



CHIS 2007

Child Questionnaire (Spanish)

Version 5.3

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

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Table of Contents

Section A – Demographics Part I, Health Conditions	4
GENDER	4
AGE.....	4
HEIGHT.....	5
WEIGHT.....	6
SCHOOL ATTENDANCE.....	6
HEALTH STATUS	7
ASTHMA.....	7
ADD/ADHD	11
Section B – Dental Health.....	13
DENTAL CARE	13
REASONS FOR NOT VISITING DENTIST.....	14
MISSIED SCHOOL	15
Section C – Diet, Physical Activity, Park Use	16
Dietary Intake.....	16
PHYSICAL ACTIVITY.....	19
School Name	21
PARK USE.....	22
Section D – Access and Utilization of Health Care.....	23
USUAL SOURCE OF CARE, VISITS TO MEDICAL DOCTOR.....	23
COMMUNICATION WITH DOCTOR	24
Delayed Care/Unmet Need.....	26
Delay in Medical Care.....	27
FLU SHOT	27
EMERGENCY ROOM USE	27
Section E – Public Programs	28
TANF	28
Food Stamps.....	28
WIC	29
Section F – Parental Involvement, Concerns, Mental Health	31
READING	31
SPEECH AND COMMUNICATION	32
Coordination.....	33
Behavior.....	34
SCREENING TESTS.....	35
Section G – Child Care.....	40
REGULAR CHILD CARE	40
PRESCHOOL AND CHILD CARE	41
ACCESS TO CHILD CARE.....	42

Section H – Demographics, Part II..... 44

Race/Ethnicity	44
Country of Birth	49
CITIZENSHIP, IMMIGRATION STATUS, YEARS IN THE US	49
Country of Birth (Mother)	51
Citizenship, Immigration Status, Years in the US (Mother)	52
Country of Birth (Father)	53
Citizenship, Immigration Status, Years in the US (Father)	54
Languages Spoken At Home/English Proficiency	55
Education of Primary Caretaker.....	56
Follow-up and Close	57

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 2007 Data Dictionaries for additional information on variables, the population universe answering a specific question, and data file content.

Section A – Demographics Part I, Health Conditions

PROGRAMMING NOTE QC07_A1:
IF AR = MKA AND GENDER OF CHILD IS KNOWN, SKIP TO QC07_A2;
ELSE CONTINUE WITH QC07_A1;

QC07_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.
Algunas de las preguntas están basadas en las características personales, tal como la edad de (CHILD). Así es que voy a comenzar haciéndole unas breves preguntas sobre datos básicos.

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

CA1

MALE	1
FEMALE	2
REFUSED	-7

QC07_A2 What is {his/her} date of birth?
¿Cuál es la fecha de nacimiento de {él/ella}?

CA2MON

_____ MONTH

- | | |
|-------------|--------------|
| 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

CA2YR

_____ YEAR

REFUSED	-7
DON'T KNOW	-8

PROGRAMMING NOTE QC07_A3:

**IF QC07_A2 = -7 or -8 (REFUSED/DON'T KNOW) CONTINUE WITH QC07_A3;
ELSE SKIP TO QC07_A4;**

QC07_A3 How old is {he/she}?
¿Cuántos años tiene {él/ella}?

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

QC07_A4 How much did {he/she} weigh at birth?
¿Cuánto pesó {él/ella} al nacer?

CA13P/CA13O

____ POUNDS ____ OUNCES

CA13K/CA13G

____ KILOGRAMS ____ GRAMS

CAFMT

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

QC07_A5 About how tall is (CHILD) now without shoes?
¿Más o menos cuánto mide (CHILD) sin zapatos?

CA4F/CA4I

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

____ FEET ____ INCHES

CA4M/CA4C

____ METERS ____ CENTIMETERS

CA4FMT

FEET/INCHES	1
METERS/CENTIMETERS	2
REFUSED	-7
DON'T KNOW	-8

QC07_A6 About how much does (CHILD) weigh now without shoes?
¿Cuánto pesa (CHILD) ahora sin zapatos?

CA5P

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

_____ POUNDS

CA5K

_____ KILOGRAMS

CA5FMT

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

PROGRAMMING NOTE QC07_A6A:

IF CAGE < 5 YEARS GO TO PROGRAMMING NOTE QC07_A7; ELSE CONTINUE WITH QC07_A6A AND IF CAGE = 5 YRS DISPLAY "NOT INCLUDING PRE-SCHOOL OR NURSERY SCHOOL".

QC07_A6A {Not including pre-school or nursery school} Did (CHILD) attend school last week?
{Sin incluir el pre-escolar o el jardín de infancia,} ¿Asistió (CHILD) a la escuela la semana pasada?

CA42

YES	1	[GO TO QC07_A7]
NO	2	
ON VACATION	3	
HOME SCHOoled	4	
REFUSED	-7	
DON'T KNOW	-8	

PROGRAMMING NOTE QC07_A6B:

IF CAGE = 5 YRS DISPLAY "NOT INCLUDING PRE-SCHOOL OR NURSERY SCHOOL".

QC07_A6B {Not including pre-school or nursery school} Did (CHILD) attend school during the last school year?
{Sin incluir el pre-escolar o el jardín de infancia} ¿Fue (CHILD) a la escuela durante el último año escolar?

CA43

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

QC07_A7 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 bueno, bueno, regular, o mal?

CA6

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

QC07_A8 Has a doctor ever told you that (CHILD) has asthma?
¿Le ha dicho a usted alguna vez un médico que (CHILD) tiene asma?

CA12

YES	1	[GO TO QC07_A20] [GO TO QC07_A20] [GO TO QC07_A20]
NO	2	
REFUSED	-7	
DON'T KNOW	-8	

QC07_A9 Does {he/she} still have asthma?
¿Todavía tiene asma (CHILD)?

CA31

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

QC07_A10 During the past 12 months, has {he/she} had an episode of asthma or an asthma attack?
Durante los últimos 12 meses, ¿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 QC07_A11:

**IF QC07_A9 = 2, -7 or -8 (NO, REFUSED, DON'T KNOW) AND QC07_A10 = 2, -7 or -8 (NO, REFUSED, DON'T KNOW) GO TO QC07_A14;
ELSE CONTINUE WITH QC07_A11;**

- QC07_A11** 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:
Durante los últimos 12 meses, ¿con qué frecuencia tuvo (CHILD) síntomas de asma como tos, silbido al respirar, dificultad para respirar, hasentido el pecho oprimido, o tenido flema? ¿Diría que:

CA12B

Not at all	1
Nunca 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.....	4
Todas las semanas, o.....	4
Every day	5
Todos los días?.....	5
REFUSED	-7
DON'T KNOW	-8

- QC07_A12** During the past 12 months, has (CHILD) had to visit a hospital emergency room or urgent care clinic because of {his/her} asthma?
Durante los últimos 12 meses, ¿han tenido que llevar a (CHILD) a la sala de urgencias 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

- QC07_A13** During the past 12 months, was {he/she} admitted to a hospital overnight or longer for {his/her} asthma?
Durante los últimos 12 meses, ¿fue {él/ella} admitido(a) en un hospital para pasar una noche o más tiempo a causa del asma?

CA44

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

QC07_A14 Is (CHILD) now taking a daily medication to control {his/her} asthma that was prescribed or given to you by a doctor?

