CHIS 2005
Child Questionnaire
Version 7.3
November 5, 2012

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

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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 2005 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

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.
Algunas de las preguntas están basadas en las características personales de (CHILD), tal como su edad. Así es que voy a comenzar haciéndole unas breves preguntas sobre datos básicos.

QC05_A1   Is (CHILD) male or female?
¿Es (CHILD) del sexo masculino o femenino?

CA1

MALE 1
FEMALE...2
REFUSED .... -7
DON"T KNOW... -8

QC05_A2   What is {his/her} date of birth?
¿Cuál es la fecha de nacimiento de {él/ella}?

CA2

_____ MONTH _____ DAY   _____ YEAR   **[GO TO QC05_A4]**

[HR: 1-12]   [HR: 1-31]   [SR: 1993-2005]

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

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

QC05_A3   How old is {he/she}?
¿Cuántos años tiene {él/ella}?

CA3

_____ YEARS

_____ MONTHS

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

QC05_A4   How much did {he/she} weigh at birth?
          ¿Cuánto pesó {él/ella} al nacer?

CA13

          _____ POUNDS   _____ OUNCES

          _____ KILOGRAMS   _____ GRAMS

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

PROGRAMMING NOTE QC05_A5
IF CAGE > 3 YEARS GO TO QC05_A8
ELSE CONTINUE WITH QC05_A5

QC05_A5   Was (CHILD) ever breastfed or fed breast milk?
          ¿Fue (CHILD) amamantado(a) o se le dio leche de pecho alguna vez?

CA14

          YES 1
          NO...2   **[GO TO QC05_A7]**
          REFUSED .... -7   **[GO TO QC05_A7]**
          DON'T KNOW .... -8   **[GO TO QC05_A7]**

QC05_A6   How old was (CHILD) when {you/ (CHILD)'s mother} stopped breastfeeding altogether?
          ¿Qué edad tenía (CHILD) cuando se le dejó de dar pecho totalmente?

CA15

          _____DAYS

          _____WEEKS

          _____MONTHS

          _____YEARS

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

QC05_A7   How old was (CHILD) when you began giving {him/her} baby food or other solid foods?
¿Qué edad tenía (CHILD) cuando comenzó a comer comida para bebés o alimentos sólidos?

CA16

[IF NEEDED, SAY: "Solid food is anything other than milk, formula, juice, water, herbs or teas"]
[IF NEEDED, SAY: *"Cuando digo alimentos sólidos me refiero a cualquier otro alimento que no sea leche, fórmula, jugo, agua, hierbas o té."*]

_____MONTHS

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

QC05_A8   About how tall is (CHILD) now without shoes?
¿Más o menos cuánto mide (CHILD) sin zapatos?

CA4

[IF NEEDED, SAY: "Your best guess is fine."]
[IF NEEDED, SAY: *"Está bien si me das un número aproximado."*]

_____ FEET _____ INCHES

_____METERS _____CENTIMETERS

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

QC05_A9   About how much does (CHILD) weigh now without shoes?
¿Cuánto pesa (CHILD) ahora sin zapatos?

CA5

[IF NEEDED, SAY: "Your best guess is fine."]
[IF NEEDED, SAY: *"Está bien si me das un número aproximado."*]

_____ POUNDS

_____KILOGRAMS

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

QC05_A10   In general, would you say (CHILD)'s health is excellent, very good, good, fair or poor?
En general, ¿diría usted que la salud de (CHILD) es excelente, muy buena, buena, pasable, o mal?

CA6

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

QC05_A11   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?
¿Hay algo que de alguna manera limite o que le impida a (CHILD) hacer las cosas que hacen la mayoría de los niños de su edad?

CA7

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

PROGRAMMING NOTE QC05_A12
IF CAGE < 5 YEARS GO TO PROGRAMMING NOTE QC05_A14
ELSE CONTINUE WITH QC05_A12

QC05_A12A   Did (CHILD) attend school last week?
¿Asistió (CHILD) a la escuela la semana pasada?

CA42
```
YES ...................................................................1     [GO TO QC05_A12]
NO.....................................................................2
ON VACATION ....................................................3
HOME SCHOOLED ..............................................4     [GO TO QC05_A12]
REFUSED ......................................................... -7     [GO TO QC05_A12]
DON'T KNOW ..................................................... -8     [GO TO QC05_A12]
```

QC05_A12B   Did (CHILD) attend school during the last school year?
¿Asistió (CHILD) a la escuela durante el último año escolar?

CA43

[NOTE: DO NOT COUNT PRE-SCHOOL OR NURSERY SCHOOL]

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

QC05_A12   Does (CHILD) currently have any conditions that limit or prevent {him/her} from attending school regularly?
¿Tiene (CHILD) actualmente alguna condición que le limite o impida asistir a la escuela regularmente?

CA8

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

QC05_A13   Does {he/she} currently have any conditions that limit or prevent {him/her} from doing regular schoolwork?
¿Tiene {él/ella} actualmente alguna condición que limite o impida el trabajo regular de la escuela?

CA9

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

PROGRAMMING NOTE QC05_A14
IF QC05_A11 = 1 OR QC05_A12 = 1 OR QC05_A13 = 1 CONTINUE WITH QC05_A14
ELSE GO TO PROGRAMMING NOTE QC05_A16.

QC05_A14   Is (CHILD)'s condition physical, behavioral or mental?
¿La condición de (CHILD) es física, mental o de comportamiento?

CA10

```
                        PHYSICAL ..............................................................1
                        BEHAVIORAL/MENTAL .........................................2
                        BOTH ......................................................................3
                        OTHER (SPECIFY: _____) ............. 91
                        REFUSED ............................................................. -7
                        DON'T KNOW ....................................................... -8
```

QC05_A15   What condition does (CHILD) have?
¿Qué condición o afección tiene (CHILD)?

CA10A

[CODE ALL THAT APPLY. CTRL-P TO EXIT.]

