



california
health
interview
survey

CHIS 2009
Child Questionnaire
Version 5.1 (Korean)
August 30, 2013

(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 2009 Data Dictionaries for additional information on variables, the population universe answering a specific question, and data file content.

Section A – Demographics Part I, Health Conditions

GENDER

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

QC09_A1 Some of the questions are based on (CHILD's) personal traits, like his or her age. So I will first ask you a few brief background questions.
 일부 질문들은 {CHILD NAME /AGE/SEX}의 나이와 같은 개인적 사항에 대한 것입니다. 그래서 먼저 몇 가지 간략한 배경 질문을 먼저 드리겠습니다.

Is (CHILD) male or female?

우선 성별에 관한 질문을 드리겠습니다. {CHILD NAME/AGE/SEX} 은 남자입니까 아니면 여자입니까?
 ?

CA1

MALE1
 FEMALE2
 REFUSED -7

AGE

QC09_A2 What is {his/her} date of birth?
 자녀분의 생일은 언제입니까?

CA2MON

_____ MONTH [HR: 1-12]

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

CA2DAY

_____ DAY [HR: 1-31]

CA2YR

_____ YEAR [SR: 1995-2007]

REFUSED -7
 DON'T KNOW -8

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

QC09_A3 How old is {he/she}?
 {자녀분}의 생일은 언제입니까?

CA3

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

_____ YEARS
 _____ MONTHS

REFUSED -7
 DON'T KNOW -8

BIRTHWEIGHT

QC09_A4 How much did {he/she} weigh at birth?
 {CHILD NAME/AGE/SEX}의 출생당시 몸무게는 얼마였습니까?

CA13P/CA13O

_____ POUNDS _____ OUNCES

CA13K/CA13G

_____ KILOGRAMS _____ GRAMS

CAFMT

POUNDS/OUNCES1
 KILOGRAMS/GRAMS2
 REFUSED -7
 DON'T KNOW -8

HEIGHT AND WEIGHT

QC09_A5 About how tall is (CHILD) now without shoes?
 {CHILD NAME /AGE/SEX}은(는) 현재 신발을 신지 않았을 때 신장이 대략 얼마나 됩니까?

CA4F/CA4I

[IF NEEDED, SAY: "Your best guess is fine."]
[IF NEEDED, SAY: "소신껏 추정을 하셔도 좋습니다"]

_____ FEET _____ INCHES

CA4M/CA4C

_____ METERS _____ CENTIMETERS

CA4FMT

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

QC09_A6 About how much does (CHILD) weigh now without shoes?
 {CHILD NAME /AGE/SEX}은(는) 현재 신발을 신지 않았을 때 체중이 대략 얼마나 됩니까?

CA5P

[IF NEEDED, SAY: “Your best guess is fine.”]
[IF NEEDED, SAY: “소신껏 추정을 하셔도 좋습니다.”]

_____ POUNDS

CA5K

_____ KILOGRAMS

CA5FMT

- POUNDS1
- KILOGRAMS2
- REFUSED -7
- DON'T KNOW -8

SCHOOL ATTENDANCE

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

QC09_A7 {Not including pre-school or nursery school,} Did (CHILD) attend school last week?
 {CHILD NAME /AGE/SEX}는 지난주 학교에 출석했습니까?

CA42

- YES1 **[GO TO QC09_A9]**
- NO2
- ON VACATION3
- HOME SCHOOLED4 **[GO TO QC09_A9]**
- REFUSED -7
- DON'T KNOW -8

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

QC09_A8 {Not including pre-school or nursery school,} Did (CHILD) attend school during the last school year?
 {CHILD NAME /AGE/SEX}는 지난 학년에 학교에 출석했습니까?

CA43

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

GENERAL HEALTH

QC09_A9 In general, would you say (CHILD)'s health is excellent, very good, good, fair or poor?
 대체적으로 (CHILD NAME /AGE/SEX)의 건강은 특출하게 좋습니까, 아주 좋습니까,
 좋습니까, 그런 대로 괜찮습니까, 아니면 좋지 않습니까?

CA6

- EXCELLENT1
- VERY GOOD2
- GOOD3
- FAIR4
- POOR.....5
- REFUSED -7
- DON'T KNOW -8

ASTHMA

QC09_A10 Has a doctor ever told you that (CHILD) has asthma?
 의사로부터 {CHILD NAME /AGE/SEX}이(가) 천식이 있다는 말을 들은 #적이 있습니까?

CA12

- YES1
- NO.....2 [GO TO QC09_A26]
- REFUSED -7 [GO TO QC09_A26]
- DON'T KNOW -8 [GO TO QC09_A26]

QC09_A11 Does {he/she} still have asthma?
 {}이/가 아직도 천식이 있습니까?

CA31

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

QC09_A12 During the past 12 months, has {he/she} had an episode of asthma or an asthma attack?
 지난 12개월 동안, {}이/가 이따금씩 아니면 한 번이라도 천식 증상이 있었던 적이
 있습니까?

CA32

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

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

QC09_A13 During the past 12 months, how often has (CHILD) had asthma symptoms such as coughing, wheezing, shortness of breath, chest tightness, or phlegm? Would you say: 지난 12 개월 동안, {}에게 기침, 목에서 휘휘거리는 소리가 나거나, 숨가쁨, 가슴 압박감이나 가래 등의 천식 증상이 얼마나 자주 있었습니까?

CA12B

- Not at all,1
- 지난 12 개월 동안, 아무 증상도 없었습니까, 1
- Less than every month,.....2
- 매 달 한 번도 안됐습니까,2
- Every month,3
- 매달,3
- Every week, or4
- 매주, 아니면4
- Every day?5
- 매일 있었습니까?5
- REFUSED -7
- DON'T KNOW -8

QC09_A14 During the past 12 months, has (CHILD) had to visit an emergency room because of {his/her} asthma? #지난 12 개월 동안, {CHILD NAME /AGE/SEX}{이}가 천식때문에 응급실에 갔던 적이 있습니까?

CA33

- YES1
- NO2 **[GO TO QC09_A16]**
- REFUSED -7 **[GO TO QC09_A16]**
- DON'T KNOW -8 **[GO TO QC09_A16]**

QC09_A15 Did you take (CHILD) to an emergency room for {his/her} asthma because you were unable to see {his/her} doctor? 천식이 있는 {CHILD NAME /AGE/SEX}{이}가 의사의진료를 받을 수 없었기 때문에 응급실로 데려간 적이 있습니까?

CA48

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

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

QC09_A16 During the past 12 months, was {he/she} admitted to the hospital overnight or longer for {his/her} asthma? #지난 12 개월 동안 {he/she} {his/her} 천식 때문에하룻밤 이상 병원에 입원한 적이 있습니까?

CA44

- YES1

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

QC09_A17 Is (CHILD) now taking a daily medication to control {his/her} asthma that was prescribed or given to you by a doctor?
 {이/가} 천식을 다스리기 위해 의사가 처방하거나 제공해 준 약을 현재 매일 복용하고 있습니까?

CA12A

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

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

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

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

QC09_A18 During the past 12 months, how often has (CHILD) had asthma symptoms such as coughing, wheezing, shortness of breath, chest tightness, or phlegm? Would you say:
 지난 12 개월\ 동안, {CHILD NAME /AGE/SEX} 에게 기침, 씨근거림, 가쁜 숨, 가슴 답답함 또는 가래와 같은 천식 증상이 얼마나 자주 발생했습니까? 다음 중에서 선택해 주십시오.

CA40

Not at all,1
 전혀 발생하지 않았음,.....1
 Less than every month,.....2
 몇 달에 한 번 발생,.....2
 Every month,.....3
 매달 발생,.....3
 Every week, or4
 매주 발생 혹은.....4
 Every day?5
 매일 발생?.....5
 REFUSED.....-7
 DON'T KNOW.....-8

QC09_A19 During the past 12 months, has (CHILD) had to visit an emergency room because of {his/her} asthma?
 #지난 12 개월\ 동안, {CHILD NAME /AGE/SEX}(이)가 천식 때문에 응급실에 간 적이 있습니까?

CA41

- YES1
- NO.....2 **[GO TO QC09_A21]**
- REFUSED -7 **[GO TO QC09_A21]**
- DON'T KNOW -8 **[GO TO QC09_A21]**

QC09_A20 Did you take (CHILD) to an emergency room for {his/her} asthma because you were unable to see {his/her} doctor?
 천식이 있는 {CHILD NAME /AGE/SEX}(이)가 의사의 진료를 받을 수 없었기 때문에 응급실로 데려간 적이 있습니까?

CA49

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

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

QC09_A21 During the past 12 months, was {he/she} admitted to the hospital overnight or longer for {his/her} asthma?
 #지난 12 개월\ 동안 {he/she} {his/her} 천식 때문에하룻밤 이상 병원에 입원한 적이 있습니까?

CA45

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

QC09_A22 During the past 12 months, how many days of day care or school did (CHILD) miss due to asthma?
 지난 12 개월 동안, 천식 때문에 {}이/가 데이 케어나 학교에 나가지 못했던 게 며칠이나 됩니까?