¿Está (CHILD) tomando ahora algún medicamento diario para controlar su asma 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 que se toman por boca o que tiene que ser inhalados. Es diferente de los inhaladores que se usan para alivio rápido.*"]

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

PROGRAMMING NOTE QC07_A15:

**IF QC07_A9 = 1 (YES, STILL HAS ASTHMA) OR QC07_A10 = 1 (YES, EPISODE IN LAST 12 MOS),
GO TO QC07_A18 ELSE CONTINUE WITH QC07_A15**

QC07_A15 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:
En los últimos 12 meses, ¿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
<i>Menos de una vez al mes</i>.....	.2
Every month .....	.3
<i>Todos los meses</i>.....	.3
Every week, or .....	.4
<i>Todas las semanas, o</i>.....	.4
Every day? .....	.5
<i>Todos los días?</i>.....	.5
REFUSED	-7
DON'T KNOW	-8

QC07_A16 During the past 12 months, has (CHILD) had to visit a hospital emergency room or urgent care clinic because of asthma?
En los últimos 12 meses, ¿ha tenido (CHILD) que visitar la sala de emergencias de un hospital o una clínica de cuidados urgentes debido a su asma?

CA41

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

QC07_A17 During the past 12 months, was {he/she} admitted to a hospital overnight or longer for {his/her} asthma?
Durante los últimos 12 meses, ¿fue {él/ella} admitido(a) en un hospital para pasar una noche o más tiempo debido al asma?

CA45

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

QC07_A18 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 (CHILD) ir a la escuela o a la guardería debido al asma?

CA34

[IF CHILD NOT IN DAYCARE OR SCHOOL ENTER 93]

_____ NUMBER OF DAYS

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

QC07_A19 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 QC07_A20:
IF CAGE < 1, SKIP TO QC07_A22;
ELSE CONTINUE WITH QC07_A20;

QC07_A20 Did a doctor or psychologist ever tell you that (CHILD) has ADD or ADHD?
¿Le ha dicho alguna vez un doctor o un psicólogo que (CHILD) tiene ADD o ADHD?

CA11

[IF NEEDED, SAY: "ADD is attention deficit disorder; ADHD is attention deficit Hyperactivity disorder."]

[IF NEEDED, SAY: "*ADD son las iniciales en inglés de trastorno de déficit de atención; ADHD son las de trastorno de hiperactividad déficit de atención.*"]

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

QC07_A21 Has a doctor ever told you that (CHILD) has Asperger's syndrome or autism?
¿Le ha dicho un doctor alguna vez que (CHILD) tiene el síndrome de Asperger o autismo?

CA46

YES, Asperger's.....	1
YES, Autism	2
NO	3
REFUSED	-7
DON'T KNOW	-8

PROGRAMMING NOTE QC07_A22:
IF CAGE > 1 AND [QC07_A20 = 1 OR QC07_A21 = 1 (ASPERGER'S) OR 2 (AUTISM)] DISPLAY "ANOTHER"; ELSE CATI HIGHLIGHT "A";

QC07_A22 Has a doctor ever told you that (CHILD) has {a/another} developmental disorder?
¿Le ha dicho un doctor alguna vez que (CHILD) tiene un trastorno del desarrollo?

CA47

YES, (SPECIFY: _____).....	1
NO	2
REFUSED	-7
DON'T KNOW	-8

PROGRAMMING NOTE QC07_A23:

IF CAGE > 1 AND [QC07_A20 = 1 (YES, ADD OR ADHD) OR QC07_A21 = 1 (ASPERGER'S) OR 2 (AUTISM) OR QC07_A22 = 1 (OTHER DEVELOPMENTAL DISORDER)] DISPLAY "OTHER";

QC07_A23 Does (CHILD) currently have any {other} 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	[GO TO QC07_B1]
REFUSED	-7	[GO TO QC07_B1]
DON'T KNOW	-8	[GO TO QC07_B1]

QC07_A24 What condition does (CHILD) have?
¿Qué problema tiene (CHILD)?

CA10A

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

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

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

Section B – Dental Health

PROGRAMMING NOTE QC07_B1:
IF CAGE < 1 YEAR, GO TO SECTION C;
IF CAGE > 2 YEARS, GO TO QC07_B2;
ELSE CONTINUE WITH QC07_B1;

QC07_B1 These questions are about (CHILD)'s dental health.
Estas preguntas son acerca de la salud dental de (CHILD).

Does (CHILD) have any teeth yet?
¿Ya tiene dientes (CHILD)?

CC1

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

QC07_B2 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.
¿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 QC07_B5]
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	

QC07_B3 Was it for a routine checkup or cleaning, or was it for a specific problem?
¿Fue por un examen o limpieza de rutina, o debido a un problema específico?

CC6

ROUTINE CHECKUP OR CLEANING	1
SPECIFIC PROBLEM.....	2
BOTH	3
REFUSED	-7
DON'T KNOW	-8

QC07_B4 Is there a particular dentist or place you USUALLY go to for (CHILD's) dental care?
¿Lleva usted normalmente a (CHILD) a un dentista, o un lugar particular para recibir su cuidado dental?

CC16

YES	1	[GO TO QC07_B6]
NO	2	[GO TO QC07_B6]
MORE THAN ONE PLACE	3	[GO TO QC07_B6]
REFUSED	-7	[GO TO QC07_B6]
DON'T KNOW	-8	[GO TO QC07_B6]

PROGRAMMING NOTE QC07_B5:

**IF QC07_B2 = 1 (HAS NEVER VISITED), DISPLAY "NEVER";
ELSE DISPLAY "NOT" AND "IN THE PAST YEAR";**

QC07_B5 What is the main reason your child has {never/not} visited a dentist {in the past year}?
¿Cuál es la razón principal por el que su niño/a {no/nunca} ha ido al dentista {durante el año pasado}?

CB23

NO REASON TO GO/NO PROBLEMS	1	
NOT OLD ENOUGH	2	
COULD NOT AFFORD IT/TOO EXPENSIVE/		
NO INSURANCE.....	3	[GO TO QC07_B7]
FEAR, DISLIKES GOING	4	
DO NOT HAVE/KNOW A DENTIST	5	
CANNOT GET TO THE OFFICE/CLINIC	6	
NO DENTIST AVAILABLE/		
NO APPOINTMENTS AVAILABLE	7	
DIDN'T KNOW WHERE TO GO	8	
HOURS NOT CONVENIENT	9	
SPEAK A DIFFERENT LANGUAGE	10	
OTHER.....	-91	
REFUSED	-7	
DON'T KNOW	-8	

QC07_B6 During the past 12 months, was there any time when (CHILD) needed dental care but you could not afford it?
Durante los últimos 12 meses, ¿hubo alguna vez que (CHILD) necesitó cuidado dental pero usted no podía pagarlo?

CB24

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

QC07_B7 Do you currently 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

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

PROGRAMMING NOTE QC07_B8:

IF CAGE < 5 GO TO SECTION C; ELSE CONTINUE WITH QC07_B8;

QC07_B8 During the past 12 months, did (he/she) miss any time from school because of a dental problem? Do not count time missed for cleaning or a check-up.

Durante los últimos 12 meses, ¿faltó {él/ella} algún día a la escuela debido a un problema dental? No cuente el tiempo que faltó para hacerse una limpieza o examen regular.

CC18

YES	1	
NO	2	[GO TO QC07_C1]
REFUSED	-7	[GO TO QC07_C1]
DON'T KNOW	-8	[GO TO QC07_C1]

QC07_B10 How many days of school did (he/she) miss because of dental problems?

¿Cuántos días de escuela faltó (CHILD) a la escuela debido a problemas dentales?