[PROBE: "Any others?"]
[PROBE: *"¿Algún otro?"*]

```
ASTHMA ................................................................1
ADD/ADHD ...........................................................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
MUSCUALR 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 QC05_A16
IF CAGE < 36 MONTHS GO TO QC05_A17
ELSE IF CAGE ≥ 36 MONTHS CONTINUE WITH QC05_A16

QC05_A16   Did a doctor or psychologist {ever} tell you (CHILD) has attention deficit disorder, ADD or ADHD?
¿Le ha dicho a usted {alguna vez} un médico o un psicólogo que (CHILD) tenía el desorden por falta de atención, conocido como ADD o ADHD en inglés?

CA11

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

QC05_A17   Has a doctor <u>ever</u> told you that (CHILD) has asthma?
¿Le ha dicho a usted <u>alguna vez</u> un médico que (CHILD) tiene asma?

> **CA12**

>   YES 1
>   NO...2   **[GO TO PN QC05_A27]**
>   REFUSED .... -7   **[GO TO PN QC05_A27]**
>   DON'T KNOW .... -8   **[GO TO PN QC05_A27]**

QC05_A18   Does (CHILD) still have asthma?
¿Todavía tiene asma (CHILD)?

> **CA31**

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

QC05_A19   During the <u>past 12 months</u>, has {he/she} had an episode of asthma or an asthma attack?
Durante los <u>últimos 12 meses</u>, ¿ha tenido {él/ella} un episodio de asma o un ataque de asma?

> **CA32**

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

PROGRAMMING NOTE QC05_A20
IF QC05_A18 = 2, -7 or -8 (NO, REFUSED, DON'T KNOW) <u>AND</u> QC05_A19 = 2, -7 or -8 (NO, REFUSED, DON'T KNOW) GO TO QC05_A22
ELSE CONTINUE WITH QC05_A20

QC05_A20   During the <u>past 12 months</u>, how often has (CHILD) had asthma symptoms such as coughing, wheezing, shortness of breath, chest tightness of phlegm? Would you say…
Durante los <u>últimos 12 meses</u>, ¿con qué frecuencia tuvo (CHILD) síntomas de asma como tos, silbido al respirar, dificultad para respirar, ha sentido el pecho oprimido, o tenido flema?¿Diría que...

> **CA12B**

>   Not at all 1
>   *No tuvo síntomas, ...1*
>   Less than every month..2
>   *Los tuvo menos de una vez al mes, ...2*
>   Every month 3
>   *Todos los meses,...3*
>   Every week, or 4
>   *Todas las semanas, o..4*
>   Every day? 5
>   *Todos los días?..5*
>   REFUSED .... -7
>   DON'T KNOW .... -8

QC05_A21   During the <u>past 12 months</u>, has (CHILD) had to visit a hospital emergency room or urgent care clinic because of {his/her} asthma?
Durante los <u>últimos 12 meses</u>, ¿han tenido que llevar a (CHILD) a la sala de emergencias de un hospital o a una clínica de atención de urgencia debido al asma?

CA33

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

QC05_A22   Is (CHILD) now taking a <u>daily</u> medication to control {his/her} asthma that was prescribed or given to you by a doctor?
¿Está (CHILD) actualmente tomando algún medicamento <u>diario</u> para controlar el asma, y que le haya sido dado o recetado por un médico?

CA12A

> **[IF NEEDED, SAY: "This includes both oral medicine and inhalers. This is different from inhalers used for quick relief."]**
> **[IF NEEDED, SAY: *"Esto incluye medicamentos orales o que tiene que ser inhalados. Esto medicamento es diferente de los inhaladores que se usan para alivio rápido."*]**

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

> **PROGRAMMING NOTE QA05_A23:**
> **IF QC05_A18 = 1 (YES, STILL HAS ASTHMA) OR QC05_A19 = 1 (YES, EPISODE IN LAST 12 MOS), GO TO QC05_A25**
> **ELSE CONTINUE WITH QC05_A23**

QC05_A23   During the <u>past 12 months</u>, how often has (CHILD) had asthma symptoms such as coughing, wheezing, shortness of breath, chest tightness or phlegm? Would you say…
En los <u>últimos 12 meses</u>, ¿con qué frecuencia ha tenido (CHILD) síntomas de asma, como tos, resuello, o silbido o dificultad para respirar, opresión en el pecho o flemas? ¿Diría que...

CA40

> Not at all 1
> *Nunca.* 1
> Less than every month 2
> *Menos de una vez al mes,* 2
> Every month 3
> *Todos los meses,* 3
> Every week, or 4
> *Todas las semanas, o*...4
> Every day? 5
> *Todos los días?*...5
> REFUSED .... -7
> DON'T KNOW .... -8

QC05_A24   During the <u>past 12 months</u>, have you had to visit a hospital emergency room or urgent care clinic because of <u>(CHILD's)</u> asthma?
Durante los <u>últimos 12 meses</u>, ¿ha tenido que visitar la sala de emergencias de un hospital o una clínica de cuidados urgentes a causa de (<u>CHILD's</u>) asma?

CA41

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

QC05_A25   During the past 12 months, how many days of day care or school did (CHILD) miss due to asthma?
Durante los últimos 12 meses, ¿cuántos días no pudo ir (CHILD) a la escuela o a la guardería debido al asma?

CA34

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

QC05_A26   Has a doctor or other health professional ever given you an asthma management plan for (CHILD)?
¿Le ha dado alguna vez un médico u otro profesional de la salud un plan para controlar el asma de (CHILD)?

CA35

> **[IF NEEDED, SAY: "An asthma management plan is a printed form that tells when to change the amount or type of medicine, when to call the doctor for advice, and when to go to the emergency room"]**
> **[IF NEEDED, SAY: *"Un plan para controlar el asma es un folleto que le indica cuándo cambiar la cantidad o el tipo de medicina, cuándo llamar al doctor para consultar, y cuándo ir a la sala de urgencias."*]**

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

PROGRAMMING NOTE QC05_A27
IF QA05_A17 = 1 (HAS ASTHMA), GO TO QC05_B1
ELSE CONTINUE WITH QC05_A27

QC05_A27 During the past 12 months, has (CHILD) had a wheezing or whistling sound in {his/her} chest?
Durante los últimos 12 meses, ¿ha tenido (CHILD) alguna vez resuellos o silbidos en el pecho?

CA36

YES 1
NO..2   **[GO TO PN QC05_B1]**
REFUSED .... -7   **[GO TO PN QC05_B1]**
DON'T KNOW .... -8   **[GO TO PN QC05_B1]**

QC05_A28 During the past 12 months, how many attacks of wheezing or whistling has {he/she} had in {his/her} chest?
Durante los últimos 12 meses, ¿cuántos ataques de resuellos o silbidos en el pecho ha tenido (CHILD)?

CA37

_____ATTACKS

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

Section B – Dental Health, Nutrition, Food Environment

> **PROGRAMMING NOTE QC05_B1**
> **IF CAGE > 2 YEARS, GO TO QC05_B2**
> **ELSE CONTINUE WITH QC05_B1**

QC05_B1   These questions are about (CHILD)'s dental health. Does (CHILD) have any teeth yet?
Estas preguntas son acerca de la salud dental de (CHILD). ¿Ya tiene dientes (CHILD)?

> **CC1**

YES 1	
NO...2	**[GO TO PN QC05_B4]**
REFUSED .... -7	**[GO TO PN QC05_B4]**
DON'T KNOW .... -8	**[GO TO PN QC05_B4]**

QC05_B2   {These questions are about (CHILD)'s dental health.} 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.
{Estas preguntas son acerca de la salud dental de (CHILD).} Más o menos, ¿hace cuánto tiempo fue la última vez que (CHILD) fue a un dentista o una clínica dental? Incluya higienistas dentales y todo tipo de especialistas dentales.

> **CC5**

HAS NEVER VISITED 0	**[GO TO PN QC05_B4]**
LESS THAN 6 MONTHS AGO 1	
6 MONTHS UP TO 1YEAR AGO.............................2	
1 YEAR UP TO 2 YEARS AGO 3	
2 YEARS UP TO 5 YEARS AGO.............................4	
MORE THAN 5 YEARS AGO 5	
REFUSED .... -7	
DON'T KNOW .... -8	

QC05_B3   Do you now have any type of insurance that pays for part or all of (CHILD)'s dental care?