CA34

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

QC09_A23 Have (CHILD'S) doctors or other medical providers worked with you to develop a plan so that you know how to take care of {his/her} asthma?
 {CHILD NAME /AGE/SEX}(이)의 담당의사나 다른 의료제공자들이 귀하에게 천식을 관리하는 방법을 알려주기 위해 귀하와 함께 천식관리 계획서를 작성한 적이 있습니까?

CA35

- YES1
- NO.....2 **[GO TO QC09_A25]**
- REFUSED -7 **[GO TO QC09_A25]**
- DON'T KNOW -8 **[GO TO QC09_A25]**

QC09_A24 Do you have a written or printed copy of this plan?
 이 계획서에 기재했거나 또는 인쇄된 사본을 가지고 있습니까?

CA50

[IF NEEDED, SAY: "This can be an electronic or hard copy."]
[IF NEEDED, SAY: "이것은 전자사본 또는 책자일 수도 있습니다."]

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

QC09_A25 How confident are you that you can control and manage (CHILD's) asthma? Would you say you are very confident, somewhat confident, not too confident, or not at all confident?
 귀하는 {CHILD NAME /AGE/SEX}(이)의 천식을 억제 또는 관리하는 데 얼마나 자신이 있습니까? 매우 자신이 있다, 약간 자신이 있다, 별로 자신이 없다, 전혀 자신이 없다 중에서 선택해 주십시오.

CA51

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

OTHER CONDITIONS

QC09_A26 Does (CHILD) currently have any physical, behavioral, or mental conditions that limit or prevent {him/her} from doing childhood activities usual for {his/her} age?
 {CHILD NAME /AGE/SEX}은(는) 현재 {그/그녀}의 나이에 일반적인 유년기 활동을 하는 것을 제한하거나 방해하는 신체적, 행동적, 정신적 건강 상태가 있습니까?

CA7

- YES1
- NO.....2 **[GO TO QC09_B1]**
- REFUSED -7 **[GO TO QC09_B1]**
- DON'T KNOW -8 **[GO TO QC09_B1]**

QC09_A27 What condition does (CHILD) have?
 {CHILD NAME /AGE/SEX}(이)는 어떤 건강상의 문제를 가지고 있습니까?

CA10A

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

[PROBE: "Any others?"]

[PROBE: "다른건강 상태도 있습니까?"]

- ADD/ADHD 1
- ASPERGER'S SYNDROME 2
- AUTISM..... 3
- CEREBRAL PALSY 4
- CONGENITAL HEART DISEASE 5
- CYSTIC FIBROSIS 6
- DIABETES 7
- DOWN'S SYNDROME..... 8
- EPILEPSY 9
- DEAFNESS OR OTHER HEARING PROBLEM 10
- MENTAL RETARDATION, OTHER THAN DOWN'S 11
- MUSCULAR DYSTROPHY 12
- NEUROMUSCULAR DISORDER..... 13
- ORTHOPEDIC PROBLEM (BONES OR JOINTS) 14
- SICKLE CELL ANEMIA 15
- BLINDNESS OR OTHER VISION PROBLEM..... 16
- OTHER (SPECIFY: _____) 91
- REFUSED -7
- DON'T KNOW -8

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

QC09_A28 During the past 12 months, has (CHILD) had to visit an emergency room because of {his/her} (INSERT CONDITION(S) 4-91 FROM QC09_A27)?
 (INSERT CONDITION(S) 4-91 FROM QC09_A27) #지난 12개월\ 동안, {CHILD NAME /AGE/SEX}(이)가 다음의 증상 때문에 응급실에 간 적이 있습니까?

CA52

- YES1
- NO2 **[GO TO QC09_A30]**
- REFUSED -7 **[GO TO QC09_A30]**
- DON'T KNOW -8 **[GO TO QC09_A30]**

QC09_A29 Did you take (CHILD) to an emergency room for {his/her} (INSERT CONDITION(S) 4-91 FROM QC09_A27) because you were unable to see {his/her} doctor?
 다음의 증상이 있는 {CHILD NAME /AGE/SEX} (이)가 의사의 진료를 받을 수 없었기 때문에 응급실로 데려간 적이 있습니까? (INSERT CONDITION(S) 4-91 FROM QC09_A27)

CA53

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

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

QC09_A30 During the past 12 months, was {he/she} admitted to the hospital overnight or longer for {his/her} (INSERT CONDITION(S) 4-91 FROM QC09_A27)?
 #지난 12개월 동안, {CHILD NAME /AGE/SEX}(이)가 다음의 증상 때문에 하룻밤 이상 병원에 입원한 적이 있습니까? (INSERT CONDITION(S) 4-91 FROM QC09_A27)

CA54

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

QC09_A31 Have (CHILD's) doctors or other medical providers worked with you to develop a plan so that you know how to take care of {his/her} (INSERT CONDITION(S) FROM QC09_A27)?

다음의 증상이 있는 {CHILD NAME /AGE/SEX}이(의) 담당의사나 다른 의료제공자들이 귀하에게 그 증상을 돌보는 방법을 알려주기 위해 귀하와 함께 관리 계획서를 작성한적이 있습니까? (INSERT CONDITION(S) 4-91 FROM QC09_A27)

CA55

- YES1
- NO2 **[GO TO QC09_A33]**
- REFUSED -7 **[GO TO QC09_A33]**
- DON'T KNOW -8 **[GO TO QC09_A33]**

QC09_A32 Do you have a written or printed copy of this plan?
 이 계획서에 기재했거나 인쇄된 사본을 가지고 있습니까?

CA56

**[IF NEEDED, SAY: "This can be an electronic or hard copy."]
 [IF NEEDED, SAY: "이 사본은 전자사본 또는 하드카피일 수도 있습니다."]**

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

QC09_A33

How confident are you that you can control and manage (CHILD's) (INSERT CONDITION(S) FROM QC09_A27)? Would you say you are very confident, somewhat confident, not too confident, or not at all confident?

귀하는 다음과 같은 {CHILD NAME /AGE/SEX}(이)의 증상을 억제 또는 관리하는 데 얼마나 자신이 있으십니까? (INSERT CONDITION(S) 4-91 FROM QC09_A27) 매우 자신이 있다, 약간 자신이 있다, 별로 자신이 없다, 전혀 자신이 없다 중에서 선택해 주십시오.

CA57

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

Section B – Dental Health

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

QC09_B1 These questions are about (CHILD)’s dental health. Does (CHILD) have any teeth yet?
 다음 질문들은 (CHILD NAME /AGE/SEX)의 치아 건강에 관한 겁니다.(CHILD NAME /AGE/SEX)는 치아가 있습니까?

CC1

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

QC09_B2 {Now I’m going to ask 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.
 {CHILD NAME /AGE/SEX}이(가) 치과 의사나치과 클리닉을 마지막으로 방문한 지 대략 얼마나 오래 되었습니까?치과위생사와 다른 모든 {지금부터는 {CHILD NAME /AGE/SEX}(이)의 치아 건강에 관해 질문을 드리겠습니다.}

CC5

- HAS NEVER VISITED0
- 6 MONTHS AGO OR LESS1 **[GO TO QC09_C1]**
- MORE THAN 6 MONTHS UP TO 1YEAR AGO2 **[GO TO QC09_C1]**
- MORE THAN 1 YEAR UP TO 2 YEARS AGO3
- MORE THAN 2 YEARS UP TO 5 YEARS AGO4
- MORE THAN 5 YEARS AGO5
- REFUSED -7
- DON’T KNOW -8

PROGRAMMING NOTE QC09_B3:
IF QC09_B2 = 0 (HAS NEVER VISITED), DISPLAY “never”;
ELSE IF QC09_B2 ≥ 3 DISPLAY “not” AND “in the past year”

QC09_B3 What is the main reason your child has {never/not} visited a dentist {in the past year}?
 귀하의 자녀가 작년 치과에 가지 않은 주된 이유는 무엇입니까?

CB23

- NO REASON TO GO/NO PROBLEMS 1
- NOT OLD ENOUGH 2
- COULD NOT AFFORD IT/TOO EXPENSIVE/NO INSURANCE. 3
- 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

Section C – Diet, Physical Activity, Park Use

DIETARY INTAKE

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

QC09_C1 Now I'm going to ask you about the foods your child ate yesterday, including meals and snacks. Yesterday, how many glasses or boxes of 100% fruit juice, such as orange or apple juice, did (CHILD) drink?
 지금부터는 귀 자녀가 주식 및 간식을 포함하여 어제 먹은 식품에 관해 질문을 드리겠습니다. {CHILD NAME /AGE/SEX}(이)는 어제 오렌지 주스 또는 사과 주스와 같은 100% 과일 주스를 몇 잔 또는 몇 박스나 마셨습니까?

CC10

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

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

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

- REFUSED -7
- DON'T KNOW -8

QC09_C2 Yesterday, how many servings of fruit, such as an apple or a banana, did {he/she} eat?
 {he/she} 어제 사과 또는 바나나 같은 과일을 몇 인분이나 먹었습니까?

CC13

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

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

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

REFUSED -7

DON'T KNOW -8

QC09_C3 Yesterday, how many servings of French fries, home fries, or hash browns did (CHILD) eat?
 어제, {CHILD NAME /AGE/SEX}은(는) 프렌치 프라이, 홈 프라이 또는 해시 브라운을 몇 서빙이나 샀습니까?

