td>
</tr>
<tr>
<td>REFUSED</td>
<td>-7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>-8</td>
</tr>
</tbody>
</table>
Section B – Dental Health

PROGRAMMING NOTE QC09_B1:
IF CAGE < 1 YEAR, GO TO SECTION C;
IF CAGE > 2 YEARS, GO TO QC09_B2 AND DISPLAY “Now I’m going to ask about (CHILD)’s
dental health”;
ELSE CONTINUE WITH QC09_B1

QC09_B1 These questions are about (CHILD)’s dental health. Does (CHILD) have any teeth yet?
這些問題是有關 {孩子名字 / 歲數 / 性別} 牙齒的健康。{孩子名字 / 歲數 / 性別} 有沒有長任何的牙齒了？

CC1

YES...................................................................................1
NO....................................................................................2 [GO TO SECTION C]
REFUSED.........................................................................-7 [GO TO SECTION C]
DON’T KNOW.....................................................................-8

QC09_B2 {Now I’m going to ask about (CHILD)’s dental health.}
以下是有關{CHILD NAME /AGE/SEX}的牙齒健康的問題。

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.
您的孩子最近一次看牙醫或去牙科診所大約是多久以前？請包括牙科保健員及各類牙科專家。

CC5

HAS NEVER VISITED.............................................................0
6 MONTHS AGO OR LESS............................................1 [GO TO QC09_C1]
MORE THAN 6 MONTHS UP TO 1 YEAR AGO.............2 [GO TO QC09_C1]
MORE THAN 1 YEAR UP TO 2 YEARS AGO.................3
MORE THAN 2 YEARS UP TO 5 YEARS AGO..............4
MORE THAN 5 YEARS AGO.............................................5
REFUSED.........................................................................-7
DON’T KNOW.....................................................................-8
PROGRAMMING NOTE QC09_B3:
IF QC09_B2 = 0 (HAS NEVER VISITED), DISPLAY “never”;
ELSE IF QC09_B2 ≥ 3 DISPLAY “not” AND “in the past year”

QC09_B3 What is the main reason your child has {never/not} visited a dentist {in the past year}?
您的孩子去年沒有看牙醫的主要原因是什麼？

CB23

<table>
<thead>
<tr>
<th>Reason</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>NO REASON TO GO/NO PROBLEMS</td>
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</tr>
<tr>
<td>NOT OLD ENOUGH</td>
<td>2</td>
</tr>
<tr>
<td>COULD NOT AFFORD IT/TOO EXPENSIVE/NO INSURANCE.</td>
<td>3</td>
</tr>
<tr>
<td>FEAR, DISLIKES GOING</td>
<td>4</td>
</tr>
<tr>
<td>DO NOT HAVE/KNOW A DENTIST</td>
<td>5</td>
</tr>
<tr>
<td>CANNOT GET TO THE OFFICE/CLinic</td>
<td>6</td>
</tr>
<tr>
<td>NO DENTIST AVAILABLE/NO APPOINTMENTS AVAILABLE</td>
<td>7</td>
</tr>
<tr>
<td>DIDN’T KNOW WHERE TO GO</td>
<td>8</td>
</tr>
<tr>
<td>HOURS NOT CONVENIENT</td>
<td>9</td>
</tr>
<tr>
<td>SPEAK A DIFFERENT LANGUAGE</td>
<td>10</td>
</tr>
<tr>
<td>OTHER</td>
<td>91</td>
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<td>REFUSED</td>
<td>-7</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>-8</td>
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</tbody>
</table>
Section C – Diet, Physical Activity, Park Use

**DIETARY INTAKE**

**PROGRAMMING NOTE QC09_C1:**

IF CAGE < 2 YEARS, GO TO QC09_C13;
ELSE CONTINUE WITH QC09_C1

QC09_C1  Now I’m going to ask you about the foods your child ate yesterday, including meals and snacks. Yesterday, how many glasses or boxes of 100% fruit juice, such as orange or apple juice, did (CHILD) drink?

{ }昨天喝了幾杯或幾盒小純果汁飲料？請不要計入您已經告訴我的飲料。

**CC10**

[IF NEEDED, SAY: “Only include 100% fruit juices.”]

[INTERVIEWER NOTE: PART OF A GLASS COUNTS AS 1 GLASS, ASK R TO ESTIMATE NUMBER OF GLASSES IF DRINKING FROM A BOTTLE, CAN, OR CARTON.]

______ GLASSES  [HR: 0-20; SR 0-9]

REFUSED……………………………………………………………-7
DON’T KNOW……………………………………………………-8

QC09_C2  Yesterday, how many servings of fruit, such as an apple or a banana, did {he/she} eat?

{ }昨天吃了幾份水果，例如一隻蘋果或一根香蕉？

**CC13**

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

[IF NEEDED, SAY: “一份是指兒童食用此類食物的正常份量。”]

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

REFUSED……………………………………………………………-7
DON’T KNOW……………………………………………………-8

QC09_C3  Yesterday, how many servings of French fries, home fries, or hash browns did (CHILD) eat?

{ }昨天吃了幾份炸薯條或其他油炸馬鈴薯食物？請不要包括馬鈴薯片。

**CC14**

[IF RESPONDENT ASKS, SAY: “Do not include potato chips.”]

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

REFUSED………………………………………………………………-7
DON’T KNOW…………………………………………………………-8
QC09_C4  Yesterday, how many servings of other vegetables like green salad, green beans, or potatoes did {he/she} have? Do not include fried potatoes.
昨天，{he/she} 吃了幾份其他蔬菜，例如青菜沙拉、青豆或馬鈴薯？請勿包括油炸薯片。

CC31  ______ SERVINGS  [HR: 0-20; SR 0-4]
 REFUSED.........................................................-7
 DON’T KNOW......................................................-8

QC09_C5  Yesterday, how many glasses or cans of soda, such as Coke, or other sweetened drinks, such as fruit punch or sports drinks did {he/she} drink? Do not count diet drinks.
{}昨天喝了幾杯或幾罐汽水（如可樂）或其他加糖飲料（如混合水果飲料或 Sunny Delight）？請不要計入減肥飲料或無糖飲料。

CC12  [INTERVIEWER NOTE: THIS ALSO INCLUDES ANY DRINKS WITH ADDED SUGAR, SUCH AS SUNNY DELIGHT, ICED TEA DRINKS, TAMPICO, HAWAIIAN PUNCH, CRANBERRY COCKTAIL, HI-C, SNAPPLE, SUGAR CANE JUICE, GATORADE, SWEETENED WATER DRINKS, AND ENERGY DRINKS.]

CC24  [IF NEEDED, SAY: “Include pies and ice cream. Do not include sugar-free kinds but include low-fat kinds.”]

QC09_C6  Yesterday, how many servings of sweets such as cookies, candy, doughnuts, pastries, cake, or popsicles did {he/she} have?
{}昨天吃了幾份含糖量很高的食物？例如餅乾、糖果、甜麵圈、酥餅、蛋糕或冰棒。

CC24  ______ SERVINGS  [HR: 0-20; SR 0-9]
 REFUSED.........................................................-7
 DON’T KNOW......................................................-8
**Fast Food**

**QC09_C7**

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.

現在，請想一想上一週的情況。在過去七天內，{he/she}曾任幾次吃快餐食品？請包括在學校、家中、快餐店、外賣店或無需下車的得來速快餐店吃的快餐食品。

**CC32**

*IF NEEDED, SAY: “Such as food you get at McDonald’s, KFC, Panda Express or Taco Bell.”*

*IF NEEDED, SAY: “例如，您在麥當勞、肯塔基炸雞店、熊貓快餐店或塔可鐘（Taco Bell）購買的食品。”*

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

REFUSED..................................................-7
DON'T KNOW..........................................-8

**Commute from School to Home**

PROGRAMMING NOTE QC09_C8:

IF QC09_A7 = 1 (ATTENDED SCHOOL LAST WEEK), CONTINUE WITH QC09_C8 AND DISPLAY “How many days in the past week”;

IF QC09_A8 = 1 (ATTENDED SCHOOL LAST YEAR), CONTINUE WITH QC09_C8 AND DISPLAY “During the school year, on how many days during a typical week”;

ELSE GO TO PROGRAMMING NOTE QC09_C12

Now I’m going to ask you about physical activity.

現在，我要向您提出一些有關身體活動的問題。

**QC09_C8**

{How many days in the past week/During the school year, on how many days during a typical week} did (CHILD) walk, bicycle, or skateboard home from school?

{CHILD NAME /AGE/SEX}上週有幾天從學校步行、騎自行車或溜滑板回家？

**CC29**

*[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
About how many minutes \{did/does\} it take \{him/her\} without any stops?

从學校步行、騎自行車或溜滑板回家大約需要多少分鐘？

\[ \begin{array}{c|c}
\text{CC30} & \text{______ MINUTES} \\
\text{REFUSED} & -7 \\
\text{DON'T KNOW} & -8
\end{array} \]

Could \{he/she\} walk or bike home from school in 30 minutes or less?

\{he/she\}是否能夠在30分鐘內從學校步行或騎自行車回家？

\[ \begin{array}{c|c}
\text{CC33} & \\
\text{YES} & 1 \\
\text{NO} & 2 \\
\text{REFUSED} & -7 \\
\text{DON'T KNOW} & -8
\end{array} \]

What is the name of the school (CHILD) goes to or last attended?