¿Tiene usted actualmente algún tipo de seguro que pague por todo o parte del cuidado dental de (CHILD)?

> **CC7A**

[IF NEEDED, SAY: "Your insurance may be dental insurance, prepaid dental plans such as HMOs, or government programs such as Medi-Cal or Healthy Families. Do not include free programs."]
[IF NEEDED, SAY: *"Su seguro dental puede ser un plan de seguro dental pre-pagado tal como una HMO, o un programa del gobierno como, por ejemplo, Medi-Cal o Healthy Families."*]

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

PROGRAMMING NOTE QC05_B4
IF CAGE< 2 YEARS, GO TO QC05_B15
ELSE CONTINUE WITH QC05_B4

QC05_B4   Now I'm going to ask you about the foods your child ate yesterday, including meals and snacks.
Ahora, voy a hacerle algunas preguntas sobre lo que comió su niño el día de ayer, incluyendo comidas y bocadillos.

Yesterday, how many servings of fruit, such as an apple or a banana, did {he/she} eat?
El día de ayer, ¿cuántas porciones de fruta, tales como manzanas o plátanos comió {él/ella}?

CC13

[IF NEEDED, SAY: "'Servings' are self-defined. A serving is the child's regular portion of this food. Do not include juices."]
[IF NEEDED, SAY: *"Cada persona define sus porciones. Una porción es la cantidad regular de este alimento que consume su niño. No incluya jugos."***]**

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

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

QC05_B5   Yesterday, how many servings of French fries, home fries or hash brown did (CHILD) eat?
El día de ayer, ¿cuántas porciones de papas fritas de cualquier tipo comió (CHILD)?

CC14

[IF NEEDED, SAY: "Do not include potato chips."]
[IF NEEDED, SAY: *"Sin contar los 'chips' o papitas que vienen en bolsa."***]**

_____ SERVINGS

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

QC05_B6   Yesterday, how many servings of other white potatoes did {he/she} eat?
Ayer, ¿cuántas porciones de otras papas blancas se comió {él/ella}?

CB15

[IF NEEDED, SAY: "Do not include yams or sweet potatoes. Include red, yellow, purple or brown-skinned potatoes."]
[IF NEEDED, SAY: *"No incluya papa dulce ni camotes. Incluya papas de piel roja, amarilla, morada o café."*]

[DO NOT READ: FOR INTERVIEWER INFO ONLY. THIS QUESTION INCLUDES DIFFERENT COLORED POTATOES AS LONG AS THE INSIDE OF THE POTATO IS WHITE. THIS INCLUDES POTATOES PREPARED IN ANY FASHION SUCH AS MASHED, BAKED OR BOILED. IT INCLUDES POTATOES PREPARED IN OTHER DISHES, SUCH AS POTATO SALAD.]

_____ SERVINGS

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

QC05_B7   Yesterday, how many servings of other vegetables like corn, green beans, green salad, or other vegetables did {he/she} have?
Ayer, ¿cuántas porciones de verduras tal como maíz, ejotes o habichuelas verdes, ensalada verde, u otros vegetales comió {él/ella}?

CC15

_____SERVINGS   [HR: 0-20; SR 0-4]

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

QC05_B8   Yesterday, how many glasses or small cartons of milk did {he/she} drink?
El día de ayer, ¿cuántos vasos o cartones pequeños de leche bebió {él/ella}?

CC11

[IF NECESSARY, SAY: "Include milk on cereal."]
[IF NECESSARY, SAY: *"Incluya leche con cereal."*]

_____GLASSES

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

> **PROGRAMMING NOTE QC05_B9**
> **IF QC05_B8 = 0 (DID NOT DRINK MILK), GO TO QC05_B1O**
> **ELSE IF QC05_B8 > 0, CONTINUE WITH QC05_B9**

QC05_B9:   What type of milk was it? Was it…
¿Qué tipo de leche era? ¿Era...

CB16

[IF RESPONDENT CANNOT CHOOSE ONE, CODE ALL THAT APPLY]
[NOTE: NONFAT MILK CAN BE LIQUID OR DRY MILK. IF R SAYS "LOWFAT" BUT
DOES NOT SPECIFY % FAT, CODE AS 2%. SOYMILK, RICE MILK and CHOCOLATE
MILK SHOULD BE CODED AS "ANOTHER TYPE"]

Whole milk..1
Leche entera 1
Low-fat 2% 2
Baja en grasa 2%,...2
Low-fat 1% 3
Baja en grasa 1%..3
Nonfat milk or 4
Leche sin grasa, o...4
Another type?..93
De otro tipo.. 93
REFUSED .... -7
DON'T KNOW .... -8

QC05_B10   Yesterday, how many glasses or cans of soda (such as Coke) or other sweetened drinks
(such as fruit punch or Sunny Delight) did {he/she} drink? Do <u>not</u> count diet drinks.
*El día de ayer, ¿cuántos vasos o latas de refrescos (como Coca Cola), u otra bebida
azucarada, (como ponche de frutas o bebidas deportivas), bebió (CHILD)? <u>No</u> cuente
las bebidas de dieta.*

CC12

[DO NOT READ. FOR INTERVIEWER INFO ONLY. THIS ALSO INCLUDES DRINKS
SUCH AS TAMPICO, HAWAIIAN PUNCH, CRANBERRY COCKTAIL, HI-C, SNAPPLE,
SUGAR CANE JUICE, GATORADE AND OTHER SPORTS DRINKS WITH ADDED
SUGAR.]

_____GLASSES, CANS or BOTTLES

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

QC05_B11   How many glasses or boxes of 100% fruit juice, such as orange or apple juice, did (CHILD) drink?
¿Cuántos vasos o cartones pequeños de jugo 100% puro de fruta, como jugo de naranja o de manzana, bebió (CHILD)?

CC10

[IF NEEDED, SAY: "Only include 100% fruit juices."]
[IF NEEDED, SAY: *"Incluya solamente jugos 100% puros de fruta."*]

[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

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

QC05_B12   Yesterday, how many servings of high sugar foods such as cookies, candy, doughnuts, pastries, cake or popsicles did {he/she} have?
Ayer, ¿cuántas porciones de alimentos con alto contenido de azúcar como galletas, dulces, donuts, pasteles, torta o paleta helada comió {él/ella}?

CC24

[IF NEEDED, SAY: "Do not include sugar-free kinds but include low-fat kinds."]
[IF NEEDED, SAY: *"No incluya los que no tienen azúcar pero sí los que tienen un bajo contenido de grasa."*]

_____ SERVINGS

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

QC05_B13   Yesterday, 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.
Ayer, ¿cuántas veces comió {él/ella} comida rápida o "fast food?" Incluya comidas = rápidos que comió en la escuela o en casa, en el restaurante de comida rápida, compradas listas para llevar a casa o en el "drive thru."

CC23

[IF NEEDED, SAY: "Such as food you get at McDonald's, Panda Express or Taco Bell."]
[IF NEEDED, SAY: *"Esta comida es la que compra en McDonald's, Panda Express o Taco Bell."*]

[IF STRONGLY NEEDED, SAY: "Foods from American-style fast food restaurants."]
[IF STRONGLY NEEDED, SAY: *"Comidas de restaurantes de comidas rápidas tipo Americano."*]

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

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

QC05_B14   How satisfied are you with the quality of supermarkets or food stores in your
neighborhood…would you say very satisfied, somewhat satisfied or not at all satisfied?
*¿Qué tan satisfecho(a) está con la calidad de los supermercados o tiendas de alimentos
de su vecindario? ¿Diría que está muy satisfecho(a), algo satisfecho(a) o no está
satisfecho(a)?*

CB18

**[IF NEEDED, SAY: "By food stores, we mean markets, grocery stores,
supermarkets, farmers' markets, and fruit and vegetable markets. By
neighborhood, we mean the area around where you live and do things like
shopping, going to the park, or visiting with neighbors."]**
**[IF NEEDED, SAY: *"Por tiendas de alimentos, queremos decir mercados, tiendas
de abarrotes, supermercados, mercados de agricultores y mercados de frutas y
verduras. Por vecindario, nos referimos al área alrededor de donde usted vive y
hace cosas como ir de compras, ir al parque o visitar a los vecinos."*]**