CC14

**[IF RESPONDENT ASKS, SAY: “Do not include potato chips.”]
 [IF RESPONDENT ASKS, SAY: “감자 칩은 포함시키지 마십시오.”]**

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

REFUSED -7

DON'T KNOW -8

QC09_C4 Yesterday, how many servings of other vegetables like green salad, green beans, or potatoes did {he/she} have? Do not include fried potatoes.
 어제 {he/she} 녹색잎 야채 샐러드, 각지콩 또는 감자와 같은 다른 야채를 몇 서빙이나 먹었습니까? 튀긴 감자는 포함시키지 마십시오.

CC31

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

REFUSED -7

DON'T KNOW -8

QC09_C5 Yesterday, how many glasses or cans of soda, such as Coke, or other sweetened drinks, such as fruit punch or sports drinks did {he/she} drink? Do not count diet drinks.
 {CHILD/NAME/AGE/SEX }은(는) 어제 소다(콜라와 같은) 또는 가당 음료(과일 펀치나 스포츠 음료와 같은)를 몇 잔 또는 몇 캔이나 마셨습니까? 다이어트 음료는 포함시키지 #마십시오.

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.]

_____ GLASSES, CANS, OR BOTTLES [HR: 0-20; SR 0-9]

REFUSED -7

DON'T KNOW -8

QC09_C6 Yesterday, how many servings of sweets such as cookies, candy, doughnuts, pastries, cake, or popsicles did {he/she} have?
 {he or she} 어제 과자, 캔디, 도넛, 페이스트리, 케이크 또는 팝시클과 같은 설탕이 많이 들어 있는 식품을 몇 인분이나 먹었습니까?

CC24

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

[IF NEEDED, SAY: “파이와 아이스크림은 포함시키십시오. 무설탕 식품은 제외하되, 저지방 식품은 포함시키십시오.”]

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

REFUSED -7

DON'T KNOW -8

FAST FOOD

QC09_C7

Now think about the *past week*. In the past 7 days, how many times did {he/she} eat fast food? Include fast food meals eaten at school or at home, or at fast food restaurants, carryout, or drive thru.

지금부터는 #지난W 한 주에 대해서만 답변해 주십시오. 지난 7 일 동안, {he/she} 패스트 푸드를 몇 번이나 먹었습니까? 학교나 가정에서 먹거나, 또는 패스트 푸드 식당에서 캐리아웃 또는 드라이브 스루를 통해서 사먹은 패스트 푸드 음식을 포함시키십시오.

CC32

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

[IF NEEDED, SAY: “맥도널즈, KFC, 팬더 익스프레스, 또는 타코벨에서 사 먹은 음식과 같은.”]

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

REFUSED -7

DON'T KNOW -8

COMMUTE FROM SCHOOL TO HOME

PROGRAMMING NOTE QC09_C8:

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

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

ELSE GO TO PROGRAMMING NOTE QC09_C12

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

지금부터는 신체활동에 대해 질문을 드리겠습니다.

QC09_C8

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

{CHILD NAME /AGE/SEX}(이)는 지난 주에 며칠이나 걸거나, 자전거 또는 스케이트보드를 타고 학교에서 집으로 돌아왔습니까?

{이 학년도 동안, {CHILD NAME /AGE/SEX}(이)는 평상적인 주에 며칠이나 걸거나, 자전거 또는 스케이트보드를 타고 학교에서 집으로 돌아왔습니까?}

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 QC09_C9:
IF QC09_C8 = 0 (DAYS), -7, OR -8, GO TO QC09_C10;
ELSE IF QC09_C8 > 0 (DAYS) CONTINUE WITH QC09_C9;
IF QC09_A7 = 1 (ATTENDED SCHOOL LAST WEEK) DISPLAY “does”;
IF QC09_A8 = 1 (ATTENDED SCHOOL LAST YEAR) DISPLAY “did”

QC09_C9 About how many minutes {did/does} it take {him/her} without any stops?
 도중에 멈추지 않는 경우 {him/her} 대략 몇 분이나 걸렸습니까?

CC30

_____ MINUTES [GO TO QC09_C11]
 REFUSED -7 [GO TO QC09_C11]
 DON'T KNOW -8 [GO TO QC09_C11]

QC09_C10 Could {he/she} walk or bike home from school in 30 minutes or less?
 {he/she} 학교에서 걸거나 자전거를 타고 30분 이내에 귀가할 수 있었습니까?

CC33

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

NAME OF SCHOOL

PROGRAMMING NOTE QC09_C11:
IF QC09_A7 = 1 (ATTENDED SCHOOL LAST WEEK) OR QC09_A8 = 1 (ATTENDED SCHOOL LAST YEAR) THEN CONTINUE WITH QC09_C11;
ELSE SKIP TO QC09_C12

QC09_C11 What is the name of the school (CHILD) goes to or last attended?
 {CHILD NAME /AGE/SEX}이(가)현재 다니고 있거나 마지막으로 다녔던 학교의 이름은 무엇입니까?

CB22

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

_____ NAME OF SCHOOL

CHILD NOT IN SCHOOL0
 PRE-SCHOOL/DAYCARE1
 KINDERGARTEN2
 ELEMENTARY3
 INTERMEDIATE4
 JUNIOR HIGH5
 MIDDLE SCHOOL6
 CHARTER7
 OTHER SPECIFY: _____ 91
 REFUSED -7
 DON'T KNOW -8

PHYSICAL ACTIVITY

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

QC09_C12 Not including school PE, on how many days of the past 7 days was (CHILD) physically active for at least 60 minutes total?
 지난 7일 동안 {CHILD NAME/AGE/SEX}(이)가 학교 PE 시간을 제외하고 모두 합해서 60분 이상 신체 활동을 한 날은 며칠이나 됩니까?

CC35

_____ DAYS [HR: 0-7]

REFUSED -7
 DON'T KNOW -8

PARK USE

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

QC09_C13 Has (CHILD) been to a park in the past 30 days?
 {CHILD NAME/AGE/SEX}(이)가 지난 30일 동안 공원에 간적이 있습니까?

CC37

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QC09_C14 Is there a park, playground, or open space within walking distance of your home?
 집에서 걸어갈 수 있는 거리에 공원, 운동장 또는 공지가 있습니까?

CC36

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QC09_C15 Do you strongly agree, agree, disagree, or strongly disagree with the following statement?
 다음의 기술에 대해 동의하는 정도를 매우 동의, 동의, 부정, 매우 부정 중에서 선택해 주십시오?

The park or playground closest to where I live is safe during the day.
 내가 사는 곳에서 가장 가까이 있는 공원 또는 놀이터는 낮에 안전하다.

CC39

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

SEDENTARY TIME

PROGRAMMING NOTE QC09_C16:

**IF CAGE ≤ 1 YEAR GO TO QC09_D1;
ELSE IF CAGE > 1 YEAR, CONTINUE WITH QC09_C16**

QC09_C16 Thinking just about SATURDAYs AND SUNDAYs, about how many hours does (CHILD) usually watch TV or play video games (such as Playstation)?
#토요일과 일요일\에 대해 생각해 볼 때 {CHILD NAME/AGE/SEX}(이)가 보통 하루에 대략 몇 시간이나 TV를 보거나 비디오 게임(플레이스테이션 같은)을 합니까?

CG10

**[IF > 1 HOUR, VERIFY: "That's {xx} hours PER DAY."]
[IF > 1 HOUR, VERIFY: "그것은 #하루 당\ (READ ENTRY BELOW) 시간입니까?"]**

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

_____ HOURS

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

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

QC09_C17 About how many hours per day on a typical SATURDAY OR SUNDAY does (CHILD) use a computer for fun, not schoolwork?
{CHILD NAME/AGE/SEX}(이)가 #토요일 이나 일요일\에 공부 목적이 아니라 재미로 컴퓨터를 사용하는 시간이 얼마나 됩니까?

CG11

[IF > 1 HOUR, VERIFY: "그것은 #하루 당\ (READ ENTRY BELOW) 시간입니까?"]

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

_____ HOURS

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

Section D – Health Care Access and Utilization

USUAL SOURCE OF CARE

QC09_D1 The next questions are about where (CHILD) goes for health care.
 다음 질문들은 (CHILD NAME /AGE/SEX)가 혜택받고 있는 건강 프로그램에 관한 질문입니다.

Is there a place you usually take {him/her} to when {he/she} is sick or you need advice about {his/her} health?
 자녀분이 아프거나 자녀분의 건강에 관하여 조언이 필요할 때 귀하께서 주로 자녀분을 데리고 가는 곳이 있습니까?

CD1

- YES1
- NO2 **[GO TO QC09_D3]**
- DOCTOR/(HIS/HER) DOCTOR3
- KAISER4
- MORE THAN ONE PLACE5
- REFUSED -7
- DON'T KNOW -8

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

QC09_D2 {What kind of place do you take {him/her} to most often—a medical/Is {his/her} doctor a private} doctor’s office, a clinic or hospital clinic, an emergency room, or some other place?
 자녀분을 가장 자주 데리고 가는 곳이 어디입니까? 개인병원, 보건소 또는 종합 병원, 응급실 아니면 다른 어떤 곳입니까?