CC19

_____ DAYS

LESS THAN ONE DAY	1
NO	2
REFUSED	-7
DON'T KNOW	-8

Section C – Diet, Physical Activity, Park Use

PROGRAMMING NOTE QC07_C1:
IF CAGE < 2 YEARS, GO TO QC07_C17, ELSE CONTINUE WITH QC07_C1;

- QC07_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 NAME/AGE/SEX} drink?
Ahora le voy a hacer preguntas acerca de los alimentos que su niño/a comió ayer, incluyendo comidas y bocados. Ayer, ¿cuántos vasos o cartones de jugo 100% puro de fruta, como jugo de naranja o de manzana, bebió {CHILD NAME /AGE/SEX}?

CC10

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

[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

- QC07_C2** Yesterday, how many servings of fruit, such as an apple or a banana, did {he/she} eat?
Ayer, ¿cuántas porciones de fruta, como una manzana o un plátano, comió él/ella?

CC13

[IF NEEDED, SAY: "Servings" are self-defined. A serving is the child's regular portion of this food.]
[IF NEEDED, SAY: "*Cada persona define sus porciones. Una porción es la cantidad regular de este alimento que consume su niño.*"]

_____ SERVINGS

REFUSED -7
DON'T KNOW -8

- QC07_C3** Yesterday, how many servings of French fries, home fries, or hash brown did {CHILD NAME} eat?
El día de ayer, ¿cuántas porciones de papas fritas de cualquier tipo comió {CHILD NAME}?

CC14

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

_____ SERVINGS

REFUSED -7
DON'T KNOW -8

QC07_C4 Yesterday, how many servings of other vegetables like green salad, green beans, or potatoes did {he/she} have? Do not include fried potatoes.
¿Cuántas porciones de otros vegetales como ensalada verde, ejotes/judías verdes/vainas, o papas, comió {él/ella} ayer? No incluya las papas fritas.

CC31

____ SERVINGS

REFUSED	-7
DON'T KNOW	-8

QC07_C5 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 NEEDED, SAY: "Include milk on cereal."]
[IF NECESSARY, SAY: "*Incluya leche con cereal.*"]

____ GLASSES

REFUSED	-7
DON'T KNOW	-8

PROGRAMMING NOTE QC07_C6:

IF QC07_C5 = 0 (DID NOT DRINK MILK), GO TO QC07_C7;
ELSE IF QC07_C5 > 0, CONTINUE WITH QC07_C6;

QC07_C6 What type of milk was it? Was it...
¿Qué tipo de leche era? ¿Era...

CB16

[INTERVIEWER NOTE: IF RESPONDENT CANNOT CHOOSE ONE, CODE ALL THAT APPLY. NONFAT MILK CAN BE LIQUID OR DRY MILK. SOY MILK, RICE MILK, AND CHOCOLATE MILK SHOULD BE CODED AS "ANOTHER TYPE".]

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

- QC07_C7** 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.
Ayer, ¿cuántos vasos o latas de refrescos, como Coca Cola, u otra bebida azucarada, como ponche de frutas o bebidas deportivas, bebió {CHILD NAME /AGE/SEX}? No cuente las bebidas de dieta.

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. CHINESE TRANSLATORS MAY WISH TO INCLUDE CHINESE-NAMED FRUIT-FLAVORED]

_____ GLASSES, CANS OR BOTTLES

REFUSED	-7
DON'T KNOW	-8

- QC07_C8** Yesterday, how many servings of sweets 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: "Include pies and ice cream. Do not include sugar-free kinds but include low-fat kinds."]

[IF NEEDED, SAY: "*Incluya pasteles y helados. No incluya los que no tienen azúcar, pero sí los que tienen un bajo contenido de grasa.*"]

_____ SERVINGS

REFUSED	-7
DON'T KNOW	-8

- QC07_C9** 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.
Ahora piense en la semana pasada. En los últimos 7 días, ¿cuántas veces comió {él/ella} comida rápida? Incluya la comida rápida consumida en la escuela o en el hogar, o en restaurants de comida rápida, comidas para llevar o comida de un "drive thru".

CC32

[IF NEEDED, SAY: "Such as food you get at McDonald's, KFC, Panda Express, or Taco Bell."]

[IF NEEDED, SAY: "*Como la comida que compra en McDonald's, KFC, Panda Express o Taco Bell.*"]

_____ SERVINGS

REFUSED	-7
DON'T KNOW	-8

PROGRAMMING NOTE QC07_C10:

IF QC07_A6A = 1 (ATTENDED SCHOOL LAST WEEK), CONTINUE WITH QC07_C10 AND DISPLAY "HOW MANY DAYS IN THE PAST WEEK";
IF QC07_A6B = 1 (ATTENDED SCHOOL LAST YEAR), CONTINUE WITH QC07_C10 AND DISPLAY "DURING THE SCHOOL YEAR, ON HOW MANY DAYS DURING A TYPICAL WEEK";
ELSE GO TO QC07_C14;

QC07_C10 Now I'm going to ask you about physical activity.

Ahora le voy a hacer preguntas acerca de la actividad física.

{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 to school?

{*¿Cuántos días de la semana pasada /Durante el año escolar, ¿cuántos días en una semana típica,*} fue a la escuela (CHILD) caminando, en bicicleta o en skateboard/
patineta?

CC27

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

_____ DAYS

REFUSED -7
DON'T KNOW -8

PROGRAMMING NOTE QC07_C11:

IF QC07_C10 = 0 (DAYS), -7, OR -8, GO TO QC07_C12;
ELSE IF QC07_C10 > 0 (DAYS) CONTINUE WITH QC07_C11;

QC07_C11 About how many minutes {did/does} it take {him/her} without any stops?

¿Cuántos minutos, más o menos se tardó {él/ella} sin hacer ninguna parada?

CC28

_____ MINUTES

REFUSED -7
DON'T KNOW -8

PROGRAMMING NOTE QC07_C12

IF QC07_A6A = 1 (ATTENDED SCHOOL LAST WEEK), CONTINUE WITH QC07_C10 AND DISPLAY

"HOW MANY DAYS IN THE PAST WEEK";

IF QC07_A6B = 1 (ATTENDED SCHOOL LAST YEAR), CONTINUE WITH QC07_C10 AND DISPLAY
"DURING THE SCHOOL YEAR, ON HOW MANY DAYS DURING A TYPICAL WEEK";

- QC07_C12** {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?
{¿Cuántos días de la semana pasada/ Durante el año escolar, ¿cuántos días en una semana típica,} fue a casa desde la escuela (CHILD) caminando, en bicicleta o en skateboard/patineta?

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

PROGRAMMING NOTE QC07_C13:

IF QC07_C12 = 0 (DAYS), -7, OR -8, GO TO QC07_C14;

ELSE IF QC07_C12 > 0 (DAYS) CONTINUE WITH QC07_C13;

- QC07_C13** About how many minutes {did/does} it take {him/her} without any stops?
¿Cuántos minutos, más o menos se tardó {él/ella} sin hacer ninguna parada?

CC30

_____ MINUTES

[GO TO QC07_C15]

REFUSED	-7	[GO TO QC07_C15]
DON'T KNOW	-8	[GO TO QC07_C15]

- QC07_C14** Could {he/she} walk or bike home from school in 30 minutes or less?
¿Podría {él/ella} ir desde la escuela a la casa caminando o en bicicleta, en 30 minutos o menos?