\{CHILD NAME /AGE/SEX\}所上學校或最後上的學校的名稱是什麼？

\[ \begin{array}{c|c}
\text{CB22} & \\
\text{NAME OF SCHOOL} & \\
\text{CHILD NOT IN SCHOOL} & 0 \\
\text{PRE-SCHOOL/DAYCARE} & 1 \\
\text{KINDERGARTEN} & 2 \\
\text{ELEMENTARY} & 3 \\
\text{INTERMEDIATE} & 4 \\
\text{JUNIOR HIGH} & 5 \\
\text{MIDDLE SCHOOL} & 6 \\
\text{CHARTER} & 7 \\
\text{OTHER SPECIFY} & 91 \\
\text{REFUSED} & -7 \\
\text{DON'T KNOW} & -8
\end{array} \]
**PHYSICAL ACTIVITY**

**PROGRAMMING NOTE QC09_C12:**
IF CAGE < 5, SKIP TO QC09_C13;
ELSE CONTINUE WITH QC09_C12

**QC09_C12**  
Not including school PE, on how many days of the past 7 days was (CHILD) physically active for at least 60 minutes total?  
請勿包括學校的體育課，在過去七天中，(CHILD NAME/AGE/SEX)有幾天每天至少總共進行60分鐘的身體活動？

<table>
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<td>_____ DAYS [HR: 0-7]</td>
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<tr>
<td>REFUSED .................................................... -7</td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW ............................................ -8</td>
<td></td>
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</tbody>
</table>

**PARK USE**

**PROGRAMMING NOTE QC09_C13:**
IF CAGE < 1 GO TO QC09_D1;
ELSE CONTINUE WITH QC09_C13

**QC09_C13**  
Has (CHILD) been to a park in the past 30 days?  
在過去三十天中，(CHILD NAME/AGE/SEX)是否曾經到公園去？

<table>
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</tr>
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<td></td>
</tr>
<tr>
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<td></td>
</tr>
<tr>
<td>DON'T KNOW ................................................ -8</td>
<td></td>
</tr>
</tbody>
</table>

**QC09_C14**  
Is there a park, playground, or open space within walking distance of your home?  
在您的住處步行可到的地方是否有公園、運動場或開闊的空間？

<table>
<thead>
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<th>CC36</th>
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</thead>
<tbody>
<tr>
<td>YES ........................................................................ 1</td>
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</tr>
<tr>
<td>NO ........................................................................ 2</td>
<td></td>
</tr>
<tr>
<td>REFUSED ..................................................... -7</td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW ................................................ -8</td>
<td></td>
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</tbody>
</table>

**QC09_C15**  
Do you strongly agree, agree, disagree, or strongly disagree with the following statement?  
您對以下陳述是極為贊成、贊成、不贊成還是極不贊成？

The park or playground closest to where I live is safe during the day.  
離我的住處最近的公園或遊樂場白天很安全。

<table>
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<tr>
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<tr>
<td>DISAGREE .......................................................... 3</td>
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</tr>
<tr>
<td>STRONGLY DISAGREE ............................................. 4</td>
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</tr>
<tr>
<td>REFUSED .......................................................... -7</td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW ..................................................... -8</td>
<td></td>
</tr>
</tbody>
</table>
SEDENTARY TIME

PROGRAMMING NOTE QC09_C16:
IF CAGE ≤ 1 YEAR GO TO QC09_D1;
ELSE IF CAGE > 1 YEAR, CONTINUE WITH QC09_C16

QC09_C16  Thinking just about SATURDAYs AND SUNDAYs, about how many hours does (CHILD) usually watch TV or play video games (such as Playstation)?
請僅想一想星期六及星期日的情況。{CHILD NAME /AGE/SEX}每天通常大約花幾小時看電視或玩電視遊戲（例如 Playstation）?

CG10

[IF > 1 HOUR, VERIFY: “That’s {xx} hours PER DAY?”]  
[IF > 0, BUT < 1, ENTER 94]

______ HOURS  

DOESN’T HAVE TV..................................................93  
MORE THAN ZERO, LESS THAN 1 HOUR...........94  
REFUSED..............................................................-7  
DON’T KNOW..........................................................-8

PROGRAMMING NOTE QC09_C17:  
IF CAGE < 3 YEARS, GO TO QC09_D1;  
ELSE IF CAGE ≥ 3 YEARS CONTINUE WITH QC09_C17

QC09_C17  About how many hours per day on a typical SATURDAY OR SUNDAY does (CHILD) use a computer for fun, not schoolwork?
在一個普通的星期六或星期日， {CHILD NAME/AGE/SEX} 每天大約花幾小時玩電腦，而不是用來做功課?

CG11

[IF > 0, BUT < 1, ENTER 94]

______ HOURS  

DOESN’T HAVE ACCESS TO A PC..............................93  
MORE THAN ZERO, LESS THAN 1 HOUR...........94  
REFUSED..............................................................-7  
DON’T KNOW..........................................................-8
Section D – Health Care Access and Utilization

Usual Source of Care

QC09_D1 The next questions are about where (CHILD) goes for health care.
下面的是有關 {孩子名字 / 年齡/性別} 在哪裡尋求醫療護理的問題。

Is there a place you usually take {him/her} to when {he/she} is sick or you need advice about {his/her} health?
當 {他/她} 生病或您需要徵詢有關 {他/她} 的健康建議時，您有沒有一個常

带 {他/她} 去的地方？

CD1

YES.................................................................1
NO..............................................................2  [GO TO QC09_D3]
DOCTOR/(HIS/HER) DOCTOR..........................3
KAISER.........................................................4
MORE THAN ONE PLACE...............................5
REFUSED.....................................................-7
DON'T KNOW.............................................-8

Programming Note QC09_D2:

IF QC09_D1 = 1, 5, -7, OR -8, DISPLAY "What kind of place do you take {him/her} to most often—a medical";
ELSE IF QC09_D1 = 3 DISPLAY "Is (his/her) doctor in a private";
ELSE IF QC09_D1 = 4, FILL QC09_D2 = 1 AND GO TO PN QC09_D3

QC09_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?
您最常帶 {他/她} 去什麼樣的地方－醫生辦公室、診所或醫院診所、急診室或其他地方？

CD3

DOCTOR’S OFFICE/KAISER/OTHER HMO ..........1
CLINIC/HEALTH CENTER/HOSPITAL CLINIC ......2
EMERGENCY ROOM.......................................3
SOME OTHER PLACE (SPECIFY: ________) .........91
NO ONE PLACE............................................94
REFUSED.....................................................-7
DON'T KNOW.............................................-8

Emergency Room (General)

Programming Note QC09_D3:

IF QC09_A14 = 1 (YES WENT TO ER PAST 12 MONTHS FOR ASThma) OR IF QC09_A19 = 1 (YES WENT TO ER PAST 12 MONTHS FOR OTHER CONDITION), MARK YES ON QC09_D3 AND GO TO QC09_D4;
ELSE CONTINUE WITH QC09_D3

QC09_D3 During the past 12 months, did (CHILD) visit a hospital emergency room?
在過去 12 個月中，{孩子名字 / 員數/性別} 被送入醫院急診室？

CD12

YES.................................................................1
NO..............................................................2
REFUSED.....................................................-7
DON'T KNOW.............................................-8
**Visits to Medical Doctor**

**QC09_D4**

During the past 12 months, how many times has (CHILD) seen any kind of medical doctor?

在過去十二個月中，{}曾經幾次在任何類型的醫生處就診？

CD6

_________________ TIMES

REFUSED.................................................................-7
DON'T KNOW........................................................-----8

**Programming Note QC09_D5:**

IF QC09_D4 > 0, GO TO PROGRAMMING NOTE QC09_D6;
ELSE IF QC09_D4 = 0, -7, OR -8, CONTINUE WITH QC09_D5

**QC09_D5**

About how long has it been since (he/she) last saw a medical doctor?

{他/她} 上一次看醫生到現在已有多長時間？

CD7

ONE YEAR AGO OR LESS.................................1
MORE THAN 1 YEAR UP TO 2 YEARS AGO........2
MORE THAN 2 YEARS UP TO 3 YEARS AGO......3
MORE THAN 3 YEARS AGO............................4
NEVER.................................................................5
REFUSED.............................................................-7
DON'T KNOW........................................................-8

**Personal Doctor**

**Programming Note QC09_D6:**

IF QC09_D1 = 1 OR 3 OR 4 OR 5 AND [QC09_A11 = 1 (STILL HAS ASTHMA) OR QC09_A12 = 1 (EPISODE OF ASTHMA IN PAST 12 MONTHS) OR QC09_A26 = 1 (HAS OTHER CONDITION)], CONTINUE WITH QC09_D6;
ELSE SKIP TO PN QC09_D7

**QC09_D6**

Does (he/she) have a personal doctor or medical provider who is (his/her) main provider?

{he/she}是否有一位個人醫生或醫療服務提供者擔任{his/her}主要服務提供者？

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: “可以是一位全科醫生、專科醫生、醫生助理、護士或其他健康服務提供者。”]

YES.................................................................1
NO.................................................................2
REFUSED.............................................................-7
DON'T KNOW........................................................-8
**Patient-centered care: Information**

**Programming Note QC09_D7:**
IF QC09_A11 = 1 (STILL HAS ASTHMA) OR QC09_A12 = 1 (EPISODE OF ASTHMA IN PAST 12 MONTHS) OR QC09_A26 = 1 AND [QC09_D4 > 0 (HAD A DOCTOR VISIT IN THE PAST 12 MONTHS) OR QC09_D5 = 1 (SAW DOCTOR LESS THAN A YEAR AGO)], CONTINUE WITH QC09_D7; ELSE SKIP TO QC09_D9

**QC09_D7**
During the past 12 months, did you phone or e-mail the doctor’s office with a medical question about (CHILD)?