CD3

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

EMERGENCY ROOM (GENERAL)

PROGRAMMING NOTE QC09_D3:
 IF QC09_A14 = 1 (YES WENT TO ER PAST 12 MONTHS FOR ASTHMA) OR IF QC09_A19 = 1 (YES WENT TO ER PAST 12 MONTHS FOR ASTHMA) OR IF QC09_A28 = 1 (YES WENT TO ER PAST 12 MONTHS FOR OTHER CONDITION), MARK YES ON QC09_D3 AND GO TO QC09_D4;
 ELSE CONTINUE WITH QC09_D3

QC09_D3 During the past 12 months, did (CHILD) visit a hospital emergency room?
 (CHILD NAME /AGE/SEX)가 지난 12 개월 동안 병원의 응급실을 방문한 적이 있습니까?

CD12

- YES1
- NO2
- REFUSED -7

DON'T KNOW -8

VISITS TO MEDICAL DOCTOR

QC09_D4 During the past 12 months, how many times has (CHILD) seen any kind of medical doctor?
 지난 12 개월 동안, {이/가} 의사를 보았던 게 몇 번이나 됩니까?

CD6

_____ TIMES
 REFUSED -7
 DON'T KNOW -8

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

QC09_D5 About how long has it been since {he/she} last saw a medical doctor?
 마지막으로 자녀분이 의사를 만난 것은 대략 얼마 전입니까?

CD7

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

PERSONAL DOCTOR

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

QC09_D6 Does (he/she) have a personal doctor or medical provider who is {his/her} main provider?
 이 자녀에게 주치의 역할을 하는 개인 의사 또는 의료제공자가 있습니까?

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

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

CD33

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

PATIENT-CENTERED CARE: INFORMATION

PROGRAMMING NOTE QC09_D7:

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

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

지난 12 개월 동안, {CHILD NAME /AGE/SEX}(이)의 치료와 관련된 질문을 하기 위해 병원에 전화를 걸었거나 이메일을 보낸 적이 있습니까?

CD34

- YES1
- NO2 **[GO TO QC09_D9]**
- REFUSED -7 **[GO TO QC09_D9]**
- DON'T KNOW -8 **[GO TO QC09_D9]**

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

치료와 관련된 질문에 대한 답변을 필요한 만큼 빨리 받은 경우가 얼마나 자주 있었습니까?

CD35

- Never,1
- Sometimes,2
- Usually, or3
- Always?4
- REFUSED -7
- DON'T KNOW -8

CARE COORDINATION

PROGRAMMING NOTE QC09_D9:

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

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

{CHILD NAME /AGE/SEX}(이)의 병원 또는 클리닉에 다른 의사로부터 받는 진료, 또는 검사나 치료와 같은 서비스를 조정해주는 사람이 있습니까?

CD36

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

DELAYS IN CARE

QC09_D10 During the past 12 months, did you either delay or not get a medicine that a doctor prescribed for (CHILD)?
 지난 12개월 동안, {}에게 의사가 처방해 준 약을 받는 게 지체되었거나, 아니면 아예 약을 못 받았던 적이 있습니까?

CE1

- YES1
- NO.....2 **[GO TO QC09_D14]**
- REFUSED -7 **[GO TO QC09_D14]**
- DON'T KNOW -8 **[GO TO QC09_D14]**

QC09_D11 Was cost or lack of insurance a reason why you delayed or did not get the prescription?
 경제적 형편이나, 보험이 없었던 것이 귀하가 의사가 처방해 준 약을 받는 것을 지연시켰거나 받지 못하게 했던 이유입니까?

CE12

- YES1
- NO.....2 **[GO TO QC09_D14]**
- REFUSED -7 **[GO TO QC09_D14]**
- DON'T KNOW -8 **[GO TO QC09_D14]**

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

QC09_D12 Was this prescription for {his/her} asthma?
 이 처방은 이 자녀의 천식에 대한 것이었습니까?

CD37

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

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

QC09_D13 Was this prescription for {his/her} (INSERT CONDITION(S) FROM QC09_A27)?
 이 처방은 이 자녀의 다음과 같은 증상에 대한 것이었습니까? (INSERT CONDITION(S) FROM QC09_A27)

CD38

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

QC09_D14 During the past 12 months, did you delay or not get any other medical care you felt (CHILD) needed—such as seeing a doctor, a specialist, or other health professional?

지난 12 개월동안 귀하께서 {CHILD NAME/AGE/ SEX} 에게 필요하다고 생각한 의사나 다른 의료전문가의 진료를 미루거나 받지 않으신 적이 있습니까?

CE7

- YES1
- NO.....2 [GO TO QT09_D18]
- REFUSED -7 [GO TO QT09_D18]
- DON'T KNOW -8 [GO TO QT09_D18]

QC09_D15 Was cost or lack of insurance a reason why you delayed or did not get the medical care you felt (he/she) needed?

경제적 형편이나 보험이 없었던 것이, {he/she}에게 필요하다고 생각하는 치료를 지연시켰거나 받지 못하게 했던 이유입니까?

CE13

- YES1
- NO.....2 [GO TO QT09_D18]
- REFUSED -7 [GO TO QT09_D18]
- DON'T KNOW -8 [GO TO QT09_D18]

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

QC09_D16 Was this medical care for {his/her} asthma?
 이 치료는 이 자녀의 천식에 대한 것이었습니까?

CD39

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

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

QC09_D17 Was this medical care for {his/her} (INSERT CONDITION(S) FROM QC09_A27)?
 이 치료는 이 자녀의 다음과 같은 증상에 대한 것이었습니까? (INSERT CONDITION(S) FROM QC09_A27)

CD40

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

DOCTOR DISCUSSED CHILD’S NUTRITION

QC09_D18 When (CHILD) had {his/her} last routine physical exam, did you and a doctor talk about {his/her} nutrition or healthy eating?
 {CHILD/AGE/SEX}(이)가 가장 최근에 {his/her} 정기 신체검사를 받았을 때, 귀하와 의사가 {his/her} 영양이나 건강에 좋은 식생활에 대해 상의했습니까?

CD32

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

FLU SHOT

PROGRAMMING NOTE QC09C_D19:
IF CAGE < 6 MONTHS, GO TO QC09_E1;
ELSE IF CAGE ≥ 6 MONTHS, CONTINUE WITH QC09_D19

QC09_D19 During the past 12 months, did (CHILD) get a flu shot or the nasal flu vaccine, called "Flumist"?
 지난 12개월 동안, {CHILD NAME /AGE/SEX}(이)가 독감 예방 주사를 맞았거나 "Flumist"라고 하는 독감 백신을 코에 뿌린 적이 있습니까?

CD30

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

- YES1
- NO2 **[GO TO QC09_E1]**
- REFUSED -7 **[GO TO QC09_E1]**
- DON'T KNOW -8 **[GO TO QC09_E1]**

QC09_D20 Did (he/she) have the flu shot or the nasal flu vaccine?
 그것은 독감 예방주사 또는 코에 뿌리는 독감 백신 중 어느 것이었습니까?

CD41

- FLU SHOT1
- NASAL/FLUMIST2
- BOTH3
- REFUSED -7
- DON'T KNOW -8

PROGRAMMING NOTE QC09_D21:
IF QC09_D20 = 1 DISPLAY “flu shot”;
IF QC09_D20 = 2 DISPLAY “nasal flu vaccine”;
ELSE DISPLAY “vaccine”

QC09_D21 At what kind of place did {he/she} get {his/her} last {flu shot/nasal flu vaccine/vaccine}?
 이 자녀가 가장 최근에 {독감 예방주사를 맞은 곳은/코에 독감 백신을 뿌리기 위해/독감
 백신을 접종 받은 곳은} 어디입니까?

CD42

- DOCTOR'S OFFICE, KAISER, OR HMO1
- COMMUNITY HEALTH CENTER, HEALTH DEPT.,
HEALTH DEPT CLINIC,
OR OTHER TYPE OF CLINIC2
- A STORE3
- PARENT'S WORKPLACE4
- A SENIOR, RECREATION,
OR COMMUNITY CENTER.....5
- HOSPITAL OR EMERGENCY ROOM6
- PLACE OF WORSHIP7
- SCHOOL8
- DON'T KNOW -7
- REFUSED -8

Section E – Public Programs

TANF/CALWORKS

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

QC09_E1 Is (CHILD) now on TANF or CalWORKS?
 {이}가 티에이엔에프(TANF)나 칼워크스(CalWORKS)에 현재 참가하고 있습니까?

CE11

[IF NEEDED, SAY: “TANF means ‘Temporary Assistance to Needy Families,’ and CalWORKS means ‘California Work Opportunities and Responsibilities to Kids.’ Both replaced AFDC, California’s old welfare entitlement program.”]

[IF NEEDED, SAY: “티에이엔에프 (TANF)는 ‘도움이 필요한 가족을 위한 임시 보조’를 의미합니다. 그리고 칼워크스 (CalWORKS)는 ‘캘리포니아 프로그램으로서 부모의 취업과 어린 자녀의 양육을 아울러 지원해주는 것’입니다. 이 둘 다, 가주에서 종래에 있었던 웰페어 프로그램인 AFDC(에이에프디씨)가 새로 바뀐 겁니다.”]