CC33

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

PROGRAMMING NOTE QC07_C15:

**IF QC07_A6A = 1 (ATTENDED SCHOOL LAST WEEK) OR QC07_A6B = 1 (ATTENDED SCHOOL LAST YEAR) THEN CONTINUE WITH QC07_C15;
ELSE SKIP TO QC07_C16;**

QC07_C15 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 la última escuela a la que fue?

CB22

[IF CHILD NOT IN SCHOOL ENTER 0]

_____ NAME OF SCHOOL

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

NOTE FOR QC07_C16:

**IF CAGE < 3, SKIP TO QC07_C19;
ELSE CONTINUE WITH QC07_C16;**

QC07_C16 During the past 12 months, was he/she a member of any sports team such as soccer, baseball, or basketball?

Durante los últimos 12 meses, ha sido {él/ella} miembro de algún equipo de deportes, como fútbol, béisbol o básquetbol?

CC34

[IF RESPONDENT ASKS, OTHER TEAMS SUCH AS SWIM, VOLLEYBALL, OR HOCKEY CAN ALSO BE INCLUDED.]

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

PROGRAMMING NOTE FOR QC07_C17:

**IF CAGE < 5, SKIP TO QC07_C19;
ELSE CONTINUE WITH QC07_C17;**

QC07_C17 Not including school PE, on how many days of the past 7 days was (CHILD) physically active for at least 60 minutes total?

Sin incluir la Educación Física (PE) en la escuela, ¿cuántos días durante los últimos 7 días realizó (CHILD) actividades físicas durante un total de 60 minutos por lo menos?

CC35

_____ DAYS

REFUSED	-7
DON'T KNOW	-8

PROGRAMMING NOTE QC07_C19:
IF CAGE < 1 GO TO QC07_D1;
ELSE CONTINUE WITH QC07_C19;

QC07_C19 Has (CHILD) been to the park in the past 30 days?
¿Ha ido (CHILD) al parque durante los últimos 30 días?

CC37

YES .....	.1	
NO .....	.2	[GO TO QC07_C18]
REFUSED	-7	[GO TO QC07_C18]
DON'T KNOW	-8	[GO TO QC07_C18]

QC07_C20 How many days in the past 30 days did (CHILD) go to the park?
¿Cuántos días durante los últimos 30 días fue (CHILD) al parque?

CC38 DAYS

REFUSED	-7
DON'T KNOW	-8

QC07_C18 Is there a park, playground or open space within walking distance of your home?
¿Hay algún parque, zona de recreo infantil o espacio abierto al que se pueda llegar caminando desde su casa?

CC36

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

Section D – Access and Utilization of Health Care

QC07_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 consejos acerca de su salud?*

CD1

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

[GO TO QC07_D3]

PROGRAMMING NOTE QC07_D2

IF QC07_D1 = (1, 5, -7, or -8), DISPLAY “WHAT KIND OF PLACE DO YOU TAKE {HIM/HER} TO MOST OFTEN—A MEDICAL...”;
ELSE IF QC07_D1 = 3 DISPLAY “IS {HIS/HER} DOCTOR IN A PRIVATE...”;
ELSE IF QC07_D1 = 4, FILL QC07_D2 = 1 AND TO QC07_D3;

QC07_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
OTHER PLACE (SPECIFY: _____).....	91
NO ONE PLACE	94
REFUSED	-7
DON'T KNOW	-8

QC07_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 QC07_D4

**IF QC07_D3 > 0, GO TO PROGRAMMING NOTE QC07_D5;
ELSE IF QC07_D3 = (0, -7, -8), CONTINUE WITH QC07_D4;**

QC07_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 QC07_D5:

**IF QC07_D3 > 0 OR QC07_D4 = 1 or 2 (SEEN A DOCTOR IN LAST 12 MONTHS OR 1-2 YEARS AGO), CONTINUE WITH QC07_D5;
ELSE GO TO QC07_D10;**

QC07_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	[GO TO QC07_D7]
NO	2	
NEVER ACCOMPANIED CHILD TO DOCTOR	3	
REFUSED	-7	
DON'T KNOW	-8	

PROGRAMMING NOTE QC07_D6:

IF QC07_D5 = 2 (DID NOT HAVE A HARD TIME UNDERSTANDING DOCTOR) AND [INTERVIEW NOT CONDUCTED IN ENGLISH OR QA07_G4 > 1 (ADULT R SPEAKS LANGUAGE OTHER THAN ENGLISH AT HOME)]

CONTINUE WITH QC07_D6;
ELSE SKIP TO QC07_D7;

QC07_D6 In what language does your doctor speak to you?
¿En qué idioma le habla a usted el médico?

CD31

ENGLISH	1	[GO TO QC07_D8]
SPANISH	2	[GO TO QC07_D10]
CANTONESE.....	3	[GO TO QC07_D10]
VIETNAMESE	4	[GO TO QC07_D10]
TAGALOG	5	[GO TO QC07_D10]
MANDARIN	6	[GO TO QC07_D10]
KOREAN	7	[GO TO QC07_D10]
ASIAN INDIAN LANGUAGES.....	8	[GO TO QC07_D10]
RUSSIAN	9	[GO TO QC07_D10]
OTHER (SPECIFY: _____).....	91	[GO TO QC07_D10]
REFUSED	-7	[GO TO QC07_D10]
DON'T KNOW	-8	[GO TO QC07_D10]

PROGRAMMING NOTE QC07_D7:

IF QC07_D5 = 1 CONTINUE WITH QC07_D7;
ELSE SKIP TO QC07_D10;

QC07_D7 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	

QC07_D8 Did you need someone to help you understand the doctor?
¿Necesitó que otra persona le ayudara a entender al médico?

CD27

YES	1		
NO	2	[GO TO QC07_D10]	
REFUSED	-7	[GO TO QC07_D10]	
DON'T KNOW	-8	[GO TO QC07_D10]	

QC07_D9 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
OF MINE	2
NON-MEDICAL OFFICE STAFF	3
MEDICAL STAFF INCLUDING NURSES AND DOCTORS	4
PROFESSIONAL INTERPRETER (BOTH IN PERSON AND ON THE TELEPHONE)	5
OTHER (PATIENTS, SOMEONE ELSE).....	6
DID NOT HAVE SOMEONE TO HELP.....	7
REFUSED	-7
DON'T KNOW	-8

QC07_D10 When (CHILD) had {his/her} last routine physical exam, did you and a doctor talk about {his/her} nutrition or healthy eating?
Cuando (CHILD) tuvo su último examen físico de rutina, ¿hablaron usted y un doctor acerca de su nutrición o de sus hábitos de comida saludable?

CD32

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

QC07_D11 During the past 12 months, did you delay or not get a medicine that a doctor prescribed for (CHILD)?
Durante los últimos 12 meses, ¿tardó en comprar o no compró alguna medicina que el doctor recetó para (CHILD)?

CE1

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

[GO TO QC07_D13]
[GO TO QC07_D13]
[GO TO QC07_D13]

QC07_D12 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?

CE12

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

QC07_D13 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 QC07_D15]
REFUSED	-7	[GO TO QC07_D15]
DON'T KNOW	-8	[GO TO QC07_D15]

QC07_D14 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 QC07C_D15
IF CAGE < 6 MONTHS, GO TO QC07_D16;
ELSE IF CAGE ≥ 6 MONTHS, CONTINUE WITH QC07_D15;

QC07_D15 During the past 12 months, has (CHILD) had a flu shot?
En los últimos 12 meses, ¿recibió la vacuna (CHILD) contra la gripe?