在過去十二個月中，您是否曾經打電話或發電子郵件給醫生診所，詢問有關 (CHILD NAME /AGE/SEX) 的醫療問題？

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<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
<th>DON'T KNOW</th>
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<tr>
<td></td>
<td>1</td>
<td>2</td>
<td>-7</td>
<td>-8</td>
</tr>
</tbody>
</table>

**QC09_D8**
How often did you get an answer as soon as you needed it? Would you say...

您在需要時獲得對您的醫療問題答覆的頻率有多高？您認為是...

<table>
<thead>
<tr>
<th>CD35</th>
<th>Never</th>
<th>Sometimes</th>
<th>Usually</th>
<th>Always</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td>2</td>
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<td>4</td>
</tr>
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</table>

<table>
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<tr>
<th></th>
<th>REFUSED</th>
<th>DON'T KNOW</th>
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<td>-7</td>
<td>-8</td>
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</table>

**Care Coordination**

**Programming Note QC09_D9:**
IF QC09_D1 = 1, 3, 4, OR 5 AND QC09_D6 = 1 AND QC09_A11 = 1 OR QC09_A12 = 1 OR QC09_A26 = 1, CONTINUE WITH QC09_D9; ELSE SKIP TO QC09_D10

**QC09_D9**
Is there anyone at (CHILD’s) doctor’s office or clinic who helps coordinate {his/her} care with other doctors or services such as tests or treatments?

在 (CHILD NAME /AGE/SEX) 的醫生辦公室或診所是否有人幫助協調其他醫生對 {him/her} 提供的護理或服務，例如測試或治療？

<table>
<thead>
<tr>
<th>CD36</th>
<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
<th>DON'T KNOW</th>
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<tr>
<td></td>
<td>1</td>
<td>2</td>
<td>-7</td>
<td>-8</td>
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</table>
**DELAYS IN CARE**

**QC09_D10**  During the past 12 months, did you either delay or not get a medicine that a doctor prescribed for (CHILD)?

在過去十二個月中，您是否有過延遲或沒有配取醫生為{}開的處方藥物的情況？

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>-7</td>
<td>-8</td>
</tr>
</tbody>
</table>

**QC09_D11**  Was cost or lack of insurance a reason why you delayed or did not get the prescription?

醫療費用或沒有保險是不是您延遲或沒有領取處方藥的一個原因？

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
<th>DON'T KNOW</th>
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</thead>
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<td>1</td>
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</tr>
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</table>

**PROGRAMMING NOTE QC09_D12:**

IF QC09_A11 = 1 (STILL HAS ASTHMA) OR QC09_A12 = 1 (EPISODE OF ASTHMA PAST 12 MONTHS), CONTINUE WITH QC09_D12;
ELSE SKIP TO QC09_D13

**QC09_D12**  Was this prescription for {his/her} asthma?

這是為{his/her}哮喘開的處方藥嗎？

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
<th>DON'T KNOW</th>
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<tr>
<td>1</td>
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<td>-7</td>
<td>-8</td>
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</table>

**PROGRAMMING NOTE QC09_D13:**

IF QC09_A26 = 1 (HAS OTHER CONDITION), CONTINUE WITH QC09_D13;
ELSE SKIP TO QC09_D14

**QC09_D13**  Was this prescription for {his/her} (INSERT CONDITION(S) FROM QC09_A27)?

這是為{his/her}(INSERT CONDITION(S) FROM QC09_A27)開的處方藥嗎？

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
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<tbody>
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<td>1</td>
<td>2</td>
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</tbody>
</table>
QC09_D14  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?  在過去 12 個月中，您有沒有延遲或沒有尋求任何您覺得{他/她}需要的醫療護理—例如看醫生、專家或其他醫療專業人員？

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
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</table>

QC09_D15  Was cost or lack of insurance a reason why you delayed or did not get the medical care you felt (he/she) needed?  醫療費用或沒有保險是不是您延遲或沒有讓{he/she}接受您認為必要的醫療護理的一個原因？

<table>
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<tr>
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PROGRAMMING NOTE QC09_D16:
IF QC09_A11 = 1 (STILL HAS ASTHMA) OR QC09_A12 = 1 (EPISODE OF ASTHMA PAST 12 MONTHS), CONTINUE WITH QC09_D16;  ELSE SKIP TO QC09_D17

QC09_D16  Was this medical care for {his/her} asthma?  這是為{his/her}哮喘提供的醫療護理嗎？

<table>
<thead>
<tr>
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</table>

PROGRAMMING NOTE QC09_D17:
IF QC09_A26 = 1 (HAS OTHER CONDITION), CONTINUE WITH QC09_D17;  ELSE SKIP TO QC09_D18

QC09_D17  Was this medical care for {his/her} {INSERT CONDITION(S) FROM QC09_A27}?  這是為{his/her}({INSERT CONDITION(S) FROM QC09_A27}) 提供的醫療護理嗎？

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
<th>DON'T KNOW</th>
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</table>
**Doctor Discussed Child’s Nutrition**

**QC09_D18**  When (CHILD) had {his/her} last routine physical exam, did you and a doctor talk about {his/her} nutrition or healthy eating?

當 {CHILD/AGE/SEX} 最後一次接受常規體檢時，您是否與醫生討論 {his/her}營養或健康飲食的問題﹖

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<td>Refused</td>
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<tr>
<td>Don't know</td>
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</table>

**Flu Shot**

**PROGRAMMING NOTE QC09C_D19:**

IF CAGE < 6 MONTHS, GO TO QC09_E1;
ELSE IF CAGE ≥ 6 MONTHS, CONTINUE WITH QC09_D19

**QC09_D19**  During the past 12 months, did (CHILD) get a flu shot or the nasal flu vaccine, called “Flumist”?

在過去十二個月中，{CHILD NAME /AGE/SEX} 是否曾經注射流感防疫針或流感疫苗鼻噴劑 Flumist？

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<td>Yes</td>
<td>CD30</td>
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<tr>
<td>Refused</td>
<td></td>
</tr>
<tr>
<td>Don't know</td>
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</tbody>
</table>

**QC09_D20**  Did (he/she) have the flu shot or the nasal flu vaccine?

這是流感防疫針還是流感疫苗鼻噴劑？

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flu shot</td>
<td>CD41</td>
</tr>
<tr>
<td>Nasal/Flumist</td>
<td></td>
</tr>
<tr>
<td>Both</td>
<td></td>
</tr>
<tr>
<td>Refused</td>
<td></td>
</tr>
<tr>
<td>Don't know</td>
<td></td>
</tr>
</tbody>
</table>
PROGRAMMING NOTE QC09_D21:
IF QC09_D20 = 1 DISPLAY “flu shot”;
IF QC09_D20 = 2 DISPLAY “nasal flu vaccine”;
ELSE DISPLAY “vaccine”

QC09_D21  At what kind of place did {he/she} get {his/her} last {flu shot/nasal flu vaccine/vaccine}? 
{he/she}在何處注射{his/her}最近一次{流感防疫針/流感疫苗鼻噴劑/疫苗注射}?

CD42

DOCTOR’S OFFICE, KAISER, OR HMO..................1
COMMUNITY HEALTH CENTER, HEALTH DEPT.,
HEALTH DEPT CLINIC,
OR OTHER TYPE OF CLINIC..........................2
A STORE..................................................3
PARENT’S WORKPLACE..................................4
A SENIOR, RECREATION,
OR COMMUNITY CENTER............................5
HOSPITAL OR EMERGENCY ROOM....................6
PLACE OF WORSHIP.................................7
SCHOOL.................................................8
DON’T KNOW.........................................-7
REFUSED.............................................-8
Section E – Public Programs

TANF/CalWORKS

PROGRAMMING NOTE SECTION E:
IF POVERTY = 1, 2, 3, OR 5 (INCOME LESS THAN OR EQUAL TO 300% OF POVERTY LEVEL),
CONTINUE WITH QC09_E1;
ELSE SKIP TO QC09_F1

QC09_E1  Is (CHILD) now on TANF or CalWORKS?
{} 目前是否參加 TANF 或 CalWORKS？

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 指貧困家庭臨時協助計劃；CalWORKS 指加州工作
機會與對兒童承擔責任的計劃。這兩項計劃用於取代 AFDC，即加州原來的
救濟計劃。”]

YES...................................................................................1
NO......................................................................................2
REFUSED........................................................................-7
DON'T KNOW.....................................................................-8

Food Stamps

QC09_E2  Is (CHILD) receiving Food Stamps?
{} 目前是否在領糧食券？

CE11A

[IF NEEDED, SAY: “You may receive benefits as stamps or through an EBT card.
EBT stands for Electronic Benefit Transfer card and is also known as the Golden
State Advantage Card.”]
[IF NEEDED SAY: “您領取的福利可以是食品券或以 EBT 卡的形式。
EBT 代表「電子福利轉帳」卡，亦稱為「州立福利金卡。”]

YES...................................................................................1
NO......................................................................................2
REFUSED........................................................................-7
DON'T KNOW.....................................................................-8
WIC