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

FOOD STAMPS

QC09_E2 Is (CHILD) receiving Food Stamps?
 {CHILD /AGE/SEX}은(는) 푸드 스탬프 혜택을 받고 있습니까?

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: “귀하는 푸드 스탬프로 또는 EBT 카드를 통해서 혜택을 받을 수 있습니다. EBT 란 전자식 혜택 제공 카드를 말하며 골든 스테이트 혜택 카드라고도 합니다.”]

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

WIC

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

QC09_E3 Is (CHILD) on WIC now?
{ }이/가 현재 WIC(윅) 혜택을 받고 있습니까?

CE11C

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

[IF NEEDED, SAY: "WIC(윅)은 '여성, 유아 및 아동을 위한 음식 보조 프로그램'입니다."]

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

Section F – Parental Involvement, Concerns, Mental Health

PARENTAL INVOLVEMENT

PROGRAMMING NOTE QC09_F1:

IF CAGE > 5 YEARS GO TO PROGRAMMING NOTE QC09_F4 INTRO;

ELSE CONTINUE WITH QC09_F1

QC09_F1 In a usual week, about how many days do you or any other family members read stories or look at picture books with (CHILD)?
 일반적인 주에 귀하나 다른 가족 구성원이 {CHILD NAME/AGE/SEX}와(과) 함께 동화책을 읽거나 그림책을 보는 시간은 대략 얼마나 됩니까?

CG14

- EVERY DAY.....1
- 3-6 DAYS2
- 1-2 DAYS3
- NEVER.....4
- REFUSED.....-7
- DON'T KNOW.....-8

QC09_F2 [In a usual week, about how many days do you or any other family member] play music or sing songs with (CHILD)?
 [귀하나 가족 중에 다른 어떤 분이 보통 한 주에 며칠이나] ...{CHILD NAME/AGE/SEX }(이)와 음악을 같이 연주하거나 노래를 불러 줍니까?

CG15

- EVERY DAY.....1
- 3-6 DAYS2
- 1-2 DAYS3
- NEVER.....4
- REFUSED.....-7
- DON'T KNOW.....-8

QC09_F3 [In a usual week, about how many days do you or any other family member] take (CHILD) out somewhere, for example, to the park, store, or playground?
 [귀하나 가족 중에 다른 어떤 분이 보통 한 주에 며칠이나]...{CHILD NAME/AGE/SEX }(이)를 공원, 상점, 놀이터 같은 곳에 데리고 갑니까?

CG16

- EVERY DAY.....1
- 3-6 DAYS2
- 1-2 DAYS3
- NEVER.....4
- REFUSED.....-7
- DON'T KNOW.....-8

PARENTAL CONCERNS

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

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

QC09_F4 INTRO

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

부모로서, 어린 자녀에 대해 걱정되는 것이 있을 수도 있는데요. 지금부터는 그런 걱정거리가 있는지에 대해 여쭙어보도록 하겠습니다. 하나씩 읽어 드릴 때 마다, 많이 걱정된다, 조금 걱정된다, 전혀 걱정되지 않는다 중에서 골라 대답해 주십시오.

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

QC09_F4 How your child makes speech sounds? [Are you concerned a lot, a little, or not at all?]
 [많이 기울인다, 약간 기울인다, 전혀 기울이지 않는다 중에서 어느 것입니까? 자녀분이 말하는 소리를 내는 데에 대해서는, 걱정되는 바가 있으십니까...]

CG17

- A LOT1 **[GO TO QC09_F6]**
- A LITTLE2 **[GO TO QC09_F6]**
- NOT AT ALL.....3 **[GO TO QC09_F6]**
- REFUSED -7 **[GO TO QC09_F6]**
- DON'T KNOW -8 **[GO TO QC09_F6]**

QC09_F5 How your child talks and makes words? [Are you concerned a lot, a little, or not at all?]
 자녀분이 말을 하고 말을 만들어 이야기하는 데에 대해서는, 걱정되는 바가 있으십니까...
 [많이 기울인다, 약간 기울인다, 전혀 기울이지 않는다 중에서 어느 것입니까?]

CG17A

- A LOT1
- A LITTLE2
- NOT AT ALL.....3
- REFUSED -7
- DON'T KNOW -8

PROGRAMMING NOTE QC09_F6:
IF CAGE < 18 MONTHS, GO TO QC09_F7;
ELSE IF CAGE ≥ 18 MONTHS CONTINUE WITH QC09_F6

QC09_F6 How well your child understands what you say? [Are you concerned a lot, a little, or not at all?]
 귀 자녀가 귀하의 말을 잘 알아 듣는지에 대해 얼마나 관심을 기울이십니까? [많이
 기울인다, 약간 기울인다, 전혀 기울이지 않는다 중에서 어느 것입니까?

CG18

- A LOT1
- A LITTLE2
- NOT AT ALL.....3
- REFUSED -7
- DON'T KNOW -8

QC09_F7 How your child uses {his/her} hands and fingers to do things? [Are you concerned a lot, a little, or not at all?]
 무엇을 하기 위해 귀 자녀가 손과 손가락을 어떻게 사용하는지에 대해 얼마나 관심을
 기울이십니까? [많이 기울인다, 약간 기울인다, 전혀 기울이지 않는다 중에서 어느
 것입니까?

CG19

- A LOT1
- A LITTLE2
- NOT AT ALL.....3
- REFUSED -7
- DON'T KNOW -8

QC09_F8 How well your child uses {his/her} arms and legs? [Are you concerned a lot, a little, or not at all?]
 귀 자녀가 자신의 팔과 다리를 잘 사용하는지에 대해 얼마나 관심을 기울이십니까? [많이
 기울인다, 약간 기울인다, 전혀 기울이지 않는다 중에서 어느 것입니까?

CG20

- A LOT1
- A LITTLE2
- NOT AT ALL.....3
- REFUSED -7
- DON'T KNOW -8

QC09_F9 How well your child can see or hear? [Are you concerned a lot, a little, or not at all?]
 귀 자녀가 잘 보고 듣는지에 대해 얼마나 관심을 기울이십니까? [많이 기울인다, 약간
 기울인다, 전혀 기울이지 않는다 중에서 어느 것입니까?

CG21

- A LOT1
- A LITTLE2
- NOT AT ALL.....3
- REFUSED -7
- DON'T KNOW -8

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

QC09_F10 How your child gets along with others? [Are you concerned a lot, a little, or not at all?]
 귀 자녀가 다른 사람들과 잘 어울리는지에 대해 얼마나 관심을 기울이십니까? [많이
 기울인다, 약간 기울인다, 전혀 기울이지 않는다 중에서 어느 것입니까?

CG22

- A LOT1
- A LITTLE2
- NOT AT ALL.....3
- REFUSED -7
- DON'T KNOW -8

QC09_F11 Your child's feelings and moods? [Are you concerned a lot, a little, or not at all?]
 귀 자녀의 정서와 기분에 대해 얼마나 관심을 기울이십니까? [많이 기울인다, 약간
 기울인다, 전혀 기울이지 않는다 중에서 어느 것입니까?

CG23

- A LOT1
- A LITTLE2
- NOT AT ALL.....3
- REFUSED -7
- DON'T KNOW -8

QC09_F12 How your child behaves? [Are you concerned a lot, a little, or not at all?]
 귀 자녀가 어떻게 처신하는지에 대해 얼마나 관심을 기울이십니까? [많이 기울인다, 약간
 기울인다, 전혀 기울이지 않는다 중에서 어느 것입니까?

CG24

- A LOT1
- A LITTLE2
- NOT AT ALL.....3
- REFUSED -7
- DON'T KNOW -8

QC09_F13 How your child is learning to do things for {himself/herself}? [Are you concerned a lot, a
 little, or not at all?]
 귀하의 자녀가 자신을 위해 어떻게 학습하는지에 대해 얼마나 관심을 기울이십니까?
 [많이 기울인다, 약간 기울인다, 전혀 기울이지 않는다 중에서 어느 것입니까?

CG25

- A LOT1
- A LITTLE2
- NOT AT ALL.....3
- REFUSED -7
- DON'T KNOW -8

QC09_F14 Whether your child can do what other children {his/her} age can do? [Are you concerned a lot, a little, or not at all?]
 {그/그녀}의 연령의 다른 아이들이 할 수 있는 일을 귀 자녀도 할 수 있는지에 대해 얼마나 관심을 기울이십니까? [많이 기울인다, 약간 기울인다, 전혀 기울이지 않는다 중에서 어느 것입니까?

CG26

- A LOT1
- A LITTLE2
- NOT AT ALL.....3
- REFUSED -7
- DON'T KNOW -8

DEVELOPMENTAL ASSESSMENT

QC09_F15 Did a doctor or other professional ever refer {him/her} to a specialist regarding his development?
 의사나 다른 전문가들이 귀하의 자녀의 발달 상태와 관련하여 이 자녀를 전문의에게 의뢰한 적이 있습니까?