CD30

[INTERVIEWER NOTE: IF R REPORTS RECEIVING FLUMIST, CODE AS YES]

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

PROGRAMMING NOTE QC07_D16;
IF QC07_A12 = 1 OR QC07_A16 = 1 (VISIT ER FOR ASTHMA) GO TO QC07_E1;
ELSE CONTINUE WITH QC07_D16;

QC07_D16 During the past 12 months did (CHILD) visit a hospital emergency room?
Durante los últimos 12 meses, ¿visitó (CHILD) una sala de urgencias de un hospital?

CD12

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

Section E – Public Programs

PROGRAMMING NOTE FOR QC07_E1:

**IF POVERTY = 1, 2, 3, OR 5 (INCOME LESS THAN OR EQUAL TO 300% OF POVERTY LEVEL),
CONTINUE WITH QC07_E1;
ELSE SKIP TO QC07_E4**

QC07_E1 Is (CHILD) now on TANF or CalWORKS?
¿Está (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 bienestar de California."]

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

QC07_E2 Is (CHILD) receiving Food Stamps?
¿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 podría recibir beneficios como estampillas o 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 QC07_E3:
IF CAGE > 6, GO TO QC07_E4;
ELSE CONTINUE WITH QC07_E3;

QC07_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

PROGRAMMING NOTE QC07_E4:
IF ENGLSPAN = 1 OR 2 (INTERVIEW LANGUAGE IS ENGLISH OR SPANISH), CONTINUE WITH QC07_E4;
ELSE SKIP to QC07_E5;

QC07_E4 In the past 12 months, have you seen or heard a radio or TV ad that says, "Sometimes it's hard to say no to kids, but it's even harder to see them grow up unhealthy."?
En los últimos 12 meses, ¿ha visto o escuchado un comercial de radio o televisión que dice, "Sometimes it's hard to say no to kids, but it's even harder to see them grow up unhealthy."?

CE14

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

PROGRAMMING NOTE QC07_E5:
IF CAGE < 2, SKIP TO QC07_E7;
ELSE CONTINUE WITH QC07_E5;

QC07_E5 How much influence do you feel you have over what foods your child eats?
 ¿Cuánta influencia cree usted que tiene sobre los alimentos que come su {niño/a}?

CE15

A LOT	1
SOME	2
VERY LITTLE.....	3
REFUSED	-7
DON'T KNOW	-8

QC07_E6 How much influence do you feel you have over how much exercise your child gets?
¿Cuánta influencia cree usted que tiene sobre la cantidad de ejercicio que hace su {niño/a}?

CE16

A LOT	1
SOME.....	2
VERY LITTLE.....	3
REFUSED	-7
DON'T KNOW	-8

PROGRAMMING NOTE QC07_E7:
IF ENGLSPAN = 1 OR 2 (INTERVIEW LANGUAGE IS ENGLISH OR SPANISH), CONTINUE WITH QC07_E7;
ELSE SKIP to QC07_E8;

QC07_E7 In the past 12 months, have you seen a billboard that says, "Obesity in Little Children is a Big Problem"?
¿En los últimos 12 meses, ha visto una cartelera que dice, "Obesity in Little Children is a Big Problem"?

CE17

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

PROGRAMMING NOTE QC07_E8:
IF ENGLSPAN = 3, 4, 5, 6 (INTERVIEW LANGUAGE IS VIETNAMESE, KOREAN, CANTONESE, OR MANDARIN), CONTINUE WITH QC07_E8;
ELSE SKIP TO SECTION F;

QC07_E8 In the past 12 months, have you seen or heard a radio or TV ad that says, "So for many children of smokers, the question isn't IF they'll become smokers...but WHEN."?
En los últimos 12 meses, ¿ha visto o escuchado un anuncio por la televisión o radio que dice, "So for many children of smokers, the question isn't IF they'll become smokers...but WHEN."?

CE18

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

Section F – Parental Involvement, Concerns, Mental Health

PROGRAMMING NOTE QC07_F1:
IF CAGE > 5 YEARS GO TO PROGRAMMING NOTE QC07_F4 INTRO;
ELSE CONTINUE WITH QC07_F1;

- QC07_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

- QC07_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, ¿aproximadamente 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

- QC07_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,] lleva a (CHILD) a alguna parte, como por ejemplo, al parque, la tienda, o a una zona de juegos?

CG16

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

PROGRAMMING NOTE QC07_F4 INTRO:**IF CAGE < 4 MONTHS, GO TO QC07_G1;****IF CAGE ≥ 6 YEARS, GO TO QC07_F10;****ELSE IF CAGE ≥ 4 MONTHS AND < 6 YEARS, CONTINUE WITH QC07_F4 INTRO;****QC07_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.

(Reference for Questions QC07_F4 through QC07_F14: Glascoe FP. Parents' Evaluation of Development Status (PEDS), Survey Edition. Nashville, Tennessee: Ellsworth and Vandermeer Press, 2008.)

PROGRAMMING NOTE QC07_F4:**IF CAGE > 9 MONTHS GO TO QC07_F5;****ELSE IF CAGE ≤ 9 MONTHS CONTINUE WITH QC07_F4;**

QC07_F4 How your child makes speech sounds, [Are you concerned a lot, a little, or not at all?] *La manera en que su niño suena al hablar, [¿Le preocupa esto mucho, un poco, o nada?]*

CG17

A LOT	1	[GO TO QC07_F6]
A LITTLE	2	[GO TO QC07_F6]
NOT AT ALL.....	3	[GO TO QC07_F6]
REFUSED	-7	[GO TO QC07_F6]
DON'T KNOW	-8	[GO TO QC07_F6]

QC07_F5 How your child talks and makes words? [Are you concerned a lot, a little, or not at all?] *La manera en que su niño habla y hace palabras, [¿Le preocupa esto mucho, un poco, o nada?]*

CG17A

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

PROGRAMMING NOTE QC07_F6:

IF CAGE < 18 MONTHS, GO TO QC07_F7;
ELSE IF CAGE ≥ 18 MONTHS CONTINUE WITH QC07_F6;

QC07_F6 How well your child understands what you say, [Are you concerned a lot, a little, or not at all?]

Qué tan bien entiende su niño lo que usted dice, [¿Le preocupa esto mucho, un poco, o nada?]

CG18

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

QC07_F7 How your child uses {his/her} hands and fingers to do things, [Are you concerned a lot, a little, or not at all?]

La manera en que su niño usa las manos y los dedos para hacer cosas, [¿Le preocupa esto mucho, un poco, o nada?]

CG19

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

QC07_F8 How well your child uses {his/her} arms and legs, [Are you concerned a lot, a little, or not at all?]

Qué tan bien su niño usa los brazos y las piernas, [¿Le preocupa esto mucho, un poco, o nada?]

CG20

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

QC07_F9 How well your child can see or hear, [Are you concerned a lot, a little, or not at all?]

Qué tan bien su niño puede ver u oír, [¿Le preocupa esto mucho, un poco, o nada?]

CG21

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

PROGRAMMING NOTE QC07_F10:**IF CAGE IS ≤ 9 MONTHS, GO TO QC07_G1;****IF CAGE > 6 YEARS, GO TO PROGRAMMING NOTE QC07_F15;****ELSE IF CAGE = 10 MONTHS TO 6 YEARS, CONTINUE WITH QC07_F10;**

- QC07_F10** How your child gets along with others, [Are you concerned a lot, a little, or not at all?]
La manera en que se lleva su niño con otros, [¿Le preocupa esto mucho, un poco, o nada?]