PROGRAMMING NOTE QC09_E3:
 IF CAGE > 6, GO TO QC09_F1;
 ELSE CONTINUE WITH QC09_E3

QC09_E3  Is (CHILD) on WIC now?
   {}  目前是否参加了 WIC？

CE11C

[IF NEEDED, SAY: “WIC means ‘Supplemental Food Program for Women, Infants and Children.””
 [IF NEEDED, SAY: “WIC 指為婦女、嬰兒和兒童提供的輔助食品計畫。”]

YES........................................................................................................1
NO...........................................................................................................2
REFUSED.........................................................................................-7
DON'T KNOW...................................................................................-8
Section F – Parental Involvement, Concerns, Mental Health

PARENTAL INVOLVEMENT

PROGRAMMING NOTE QC09_F1:
IF CAGE > 5 YEARS GO TO PROGRAMMING NOTE QC09_F4 INTRO;
ELSE CONTINUE WITH QC09_F1

QC09_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)?
在通常的一週中，您或任何其他家庭成員大約有幾天會給{}讀故事書或與{}一起看圖畫書？

CG14
EVERY DAY.................................................................1
3-6 DAYS ..............................................................2
1-2 DAYS ..............................................................3
NEVER .................................................................4
REFUSED ...............................................................-7
DON'T KNOW ..........................................................-8

QC09_F2
[In a usual week, about how many days do you or any other family member] play music or sing songs with (CHILD)?
[在通常的一週中，您或任何其他家庭成員大約有幾天會] ...與{}一起彈奏音樂或唱歌？

CG15
EVERY DAY.................................................................1
3-6 DAYS ..............................................................2
1-2 DAYS ..............................................................3
NEVER .................................................................4
REFUSED ...............................................................-7
DON'T KNOW ..........................................................-8

QC09_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?
[在通常的一週中，您或任何其他家庭成員大約有幾天會.] ......帶{}外出，例如去公園、食品店、遊樂場或教堂？

CG16
EVERY DAY.................................................................1
3-6 DAYS ..............................................................2
1-2 DAYS ..............................................................3
NEVER .................................................................4
REFUSED ...............................................................-7
DON'T KNOW ..........................................................-8
Parental Concerns

PROGRAMMING NOTE QC09_F4 INTRO:
IF CAGE < 4 MONTHS, GO TO QC09_F25;
IF CAGE ≥ 6 YEARS, GO TO QC09_F10;
ELSE IF CAGE ≥ 4 MONTHS AND < 6 YEARS, CONTINUE WITH QC09_F4 INTRO

QUESTIONS QC09_F4-QC09_F14 ARE DRAWN FROM THE SURVEY EDITION OF PARENTS’ EVALUATION OF DEVELOPMENTAL STATUS (PEDS) AND DO NOT HAVE AN IMMEDIATE CLINICAL APPLICATION. THESE ITEMS ARE COPYRIGHTED AND MAY NOT BE USED WITHOUT EXPRESS PERMISSION FROM THE AUTHOR (FRANCES P. GLASGOW@VANDERBILT.EDU).

QC09_F4 INTRO
The next questions are about concerns you may have about your child. After each one, tell me if you are concerned a lot, a little, or not at all.

PROGRAMMING NOTE QC09_F4:
IF CAGE > 9 MONTHS GO TO QC09_F5;
ELSE IF CAGE ≤ 9 MONTHS CONTINUE WITH QC09_F4

QC09_F4
How your child makes speech sounds? [Are you concerned a lot, a little, or not at all?]

您的孩子說話發音的情況？您是... [您是十分擔心、有些擔心還是根本不擔心？]

CG17

A LOT.............................................................................. 1 [GO TO QC09_F6]
A LITTLE........................................................................ 2 [GO TO QC09_F6]
NOT AT ALL.................................................................. 3 [GO TO QC09_F6]
REFUSED.........................................................................-7 [GO TO QC09_F6]
DON’T KNOW..............................................................-8 [GO TO QC09_F6]

QC09_F5
How your child talks and makes words? [Are you concerned a lot, a little, or not at all?]

您的孩子講話和用詞的情況？您是... [您是十分擔心、有些擔心還是根本不擔心？]

CG17A

A LOT.............................................................................. 1
A LITTLE........................................................................ 2
NOT AT ALL.................................................................. 3
REFUSED.........................................................................-7
DON’T KNOW..............................................................-8
PROGRAMMING NOTE QC09_F6:
IF CAGE < 18 MONTHS, GO TO QC09_F7;
ELSE IF CAGE ≥ 18 MONTHS CONTINUE WITH QC09_F6

QC09_F6  How well your child understands what you say? [Are you concerned a lot, a little, or not at all?]
您的孩子對您說的話的理解程度？[您是十分擔心、有些擔心還是根本不擔心？]

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<thead>
<tr>
<th>Rating</th>
<th>Chinese</th>
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<tbody>
<tr>
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<td>A LITTLE</td>
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<tr>
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<td>REFUSED</td>
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<tr>
<td>DON'T KNOW</td>
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</tbody>
</table>

QC09_F7  How your child uses {his/her} hands and fingers to do things? [Are you concerned a lot, a little, or not at all?]
您的孩子使用{}手和手指做事的靈活程度？[您是十分擔心、有些擔心還不是根本不擔心？]

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<thead>
<tr>
<th>Rating</th>
<th>Chinese</th>
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<tbody>
<tr>
<td>A LOT</td>
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<td>REFUSED</td>
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<tr>
<td>DON'T KNOW</td>
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</table>

QC09_F8  How well your child uses {his/her} arms and legs? [Are you concerned a lot, a little, or not at all?]
您的孩子使用{}手臂和腿的靈活程度？[您是十分擔心、有些擔心還是根本不擔心？]

<table>
<thead>
<tr>
<th>Rating</th>
<th>Chinese</th>
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<tbody>
<tr>
<td>A LOT</td>
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<td>A LITTLE</td>
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<tr>
<td>NOT AT ALL</td>
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<td>REFUSED</td>
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<td>DON'T KNOW</td>
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**QC09_F9** How well your child can see or hear? [Are you concerned a lot, a little, or not at all?]

您的孩子的視力和聽力水平？ [您是十分擔心、有些擔心還是根本不擔心？]

- A LOT................................................................. 1
- A LITTLE............................................................ 2
- NOT AT ALL...................................................... 3
- REFUSED.......................................................... -7
- DON'T KNOW..................................................... -8

**PROGRAMMING NOTE QC09_F10:**
IF CAGE IS ≤ 9 MONTHS, GO TO QC09_F25;
IF CAGE > 6 YEARS, GO TO QC09_F15;
ELSE IF CAGE = 10 MONTHS TO 6 YEARS, CONTINUE WITH QC09_F10

**QC09_F10** How your child gets along with others? [Are you concerned a lot, a little, or not at all?]

您的孩子與其他人相處的情況？ [您是十分擔心、有些擔心還是根本不擔心？]

- A LOT................................................................. 1
- A LITTLE............................................................ 2
- NOT AT ALL...................................................... 3
- REFUSED.......................................................... -7
- DON'T KNOW..................................................... -8

**QC09_F11** Your child’s feelings and moods? [Are you concerned a lot, a little, or not at all?]

您的孩子的感情和情緒？ [您是十分擔心、有些擔心還是根本不擔心？]

- A LOT................................................................. 1
- A LITTLE............................................................ 2
- NOT AT ALL...................................................... 3
- REFUSED.......................................................... -7
- DON'T KNOW..................................................... -8
**QC09_F12**  How your child behaves? [Are you concerned a lot, a little, or not at all?]

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
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<tbody>
<tr>
<td>A LOT</td>
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<td>REFUSED</td>
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<tr>
<td>DON'T KNOW</td>
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</table>

**QC09_F13**  How your child is learning to do things for {himself/herself}? [Are you concerned a lot, a little, or not at all?]

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<thead>
<tr>
<th>Response</th>
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<tbody>
<tr>
<td>A LOT</td>
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<td>A LITTLE</td>
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**QC09_F14**  Whether your child can do what other children {his/her} age can do? [Are you concerned a lot, a little, or not at all?]

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
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<tbody>
<tr>
<td>A LOT</td>
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<td>DON'T KNOW</td>
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**DEVELOPMENTAL ASSESSMENT**

**QC09_F15**  Did a doctor or other professional ever refer {him/her} to a specialist regarding his development?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
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<tbody>
<tr>
<td>YES</td>
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<td>NO</td>
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<td>REFUSED</td>
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<tr>
<td>DON'T KNOW</td>
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</tbody>
</table>
QC09_F16  Did they ever refer {him/her} for speech, language or hearing testing?
他們是否曾經推薦 {him or her} 接受言語、語言或聽力測試?

CF47

YES.................................................................1
NO.................................................................2
REFUSED.....................................................-7
DON'T KNOW.............................................-8

THE NEXT 7 ITEMS (QC09_F17-QC07_F23) ARE INCLUDED IN THIS SURVEY WITH PERMISSION AS INDICATED:

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MENTAL HEALTH

PROGRAMMING NOTE QC09_F17:
IF CAGE < 4 YEARS, GO TO QC09_F25;
ELSE CONTINUE WITH QC09_F17

I am going to read a list of items that describe children. For each item, please tell me if it has been not true, somewhat true, or certainly true of (CHILD) during the past six months.

QC095_F17  {He/She} is generally well behaved, usually does what adults request [...]during the past 6 months.
通常很聽話，會按照大人的要求去做。

CG28

NOT TRUE.......................................................1
SOMETHAT TRUE.................................2
CERTAINLY TRUE..................................3
REFUSED......................................................-7
DON'T KNOW.............................................-8

QC09_F18  {He/She} has many worries or often seems worried [...]during the past 6 months.
有很多煩惱的事或經常看上去很煩惱。

CG29

NOT TRUE.......................................................1
SOMETHAT TRUE....................................2
CERTAINLY TRUE..................................3
REFUSED......................................................-7
DON'T KNOW.............................................-8
QC09_F19  {He/She} is often unhappy, depressed or tearful [...during the past 6 months].