CF46

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

QC09_F16 Did they ever refer {him/her} for speech, language or hearing testing?
 그러한 전문가들이 {him or her} 발음, 언어 또는 청력 검사를 의뢰한 적이 있습니까?

CF47

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

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MENTAL HEALTH

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

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

지금부터 아이들을 평가하는 문장들을 읽겠습니다. 하나씩 읽을때마다 지난 6 개월동안의 {CHILD NAME/AGE/SEX}과 관련하여 그 문장이 맞지 않는다, 어느정도는 맞는 말이다, 아니면 분명히 맞는말이다 중에서 골라 대답해 주십시오.

QC095_F17 {He/She} is generally well behaved, usually does what adults request [...during the past 6 months].
일반적으로 올바른 행동을 하고, 보통 어른들이 시키는 대로 한다. [... 지난 6 개월 동안]

CG28

- NOT TRUE.....1
- SOMEWHAT TRUE2
- CERTAINLY TRUE3
- REFUSED -7
- DON'T KNOW -8

QC09_F18 {He/She} has many worries or often seems worried [...during the past 6 months].
걱정거리가 많거나 걱정이 있는 것처럼 보이는 경우가 많다. [... 지난 6 개월 동안]

CG29

- NOT TRUE.....1
- SOMEWHAT TRUE2
- CERTAINLY TRUE3
- REFUSED -7
- DON'T KNOW -8

QC09_F19 {He/She} is often unhappy, depressed or tearful [...during the past 6 months].
불행하거나, 우울하거나, 울 때가 많다. [... 지난 6 개월 동안]

CG30

- NOT TRUE.....1
- SOMEWHAT TRUE2
- CERTAINLY TRUE3
- REFUSED -7
- DON'T KNOW -8

QC09_F20 {He/She} gets along better with adults than with other children [...during the past 6 months].
 다른 아이들보다 어른들과 더 잘 지낸다. [... 지난 6 개월 동안]

CG31

- NOT TRUE1
- SOMEWHAT TRUE2
- CERTAINLY TRUE3
- REFUSED -7
- DON'T KNOW -8

QC09_F21 {He/She} has good attention span, sees chores or homework through to the end.
 주의 지속 시간이 길고, 집안일이나 숙제를 끝까지 한다. [... 지난 6 개월 동안]

CG32

- NOT TRUE1
- SOMEWHAT TRUE2
- CERTAINLY TRUE3
- REFUSED -7
- DON'T KNOW -8

QC09_F22 Overall, do you think your child has difficulties in any of the following areas: emotions, concentration, behavior, or being able to get along with other people?
 전반적으로, 귀하는 귀하의 자녀가 다음 분야에 대해 어려움을 느끼고 있다고 생각하십니까? 정서, 집중력, 품행, 혹은 사교성 중 한가지에라도 어려움을 느끼고 있다고 생각하십니까?

CF30

- YES1
- NO2 **[GO TO QC09_F24]**
- REFUSED -7 **[GO TO QC09_F24]**
- DON'T KNOW -8 **[GO TO QC09_F24]**

QC09_F23 Are these difficulties minor, definite, or severe?
 이러한 어려움의 정도는 가볍고, 보통이고, 심한 것 중에서 어느 것입니까?

CF31

- MINOR1
- DEFINITE2
- SEVERE3
- REFUSED -7
- DON'T KNOW -8

QC09_F24 During the past 12 months, did (CHILD) receive any psychological or emotional counseling?
 지난 12 개월 동안, {CHILD NAME /AGE/SEX}은(는) 심리 또는 정서 상담을 받았습니까?

CF32

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

EDUCATIONAL TV PROGRAMMING

PROGRAMMING NOTE QC09_F25:
IF QC09_C16 = 93 (DOESN'T HAVE TV) OR CAGE < 1 YEAR, GO TO QC09_F29;
ELSE CONTINUE WITH QC09_F25

QC09_F25 The next questions are about television programming your child might watch.
 다음의 질문들은 귀하의 자녀가 시청하는 텔레비전 프로그램에 관한 것입니다.

Have you heard about the PBS TV show “Sid the Science Kid”?
 귀하는 "시드 더 사이언스 키드"라는 PBS TV 시리즈에 대해 들어보신 적이 있습니까?

CF60

- YES1
- NO2 **[GO TO QC09_F29]**
- REFUSED -7 **[GO TO QC09_F29]**
- DON'T KNOW -8 **[GO TO QC09_F29]**

QC09_F26 Has (CHILD) seen the PBS TV show “Sid the Science Kid”?
 {CHILD NAME/AGE/SEX}(이)는 "시드 더 사이언스 키드"라는 PBS TV 시리즈를 본 적이
 있습니까?

CF61

- YES1
- NO2 **[GO TO QC09_F29]**
- DOESN'T WATCH TV3 **[GO TO QC09_F29]**
- REFUSED -7 **[GO TO QC09_F29]**
- DON'T KNOW -8 **[GO TO QC09_F29]**

QC09_F27 Tell me if you strongly agree, agree, disagree, or strongly disagree with the following
 statements:

다음의 기술에 대해 동의하는 정도를 매우 동의, 동의, 부정, 매우 부정 중에서 선택해
 주십시오.

(CHILD) is learning science from Sid.
 {CHILD NAME/AGE/SEX}(이)는 시드로부터 과학을 배우고 있다.

CF62

[IF NEEDED, SAY: “Do you strongly agree, agree, disagree, or strongly disagree?”]
**[IF NEEDED, SAY: “귀하가 동의하시는 정도는 매우 동의, 동의, 부정, 매우 부정 중에서
 어느 것에 해당됩니까?”]**

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

QC09_F28 "Sid the Science Kid" increases preschoolers' interest in science.
 "시드 더 사이언스 키드"는 취학 전 아동들의 과학에 대한 관심을 증가시키고 있다.

[IF NEEDED, SAY: "Do you strongly agree, agree, disagree, or strongly disagree?"]
[IF NEEDED, SAY: "귀하가 동의하시는 정도는 매우 동의, 동의, 부정, 매우 부정 중에서 어느 것에 해당됩니까?"]

CF63

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

FIRST 5 PARENT KIT

QC09_F29 Do you know that First 5 California, a state agency, provides a free Parent Kit to parents of young children?

주 정부 기관인 First 5 California 가 어린 아이들의 부모들에게 부모용 키트를 무료로 제공하는 것에 대해 알고 계셨습니까?

CF35

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

QC09_F30 Have you ever received this Parent Kit?
 이 부모용 키트를 받으신 적이 있습니까?

CF36

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

QC09_F31 Did you use any of the materials from this Parent Kit?
 부모용 키트에 들어 있는 자료를 사용하셨습니까?

CF39

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

QC09_F32 On a scale of 1-10, with 10 being most useful and 1 the least, how useful was the Parent Kit?

10은 매우 유용, 1은 전혀 유용하지 않음을 뜻하는 1부터 10까지의 척도를 사용할 때, 부모용 키트는 얼마나 유용했습니까?

CF37

- _____RESPONDENT'S NUMBER FROM 1 (WORST) TO 10 (BEST)
- REFUSED.....-7
 - DON'T KNOW.....-8

Section G – Child Care, Neighborhood Cohesion

CHILD CARE

PROGRAMMING NOTE QC09_G1:

IF CAGE ≥ 7, DO NOT DISPLAY LAST SENTENCE OF FIRST PARAGRAPH

QC09_G1

These next questions are about childcare. By childcare we mean any arrangement where someone other than the parents, legal guardian, or stepparents takes care of (CHILD). {This includes preschool and nursery school, but not kindergarten.} 지금부터는 어린 애를 맡기는 데에 대해 여쭙어 보겠습니다. 애를 맡긴다는 건, 부모나 법적 보호자나 양부모가 아닌 다른 어떤 사람에 의하여 또는 다른 어떤 장소에서 {을/를} 돌보도록 하는 것입니다. 프리스쿨, 보육원, 유아원, 데이케어 센터 등은 여기에 포함되지만, 유치원은 빼고요.

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

현재 일주일에 10 시간 이상 {을/를} 정기적으로 맡겨 놓으십니까?

CG1

- YES1
- NO2 **[GO TO QC09_G10]**
- REFUSED -7 **[GO TO QC09_G10]**
- DON'T KNOW -8 **[GO TO QC09_G10]**

QC09_G2

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

{CHILD NAME /AGE/SEX} 이(가) 어린이 보육기관이나 부모 곁에서 지내는 시간은 평상시때 일주일에 총 몇 시간입니까? 모든 종류의 보육 방법을 포함하여 시간을 합산해 주십시오.

CG2

- _____ HOURS [SR: 10-168 HRS]
- REFUSED -7 **[GO TO QC09_G10]**
- DON'T KNOW -8 **[GO TO QC09_G10]**

PROGRAMMING NOTE QC09_G3:

IF QC09_G2 < 10 (HOURS IN CHILDCARE), GO TO QC09_G10;

ELSE CONTINUE WITH QC09_G3

QC09_G3

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

보통 주중에 {CHILD NAME/AGE/SEX}을 (를) 할아버지, 할머니 또는 다른 가족 구성원이 돌봐줍니까?