CG22

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

- QC07_F11** Your child's feelings and moods, [Are you concerned a lot, a little, or not at all?]
Los sentimientos y estados de ánimo de su niño, [¿Le preocupa esto mucho, un poco, o nada?]

CG23

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

- QC07_F12** How your child behaves, [Are you concerned a lot, a little, or not at all?]
La manera en que se comporta su niño, [¿Le preocupa esto mucho, un poco, o nada?]

CG24

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

- QC07_F13** How your child is learning to do things for {himself/herself}, [Are you concerned a lot, a little, or not at all?]
La manera en que su niño está aprendiendo a hacer cosas por sí mismo, [¿Le preocupa esto mucho, un poco, o nada?]

CG25

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

QC07_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?]

Si acaso su niño puede hacer lo que otros niños de su edad pueden hacer, [¿Le preocupa esto mucho, un poco, o nada?]

CG26

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

PROGRAMMING NOTE QC07_F15:

IF CAGE < 1 GO TO QC07_F23; ELSE CONTINUE WITH QC07_F15;

QC07_F15 Many professionals such as health providers, teachers and counselors do developmental screening tests. Tests check how a child is growing, learning, and behaving compared with children of the same age.

Muchos profesionales como los proveedores de salud, maestros y consejeros, hacen pruebas de exploración del desarrollo. Estas pruebas examinan cómo está creciendo, aprendiendo y comportándose un niño/a comparado con otros niños de la misma edad.

Did (CHILD's) doctor, other health providers, teachers, or school counselors ever tell you that they were doing an assessment or tests of (CHILD's) development?

¿Le dijo alguna vez el doctor, otro proveedor de salud, un maestro o un consejero escolar de (CHILD) que estaba haciendo una evaluación o prueba del desarrollo de (CHILD)?

CF40

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

QC07_F16 Did {his/her} doctor, other health providers, teachers, or school counselors ever have (CHILD) rollover, pick up small objects, stack blocks, throw a ball, or recognize different colors?

¿Le pidió alguna vez a (CHILD) su doctor, otro proveedor de salud, un maestro o un consejero escolar que rodara, recogiera objetos pequeños, apilara bloques, tirara una pelota o reconociera colores diferentes?

CF41

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

QC07_F17 Did they ever have you fill out a checklist about concerns you have about {his/her} learning, development, or behavior?
¿Le pidieron a usted alguna vez que llenara una lista acerca de las preocupaciones que tenía respecto a su aprendizaje, desarrollo o comportamiento?

CF42

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

QC07_F18 Did they ever have you fill out a checklist of activities that (child) can do, such as certain physical tasks, whether {her/she} can draw certain objects, or ways {he/she} can communicate with you?
¿Le pidieron a usted alguna vez que llenara una lista de actividades que puede hacer (CHILD), como ciertas tareas físicas, si puede dibujar ciertos objetos, o de qué maneras se puede comunicar con usted?

CF43

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

QC07_F19 Did they ever ask if you have concerns about {his/her} learning, development, or behavior?
¿Le preguntaron alguna vez si tiene usted preocupaciones acerca de su aprendizaje, desarrollo o comportamiento?

CF44

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

PROGRAMMING NOTE QC07_F20:
**IF QC07_A20 = 1 (ADD/ADHD) OR QC07_A21 = 1 (ASPERGER'S, AUTISM) OR QC07_A22 = 1 (OTHER DEVELOPMENTAL CONDITION), GO TO QC07_F21
ELSE CONTINUE WITH QC07_F20**

QC07_F20 Did a doctor or other professional ever note a concern about (CHILD) that should be monitored carefully?
¿Observó alguna vez un doctor u otro profesional algún motivo de preocupación acerca de (CHILD), que debe ser vigilado atentamente?

CF45

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

QC07_F21 Did they ever refer {him/her} to a specialist regarding his development?
¿Le recomendaron alguna vez a un especialista en relación con su desarrollo?

CF46

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

QC07_F22 Did they ever refer {him/her} for speech, language, or hearing testing?
¿Le recomendaron alguna vez que hiciera pruebas del habla, idioma u oído?

CF47

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

THE NEXT 7 ITEMS (QC07_F23-QC07_F28) ARE INCLUDED IN THIS SURVEY WITH PERMISSION AS INDICATED:

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PROGRAMMING NOTE QC07_F23:
IF CAGE < 4 YEARS, GO TO QC07_G1;
ELSE CONTINUE WITH QC07_F23;

I am going to read a list of items that describe children. For each item, please tell me if 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.

QC075_F23 {He/She} is generally well behaved, usually does what adults request [...during the past 6 months.]
Por lo general es obediente, y normalmente hace lo que le piden los adultos [...]en los últimos 6 meses.]

CG28

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

QC07_F24 {He/She} has many worries or often seems worried [...during the past 6 months.]
Se preocupa de muchas cosas o siempre se ve preocupado(a) [...en los últimos 6 meses.]

CG29

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

QC07_F25 {He/She} is often unhappy, depressed or tearful [...during the past 6 months.]
Está a menudo está triste, deprimido(a) o con lágrimas en los ojos [...en los últimos 6 meses.]

CG30

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

QC07_F26 {He/She} gets along better with adults than with other children [...during the past 6 months.]
Se lleva mejor con adultos que con otros niños [...en los últimos 6 meses.]

CG31

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

QC07_F27 {He/She} 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

QC07_F28 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 TO QC07_F30]
REFUSED	-7	[GO TO QC07_F30]
DON'T KNOW	-8	[GO TO QC07_F30]

QC07_F29 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	

QC07_F30 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 QC07_F31:

**IF QC07_A6A = 1 OR QC07_A6B = 1 (CHILD ATTNDDED SCHOOL LAST WK OR LAST YR),
 THEN CONTINUE WITH QC07_F31;
 ELSE, GO TO QC07_G1;**

QC07_F31 Would you describe (CHILD'S) school work as...
¿Describiría el trabajo escolar de (CHILD) como ...

CF38

EXCELLENT	1	
ABOVE AVERAGE	2	
AVERAGE.....	3	
BELOW AVERAGE.....	4	
FAILING	5	
REFUSED	-7	
DON'T KNOW	-8	

Section G – Child Care

PROGRAMMING NOTE QC07_G1
IF CAGE ≥ 7, LAST SENTENCE OF FIRST PARAGRAPH DOES NOT APPLY;
QC07_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.}
Las siguientes preguntas son acerca de cuidado infantil. Por cuidado infantil, queremos decir cualquier arreglo donde alguien que no sea uno de los padres, 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 hours or more per week?

¿Tiene usted actualmente algún tipo de arreglo regular para cuidar a (CHILD) por 10 horas a la semana o más?

CG1

YES .....	.1	
NO .....	.2	[GO TO QC07_G10]
REFUSED	-7	[GO TO QC07_G10]
DON'T KNOW	-8	[GO TO QC07_G10]

QC07_G2

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

En total, ¿cuántas horas está (CHILD) en cuidado infantil durante una semana típica? Incluya todas las combinaciones de arreglos de cuidado infantil.

CG2

_____ HOURS

REFUSED	-7	[GO TO QC07_G10]
DON'T KNOW	-8	[GO TO QC07_G10]

PROGRAMMING NOTE QC07_G3:
IF QC07_G2 < 10 (HOURS IN CHILDCARE), GO TO QC07_G10;
ELSE CONTINUE WITH QC07_G3 INTRO;

During a typical week does (CHILD) receive childcare from...