{He/She} is often 不快樂、憂鬱或哭泣。

CG30

NOT TRUE ......................................................... 1
SOMEWAT TRUE ............................................ 2
CERTAINLY TRUE ......................................... 3
REFUSED ...................................................... -7
DON'T KNOW ................................................. -8

QC09_F20  {He/She} gets along better with adults than with other children [...during the past 6 months].

與成年人相處好過與兒童相處。

CG31

NOT TRUE ......................................................... 1
SOMEWAT TRUE ............................................ 2
CERTAINLY TRUE ......................................... 3
REFUSED ...................................................... -7
DON'T KNOW ................................................. -8

QC09_F21  {He/She} has good attention span, sees chores or homework through to the end.

能夠集中注意力，完成所做的事情或家庭作業。

CG32

NOT TRUE ......................................................... 1
SOMEWAT TRUE ............................................ 2
CERTAINLY TRUE ......................................... 3
REFUSED ...................................................... -7
DON'T KNOW ................................................. -8

QC09_F22  Overall, do you think your child has difficulties in any of the following areas: emotions, concentration, behavior, or being able to get along with other people?

總體而言，您是否認為您的孩子在以下任何一個方面存在困難：情感、注意力集中、行為或與他人相處？

CF30

YES ...................................................................... 1
NO ....................................................................... 2
REFUSED ...................................................... -7
DON'T KNOW ................................................. -8
[GO TO QC09_F24]

QC09_F23  Are these difficulties minor, definite, or severe?

此類困難的程度是輕微、有限還是嚴重？

CF31

MINOR ............................................................... 1
DEFINITE .......................................................... 2
SEVERE .............................................................. 3
REFUSED ...................................................... -7
DON'T KNOW ................................................. -8
[GO TO QC09_F24]
During the past 12 months, did (CHILD) receive any psychological or emotional counseling?
在過去12個月中，{CHILD NAME / AGE / SEX}是否曾經接受任何心理或情感諮詢？

YES.................................................................1
NO...............................................................2
REFUSED....................................................-7
DON'T KNOW.............................................-8

The next questions are about television programming your child might watch.
以下是有關您的孩子可能看的電視節目的問題。

Have you heard about the PBS TV show “Sid the Science Kid”?
您是否聽說過PBS電視節目「Sid the Science Kid」？

YES.................................................................1
NO...............................................................2
[GO TO QC09_F29]
REFUSED....................................................-7
[GO TO QC09_F29]
DON'T KNOW.............................................-8
[GO TO QC09_F29]

Has (CHILD) seen the PBS TV show “Sid the Science Kid”?
{CHILD NAME / AGE / SEX} 是否看過 PBS 電視節目「Sid the Science Kid」？

YES.................................................................1
NO...............................................................2
[GO TO QC09_F29]
DOESN’T WATCH TV........................................3
[GO TO QC09_F29]
REFUSED....................................................-7
[GO TO QC09_F29]
DON'T KNOW.............................................-8
[GO TO QC09_F29]

Tell me if you strongly agree, agree, disagree, or strongly disagree with the following statements:
告訴我您對以下陳述是極為贊成、贊成、不贊成還是極不贊成：

(CHILD) is learning science from Sid.
{CHILD NAME / AGE / SEX} 從 Sid 那裡學習科學知識。

[IF NEEDED, SAY: “Do you strongly agree, agree, disagree, or strongly disagree?”]
[IF NEEDED, SAY: 「您是極為贊成、贊成、不贊成還是極不贊成？」]

STONGLY AGREE.............................................1
AGREE..........................................................2
DISAGREE.....................................................3
STRONGLY DISAGREE....................................4
REFUSED....................................................-7
DON'T KNOW.............................................-8
QC09_F28  “Sid the Science Kid” increases preschoolers’ interest in science.
「Sid the Science Kid」提高學齡前兒童對科學的興趣。

CF63  [IF NEEDED, SAY: “Do you strongly agree, agree, disagree, or strongly disagree?”]
[IF NEEDED, SAY：「您是極為贊成、贊成、不贊成還是極不贊成？」]
STRONGLY AGREE..............................................1
AGREE..........................................................2
DISAGREE......................................................3
STRONGLY DISAGREE.....................................4
REFUSED....................................................-7
DON’T KNOW...............................................-8

FIRST 5 PARENT KIT
QC09_F29  Do you know that First 5 California, a state agency, provides a free Parent Kit to parents of young children?
您是否知道加州政府機構 First 5 California 向年幼兒童的父母提供免費「父母必讀資料」？

CF35
YES.........................................................................1
NO.........................................................................2  [GO TO QC09_G1]
REFUSED..........................................................-7  [GO TO QC09_G1]
DON’T KNOW....................................................-8  [GO TO QC09_G1]

QC09_F30  Have you ever received this Parent Kit?
您是否曾經收到這套「父母必讀資料」？

CF36
YES.........................................................................1
NO.........................................................................2  [GO TO QC09_G1]
REFUSED..........................................................-7  [GO TO QC09_G1]
DON’T KNOW....................................................-8  [GO TO QC09_G1]

QC09_F31  Did you use any of the materials from this Parent Kit?
您是否使用過「父母必讀資料」中提供的任何信息？

CF39
YES.........................................................................1
NO.........................................................................2  [GO TO QC09_G1]
REFUSED..........................................................-7  [GO TO QC09_G1]
DON’T KNOW....................................................-8  [GO TO QC09_G1]

QC09_F32  On a scale of 1-10, with 10 being most useful and 1 the least, how useful was the Parent Kit?
請按照1-10的評分標準，其中10表示十分有用，1表示毫無用處，您認為這套「父母必讀資料」的用處有多大？

CF37
________________________RESPONDENT’S NUMBER FROM 1 (WORST) TO 10 (BEST)
REFUSED..........................................................-7
DON’T KNOW....................................................-8
Section G – Child Care, Neighborhood Cohesion

PROGRAMMING NOTE QC09_G1:
IF CAGE ≥ 7, DO NOT DISPLAY LAST SENTENCE OF FIRST PARAGRAPH

QC09_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.}

以下是有關幼兒看護的問題。幼兒看護是指由家長、法定監護人或繼父母之外的任何其他人照料的安排。這包括學前班和託兒所，但不包括幼稚園。

Do you currently have any kind of regular childcare arrangements for (CHILD) for 10 hours or more per week?

您目前是否為{}作出了每週 10 小時或 10 小時以上的任何類型的定期幼兒看護安排？

CG1

YES................................................................................... 1
NO............................................................................... 2 [GO TO QC09_G10]
REFUSED................................................................. -7 [GO TO QC09_G10]
DON’T KNOW............................................................. -8 [GO TO QC09_G10]

QC09_G2

Altogether, how many hours is (CHILD) in childcare during a typical week? Include all combinations of care arrangements.

{孩子名字 / 年齡 / 性別} 通常一週內在托兒所的時間有多少小時？請包括各種護理安排。

CG2

______ HOURS [SR: 10-168 HRS]

REFUSED..................................................................... -7 [GO TO QC09_G10]
DON’T KNOW............................................................. -8 [GO TO QC09_G10]

PROGRAMMING NOTE QC09_G3:
IF QC09_G2 < 10 (HOURS IN CHILDCARE), GO TO QC09_G10;
ELSE CONTINUE WITH QC09_G3

QC09_G3

During a typical week does (CHILD) receive childcare from...a grandparent or other family member?

我接下來要提出有關在通常的一週中{}接受幼兒看護的問題。{}是由祖父母或其他家庭成員照看嗎？

CG3A

YES............................................................................... 1
NO............................................................................. 2
REFUSED..................................................................... -7
DON’T KNOW............................................................. -8
PROGRAMMING NOTE QC09_G4:
IF CAGE ≥ 7 YEARS, GO TO QC09_G6;
ELSE CONTINUE WITH QC09_G4

QC09_G4  [Does (CHILD) receive childcare from]...a Head Start or state preschool program?
[在通常的一週中{ }是在以下計劃接受幼兒看護嗎？] Head Start（學前起步計劃）或州政府學前班計劃

CG3B
YES.................................................................1
NO..............................................................2
REFUSED.......................................................-7
DON'T KNOW..............................................-8

QC09_G5  [Does (CHILD) receive childcare from]...some other preschool or nursery school?
[在通常的一週中{ }是在以下機構接受幼兒看護嗎？]其他學前班或託兒所

CG3C
YES.................................................................1
NO..............................................................2
REFUSED.......................................................-7
DON'T KNOW..............................................-8

QC09_G6  [Does (CHILD) receive childcare from]...a childcare center that is not in someone’s home?
[在通常的一週中{ }是在以下機構接受幼兒看護嗎？]不是設在某人家中的幼兒看護中心

CG3D
YES.................................................................1
NO..............................................................2
REFUSED.......................................................-7
DON'T KNOW..............................................-8

QC09_G7  [Does (CHILD) receive childcare from]...a non-family member who cares for (CHILD) in your home?
[在通常的一週中{ }是在以下機構接受幼兒看護嗎？]一位家庭成員之外的人士在您的家中照看{ }

CG3E
YES.................................................................1
NO..............................................................2
REFUSED.......................................................-7
DON'T KNOW..............................................-8
**QC09_G8**

[Does (CHILD) receive childcare from]...a non-family member who cares for (CHILD) in his or her home?