CG3A

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

**PROGRAMMING NOTE QC09_G4:
IF CAGE ≥ 7 YEARS, GO TO QC09_G6;
ELSE CONTINUE WITH QC09_G4**

QC09_G4 [Does (CHILD) receive childcare from]...a Head Start or state preschool program?
[{CHILD NAME /AGE/SEX} 을(를)]... [평상시 일주일에] 헤드 스타트(Head Start)나
주립 프리스쿨 프로그램에서 돌봐 줍니까?

CG3B

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

QC09_G5 [Does (CHILD) receive childcare from]...some other preschool or
nursery school?
[{CHILD NAME /AGE/SEX} 을(를)]... [평상시 일주일에] 다른 어떤 프리스쿨이나
보육원에서 돌봐줍니까?

CG3C

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

QC09_G6 [Does (CHILD) receive childcare from]...a childcare center that is not in someone's
home?
[{CHILD NAME /AGE/SEX} 을(를)]... [평상시 일주일에] 일반 가정집이 아닌 어린이
보육센터나 시설에서 돌봐 줍니까?

CG3D

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

QC09_G7 [Does (CHILD) receive childcare from]...a non-family member who cares for (CHILD) in
your home?
[{CHILD NAME /AGE/SEX} 을(를)]... [평상시 일주일에] 가족은 아니지만 {CHILD NAME
/AGE/SEX} 을(를) 아끼는 다른 사람이 귀하의 댁에 와서 돌봐 줍니까?

CG3E

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

QC09_G8 [Does (CHILD) receive childcare from]...a non-family member who cares for (CHILD) in his or her home?

{CHILD NAME /AGE/SEX}을(를)... [평상시 일주일에] 가족은 아니지만 {CHILD NAME /AGE/SEX}을(를) 아끼는 다른 사람이 자신의 집에서 돌봐 줍니까... ?

CG3F

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

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

QC09_G9 {Is this/Are all of these} child care provider{s} licensed by the state of California?
 그 탁아소나 아이를 돌봐주는 사람은 거주 주정부로부터 허가를 받은 분들입니까?

CG3G

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

QC09_G10 In the past 12 months, was there a time when you could not find childcare when you needed it for (CHILD) for a week or longer?
 지난 12 개월 동안, {CHILD NAME /AGE/SEX}에게 차일드 케어가 필요할 때 일주일 이상 찾지 못한 적이 있었습니까?

CG5

- YES1
- NO2 **[GO TO QC09_G12]**
- REFUSED -7 **[GO TO QC09_G12]**
- DON'T KNOW -8 **[GO TO QC09_G12]**

QC09_G11 What is the main reason you were unable to find childcare for (CHILD) at that time?
 그 당시에 {을/를} 맡길 보육 시설이나 사람을 구할 수 없었던 제일 중요한 이유가
 무엇이었습니까?

CG6

[IF NEEDED, SAY: “Main reason is the most important reason.”]

[IF NEEDED, SAY: “제일 중요한 이유란 물론 가장 중요한 이유 하나만을 말하는 겁니다.”]

- 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

NEIGHBORHOOD COHESION

PROGRAMMING NOTE QC09_G12:
IF CHILD-FIRST INTERVIEW AND NO AR OR IF QC09_G12 THROUGH QC09_G16 NOT ANSWERED
IN ADULT INTERVIEW, CONTINUE WITH QC09_G12;
ELSE SKIP TO QC09_G17

QC09_G12 These next questions are about your neighborhood.
 다음의 질문들은 귀하의 이웃에 관한 것입니다.

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

다음의 기술에 대해 동의하는 정도를 매우 동의, 동의, 부정, 매우 부정 중에서 선택해 주십시오.

People in my neighborhood are willing to help each other.
 내 이웃에 사는 사람들은 자발적으로 서로 돕는다.

CG39

[IF NEEDED, SAY: “Do you strongly agree, agree, disagree, or strongly disagree?”]

[IF NEEDED, SAY: “귀하가 동의하시는 정도는 매우 동의, 동의, 부정, 매우 부정 중에서 어느 것에 해당됩니까?”]

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

QC09_G13 People in my neighborhood do not get along with each other.
 내 이웃에 사는 사람들은 보통 서로 잘 지내지 #않는다.

CG40

[IF NEEDED, SAY: “Do you strongly agree, agree, disagree, or strongly disagree?”]
[IF NEEDED, SAY: “귀하가 동의하시는 정도는 매우 동의, 동의, 부정, 매우 부정 중에서 어느 것에 해당됩니까?”]

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

QC09_G14 People in this neighborhood can be trusted.
 내 이웃에 사는 사람들은 신뢰할 수 있다.

CG41

[IF NEEDED, SAY: “Do you strongly agree, agree, disagree, or strongly disagree?”]
[IF NEEDED, SAY: “귀하가 동의하시는 정도는 매우 동의, 동의, 부정, 매우 부정 중에서 어느 것에 해당됩니까?”]

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

QC09_G15 You can count on adults in this neighborhood to watch out that children are safe and don't get into trouble.

동네 어른들이 이 곳에 사는 아이들이 안전하게 놀며 아무 문제를 일으키지 않도록 잘 지켜 봐 주리라는 것을 기대할 수 있습니다.

CG34

[IF NEEDED, SAY: “Do you strongly agree, agree, disagree, or strongly disagree?”]
[IF NEEDED, SAY: “귀하가 동의하시는 정도는 매우 동의, 동의, 부정, 매우 부정 중에서 어느 것에 해당됩니까?”]

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

SAFETY

QC09_G16

Do you feel safe in your neighborhood all of the time, most of the time, some of the time, or none of the time?

이웃에 대해 어느 정도 안전하다고 느끼십니까? 항상, 대부분, 가끔, 전혀 안전하다고 느끼지 않음 중에서 선택해 주십시오.

CG42

- ALL OF THE TIME1
- MOST OF THE TIME2
- SOME OF THE TIME3
- NONE OF THE TIME4
- REFUSED -7
- DON'T KNOW -8

CIVIC ENGAGEMENT

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

QC09_G17

In the past 12 months, have you done any volunteer work or community service that you have not been paid for?

지난 12 개월 동안, 보수를 받지 않고 자원봉사 또는 지역사회 봉사를 한 적이 있습니까?

CG43

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

Section H – Demographics, Part II

RACE/ETHNICITY

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

저는 캘리포니아 주의 모든 인종 그룹에 속한 자녀들이 포함되었는지 확인하기 위해 마지막으로 {CHILD NAME/AGE/SEX}의 배경에 관한 몇 가지 질문을 드려야 합니다.

QC09_H1 Is (CHILD) Latino or Hispanic?
{CHILD NAME /AGE/SEX}은(는) 라티노 또는 히스패닉입니까?

CH1

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

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

QC09_H2 And what is {his/her} Latino or Hispanic ancestry or origin? – such as Mexican, Salvadorian, Cuban, Honduran – and if {he/she} has more than one, tell me all of them. 그리고 {he/she}는 어떤 라티노나 히스패닉계에 속합니까? 예를 들면, 멕시코인, 엘살바도르인, 쿠바인, 온두라스인 등입니다. 하나 이상에 해당되는 경우에는 모두 말씀해 주십시오.

CH2

[IF NECESSARY GIVE MORE EXAMPLES] [CODE ALL THAT APPLY]

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

PROGRAMMING NOTE QC09_H3:
IF QC09_H1 = 1 (YES-CHILD IS LATINO), DISPLAY, “You said your child is Latino or Hispanic. Also,”
IF MORE THAN ONE RACE GIVEN, AFTER ENTERING RESPONSES FOR QC09_H3, CONTINUE WITH PROGRAMMING NOTE QC09_H4;
ELSE FOLLOW SKIPS AS INDICATED FOR SINGLE RESPONSES

QC09_H3 {You said your child is Latino or Hispanic. Also,} Please tell me which one or more of the following you would use to describe (CHILD): Would you describe {him/her} as Native Hawaiian, Other Pacific Islander, American Indian, Alaska Native, Asian, Black, African American, or White?
 또한 {CHILD NAME /AGE/SEX}이(가) 다음의 인종 중 어느 것 하나 #이상\에 속하는지를 말씀해 주십시오. {CHILD NAME /AGE/SEX}은(는) 하와이 원주민, 기타 태평양 섬 주민, 아메리칸 인디언, 알래스카 원주민, 아시아인, 흑인, 아프리카계 미국인 또는 백인 중에서 어느 인종에 속하십니까?

CH3

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

[CODE ALL THAT APPLY]

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

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

QC09_H4 You said American Indian/Alaska Native, and what is (CHILD)'s tribal heritage? If {he/she} has more than one tribe, tell me all of them.
 미국 인디언이나 알래스카 인디언이라고 말씀하셨는데요, {}이(가) 어떤 부족에 속하니까? {}이(가) 하나 이상의 부족에 속하는 경우, 모두 말씀해 주십시오.

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 [Ask for spelling] (SPECIFY: _____) ... | 91 |
| REFUSED..... | -7 |
| DON'T KNOW..... | -8 |

QC09_H5 Is (CHILD) an enrolled member in a federally or state recognized tribe?
 (CHILD NAME /AGE/SEX)은 연방정부나 주정부에 알려진 부족으로 정식 등록되어
 있습니까?