En una semana típica, ¿recibe (CHILD) cuidado de...

QC07_G3

...a grandparent or other family member?

...parte de uno de sus abuelos o de otro miembro de la familia?

CG3A

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

PROGRAMMING NOTE QC07_G4:
IF CAGE ≥ 7 YEARS, GO TO QC07_G6;
ELSE CONTINUE WITH QC07_G4;

QC07_G4 [Does (CHILD) receive childcare from...] a Head Start or state preschool program?
 [¿Recibe (CHILD) cuidado de...] Head Start o de un programa preescolar del estado?

CG3B

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

QC07_G5 [Does (CHILD) receive childcare from...] some other preschool or nursery school?
 [¿Recibe (CHILD) cuidado de...] algún otro tipo de preescolar o guardería?

CG3C

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

QC07_G6 [Does (CHILD) receive childcare from...] a childcare center that is not in someone's home?
 [¿Recibe (CHILD) cuidado de...] una guardería que no está en la casa de una persona?

CG3D

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

QC07_G7 [Does (CHILD) receive childcare from...] a non-family member who cares for (CHILD) in your home?
 [¿Recibe (CHILD) cuidado de...] 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

QC07_G8 [Does (CHILD) receive childcare from...] a non-family member who cares for (CHILD) in his or her home?
[¿Recibe (CHILD) cuidado de...] 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 QC07_G9:**GO TO QC07_G10:**

IF QC07_G3 OR QC07_G7 = 1 (CHILD RECEIVES CHILDCARE FROM GRANDPARENT OR NON-FAMILY MEMBER IN CHILD'S HOME) OR
 IF QC07_G4 ≠ 1 AND QC07_G5 ≠ 1 AND QC07_G6 ≠ 1 AND QC07_G8 ≠ 1 (NOT IN HEAD START, PRESCHOOL PROGRAM, OR IN CARE IN NON-FAMILY MEMBER HOME);
ELSE CONTINUE WITH QC07_G9
 IF ONLY ONE OF QC07_G4, QC07_G5, QC07_G6, OR QC07_G8 = 1, SAY "IS THIS" AND "PROVIDER"; ELSE SAY, "ARE ALL OF THESE" AND "PROVIDERS";

QC07_G9 {Is this/Are all of these} child care provider{s} licensed by the state of California?
{Es este proveedor/ Son todos estos proveedores} 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

QC07_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?
En los últimos 12 meses, ¿hubo algún 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
DON'T KNOW	-8

[GO TO QC07_G12]
[GO TO QC07_G12]
[GO TO QC07_G12]

QC07_G11 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

[IF NEEDED, SAY: "Main reason is the most important reason."]
[IF NEEDED, SAY: "*El motivo principal es la razón más importante.*"]

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

PROGRAMMING NOTE QC07_G12:

**IF INTERVIEW LANGUAGE IS CANTONESE, MANDARIN, KOREAN, OR VIETNAMESE THEN
CONTINUE WITH QC07_G12;
ELSE GO TO QC07_H1;**

QC07_G12 In the past 12 months, have you seen or heard a radio or TV ad 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

Section H – Demographics, Part II

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

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 la ascendencia de (CHILD).

QC07_H1

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 QC07_H3]
REFUSED	-7	[GO TO QC07_H3]
DON'T KNOW	-8	[GO TO QC07_H3]

QC07_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.
¿Y cuál es la descendencia o el origen latino o hispano de {él/ella}? Por ejemplo, mexicano, salvadoreño, cubano, hondureño --y si {él/ella} es de más de uno, dígamelos todos.

CH2

[INTERVIEWER NOTE: 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 QC07_H3:

IF QC07_H1 = 1 (YES-CHILD IS LATINO), SAY, "YOU SAID YOUR CHILD IS LATINO OR HISPANIC. ALSO...";

QC07_H3

{You said your child is Latino or Hispanic.} 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)} 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, asiática, negra, afroamericana o blanco?

CH3

[INTERVIEWER NOTE: IF R GIVES ANOTHER RESPONSE YOU MUST SPECIFY WHAT IT IS.]

[CODE ALL THAT APPLY.]

WHITE	1	[GO TO QC07_H10]
BLACK OR AFRICAN AMERICAN	2	[GO TO QC07_H10]
ASIAN	3	[GO TO QC07_H8]
AMERICAN INDIAN, ALASKA NATIVE	4	[GO TO QC07_H4]
OTHER PACIFIC ISLANDER	5	[GO TO QC07_H9]
NATIVE HAWAIIAN	6	[GO TO QC07_H10]
OTHER (SPECIFY: _____)	91	[GO TO QC07_H10]
REFUSED	-7	[GO TO QC07_H10]
DON'T KNOW	-8	[GO TO QC07_H10]

PROGRAMMING NOTE QC07_H4:

**IF QC07_H3 = 4 (AMERICAN INDIAN, ALASKA NATIVE) CONTINUE WITH QC07_H4;
ELSE GO TO PROGRAMMING NOTE QC07_H8;**

QC07_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.
Usted dijo indígena americano o nativo de Alaska, ¿De qué tribu desciende (CHILD)? Si es de más de una tribu, por favor dígamelas todas.

CH4

[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 (SPECIFY: _____)	91	
REFUSED	-7	
DON'T KNOW	-8	

QC07_H5 Is (CHILD) an enrolled member in a federally or state recognized tribe?
¿Es (CHILD) un miembro inscrito en una tribu federal o estatalmente reconocida?

CH5

YES	1	
NO	2	[GO TO QC07_H8]
REFUSED	-7	[GO TO QC07_H8]
DON'T KNOW	-8	[GO TO QC07_H8]

QC07_H6 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

OGALA/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

QC07_H7 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 por conducto 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 QC07_H8:
IF QC07_H3 = 3 (ASIAN) CONTINUE WITH QC07_H8;
ELSE GO TO PROGRAMMING NOTE QC07_H9;

QC07_H8 You said Asian, and what specific ethnic group is {he/she}, such as {Chinese, Filipino, or Vietnamese? If {he/she} is more than one, tell me all of them.
Usted dijo asiático(a), ¿y de qué grupo étnico específico es (CHILD), tal como chino, filipino o vietnamita? Si {él/ella} es de más de un grupo, dígamelos todos.

CH7

[INTERVIEWER NOTE: 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 QC07_H9:**IF QC07_H3 = 5 (PACIFIC ISLANDER) CONTINUE WITH QC07_H9;
ELSE GO TO QC07_H10;**

- QC07_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.
Usted dijo que (CHILD) es de las islas del Pacífico. ¿De qué grupo étnico específico pertenece, tal como samoano, tongano o guamaniano? Si pertenece a más de uno, digámelos todos.

CH7A**[INTERVIEWER NOTE: 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

PROGRAMMING NOTE QC07_H10:

**IF MKA = AR AND AI56C ≠ 1 (THIS QUESTION ALREADY ASKED DURING ADULT SURVEY),
SKIP TO QC07_H14; ELSE CONTINUE WITH QC07_H10;**

QC07_H10 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 QC07_H11:

**IF QC07_H10 = 1, 2, 9, 22, OR 26 (UNITED STATES OR ITS TERRITORIES), GO TO PROGRAMMING
NOTE QC07_H14; ELSE CONTINUE WITH QC07_H11;**

QC07_H11 Is (CHILD) a citizen of the United States?

¿Es (CHILD) ciudadano de los Estados Unidos?