```
              VERY SATISFIED ....................................................1
              SOMEWHAT SATISFIED ......................................2
              NOT SATISFIED ...................................................3
              NO SUPERMARKET/FOOD STORE IN
              NEIGHBORHOOD… ............................................4
              REFUSED ............................................................ -7
              DON'T KNOW ...................................................... -8
```

PROGRAMMING NOTE QC05_B15
IF QC05_A12a = 1 OR A12b =1 (ATTENDED SCHOOL LAST WEEK OR LAST SCHOOL YEAR)
CONTINUE WITH QC05_B15;
ELSE GO TO QC05_C1

QC05_B15   During the school year, where does (CHILD) <u>usually</u> eat breakfast – at home, at school,
at a restaurant or somewhere else?
*Durante el año escolar, ¿dónde desayuna (CHILD) <u>por lo general</u> – en casa, en la
escuela, en un restaurante o en otro lugar?*

CB19

[INCLUDE RELATIVE'S, GRANDPARENTS' HOMES AS "HOME"]

```
              HOME .....................................................................1
              SCHOOL .................................................................2
              RESTAURANT.........................................................3
              SOMEWHERE ELSE ...............................................4
              REFUSED ............................................................ -7
              DON'T KNOW ...................................................... -8
```

QC05_B16   During the school year, where does (CHILD) <u>usually</u> eat <u>lunch</u> - at home, at school, at a restaurant or somewhere else?
Durante el año escolar, ¿dónde almuerza (CHILD) <u>por lo general</u> – en casa, en la escuela, en un restaurante o en otro lugar?

CB20

[INCLUDE RELATIVE'S, GRANDPARENTS' HOMES AS "HOME"]

HOME 1
SCHOOL 2
RESTAURANT...3
SOMEWHERE ELSE… 4
REFUSED .... -7
DON'T KNOW .... -8

QC05_B17   During the school year, about how many times a week does (CHILD) <u>usually</u> bring {his/her} own lunch to school from home?
Durante el año escolar, ¿aproximadamente cuántas veces por semana lleva (CHILD) normalmente su propio almuerzo de casa a la escuela?

CB21

_____ # TIMES PER WEEK

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

QC05_B18   What is the name of the school (CHILD) goes to or last attended?
¿Cuál es el nombre de la escuela a la que va (CHILD) o de la última escuela a la que asistió?

CB22

[RECORD VERBATIM, ASK FOR SPELLING IF NECESSARY]

_____NAME OF SCHOOL

CHILD NOT IN SCHOOL...1
REFUSED .... -7
DON'T KNOW .... -8

Section C – Physical Activity, Sedentary Time

PROGRAMMING NOTE QC05_C1
IF QC05_12a = 1 CONTINUE and DISPLAY "A"
IF QC05_12b = 1 CONTINUE and DISPLAY "B"
ELSE GO TO QC05_C5

QC05_C1   Now I'm going to ask you about physical activity.
Ahora le voy a hacer preguntas acerca de la actividad física.

A) How many days in the past week did (CHILD) walk, bicycle, or skateboard to school?
A) *¿Cuántos días de la semana pasada fue a la escuela (CHILD) caminando, en bicicleta o en skateboard/patineta?*

B) During the school year, on how many days during a typical week does (CHILD) walk, bicycle, or skateboard to school?
B) *Durante el año escolar, ¿cuántos días durante una semana normal fue (CHILD) a la escuela caminando, en bicicleta o en un skateboard/patineta?*

CC27

[NOTE FOR INTERVIEWER: THIS INCLUDES KIDS WHO RIDE ROLLERBLADES, ROLLERSHOES OR NON-MOTORIZED SCOOTERS TO SCHOOL]

_____ DAYS

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

PROGRAMMING NOTE QC05_C2
IF QC05_C1 = 0 (DAYS), -7 OR –8, GO TO QC05_C3
ELSE IF QC05_C1 > 0 (DAYS) CONTINUE WITH QC05_C2 AND
        IF QC05_12a = 1 (AT SCHOOL LAST WEEK) DISPLAY "A"
        IF QC05_12b = 1 (AT SCHOOL LAST YEAR) DISPLAY "B"

QC05_C2   A) About how many minutes did it take {him/her} to walk, bicycle, or skateboard to school?
A) ¿Cuántos minutos, más o menos se tardó {él/ella} para ir caminando, en bicicleta o en skateboard/patineta a la escuela?

B) About how many minutes does it usually take (him/her) to walk, bicycle, or skateboard to school?
B) *¿Cuántos minutos, más o menos se tarda (él/ella) usualmente para ir caminando, en bicicleta o en skateboard/patineta a la escuela?*

CC28

[NOTE FOR INTERVIEWER: THIS INCLUDES KIDS WHO RIDE ROLLERBLADES, ROLLERSHOES OR NON-MOTORIZED SCOOTERS TO SCHOOL]

_____ MINUTES

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

PROGRAMMING NOTE QC05_C3
IF QC0512a = 1 (AT SCHOOL LAST WEEK) DISPLAY "A"
IF QA0512b = 1 (AT SCHOOL LAST YEAR) DISPLAY "B"

QC05_C3   A) How many days in the past week did (CHILD) walk, bicycle, or skateboard home from school?
A) *¿Cuántos días de la semana pasada fue a casa desde la escuela (CHILD) caminando, en bicicleta o en skateboard/patineta?*

B) During the school year, on how many days during a typical week does (CHILD) walk, bicycle, or skateboard home from school?
B) *Durante el año escolar, ¿cuántos días en una semana normal fue (CHILD) de la escuela a la casa caminando, en bicicleta o en un skateboard/patineta?*

| CC29 |

[NOTE FOR INTERVIEWER: THIS INCLUDES KIDS WHO RIDE ROLLERBLADES, ROLLERSHOES OR NON-MOTORIZED SCOOTERS HOME FROM SCHOOL.]
[IF CHILD DOES NOT GO DIRECTLY HOME FROM SCHOOL, INCLUDE NUMBER OF DAYS WALKED, ETC. TO CHILDCARE, RELATIVE'S HOME, AFTER-SCHOOL PROGRAM, ETC.]

_____ DAYS

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

PROGRAMMING NOTE QC05_C4
IF QC05_C3 = 0 (DAYS), -7, OR –8, GO TO QC05_C5
ELSE IF QC05_C3 > 0 DAYS CONTINUE WITH QC05_C4 AND
         IF A12a = 1 (SCHOOL LAST WEEK) DISPLAY "A"
         IF A12b = 1 (SCHOOL LAST YEAR) DISPLAY "B"

QC05_C4   A) About how many minutes did it take {him/her} to walk, bicycle, or skateboard home from school?
A) *¿Más o menos cuántos minutos tardó {él/ella} para ir a casa caminando, en bicicleta o en skateboard/patineta desde la escuela?*

B) About how many minutes does it usually take (him/her) to walk, bicycle, or skateboard home from school?
B) *¿Cuántos minutos, más o menos se tarda (él/ella) usualmente para ir caminando, en bicicleta o en skateboard/patineta desde la escuela?*

| CC30 |

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

_____ MINUTES

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

PROGRAMMING NOTE QC05_C5
IF CAGE ≤ 1 YEAR GO TO PROGRAMMING NOTE C7
ELSE IF CAGE > 1 YEAR, CONTINUE WITH QC05_C5

QC05_C5   Thinking about (CHILD)'s free time on MONDAY THROUGH FRIDAY, on a typical day about how many hours does {he/she} usually watch TV or play video games (such as PlayStation)?
Pensando acerca del tiempo libre del (CHILD) de LUNES A VIERNES de un día típico, más o menos ¿cuántas horas mira (él/ella} la televisión o juega juegos de vídeo (tales como PlayStation)?

CG8

[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

QC05_C6   Now, thinking about SATURDAY AND SUNDAY weekend days, on a typical weekend day, about how many hours does (CHILD) usually watch TV or play video games (such as PlayStation)?
Ahora, pensando acerca de los días de fines de semana SÁBADO Y DOMINGO, en un día de fin de semana típico, ¿más o menos cuántas horas al día ve normalmente (CHILD) la televisión o juega juegos de video (tales como 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 QC05_C7
IF CAGE ≤ 3 YEARS, GO TO QC05_D1