CH5

- YES1
- NO.....2 **[GO TO QC09_H8]**
- REFUSED -7 **[GO TO QC09_H8]**
- DON'T KNOW -8 **[GO TO QC09_H8]**

QC09_H6 In which Tribe is (CHILD) enrolled?
 {}이/가 어느 부족에 등록되어 있습니까? ()

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

QC09_H7 Does (CHILD) get any health care services through the Indian Health Service, a Tribal Health Program, or an Urban Indian clinic?
 (CHILD NAME /AGE/SEX)가 인디언 건강 서비스, 특정 부족을 위한 건강 프로그램, 또는 도시거주 인디언 보건소를 통해 혜택을 받고 계십니까?

CH6A

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

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

QC09_H8 You said Asian, and what specific ethnic group is {he/she}, such as Chinese, Filipino, Vietnamese? If {he/she} is more than one, tell me all of them.
 아시안이라고 말씀하셨는데요, 중국계라던지, 필리핀계, 또는 베트남계 등, 정확히 어느 민족이십니까? 한 가지 이상이면, 전부 말씀해 주십시오.

CH7

[CODE ALL THAT APPLY]

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

**PROGRAMMING NOTE QC09_H9:
 IF QC09_H3 = 5 (PACIFIC ISLANDER) CONTINUE WITH QC09_H9;
 ELSE GO TO QC09_H10**

QC09_H9

You said (CHILD) is Pacific Islander. What specific ethnic group is {he/she}, such as Samoan, Tongan, or Guamanian? If {he/she} is more than one, tell me all of them.
 귀하는{CHILD NAME /AGE/SEX}이(가) 태평양 섬 주민이라고 말씀하셨습니다.
 {그/그녀}가 속한 인종 그룹을 사모아인, 통가인 또는 괌인 같이 구체적으로 말씀해
 주시겠습니까? {/}두 가지 이상의 인종 그룹에 속하는 경우에는 해당되는 인종 그룹을 모두
 말씀해 주십시오.

CH7A

[CODE ALL THAT APPLY]

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

COUNTRY OF BIRTH

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

QC09_H10 In what country was (CHILD) born?
 {}이/가 어느 나라에서 출생했습니까?

CH8

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

CITIZENSHIP, IMMIGRATION STATUS, YEARS IN THE US

PROGRAMMING NOTE QC09_H11:

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

QC09_H11 Is (CHILD) a citizen of the United States?
(CHILD NAME /AGE/SEX)는 미국 시민권자입니까?

CH8A

- YES1 **[GO TO QC09_H13]**
- NO.....2
- APPLICATION PENDING3
- REFUSED -7
- DON'T KNOW -8

QC09_H12 Is (CHILD) a permanent resident with a green card?
(CHILD NAME /AGE/SEX)는 영주권자이십니까?

CH9

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

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

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

QC09_H13 About how many years has (CHILD) lived in the United States?
{CHILD NAME /AGE/SEX}은(는) 대략 몇 년 동안 미국에 살았습니까?

CH10

[FOR LESS THAN A YEAR, ENTER 1 YEAR]

_____ NUMBER OF YEARS {OR}

CH10YR

_____ YEAR FIRST CAME TO LIVE IN U.S.

CH10FMT

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

COUNTRY OF BIRTH (MOTHER)

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

QC09_H14 In what country {were you/was his mother/was her mother} born?
 {CHILD NAME /AGE/SEX}의 어머니는 어느 국가에서 태어났습니까?

CH11

[SELECT FROM MOST LIKELY COUNTRIES]

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

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

CITIZENSHIP, IMMIGRATION STATUS, YEARS IN THE US (MOTHER)

PROGRAMMING NOTE QC09_H15 AND QC09_H16:
IF QC09_H14 = 1, 2, 9, 22, OR 26 (UNITED STATES OR ITS TERRITORIES), GO TO PROGRAMMING NOTE QC09_H18;
ELSE CONTINUE WITH QC09_H15 AND IF RESPONDENT IS MOTHER OF CHILD DISPLAY “Are you”;
ELSE DISPLAY “Is {his/her} mother”

QC09_H15 {Are you/Is {his/her} mother} a citizen of the United States?
 귀하는 미국 시민권자이십니까?

CH11A

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

- YES1 **[GO TO QC09_H17]**
- NO.....2
- APPLICATION PENDING3
- REFUSED-7
- DON'T KNOW-8

QC09_H16 {Are you/Is {his/her} mother} a permanent resident with a green card?
 귀하께서는 그린카드를 소지한 영주권자이십니까?

CH12

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

PROGRAMMING NOTE QC09_H17:
IF RESPONDENT IS MOTHER OF CHILD, CONTINUE WITH QC09_H17 AND DISPLAY “have you”;
ELSE CONTINUE WITH QC09_H17 AND DISPLAY “has {his/her} mother”

QC09_H17 About how many years {have you/has {his/her} mother} lived in the United States?
 {CHILD NAME /AGE/SEX}의 어머니는 대략 몇 년 동안 미국에 살았습니까?

CH13

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

CH13YR

_____ YEAR FIRST CAME TO LIVE IN U.S.

CH13FMT

- NUMBER OF YEARS1
- YEAR FIRST CAME TO LIVE IN US2
- MOTHER DECEASED3
- NEVER LIVED IN U.S.4
- REFUSED-7
- DON'T KNOW-8

COUNTRY OF BIRTH (FATHER)

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

QC09_H18 In what country {were you/was his father/was her father} born?
 {CHILD NAME /AGE/SEX}의 아버지는 어느 국가에서 태어났습니까?

CH14

[SELECT FROM MOST LIKELY COUNTRIES]

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

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

CITIZENSHIP, IMMIGRATION STATUS, YEARS IN THE US (FATHER)

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

QC09_H19 {Are you/Is {his/her} father} a citizen of the United States?
 귀하는 미국 시민권자이십니까?

CH14A

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

YES	1	[GO TO PN QC09_H21]
NO	2	
APPLICATION PENDING	3	
REFUSED	-7	
DON'T KNOW	-8	

QC09_H20 {Are you/Is {his/her} father} a permanent resident with a green card?
 귀하께서는 그린카드를 소지한 영주권자이십니까?

CH15

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

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

QC09_H21 About how many years {have you/has {his/her} father} lived in the United States?
 {CHILD NAME /AGE/SEX}의 아버지는 대략 몇 년 동안 미국에 살았습니까?

CH16

_____ NUMBER OF YEARS [HR: 0-AGE]

{OR}

CH16YR

_____ YEAR FIRST CAME TO LIVE IN U.S.

CH16FMT

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

LANGUAGES SPOKEN AT HOME

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

QC09_H22 In general, what languages are spoken in (CHILD)'s home?
 {CHILD NAME/AGE/SEX}의 가정에서는 대체로 어떤 언어들이 사용됩니까?

CH17

[PROBE: "Any others?"]
[PROBE: "또 다른 언어는요?"]

- ENGLISH1
- SPANISH2
- CANTONESE.....3
- VIETNAMESE4
- TAGALOG.....5
- MANDARIN6
- KOREAN7
- ASIAN INDIAN LANGUAGES.....8
- RUSSIAN9
- OTHER1 (SPECIFY:_____) 91
- OTHER2 (SPECIFY:_____) 92
- REFUSED -7
- DON'T KNOW -8

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

QC09_H23 {Compared to other languages spoken in (CHILD)'s home,} would you say you speak English....
 귀하께서는 영어를 어느 정도나 하신다고 생각하십니까? 다음 중 선택해 주십시오.

CH18

- Very well,.....1
- Fairly well,2
- Not well, or3
- Not at all?4
- REFUSED -7
- DON'T KNOW -8

EDUCATION OF PRIMARY CARETAKER

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

QC09_H24 What is the highest grade of education you have completed and received credit for?
 공식적으로 이수하신 최종 학력은 어떻게 되시죠?

CH22

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

FOLLOW-UP AND CLOSE

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

QC09_H25 Those are my final questions. I appreciate your patience. Finally, do you think you would be willing to do a follow-up to this survey some time in the future?
이것이 저의 마지막 질문입니다. 시간을 내주셔서 감사합니다. 마지막으로, 나중에 이 설문조사에 대한 후속 조사에 참여해 주시겠습니까?

CG38

- YES1
- MAYBE/PROBABLY YES2
- DEFINITELY NOT3
- REFUSED -7
- DON'T KNOW -8

END Thank you. You have helped with a very important statewide survey. If you have any questions, you can contact Dr. Brown, the Principal Investigator. Do you want that number? **[IF YES, SAY:** Dr. Brown can be reached toll-free at 1-866-275-2447. **IF NO, SAY:** Goodbye.]
시간을 내 협조해 주셔서 대단히 감사합니다. 아주 중요한 건강 관련 설문 조사를 하는 데 큰 도움이 되었습니다 이 연구에 대해 질문이 있으시면 책임 연구자인 E. Richard Brown 의사에게 연락하십시오. Brown 의사에게 연락하시려면 무료 전화 1-866-275-2447 로 전화하십시오. 감사합니다, 안녕히 계십시오.