[在通常的一週中{}是在以下機構接受幼兒看護嗎？]一位家庭成員之外的人士在他/她自己的家中照看{}

CG3F

YES..............................................................................1
NO............................................................................2
REFUSED......................................................................-7
DON'T KNOW..................................................................-8

PROGRAMMING NOTE QC09_G9:

IF [QC09_G3 OR QC09_G7 = 1 (CHILD RECEIVES CHILDCARE FROM GRANDPARENT OR NON-FAMILY MEMBER IN CHILD'S HOME)] OR IF [QC09_G4 ≠ 1 AND QC09_G5 ≠ 1 AND QC09_G6 ≠ 1 AND QC09_G8 ≠ 1 (NOT IN HEAD START, PRESCHOOL PROGRAM, OR IN CARE IN NON-FAMILY MEMBER HOME)], GO TO QC09_G10;
ELSE CONTINUE WITH QC09_G9;
IF ONLY ONE OF QC09_G4, QC09_G5, QC09_G6, OR QC09_G8 = 1, DISPLAY "Is this AND "provider";
ELSE DISPLAY, "Are all of these AND "providers"

**QC09_G9**

{Is this/Are all of these} child care provider[s] licensed by the state of California?

這名幼兒看護人有沒有獲得加州政府的執照？

CG3G

YES (ALL LICENSED)..................................................1
NO (NONE LICENSED)..............................................2
SOME LICENSED AND SOME NOT.........................3
REFUSED......................................................................-7
DON'T KNOW..................................................................-8

**QC09_G10**

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?

在過去 12 個月中，有沒有一週或更長的時間內，您無法為{孩子名字　/　年齡/　性別}找到幼兒看護？

CG5

YES..............................................................................1
NO............................................................................2
[GO TO QC09_G12]
REFUSED......................................................................-7
[GO TO QC09_G12]
DON'T KNOW..................................................................-8
[GO TO QC09_G12]
QC09_G11  What is the main reason you were unable to find childcare for (CHILD) at that time?
當時您無法為{}找到幼兒看護的主要原因是什麼？

CG6  [IF NEEDED, SAY: “Main reason is the most important reason.”]
[IF NEEDED, SAY: “主要原因是指最重要的原因。”]

CANN'T AFFORD ANY CHILD CARE............................................. 1
CANN'T FIND A PROVIDER WITH A SPACE........................... 2
THE HOURS AND LOCATION DIDN’T FIT MY NEEDS................... 3
CANN'T AFFORD THE QUALITY OF CHILDCARE I WANTED.......... 4
CANN'T FIND THE QUALITY OF CHILDCARE I WANTED............. 5
OTHER REASON...................................................................... 91
REFUSED............................................................................... 7
DON'T KNOW......................................................................... 8

Neighborhood Cohesion

Programming Note QC09_G12:
If child-first interview and no AR or if QC09_G12 through QC09_G16 not answered in adult interview, continue with QC09_G12; else skip to QC09_G17

QC09_G12  These next questions are about your neighborhood.
以下是有關您所在社區的問題。

Tell me if you strongly agree, agree, disagree or strongly disagree with the following statements:
請告訴我您對以下陳述是極為贊成、贊成、不贊成還是極不贊成。

People in my neighborhood are willing to help each other.
我所在社區的人願意互相幫助。

CG39  [IF NEEDED, SAY: “Do you strongly agree, agree, disagree, or strongly disagree?”]
[IF NEEDED, SAY: “您是極為贊成、贊成、不贊成還是極不贊成？”]

STRONGLY AGREE............................................................. 1
AGREE.................................................................................. 2
DISAGREE............................................................................. 3
STRONGLY DISAGREE......................................................... 4
REFUSED............................................................................... 7
DON'T KNOW......................................................................... 8
QC09_G13 People in my neighborhood do not get along with each other.
本社區的人通常不能和睦相處。

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<td>4</td>
<td>REFUSED</td>
<td>-7</td>
<td>DON'T KNOW</td>
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QC09_G14 People in this neighborhood can be trusted.
可以信任本社區的人。

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<td>DISAGREE</td>
<td>3</td>
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<tr>
<td>STRONGLY DISAGREE</td>
<td>4</td>
<td>REFUSED</td>
<td>-7</td>
<td>DON'T KNOW</td>
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QC09_G15 You can count on adults in this neighborhood to watch out that children are safe and don't get into trouble.
您可以依賴本社區的成年人，注意兒童的安全，使他們避免遇到麻煩。

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<td>AGREE</td>
<td>2</td>
<td>DISAGREE</td>
<td>3</td>
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<tr>
<td>STRONGLY DISAGREE</td>
<td>4</td>
<td>REFUSED</td>
<td>-7</td>
<td>DON'T KNOW</td>
<td>-8</td>
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</tbody>
</table>
SAFETY
QC09_G16  Do you feel safe in your neighborhood all of the time, most of the time, some of the time, or none of the time?
您在所在社區是所有的時間、大多數時間、部份時間還是沒有任何時間感到安全？

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<tr>
<th>CG42</th>
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<tbody>
<tr>
<td>ALL OF THE TIME</td>
<td>1</td>
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<td>MOST OF THE TIME</td>
<td>2</td>
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<tr>
<td>SOME OF THE TIME</td>
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<tr>
<td>NONE OF THE TIME</td>
<td>4</td>
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<td>REFUSED</td>
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<td>DON’T KNOW</td>
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CIVIC ENGAGEMENT

PROGRAMMING NOTE QC09_G17:
IF NOT ANSWERED IN ADULT (AM36) CONTINUE WITH QC09_G17;
ELSE GO TO SECTION H

QC09_G17  In the past 12 months, have you done any volunteer work or community service that you have not been paid for?
在過去十二個月中，您是否曾經做過任何義工或提供過任何不領取報酬的社區服務？

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<tr>
<th>CG43</th>
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<tbody>
<tr>
<td>YES</td>
<td>1</td>
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<tr>
<td>NO</td>
<td>2</td>
<td></td>
<td></td>
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<tr>
<td>REFUSED</td>
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<td>DON’T KNOW</td>
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Section H – Demographics, Part II

RACE/ETHNICITY
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. 為了確保我們把加州各種族和族裔的兒童都包括在調查中，我們需要最後向您提幾個有關 {孩子名字/歲數/性別} 的背景問題。

QC09_H1 Is (CHILD) Latino or Hispanic?
{孩子名字/歲數/性別} 是拉丁裔或西班牙裔嗎？

[IF NEEDED, SAY: “Such as Mexican or Central or South American?”]
[IF NEEDED, SAY: "例如，墨西哥人或中美南美洲人？"]

YES..........................................................1
NO............................................................2 [GO TO QC09_H3]
REFUSED..................................................-7 [GO TO QC09_H3]
DON’T KNOW.............................................-8 [GO TO QC09_H3]

QC09_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. {his/her}拉丁裔或西裔祖先或原國籍是哪里？例如，墨西哥人、薩爾瓦多人、古巴人、洪都拉斯人 — 如果{he/she}有一個以上原國籍，請將所有的原國籍告訴我。

[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 QC09_H3:
IF QC09_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 QC09_H3, CONTINUE WITH PROGRAMMING NOTE QC09_H4;
ELSE FOLLOW SKIPS AS INDICATED FOR SINGLE RESPONSES

QC09_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?
另外，請告訴我您會用以下哪一項或哪幾項來描述{}：夏威夷原住民、其他太平洋群島人、美洲印地安人、阿拉斯加原住民、亞洲人、黑人、非裔美國人還是白人？

[IF R GIVES ANOTHER RESPONSE YOU MUST SPECIFY WHAT IT IS]

[CODE ALL THAT APPLY]

WHITE............................................................................................1 [GO TO QC09_H10]  
BLACK OR AFRICAN AMERICAN..............................................2 [GO TO QC09_H10]  
ASIAN.........................................................................................3 [GO TO QC09_H8]  
AMERICAN INDIAN, ALASKA NATIVE..................................4 [GO TO QC09_H4]  
OTHER PACIFIC ISLANDER....................................................5 [GO TO QC09_H9]  
NATIVE HAWAIIAN..................................................................6 [GO TO QC09_H10]  
OTHER (SPECIFY: ____________________)..............................91 [GO TO QC09_H10]  
REFUSED....................................................................................-7 [GO TO QC09_H10]  
DON'T KNOW...........................................................................-8 [GO TO QC09_H10]  

PROGRAMMING NOTE QC09_H4:
IF QC09_H3 = 4 (AMERICAN INDIAN, ALASKA NATIVE) CONTINUE WITH QC09_H4;  
ELSE GO TO PROGRAMMING NOTE QC09_H8

QC09_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.
您說您是美洲印地安人或阿拉斯加原住民，{}屬於哪一個部落？如果{}屬於一個以上部落，請告訴我所有這些部落。

[CODE ALL THAT APPLY]

APACHE.......................................................................................1  
BLACKFEET...............................................................................2  
CHEROKEE...................................................................................3  
CHOCTAW...................................................................................4  
MEXICAN AMERICAN INDIAN..................................................5  
NAVAJO........................................................................................6  
POMO.............................................................................................7  
PUEBLO........................................................................................8  
SIOUX............................................................................................9  
YAQUI............................................................................................10  
OTHER TRIBE [Ask for spelling] (SPECIFY: ____________).........91  
REFUSED....................................................................................-7  
DON'T KNOW.............................................................................-8
**QC09_H5**  
Is (CHILD) an enrolled member in a federally or state recognized tribe?