ELSE IF CAGE > 3 YEARS CONTINUE WITH QC05_C7

QC05_C7   And about how many hours on MONDAY THROUGH FRIDAY does (CHILD), on a typical day, use a computer for fun, not schoolwork?
¿Y aproximadamente cuántas horas de LUNES A VIERNES, en un día típico, utiliza (CHILD) una computadora para diversión, no para trabajo escolar?

CG9

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

_____HOURS

DOESN'T HAVE ACCES TO A PC 93
MORE THAN ZERO, LESS THAN 1 HOUR 94
REFUSED .... -7
DON'T KNOW .... -8

QC05_C8   About how many hours on a typical SATURDAY OR SUNDAY does (CHILD) use a computer for fun, not schoolwork?
Más o menos, ¿cuántas horas al día en un SABADO O DOMINGO usa (CHILD) una computadora como diversión, no para tareas de la escuela?

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 – Access / Utilization

QC05_D1   The next questions are about where (CHILD) goes for health care. Is there a place you USUALLY take {him/her} to when {he/she} is sick or you need advice about {his/her} health?
Las siguientes preguntas son acerca de dónde va (CHILD) para servicios de salud. ¿Hay un lugar donde usted {lo/la} lleva USUALMENTE cuando {él/ella} está enfermo(a) o usted necesita consejo acerca de su salud?

CD1

YES 1
NO 2   **[GO TO QC05_D3]**
DOCTOR/HIS/HER DOCTOR 3
KAISER 4
MORE THAN ONE PLACE 5
REFUSED .... -7
DON'T KNOW .... -8

PROGRAMMING NOTE QC05_D2
IF QC05_D1 = (1, 5, -7, or –8), DISPLAY "What kind of place do you take {him/her} to most often — a medical doctor's office";
ELSE IF QC05_D1=3 DISPLAY "Is {his/her} doctor in a private"
ELSE IF QC05_D1=4, FILL QC05_D2=1 GO TO QC05_D3 (note skip different from 2003)

QC05_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?
¿{A qué tipo de lugar (lo/la) lleva con más frecuencia – al consultorio médico, / Está el medico de {él/ella} en un consultorio médico privado,} una clínica o clínica de hospital, una sala de urgencias o algún otro lugar?

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

QC05_D3   During the past 12 months, how many times has (CHILD) seen any kind of medical doctor?
Durante los últimos 12 meses, ¿cuántas veces ha visto (CHILD) a cualquier tipo de médico o doctor?

CD6

_____ TIMES

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

PROGRAMMING NOTE QC05_D4
IF QC05_D3 > 0, GO TO PROGRAMMING NOTE QC05_D5
ELSE IF QC05_D3 = (0, -7, -8), CONTINUE WITH QC05_D4

QC05_D4   About how long has it been since {he/she} last saw a medical doctor?
Más o menos, ¿hace cuánto tiempo fue la última vez que {él/ella} vio un médico?

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

PROGRAMMING NOTE QC05_D5
IF QC05_D3 (PAST 12 MONTH VISIT TO DOCTOR) = (0,-7,-8) OR QC05_D4 = (3,4,5,-7,-8) (SEEN DOCTOR MORE THAN 3 YRS AGO) GO TO QC05_D9.
ELSE IF QC05_D3 > 0 (HAD PAST 12 MONTH VISIT TO DR) OR QC05_D4 = 1 OR 2 (SEEN DR IN LAST 12 MONTHS OR 1-2 YEARS AGO) CONTINUE WITH QC05_D5

QC05_D5   The last time you saw a doctor for (CHILD), did you have a hard time understanding the doctor?
La última vez que usted llevó a (CHILD) al médico, ¿tuvo alguna dificultad para entender al médico?

CD25

YES 1
NO..2   **[GO TO**
NEVER ACCOMPANIED CHILD TO DOCTOR ..... -6   **QC05_D9]**
REFUSED .... -7
DON'T KNOW .... -8

QC05_D6   Was this because you and the doctor spoke different languages?
¿Se debió esto a que usted y el médico hablaban diferentes idiomas?

CD26

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

QC05_D7   Did you need someone else to help you understand the doctor?
¿Necesitó usted que otra persona le ayudara a entender al médico?

CD27

YES 1
NO..2   **[GO TO**
REFUSED .... -7   **QC05_D9]**
DON'T KNOW .... -8

QC05_D8   Who was this person who helped you understand the doctor?
¿Quién fue esta persona que le ayudó entender al médico?

CD28

MINOR CHILD (UNDER AGE 18) 1
AN ADULT FAMILY MEMBER OR FRIEND 2
DOCTOR, NURSE OR OTHER MEDICAL STAFF ..3
OTHER OFFICE STAFF..4
PROFESSIONAL INTERPRETER
(BOTH IN PERSON AND ON THE PHONE)...........5
OTHER (PATIENTS, SOMEONE ELSE).................6
DID NOT HAVE SOMEONE TO HELP....................7
REFUSED .... -7
DON' T KNOW... -8

PROGRAMMING NOTE QC05_D9
IF QC05_A21 =1, GO TO QC05_D10, ELSE CONTINUE WITH QC05_D9

QC05_D9   During the past 12 months did (CHILD) visit a hospital emergency room?
Durante los últimos 12 meses, ¿visitó (CHILD) una sala de emergencias de hospital?

CD12

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

QC05_D10   During the past 12 months, did you delay or not get a medicine that a doctor prescribed
for (CHILD)?
*Durante los últimos 12 meses, ¿tuvo usted que postergar la compra o no comprar una
medicina que el médico le recetó a (CHILD)?*

CE1

YES 1
NO..2   **[GO TO QC05_D12]**
REFUSED .... -7   **[GO TO QC05_D12]**
DON'T KNOW... -8   **[GO TO QC05_D12]**

QC05_D11   Was cost or lack of insurance a reason why you delayed or did not get a medicine that a
doctor prescribed for (CHILD)?
*¿Fue el costo o la falta de seguro una razón por la que postergó la compra o no compró
la medicina recetada que el doctor le había recetado para (CHILD)?*

CE12

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

QC05_D12   During the past 12 months, did you delay or not get any other medical care that you felt {he/she} needed—such as seeing a doctor, a specialist or other health professional?
Durante los últimos 12 meses, ¿tuvo que postergar o dejar de recibir algún otro tipo de atención médica que usted creyó que (CHILD) necesitaba−tal como ver un médico, un especialista u otro profesional de salud?

CE7

YES 1
NO..2   **[GO TO PN QC05_D14]**
REFUSED .... -7   **[GO TO PN QC05_D14]**
DON'T KNOW .... -8   **[GO TO PN QC05_D14]**

QC05_D13   Was cost or lack of insurance a reason why you delayed or did not get any other medical care for (CHILD)?
¿Fue el costo o la falta de seguro una razón por la que usted se tardó en obtener o no obtuvo alguna otra atención médica para (CHILD)?

CE13

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

PROGRAMMING NOTE QC05C_D14
IF QC05_D3='0' (CHILD HAS NOT SEEN MD IN LAST 12 MOS), GO TO PROGRAMMING NOTE QC05_D15
ELSE CONTINUE WITH QC05C_D14

QC05C_D14   During the past 12 months, did (CHILD) get a physical exam or general check-up when (he/she) was not sick or hurt?
Durante los últimos 12 meses, ¿tuvo (CHILD) un examen físico o un chequeo general cuando {él/ella} no estaba enfermo(a) ni le dolía nada?

CD29

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

PROGRAMMING NOTE QC05C_D15
IF CAGE < 6 MONTHS, GO TO QC05_E1
ELSE IF CAGE ≥ 6 MONTHS, CONTINUE WITH QC05C_D15

QC05_D15   During the past 12 months, has (CHILD) had a flu shot?
Durante los últimos 12 meses, ¿recibió (CHILD) la vacuna contra la gripe?

CD30

[IF R REPORTS RECEIVING FLUMIST, CODE AS YES]

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

Section E – Public Program Eligibility

QC05_E1   Is (CHILD) now on TANF or CalWORKS?
¿Esta (CHILD) actualmente en TANF o 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 quiere decir 'Asistencia Temporaria a Familias Necesitadas' y CalWORKS significa 'Oportunidades de Trabajo y Responsabilidad hacia los Niños de California.' Ambos reemplazaron al AFDC, el antiguo programa de 'welfare.'"***]**

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

QC05_E2   Is (CHILD) receiving Food Stamp benefits?
¿Recibe (CHILD) Food Stamps o Estampillas para Comida?