CH8A

YES	1	[GO TO QC07_H13]
NO	2	
APPLICATION PENDING	3	
REFUSED	-7	
DON'T KNOW	-8	

QC07_H12 Is (CHILD) a permanent resident with a green card?
¿Es (CHILD) un 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

QC07_H13 About how many years has (CHILD) lived in the United States?
¿Más o menos cuántos años ha vivido (CHILD) en los Estados Unidos?

CH10

[INTERVIEWER NOTE: FOR LESS THAN A YEAR, ENTER 1 YEAR]

_____ NUMBER OF YEARS

CH10YR

_____ YEAR FIRST CAME TO LIVE IN U.S.

CH10FMT

NUMBER OF YEARS	1
YEAR FIRST CAME TO LIVE IN U.S.	2
REFUSED	-7
DON'T KNOW	-8

PROGRAMMING NOTE QC07_H14;
IF MKA = ADULT RESPONDENT SKIP TO QC07_H18;
IF RESPONDENT IS MOTHER OF CHILD, CONTINUE WITH QC07_H14 AND SAY, "WERE YOU";
ELSE, CONTINUE WITH QC07_H14 AND SAY "WAS HIS MOTHER/WAS HER MOTHER";

QC07_H14 In what country {were you/was his/her mother} born?
¿En qué país nació {usted/ la madre de (CHILD)}?

CH11

[INTERVIEWER NOTE: 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 QC07_H15 AND QC07_H16:
IF QC07_H14 = 1, 2, 9, 22, OR 26 (UNITED STATES OR ITS TERRITORIES), GO TO QC07_PROGRAMMING NOTE QC07_H18;
ELSE CONTINUE WITH QC07_H15 AND IF RESPONDENT IS MOTHER OF CHILD SAY, "ARE YOU"; ELSE DISPLAY "IS {HIS/HER/HIS OR HER} MOTHER";

QC07_H15 {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 QC07_H17]
NO	2	
APPLICATION PENDING	3	
REFUSED	-7	
DON'T KNOW	-8	

QC07_H16 {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 QC07_H17
IF RESPONDENT IS MOTHER OF CHILD, CONTINUE WITH QC07_H17 AND SAY, "HAVE YOU"; ELSE, CONTINUE WITH QC07_H17 AND SAY "HAS HIS MOTHER/HAS HER MOTHER";

QC07_H17 About how many years {have you/has {his/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

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

PROGRAMMING NOTE QC07_H18:**IF MKA IS MALE AND MKA = ADULT RESPONDENT, SKIP TO QC07_H22;****IF RESPONDENT IS FATHER OF CHILD, CONTINUE WITH QC07_G18 AND SAY "WERE YOU";****ELSE, CONTINUE WITH QC07_H18 AND SAY, "WAS HIS FATHER/WAS HER FATHER";****QC07_H18** In what country {were you/ was his/her father} born?*¿En qué país nació {usted/ el padre de {él/ella}}?***CH14**

[INTERVIEWER NOTE: 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 QC07_H19 AND QC07_H20:
IF QC07_H18 = 1, 2, 9, 22, OR 26 (UNITED STATES OR ITS TERRITORIES), GO TO PROGRAMMING NOTE QC07_H22;
ELSE CONTINUE WITH QC07_H15 AND IF RESPONDENT IS FATHER OF CHILD SAY, “ARE YOU”;
ELSE SAY “IS {HIS/HER} FATHER”;

QC07_H19 {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

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

YES	1	[GO TO QC07_H21]
NO	2	
APPLICATION PENDING	3	
REFUSED	-7	
DON'T KNOW	-8	

QC07_H20 {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 QC07_H1:
IF RESPONDENT IS FATHER OF CHILD, CONTINUE WITH QC07_H21 AND SAY “HAVE YOU”;
ELSE, CONTINUE WITH QC07_H21 AND SAY “HAS HIS FATHER/HAS HER FATHER”

QC07_H21 About how many years {have you/ has {his/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

CH16YR

_____ YEAR FIRST CAME TO LIVE IN U.S.

CH16FMT

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

PROGRAMMING NOTE QC07_H22:

**IF RESPONDENT IS SAMPLED ADULT, GO TO PROGRAMMING NOTE QC07_H23;
ELSE IF RESPONDENT ≠ ADULT RESPONDENT, CONTINUE WITH QC07_H22;**

QC07_H22 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 QC07_H23

**IF INTERVIEW CONDUCTED IN ENGLISH AND QC07_H22 > 1 (TWO OR MORE LANGUAGES SPOKEN AT HOME), CONTINUE WITH QC07_H23: "COMPARED TO THE LANGUAGE SPOKEN IN (CHILD)'S HOME,...";
ELSE IF QC07_H22 = 1 (ONLY SPEAKS ENGLISH), GO TO PROGRAMMING NOTE QC07_H24;**

QC07_H23 {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
FAIRLY WELL.....	2
NOT WELL.....	3
NOT AT ALL.....	4
REFUSED	-7
DON'T KNOW	-8

PROGRAMMING NOTE QC07_H24

**IF RESPONDENT IS NOT SAMPLED ADULT, ASK QC07_H24;
ELSE GO TO PROGRAMMING NOTE QC07_H26;**

QC07_H24 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**

1 ST GRADE	1
2 ND GRADE	2
3 RD GRADE	3
4 TH GRADE	4
5 TH GRADE	5
6 TH GRADE	6
7 TH GRADE	7
8 TH GRADE	8

HIGH SCHOOL OR EQUIVALENT

9 TH GRADE	9
10 TH GRADE	10
11 TH GRADE	11
12 TH GRADE	12

4-YEAR COLLEGE OR UNIVERSITY

1 ST YEAR (FRESHMAN)	13
2 ND YEAR (SOPHOMORE)	14
3 RD YEAR (JUNIOR)	15
4 TH YEAR (SENIOR)	16
5 TH YEAR	17

GRADUATE OR PROFESSIONAL SCHOOL

1 ST YEAR GRAD OR PROF SCHOOL.....	18
2 ND YEAR GRAD OR PROF SCHOOL.....	
(MA/MS)	19
3 RD YEAR GRAD OR PROF SCHOOL.....	20
MORE THAN 3 YRS GRAD OR PROF SCHOOL (PhD)	21

2-YEAR JUNIOR OR COMMUNITY COLLEGE

1 ST YEAR	22
2 ND YEAR	23

VOCATIONAL, BUSINESS, OR TRADE SCHOOL

1 ST YEAR	24
2 ND YEAR	25
MORE THAN 2 YEARS.....	26
HAD NO FORMAL EDUCATION	30
REFUSED	-7
DON'T KNOW	-8

QC07_H25 Are you now in school?
¿Asiste usted a la escuela?

CG37

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

PROGRAMMING NOTE QC07_H26
IF RESPONDENT IS NOT SAMPLED ADULT, ASK QC07_H26;
ELSE GO TO END;

QC07_H26 Those are my final questions. I appreciate your patience. Finally, do you think you would be willing to do a follow-up to this survey sometime in the future?
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 Thank you for your time and cooperation. You have helped with a very important statewide survey. If you have any questions about the study, please contact Dr. E. Richard Brown, the Principal Investigator. Dr. Brown can be reached toll-free at 1-866-275-2447. Goodbye.

Gracias por su tiempo y cooperación. Nos ha ayudado en un estudio sobre salud muy importante para el estado de California. Si tiene alguna pregunta acerca del estudio, puede llamar al Investigador Principal, Dr. E. Richard Brown. El número de teléfono gratis del Dr. Brown es 1-866-275-2447. Adiós.