{孩子名字/歲數/性別}是聯邦或州承認的部落的註冊成員嗎？

<table>
<thead>
<tr>
<th>CH5</th>
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<tbody>
<tr>
<td>YES</td>
<td>1 [GO TO QC09_H8]</td>
</tr>
<tr>
<td>NO</td>
<td>2 [GO TO QC09_H8]</td>
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<tr>
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<td>-7 [GO TO QC09_H8]</td>
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<tr>
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<td>-8 [GO TO QC09_H8]</td>
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**QC09_H6**  
In which Tribe is (CHILD) enrolled?

{ }是在哪一個部落註冊的？

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<td>OTHER APACHE (SPECIFY: ________________)</td>
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<tr>
<td>BLACKFEET</td>
<td>BLACKFOOT / BLACKFEET</td>
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<tr>
<td>CHEROKEE</td>
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<td>OTHER CHEROKEE (SPECIFY: ________________)</td>
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<tr>
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<td>PUEBLO (NOT SPECIFIED)</td>
</tr>
<tr>
<td></td>
<td>OTHER PUEBLO (SPECIFY: ________________)</td>
</tr>
<tr>
<td>SIOUX</td>
<td>OGLALA/PINE RIDGE SIOUX</td>
</tr>
<tr>
<td></td>
<td>SIOUX (NOT SPECIFIED)</td>
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<tr>
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<td>OTHER SIOUX (SPECIFY: ________________)</td>
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<tr>
<td>YAQUI</td>
<td>PASCUA YAQUI TRIBE OF ARIZONA</td>
</tr>
<tr>
<td></td>
<td>YAQUI (NOT SPECIFIED)</td>
</tr>
<tr>
<td></td>
<td>OTHER YAQUI (SPECIFY: ________________)</td>
</tr>
<tr>
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<td>OTHER (SPECIFY: ________________)</td>
</tr>
<tr>
<td></td>
<td>REFUSED</td>
</tr>
<tr>
<td></td>
<td>DON'T KNOW</td>
</tr>
</tbody>
</table>
Does (CHILD) get any health care services through the Indian Health Service, a Tribal Health Program, or an Urban Indian clinic?

{孩子的名字/年齡/性別}有沒有享受印地安人醫療服務、部落醫療計劃或都市印地安人診所的醫療護理服務？

YES................................................................................... 1
NO.................................................................................... 2
REFUSED........................................................................... -7
DON'T KNOW........................................................................ -8

PROGRAMMING NOTE QC09_H8:
IF QC09_H3 = 3 (ASIAN) CONTINUE WITH QC09_H8;
ELSE GO TO PROGRAMMING NOTE QC09_H9

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.

您說（他/她）是亞裔，您所指的是哪一族裔，例如華裔、菲律賓裔、越南裔？如果（他/她）有超過一種族裔的血統，請全部告訴我。

BANGLADESHI............................................................... 1
BURMESE..................................................................... 2
CAMBODIAN................................................................. 3
CHINESE...................................................................... 4
FILIPINO........................................................................ 5
HMONG......................................................................... 6
INDIAN (INDIA)............................................................... 7
INDONESIAN................................................................. 8
JAPANESE...................................................................... 9
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 QC09_H9:
IF QC09_H3 = 5 (PACIFIC ISLANDER) CONTINUE WITH QC09_H9;
ELSE GO TO QC09_H10

QC09_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.
您說 {他/她} 是其他太平洋島嶼人。{他/她} 屬於哪一個具體族裔？例如薩摩亞人、湯加人或關島人。如果 {他/她} 有一種以上族裔的血統，請全部告訴我。

CH7A [CODE ALL THAT APPLY]

SAMOAN/AMERICAN SAMOAN.................................................. 1
GUAMANIAN........................................................................... 2
TONGAN.................................................................................. 3
FIJIAN...................................................................................... 4
OTHER PACIFIC ISLANDER (SPECIFY:_____________)..... 91
REFUSED................................................................................ 7
DON'T KNOW........................................................................ 8
COUNTRY OF BIRTH

PROGRAMMING NOTE QC09_H10:
IF MKA = AR AND AI56C ≠ -1 (THIS QUESTION ALREADY ASKED DURING ADULT SURVEY), SKIP TO QC09_H14;
ELSE CONTINUE WITH QC09_H10

QC09_H10 In what country was (CHILD) born?
{}是在哪一個國家出生的?

CH8

UNITED STATES......................................................... 1
AMERICAN SAMOA............................................... 2
CANADA.................................................................. 3
CHINA..................................................................... 4
EL SALVADOR.......................................................... 5
ENGLAND............................................................... 6
FRANCE.................................................................... 7
GERMANY............................................................... 8
GUAM...................................................................... 9
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

CITIZENSHIP, IMMIGRATION STATUS, YEARS IN THE US

PROGRAMMING NOTE QC09_H11:
IF QC09_H10 = 1, 2, 9, 22, OR 26 (UNITED STATES OR ITS TERRITORIES), GO TO PROGRAMMING NOTE QC09_H14;
ELSE CONTINUE WITH QC09_H11

QC09_H11 Is (CHILD) a citizen of the United States?
{孩子的名字/年齡/性別} 是美國公民嗎？

CH8A

YES............................................................................. 1  [GO TO QC09_H13]
NO.......................................................................... 2
APPLICATION PENDING.......................................... 3
REFUSED.................................................................. -7
DON'T KNOW.......................................................... -8
QC09_H12  Is (CHILD) a permanent resident with a green card?
({孩子的名字/年齡/性別} 是持有綠卡的永久居民嗎？)

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

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

QC09_H13  About how many years has (CHILD) lived in the United States?
({孩子的名字/年齡/性別} 在美國居住了大約多少年？)

[FOR LESS THAN A YEAR, ENTER 1 YEAR]

_____ NUMBER OF YEARS {OR}

CH10YR  _____ YEAR FIRST CAME TO LIVE IN U.S.

CH10FMT  NUMBER OF YEARS......................................................1
YEAR FIRST CAME TO LIVE IN US...............................................2
REFUSED...........................................................................................-7
DON’T KNOW................................................................................8
**COUNTRY OF BIRTH (MOTHER)**

PROGRAMMING NOTE QC09_H14:
IF MKA = MOTHER OF CHILD AND AH33 ≠ -1 (ALREADY ASKED IN ADULT QUESTIONNAIRE)
THEN SKIP TO QC09_H18:
ELSE, CONTINUE WITH QC09_H14 AND DISPLAY “was his mother/was her mother”

QC09_H14  In what country {were you/was his mother/was her mother} born?
您是在哪一個國家出生的？

**[SELECT FROM MOST LIKELY COUNTRIES]**

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

- UNITED STATES.................................................. 1
- AMERICAN SAMOA........................................... 2
- CANADA.......................................................... 3
- CHINA.................................................................. 4
- EL SALVADOR.................................................... 5
- ENGLAND.......................................................... 6
- FRANCE.............................................................. 7
- GERMANY.......................................................... 8
- GUAM.................................................................. 9
- 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
Citizenship, Immigration Status, Years in the US (Mother)

**Programming Note QC09_H15 and QC09_H16:**
If QC09_H14 = 1, 2, 9, 22, or 26 (United States or its territories), go to Programming Note QC09_H18;
else continue with QC09_H15 and if respondent is mother of child display "Are you";
else display "Is (his/her) mother"

**QC09_H15**
{Are you/Is {his/her} mother} a citizen of the United States?
{他/她} 的母親是美國公民嗎？

**CH11A**

[If R says she is a naturalized citizen, code yes]

- Yes.................................................................1 [Go to QC09_H17]
- No.................................................................2
- Application pending.........................................3
- Refused..........................................................-7
- Don’t know.....................................................-8

**QC09_H16**
{Are you/Is {his/her} mother} a permanent resident with a green card?
你是擁有綠卡的永久居民嗎？

**CH12**

- Yes.................................................................1
- No.................................................................2
- Application pending.........................................3
- Refused..........................................................-7
- Don’t know.....................................................-8

**Programming Note QC09_H17:**
If respondent is mother of child, continue with QC09_H17 and display "have you";
else continue with QC09_H17 and display "has {his/her} mother"

**QC09_H17**
About how many years {have you/has {his/her} mother} lived in the United States?
{他/她} 的母親在美國居住了大約多少年？

**CH13**

_____ Number of years [HR: 0-age] {or}

**CH13YR**

_____ Year first came to live in U.S.

**CH13FMT**

- Number of years.............................................1
- Year first came to live in U.S............................2
- Mother deceased.............................................3
- Never lived in U.S...........................................4
- Refused..........................................................-7
- Don’t know.....................................................-8
**COUNTRY OF BIRTH (FATHER)**

**PROGRAMMING NOTE QC09_H18:**
IF MKA = FATHER OF CHILD AND AH33 ≠ -1 (ALREADY ASKED IN ADULT QUESTIONNAIRE THEN SKIP TO QC09_H22; ELSE CONTINUE WITH QC09_H18 AND DISPLAY, “was {his/her} father”