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: *"Usted recibe beneficios a través de una tarjeta EBT. EBT son las iniciales en inglés de Transferencia Electrónica de Beneficios y también se conoce como la tarjeta Golden State Advantage."***]**

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

PROGRAMMING NOTE QC05_E3
IF CAGE >6, GO TO QC05_F1
ELSE CONTINUE WITH QC05_E3

QC05_E3   Is (CHILD) on WIC now?
¿Está (CHILD) actualmente recibiendo WIC?

CE11C

[IF NEEDED, SAY: "WIC means 'Supplemental Food Program for Women, Infants and Children.'"]
[IF NEEDED, SAY: *"WIC quiere decir 'Programa de Alimentación Suplementaria para Mujeres embarazadas o lactantes y niños.'"***]**

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

Section F – Parental Involvement / Concerns, Mental Health, First 5, Childcare

---

PROGRAMMING NOTE QC05_F1
IF CAGE >5 YEARS GO TO PROGRAMMING NOTE QC05_F4 INTRO
ELSE CONTINUE WITH QC05_F1

QC05_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)?
En una semana normal, ¿cuántos días, ya sea usted o cualquier otro miembro de la familia, le leyó cuentos o miró libros con dibujos junto con (CHILD)?

CG14

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

QC05_F2   {In a usual week, about how many days do you or any other family member} play music or sing songs with (CHILD)?
{En una semana normal, ¿cuántos días, usted o cualquier otro miembro de la familia,} toca música o canta canciones con (CHILD)?

CG15

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

QC05_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?
{En una semana normal, ¿cuántos días, usted o cualquier otro miembro de la familia,} sale con (CHILD) a alguna parte, como por ejemplo, al parque, a una tienda, o a una zona de recreo?

CG16

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

PROGRAMMING NOTE QC05_F4 INTRO
IF CAGE <4 MONTHS, GO TO QC05_F23
OR IF CAGE ≥6 YEARS, GO TO QC05_F10
ELSE IF CAGE ≥ 4 MONTHS AND < 6 YEARS, CONTINUE WITH QC05_F4 INTRO

QC05_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.
Las siguientes preguntas tratan sobre preocupaciones que usted podría tener acerca de su niño. Para cada una, dígame si a usted esto le preocupa mucho, un poco, o nada.

PROGRAMMING NOTE QC05_F4
IF CAGE > 9 MONTHS GO TO QC05_F5
ELSE IF CAGE ≤ 9 MONTHS CONTINUE WITH QC05_F4

QC05_F4   How your child makes speech sounds? Are you concerned …
¿La manera en que su niño suena al hablar? ¿Le preocupa esto…

CG17

A lot 1	
Mucho 1	
A little or 2	
Un poco..2	**[GO TO PN QC05_F6]**
Not at all 3	
Nada..3	
REFUSED ....-7	
DON'T KNOW ....-8	

QC05_F5   How your child talks and makes words? Are you concerned …
¿La manera en que su niño habla y forma palabras? ¿Le preocupa esto…

CG17A

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

PROGRAMMING NOTE QC05_F6
IF CAGE < 18 MONTHS, GO TO QC05_F7
ELSE IF CAGE ≥ 18 MONTHS CONTINUE WITH QC05_F6

QC05_F6   How well your child understands what you say?
¿Qué tan bien entiende su niño lo que usted dice?

CG18

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

QC05_F7   How your child uses {his/her} hands and fingers to do things?
¿La manera en que su niño usa las manos y los dedos para hacer cosas?

CG19

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

QC05_F8   How well your child uses {his/her} arms and legs?
¿Qué tan bien su niño usa los brazos y las piernas?

CG20

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

QC05_F9   How well your child can see or hear?
¿Qué tan bien su niño puede ver u oír?

CG21

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

PROGRAMMING NOTE QC05_F10
IF CAGE IS ≤ 9 MONTHS, GO TO QC05_F23
IF CAGE > 6 YEARS, GO TO QC05_F15INTRO
IF CAGE = 10 MONTHS TO 6 YEARS, CONTINUE WITH QC05_F10

QC05_F10   How your child gets along with others?
¿La manera en que se lleva su niño con otros?

CG22

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

QC05_F11   Your child's feelings and moods?
¿Los sentimientos y estados de ánimo de su niño?

CG23

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

QC05_F12   How your child behaves?
¿La manera en que se comporta su niño?

CG24

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

QC05_F13   How your child is learning to do things for {himself/herself}?
¿La manera en que su niño está aprendiendo a hacer cosas por sí mismo?

CG25

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

QC05_F14   Whether your child can do what other children {his / her} age can do?
¿Si acaso su niño puede hacer lo que otros niños de su edad pueden hacer?

CG26

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

THE NEXT 7 ITEMS (QC05F15-QCO5F22) ARE INCLUDED IN THIS SURVEY WITH PERMISSION AS INDICATED:
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PROGRAMMING NOTE QC05_F15
IF CAGE <4 YEARS, GO TO QC05_F23
ELSE CONTINUE WITH QC05_F15 INTRO

QC05_F15 INTRO

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.
Voy a leerle una lista de cosas que describen a los niños. Para cada cosa, por favor dígame si no ha sido cierto, si sí ha sido cierto, o si definitivamente ha sido cierto en el caso de (CHILD) durante los últimos seis meses.

QC05_F15   Is generally well behaved, usually does what adults request.
Por lo general es obediente, y normalmente hace lo que le piden los adultos.

CG28

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

QC05_F16   Has many worries or often seems worried
Se preocupa de muchas cosas o siempre se le ve preocupado(a).

CG29

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

QC05_F17   Is often unhappy, depressed or tearful
A menudo está triste, deprimido(a) o con lágrimas en los ojos.

CG30

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

QC05_F18   Gets along better with adults than with other children
Se lleva mejor con adultos que con otros niños.

CG31

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

QC05_F19   Has good attention span, sees chores or homework through to the end.
Tiene buena atención, se concentra en tareas o deberes escolares hasta que los termina.

CG32

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

QC05_F20   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?
En general, ¿cree usted que su hijo/hija tiene dificultades en alguna de las siguientes áreas: emociones, concentración, comportamiento, o ser capaz de llevarse bien con otras personas?

CF30

YES 1
NO 2   **[GO TOQC05_F22]**
REFUSED .... -7   **[GO TOQC05_F22]**
DON'T KNOW .... -8   **[GO TOQC05_F22]**

PROGRAMMING NOTE QC05_F21
IF QC05_F20 = 2 (NO) OR -7 OR -8, GO TO QC05_F22
ELSE CONTINUE WITH QC05_F21

QC05_F21   Are these difficulties minor, definite, or severe?
¿Son estas dificultades pequeñas, definidas, o graves?

CF31

MINOR 1
DEFINITE 2
SEVERE 3
REFUSED .... -7
DON'T KNOW .... -8

QC05_F22 During the past 12 months did (CHILD) receive any psychological or emotional counseling?
Durante los últimos 12 meses, ¿recibió (CHILD) cualquier orientación psicológica o emocional?

CF32

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

PROGRAMMING NOTE QC05_F22B
IF QC05_A12a =1 OR QC05_12b = 1 (ATTENDED SCHOOL LAST WEEK OR YEAR) CONTINUE WITH QC05_F22B;
ELSE, GO TO QC05_F23

QC05_F22B Would you describe (CHILD'S) school work as…
¿Describiría el trabajo escolar de {CHILD NAME /AGE/SEX} como...

CF38

```
Excellent,................................................................1
Excelente, .............................................................1
Above average, ......................................................2
Por encima del promedio, ......................................2
Average,  ...............................................................3
Promedio,...............................................................3
Below average, or ..................................................4
Por debajo del promedio, o....................................4
Failing?..................................................................5
Malo? .....................................................................5
REFUSED ........................................................ -7
DON'T KNOW .................................................. -8
```

QC05_F23 Please tell me if you strongly agree, agree, disagree or strongly disagree with the following statement: Preschool is important in preparing young children to learn better in school and become more productive adults.
Por favor, dígame si está totalmente de acuerdo, de acuerdo, en desacuerdo o totalmente en desacuerdo con la siguiente afirmación: La educación preescolar es importante en la preparación de los niños pequeños para que aprendan mejor en la escuela y sean más productivos cuando lleguen a ser adultos.

CF33

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

QC05_F24   In the past 12 months, have you seen or heard a radio or TV ad about
preschool that says, "When kids go to preschool, they're not the only ones
who benefit. We all do"?
En los últimos 12 meses, ¿ha visto u oído un anuncio de radio o televisión acerca de la
educación preescolar que dice, "Cuando los niños reciben una educación preescolar, el
beneficio no es sólo para ellos. Todos nos beneficiamos."?

CF34

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

QC05_F25   Did you know that First 5 California, a state agency, provides a free Parent Kit to parents
of young children?
¿Sabía que First 5 California, un organismo estatal, proporciona gratuitamente a los
padres de niños pequeños un paquete informativo?

CF35

YES 1
NO..2   **[GO TO QC05_F28]**
REFUSED .... -7   **[GO TO QC05_F28]**
DON'T KNOW .... -8   **[GO TO QC05_F28]**

QC05_F26   Have you ever received this Parent Kit?
¿Ha recibido alguna vez este paquete informativo?

CF36

YES 1
NO..2   **[GO TO QC05_F28]**
REFUSED .... -7   **[GO TO QC05_F28]**
DON'T KNOW .... -8   **[GO TO QC05_F28]**

QC05_F26B   Did you use any of the materials from the Parent Kit?
¿Ha usado algunos de los materiales del paquete informativo para los padres de familia?

CF39

YES 1
NO..2   **[GO TO QC05_F28]**
REFUSED .... -7   **[GO TO QC05_F28]**
DON'T KNOW .... -8   **[GO TO QC05_F28]**

QC05_F27   On a scale of 1-10 with 10 being the most useful and 1 the least, how useful was the
Parent Kit?
En una escala de 1 a 10, donde 10 es muy útil y 1 nada útil, ¿qué tan útil fue para usted
el paquete informativo?

CF37

_____ RESPONDENT'S NUMBER FROM 1 (WORST) TO 10 (BEST)

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

QC05_F28   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.}
*Las siguientes preguntas son acerca de cuidado infantil. Por cuidado infantil, queremos
decir cualquier arreglo donde alguien que no sea uno de los padres o guardianes
legales, o padrastros/madrastras cuida a (CHILD). {Esto incluye pre-escolar y guarderías
pero no kindergarten.}*

Do you currently have any kind of regular childcare arrangements for (CHILD) for 10 or
more hours per week?
*¿Tiene usted actualmente algún tipo de arreglo regular para cuidar a (CHILD) por 10 o
más horas a la semana?*

CG1

YES 1
NO.. 2
REFUSED-...7   **[GO TO QC05_F37]**
DON'T KNOW .... -8

QC05_F29   Altogether, how many hours is (CHILD) in childcare during a typical week? Include all
combinations of care arrangements.
*En total, ¿cuántas horas esta (CHILD) en cuidado infantil durante la semana típica?
Incluya todas las combinaciones de los arreglos de cuidado infantil.*

CG2

_____ HOURS   [SR: 10-168 HRS]

REFUSED .... -7   **[GO TO QC05_F37]**
DON'T KNOW .... -8   **[GO TO QC05_F37]**

PROGRAMMING NOTE QC05_F30
IF QC05_F29 < 10 (HOURS IN CHILDCARE), GO TO QC05_F37
ELSE CONTINUE WITH QC05_F30 INTRO

QC05_F30 INTRO
During a typical week does (CHILD) receive childcare from…
En una semana típica, ¿recibe (CHILD) cuidado de parte de…

QC05_F30   …a grandparent or other family member?
…uno de sus abuelos o de otro miembro de la familia?

CG3A

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

> **PROGRAMMING NOTE QC05_F30**
> **IF CAGE ≥ 7 YEARS, GO TO QC05_F33**
> **ELSE CONTINUE WITH QC05_F31**

QC05_F31   …a Head Start or state preschool program?
...Head Start o de un programa preescolar del estado?

CG3B

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

QC05_F32   …some other preschool or nursery school?
...algún otro tipo de preescolar o guardería?

CG3C

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

QC05_F33   …a childcare center that is not in someone's home?
...una guardería que no está en la casa de una persona?

CG3D

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

QC05_F34   …a non-family member who cares for (CHILD) in your home?
...una persona que no es miembro de la familia y que viene a su casa a cuidar a (CHILD)?

CG3E

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

QC05_F35   …a non-family member who cares for (CHILD) in his or her home?
...una persona que no es miembro de la familia y que cuida a (CHILD) en su propia casa?

CG3F

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

> **PROGRAMMING NOTE QC05_F36:**
> **IF QC05_F30 OR QC05_F34= 1 (CHILD RECEIVES CHILDCARE FROM GRANDPARENT OR NON-FAMILY MEMBER IN CHILD'S HOME), GO TO QC05_F37;**
> **ELSE IF QC05_F31 ≠ 1 AND QC05_F32 ≠ 1 AND QC05_F33 ≠ 1 AND QC05_F35 ≠ 1(NOT IN HEAD START, PRESCHOOL PROGRAM, OR IN CARE IN NON-FAMILY MEMBER HOME), GO TO QC05_F37;**
> **ELSE IF ONLY ONE OF QC05_F31, QC05_F32, QC05_F33, OR QC05_F35 = 1, CONTINUE WITH QC05_F36 AND SAY "Is this" AND "provider";**
> **ELSE CONTINUE WITH QC05_F36 AND SAY "Are all of these" AND "providers"**

QC05_F36   {Is this/Are some or all of these} child care provider{s} licensed by the state of California?
¿{Es este/ Son todos estos} proveedor{es} de atención infantil licenciados por el estado de California?

CG3G

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

QC05_F37   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?
En los últimos 12 meses, ¿hubo un momento en que usted no pudo encontrar cuidado infantil para (CHILD) por una semana o más cuando lo necesitaba?

CG5

YES 1
NO...2
REFUSED .... -7   **[GO TO QC05_G1]**
DON'T KNOW .... -8

QC05_F38   What is the main reason you were unable to find childcare for (CHILD) at that time?
¿Cuál es la razón principal por la que no pudo encontrar quien cuidara a (CHILD) esa vez?

CG6

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

Section G – Demographics Part II

So we can be sure we have included children of all races and ethnic groups in California, I need to ask a few questions about (CHILD)'s background.
Para poder estar seguros de que hemos incluido a los niños de todas las razas y grupos étnicos en California, necesito hacerle unas pocas preguntas finales acerca de antecedentes de (CHILD).

QC05_G1   Is (CHILD) Latino or Hispanic?
¿Es (CHILD) de origen latino o hispano?

| CH1 |

[IF NEEDED, SAY: "Such as Mexican or Central or South American?"]
[IF NEEDED SAY: *"Tal como mexicano, o centro o sud Americano?"*]

YES 1
NO..2   **[GO TO QC05_G3]**
REFUSED .... -7   **[GO TO QC05_G3]**
DON'T KNOW .... -8   **[GO TO QC05_G3]**

QC05_G2   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.
¿Y cuál es su ascendencia u origen latino o hispano? Por ejemplo, mexicano, salvadoreño, hondureño --y si tiene más de uno, por favor dígamelos todos.

| CH2 |

[IF NECESSARY GIVE MORE EXAMPLES]

[CODE ALL THAT APPLY]

MEXICAN/MEXICANO 1
MEXICAN AMERICAN..2
CHICANO 3
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 QC05_G3:
IF QC05_G1=1 (YES-CHILD IS LATINO), SAY, "You said your child is Latino or Hispanic. Also…"
IF MORE THAN ONE RACE GIVEN, AFTER ENTERING RESPONSES FOR QC05_G3, CONTINUE
WITH PROGRAMMING NOTE QC05_G4;
ELSE FOLLOW SKIPS AS INDICATED FOR SINGLE RESPONSES

QC05_G3   {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?
*{Usted dijo su hijo(a) es hispano(a) o latino(a).} Además, por favor dígame cuál o cuáles
de los siguientes términos usaría usted para describir a (CHILD): ¿nativo de Hawái, de
otra isla del Pacífico, indígena americano, nativo de Alaska, asiático, negro,
afroamericano o blanco?*

CH3

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

[CODE ALL THAT APPLY]

WHITE 1	**[GO TO QC05_G10]**	
BLACK OR AFRICAN AMERICAN 2	**[GO TO QC05_G10]**	**IF**
ASIAN 3	**[GO TO QC05_G8]**	**ONLY**
AMERICAN INDIAN, ALASKA NATIVE...... 4	**[GO TO QC05_G4]**	**ONE**
OTHER PACIFIC ISLANDER 5	**[GO TO QC05_G9]**	**RACE**
NATIVE HAWAIIAN 6	**[GO TO QC05_G10]**	
OTHER (SPECIFY: _____) 91	**[GO TO QC05_G10]**	
REFUSED .... -7	**[GO TO QC05_G10]**	
DON'T KNOW... -8	**[GO TO QC05_G10]**	

PROGRAMMING NOTE QC05_G4:
IF QC05_G3 = 4 (AMERICAN INDIAN, ALASKA NATIVE) CONTINUE WITH QC05_G4;
ELSE GO TO PROGRAMMING NOTE QC05_G8

QC05_G4   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.
*Usted dijo indígena americano o nativo de Alaska, ¿De qué tribu desciende (CHILD)? Si
{él/ella} es de más de una tribu, por favor dígamelas todas.*

CH4

[CODE ALL THAT APPLY]

APACHE 1
BLACKFEET 2
CHEROKEE 3
CHOCTAW 4
NAVAJO..5
POMO 6
PUEBLO 7
SIOUX 8
YAQUI...9
OTHER TRIBE [Ask for spelling]
(SPECIFY: _____) 91
REFUSED .... -7
DON'T KNOW .... -8

QC05_G5   Is (CHILD) an enrolled member in a federally or state recognized tribe?
¿Es (CHILD) un miembro matriculado de una tribu federal o estatalmente reconocida?

CH5

                    YES 1
                    NO..2   **GO TO**
                    REFUSED .... -7   **PN QC05_G8**
                    DON'T KNOW .... -8

QC05_G6   In which Tribe is (CHILD) enrolled?
¿En qué tribu está inscrito(a) (CHILD)?

CH6

APACHE
        MESCALERO APACHE, NM 1
        APACHE (NOT SPECIFIED) 2
        OTHER APACHE (SPECIFY: _____) ... 91
BLACKFEET
        BLACKFOOT / BLACKFEET.............................3
CHEROKEE
        WESTERN CHEROKEE 4
        CHEROKEE (NOT SPECIFIED) 5
        OTHER CHEROKEE (SPECIFY: _____) ... 92
CHOCTAW
        CHOCTAW OKLAHOMA 6
        CHOCTAW (NOT SPECIFIED).........................7
        OTHER CHOCTAW (SPECIFY: _____) ... 93
NAVAJO
        NAVAJO (NOT SPECIFIED) 8
POMO
        HOPLAND BAND, HOPLAND RANCHERIA 9
        SHERWOOD VALLEY RANCHERIA 10
        POMO (NOT SPECIFIED) 11
        OTHER POMO (SPECIFY: _____) 94
PUEBLO
        HOPI.. 12
        YSLETA DEL SUR PUEBLO OF TEXAS........ 13
        PUEBLO (NOT SPECIFIED 14
        OTHER PUEBLO (SPECIFY: _____) 95
SIOUX
        OGLALA/PINE RIDGE SIOUX 15
        SIOUX (NOT SPECIFIED) 16
        OTHER SIOUX (SPECIFY: _____)......... 96
YAQUI
        PASCUA YAQUI TRIBE OF ARIZONA.......... 17
        YAQUI (NOT SPECIFIED.............................. 18
        OTHER YAQUI (SPECIFY: _____).......... 97
OTHER
        OTHER (SPECIFY: _____) 98
        REFUSED .... -7
        DON'T KNOW... -8

QC05_G7　　Does (CHILD) get any health care services through the Indian Health Service, a Tribal Health Program or an Urban Indian clinic?
¿Recibe (CHILD) algunos servicios de atención de salud a través del Servicio Indio de Salud, un Programa de Salud Tribal o una clínica India Urbana?

CH6A

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

PROGRAMMING NOTE QC05_G8:
IF QC05_G3 = 3 (ASIAN) CONTINUE WITH QC05_G8;
ELSE GO TO PROGRAMMING NOTE QC05_G9

QC05_G8　　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.
Usted dijo asiático(a), ¿y a qué grupo étnico específico es {él/ella}, tal como chino, filipino, vietnamita? Si {él/ella} es de más de un grupo, dígamelos todos.

CH7

[CODE ALL THAT APPLY]

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 QC05_G9:
IF QC05_G3 = 5 (PACIFIC ISLANDER) CONTINUE WITH QC05_G9;
ELSE GO TO QC05_G10
```