**QC09_H18**  
In what country {were you/was his father/was her father} born?  
您是在哪一個國家出生的？

<table>
<thead>
<tr>
<th>Country</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>UNITED STATES</td>
<td>1</td>
</tr>
<tr>
<td>AMERICAN SAMOA</td>
<td>2</td>
</tr>
<tr>
<td>CANADA</td>
<td>3</td>
</tr>
<tr>
<td>CHINA</td>
<td>4</td>
</tr>
<tr>
<td>EL SALVADOR</td>
<td>5</td>
</tr>
<tr>
<td>ENGLAND</td>
<td>6</td>
</tr>
<tr>
<td>FRANCE</td>
<td>7</td>
</tr>
<tr>
<td>GERMANY</td>
<td>8</td>
</tr>
<tr>
<td>GUAM</td>
<td>9</td>
</tr>
<tr>
<td>GUATEMALA</td>
<td>10</td>
</tr>
<tr>
<td>HUNGARY</td>
<td>11</td>
</tr>
<tr>
<td>INDIA</td>
<td>12</td>
</tr>
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<td>IRAN</td>
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<td>IRELAND</td>
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</tr>
<tr>
<td>TAIWAN</td>
<td>24</td>
</tr>
<tr>
<td>VIETNAM</td>
<td>25</td>
</tr>
<tr>
<td>VIRGIN ISLANDS</td>
<td>26</td>
</tr>
<tr>
<td>OTHER (SPECIFY:__________)</td>
<td>91</td>
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<tr>
<td>REFUSED</td>
<td>-7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>-8</td>
</tr>
</tbody>
</table>
CITIZENSHIP, IMMIGRATION STATUS, YEARS IN THE US (FATHER)

PROGRAMMING NOTE QC09_H19 AND QC09_H20:
IF QC09_H18 = 1, 2, 9, 22, OR 26 (UNITED STATES OR ITS TERRITORIES), GO TO PROGRAMMING NOTE QC09_H22;
ELSE CONTINUE WITH QC09_H19 AND IF RESPONDENT IS FATHER OF CHILD DISPLAY “Are you”; ELSE SAY “Is (his/her) father”

QC09_H19  {Are you/Is (his/her) father} a citizen of the United States?
您是美國公民嗎？

CH14A  [IF R SAYS HE IS A NATURALIZED CITIZEN, CODE YES]
YES.................................................................1 [GO TO PN QC09_H21]
NO.................................................................2
APPLICATION PENDING........................................3
REFUSED........................................................-7
DON'T KNOW.................................................-8

QC09_H20  {Are you/Is (his/her) father} a permanent resident with a green card?
您是持有綠卡的永久居民嗎？

CH15
YES.................................................................1
NO.................................................................2
APPLICATION PENDING........................................3
REFUSED........................................................-7
DON'T KNOW.................................................-8

PROGRAMMING NOTE QC09_H21:
IF RESPONDENT IS FATHER OF CHILD, CONTINUE WITH QC09_H21 AND DISPLAY “have you”; ELSE, CONTINUE WITH QC09_H21 AND DISPLAY “has {his/her} father”

QC09_H21  About how many years {have you/has {his/her} father} lived in the United States?
您在美國居住了大約多少年？

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
Languages Spoken At Home

PROGRAMMING NOTE QC09_H22:
IF RESPONDENT IS SAMPLED ADULT, GO TO PROGRAMMING NOTE QC09_H23;
ELSE IF RESPONDENT ≠ ADULT RESPONDENT, CONTINUE WITH QC09_H22

QC09_H22  In general, what languages are spoken in (CHILD)’s home?
一般來說，{孩子的名字/年齡/性別} 在家中用什麼語言交談？

[PROBE: “Any others? 還有其他語言嗎？”]

ENGLISH................................................................. 1
SPANISH.............................................................. 2
CANTONESE......................................................... 3
VIETNAMESE......................................................... 4
TAGALOG............................................................... 5
MANDARIN............................................................. 6
KOREAN................................................................. 7
ASIAN INDIAN LANGUAGES................................. 8
RUSSIAN................................................................. 9
OTHER1 (SPECIFY:______________)........... 91
OTHER2 (SPECIFY:______________)........... 92
REFUSED ............................................................... -7
DON’T KNOW......................................................... -8

PROGRAMMING NOTE QC09_H23:
IF INTERVIEW CONDUCTED IN ENGLISH AND QC09_H22 > 1 (TWO OR MORE LANGUAGES
SPOKEN AT HOME), CONTINUE WITH QC09_H23 AND DISPLAY “Compared to the language
spoken in (CHILD)’s home,”;
ELSE IF QC09_H22 = 1 (ONLY SPEAKS ENGLISH), GO TO PROGRAMMING NOTE QC09_H24

QC09_H23  {Compared to other languages spoken in (CHILD)’s home,} would you say you speak
English....
您覺得您的英文說得......

CH18

Very well................................................................. 1
非常好............................................................... 1
Fairly well........................................................... 2
好................................................................. 2
Not well, or......................................................... 3
不好，或.................................................... 3
Not at all?............................................................. 4
完全不會說?.................................................. 4
REFUSED............................................................... -7
DON’T KNOW......................................................... -8
**EDUCATION OF PRIMARY CARETAKER**

**PROGRAMMING NOTE QC09_H24:**
IF RESPONDENT IS NOT SAMPLED ADULT, CONTINUE WITH QC09_H24;
ELSE GO TO PROGRAMMING NOTE QC09_H26

**QC09_H24**  What is the highest grade of education you have completed and received credit for?
您完成的最高教育和獲得學分的最高年級是什麼?

<table>
<thead>
<tr>
<th>GRADE SCHOOL</th>
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<tbody>
<tr>
<td>1(^{ST}) GRADE</td>
<td>1</td>
</tr>
<tr>
<td>2(^{ND}) GRADE</td>
<td>2</td>
</tr>
<tr>
<td>3(^{RD}) GRADE</td>
<td>3</td>
</tr>
<tr>
<td>4(^{TH}) GRADE</td>
<td>4</td>
</tr>
<tr>
<td>5(^{TH}) GRADE</td>
<td>5</td>
</tr>
<tr>
<td>6(^{TH}) GRADE</td>
<td>6</td>
</tr>
<tr>
<td>7(^{TH}) GRADE</td>
<td>7</td>
</tr>
<tr>
<td>8(^{TH}) GRADE</td>
<td>8</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>HIGH SCHOOL OR EQUIVALENT</th>
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<tbody>
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<td>9(^{TH}) GRADE</td>
<td>9</td>
</tr>
<tr>
<td>10(^{TH}) GRADE</td>
<td>10</td>
</tr>
<tr>
<td>11(^{TH}) GRADE</td>
<td>11</td>
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<tr>
<td>12(^{TH}) GRADE</td>
<td>12</td>
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</table>

<table>
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<tr>
<th>4-YEAR COLLEGE OR UNIVERSITY</th>
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<tbody>
<tr>
<td>1(^{ST}) YEAR (FRESHMAN)</td>
<td>13</td>
</tr>
<tr>
<td>2(^{ND}) YEAR (SOPHOMORE)</td>
<td>14</td>
</tr>
<tr>
<td>3(^{RD}) YEAR (JUNIOR)</td>
<td>15</td>
</tr>
<tr>
<td>4(^{TH}) YEAR (SENIOR)</td>
<td>16</td>
</tr>
<tr>
<td>5(^{TH}) YEAR</td>
<td>17</td>
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</table>

<table>
<thead>
<tr>
<th>GRADUATE OR PROFESSIONAL SCHOOL</th>
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</tr>
</thead>
<tbody>
<tr>
<td>1(^{ST}) YEAR GRAD OR PROF SCHOOL</td>
<td>18</td>
</tr>
<tr>
<td>2(^{ND}) YEAR GRAD OR PROF SCHOOL (MA/MS)</td>
<td>19</td>
</tr>
<tr>
<td>3(^{RD}) YEAR GRAND OR PROF SCHOOL</td>
<td>20</td>
</tr>
<tr>
<td>MORE THAN 3 YEARS GRAD OR PROF SCHOOL (PhD)</td>
<td>21</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2-YEAR JUNIOR OR COMMUNITY COLLEGE</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1(^{ST}) YEAR</td>
<td>22</td>
</tr>
<tr>
<td>2(^{ND}) YEAR</td>
<td>23</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>VOCATIONAL, BUSINESS, OR TRADE SCHOOL</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1(^{ST}) YEAR</td>
<td>24</td>
</tr>
<tr>
<td>2(^{ND}) YEAR</td>
<td>25</td>
</tr>
<tr>
<td>MORE THAN 2 YEARS</td>
<td>26</td>
</tr>
<tr>
<td>HAD NO FORMAL EDUCATION</td>
<td>30</td>
</tr>
<tr>
<td>REFUSED</td>
<td>-7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>-8</td>
</tr>
</tbody>
</table>
FOLLOW-UP AND CLOSE

PROGRAMMING NOTE QC09_H25:
IF RESPONDENT IS NOT SAMPLED ADULT, CONTINUE WITH QC09_H25;
ELSE GO TO END

QC09_H25 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 some time in the future?
以下是最後幾個問題。感謝您的耐心合作。最後，您是否願意在今後參加本項問卷調查的後續調查？

CG38

YES.................................................................1
MAYBE/PROBABLY YES........................................2
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. Brown, the Principal Investigator. Do you want that number? [IF YES, SAY: Dr. Brown can be reached toll-free at 1-866-275-2447. IF NO, SAY: Goodbye.]
谢谢，非常感謝您花費寶貴的時間，並給予合作。您為一項非常重要的健康調查提供了幫助。如果您對本項研究有任何問題，請聯絡主研究員 E. Richard Brown博士，電話號碼 1-866-275-2447。謝謝，再見！