QC05_G9   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.
*Usted dijo que (CHILD) es de las islas del Pacífico. ¿De qué grupo étnico específico es
{él/ella}, tal como samoano, tongano o guamaniano? Si {él/ella} es de más de un grupo,
dígamelos todos.*

CH7A

[CODE ALLTHAT APPLY]

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

QC05_G10   In what country was (CHILD) born?
¿En qué país nació (CHILD)?

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

PROGRAMMING NOTE QC05_G11:
IF QC05_G10 = 1, 2, 9, 22, OR 26 (UNITED STATES OR ITS TERRITORIES), GO TO PROGRAMMING
NOTE QC05_G14;
ELSE CONTINUE WITH QC05_G11

QC05_G11   Is (CHILD) a citizen of the United States?
¿Es (CHILD) ciudadano(a) de los Estados Unidos?

CH8A

YES 1   **[GO TO QC05_G13]**
NO..2
APPLICATION PENDING 3
REFUSED .... -7
DON'T KNOW .... -8

QC05_G12   Is (CHILD) a permanent resident with a green card?
¿Es (CHILD) residente permanente con tarjeta verde?

CH9

**[IF NEEDED, SAY: "People usually call this a green card but the color can also be
pink, blue or white"]**
**[IF NEEDED, SAY: *"La gente usualmente la llama la "tarjeta verde" o "Green Card"
pero también puede ser de color rosa, azul o Blanca."*]**

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

QC05_G13   About how many years has (CHILD) lived in the United States?
¿Más o menos cuántos años ha vivido (CHILD) en los Estados Unidos?

CH10

[FOR LESS THAN A YEAR, ENTER 1 YEAR]

_____ NUMBER OF YEARS

{OR}

_____ YEAR FIRST CAME TO LIVE IN U.S.

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

PROGRAMMING NOTE QC05_G14;
IF MKA = ADULT RESPONDENT SKIP TO PN QC05_G18
IF RESPONDENT IS MOTHER OF CHILD, CONTINUE WITH QC05_G14 AND SAY, "were you";
ELSE, CONTINUE WITH QC05_G14 AND SAY "was his mother/was her mother"

QC05_G14   In what country {were you/was his mother/was her mother} born?
¿En qué país nació {usted/ la madre de (CHILD)}?

CH11

[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

PROGRAMMING NOTE QC05_G15
IF QC05_G14 = 1, 2, 9, 22 OR 26 (UNITED STATES OR ITS TERRITORIES), GO TO
QC05_PROGRAMMING NOTE QC05_G18;
ELSE IF RESPONDENT IS MOTHER OF CHILD, CONTINUE WITH QC05_G15 AND QC05_G16 (IF
APPLICABLE) AND SAY "Are you" IN BOTH QUESTIONS;
ELSE CONTINUE WITH QC05_G15 AND QC05_G16 (IF APPLICABLE) AND SAY "Is {his/her}
mother" IN BOTH QUESTIONS

QC05_G15   {Are you/Is {his/her} mother} a citizen of the United States?
              ¿{Es usted/ Es la madre de (él/ella)} ciudadano de los Estados Unidos?

CH11A

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

                      YES 1   **[GO TO PN QC05_G17]**
                      NO...2
                      APPLICATION PENDING.......................................3
                      REFUSED .... -7
                      DON'T KNOW .... -8

QC05_G16   {Are you/Is {his/her} mother} a permanent resident with a green card?
              ¿{Es usted/ Es la madre de (él/ella)} residente permanente con tarjeta verde?

CH12

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

PROGRAMMING NOTE QC05_G17
IF RESPONDENT IS MOTHER OF CHILD, CONTINUE WITH QC05_G17 AND SAY, "have you";
ELSE, CONTINUE WITH QC05_G17 AND SAY "has his mother/has her mother"

QC05_G17   About how many years {have you/has his mother/has her mother} lived in the United
              States?
              *Más o menos, ¿cuántos años ha vivido {usted/ la madre de (él/ella)} en los Estados
              Unidos?*

CH13
                      _____ NUMBER OF YEARS [HR: 0-11]

                      {OR}

                      _____ YEAR FIRST CAME TO LIVE IN U.S. HR: 1988-2000]

                      NEVER LIVED IN U.S.. 91
                      REFUSED .... -7
                      DON'T KNOW .... -8

PROGRAMMING NOTE QC05_G18;
IF MKA IS MALE AND MKA = ADULT RESPONDENT, SKIP TO
IF RESPONDENT IS FATHER OF CHILD, CONTINUE WITH QC05_G18 AND SAY "were you";
ELSE, CONTINUE WITH QC05_G18 AND SAY, "was his father/was her father"

QC05_G18   In what country {were you/was his father/was her father} born?
¿En qué país nació {usted/ el padre de {él/ella}}?

CH14

[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

> **PROGRAMMING NOTE QC05_G19**
> **IF QC05_G18 = 1, 2, 9, 22 OR 26 (UNITED STATES OR ITS TERRITORIES), GO TO PROGRAMMING NOTE QC05_G22;**
> **ELSE IF RESPONDENT IS FATHER OF CHILD, CONTINUE WITH QC05_G19 AND QC05_G20 (IF APPLICABLE) AND SAY "Are you" IN BOTH QUESTIONS;**
> **ELSE CONTINUE WITH QC05_G19 AND QC05_G20 (IF APPLICABLE) AND SAY "Is {his/her} father" IN BOTH QUESTIONS**

QC05_G19   {Are you/Is {his/her} father} a citizen of the United States?
¿Es {usted/ el padre de {él/ella}} ciudadano de los Estados Unidos?

CH14A

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

YES 1   **[GO TO PN QC05_G21]**
NO 2
APPLICATION PENDING 3
REFUSED .... -7
DON'T KNOW .... -8

QC05_G20   {Are you/Is {his/her} father} a permanent resident with a green card?
¿Es {usted/ el padre de {él/ella}} residente permanente con tarjeta verde?

CH15

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

> **PROGRAMMING NOTE QC05_G21**
> **IF RESPONDENT IS FATHER OF CHILD, CONTINUE WITH QC05_G21 AND SAY "have you";**
> **ELSE, CONTINUE WITH QC05_G21 AND SAY "has his father/has her father"**

QC05_G21   About how many years {have you/has his father/has her father} lived in the United States?
Aproximadamente, ¿cuántos años ha vivido {usted/ el padre de {él/ella}} en los Estados Unidos?

CH16

_____ NUMBER OF YEARS [HR: 0-11]

{OR}

_____ YEAR FIRST CAME TO LIVE IN U.S. HR: 1988-2000]

NEVER LIVED IN U.S. 91
REFUSED .... -7
DON'T KNOW .... -8

PROGRAMMING NOTE QC05_G22:
IF RESPONDENT IS SAMPLED ADULT, GO TO PROGRAMMING NOTE QC05_G23;
ELSE IF RESPONDENT ≠ ADULT RESPONDENT, CONTINUE WITH QC05_G22

QC05_G22   In general, what languages are spoken in (CHILD)'s home?
              En general, ¿qué idiomas se hablan en el hogar de (CHILD}?

CH17

              [PROBE: "Any others?"]
              [PROBE: *"Cualquier otro idioma?"*]

                          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 QC05_G23
IF INTERVIEW CONDUCTED IN ENGLISH AND QC05_G22 > 1 (TWO OR MORE LANGUAGES
SPOKEN AT HOME), CONTINUE WITH QC05_G23: "Compared to the language spoken in
(CHILD)'s home,...";
ELSE IF QC05_G22 = 1 (ONLY SPEAKS ENGLISH), GO TO PROGRAMMING NOTE QC05_G24

QC05_G23   {Compared to other languages spoken in (CHILD)'s home}, would you say you speak
              English....
              {En comparación con otras lenguas que se hablan en casa de (CHILD),) ¿Diría usted
              que habla inglés...

CH18

                          Very well,...1
                          Muy bien...1
                          Fairly well, ...2
                          Bien 2
                          Not well, or 3
                          No bien...3
                          Not at all? 4
                          No en absoluto...4
                          REFUSED .... -7
                          DON'T KNOW .... -8

PROGRAMMING NOTE QC05_G24
IF RESPONDENT IS NOT SAMPLED ADULT, ASK QC05_G24
ELSE GO TO PROGRAMMING NOTE QC05_G26

QC05_G24   What is the highest grade of education you have completed and received credit for?
¿Cuál es el nivel de educación más alto que usted ha completado y por el cual ha recibido reconocimiento?

CH22

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

QC05_G25   Are you now in school?
¿Asiste usted a la escuela?

CG37

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

PROGRAMMING NOTE QC05_G26
IF RESPONDENT IS NOT SAMPLED ADULT, ASK QC05_G26
ELSE GO TO END.

QC05_G26   Those are my final questions. I appreciate your patience. Finally, do you think you would
be willing to do a follow-up to this survey sometime in the future?
*Estas son mis últimas preguntas. Le agradezco su paciencia. Finalmente, ¿estaría
dispuesto(a) a hacer una entrevista de seguimiento a esta encuesta en algún momento
en el futuro?*

CG38

YES 1
MAYBE / PROBABLY YES 2
DEFINITELY NOT 3
REFUSED .... -7
DON'T KNOW .... -8

END   Those are my final questions. Thank you for your time and cooperation. You have helped
with a very important statewide survey. Good bye.

*Estas son mis últimas preguntas. Gracias por su tiempo y cooperación. Nos ha ayudado
en un estudio sobre la salud muy importante para el estado de California. Adiós.*