NATIONAL SURVEY OF **EARLY CARE & EDUCATION** | **2019**

Household Questionnaire

November 2019, Revised December 2021

2019 National Survey of Early Care and Education Household Questionnaire

OPRE Report 2019-118

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Questionnaire Key

Skip Patterns:

1. Simple skip patterns are identified with an arrow immediately following a response option, as in the example below:

A8A.
Is your program for profit, not for profit, or is it run by a government agency?

1. FOR PROFIT → SKIP TO A9
2. NOT FOR PROFIT
3. RUN BY A GOVERNMENT AGENCY
4. OTHER, SPECIFY: _____

2. More complex skip patterns are identified with a bordered box, as in the example below. Skip Logic Boxes are titled in **bold** and numbered using the following naming convention: [Section]_S_[Sequential count].

Skip Logic Box A_S_1:
IF A8A = 1 OR 2 ("FOR PROFIT" OR "NOT FOR PROFIT"), ASK A9
ELSE, SKIP TO A11.

Loops:

A loop is a series of questions that are asked iteratively about one or more entities, for example, a series of personal characteristics asked about each child in the household. The loop's questions appear once in the questionnaire, with skip instructions that indicate when the series starts and ends and for which entities the loop is asked. Sometimes one loop is nested within another.

1. Loop patterns are identified with a broken-line bordered box, as in the example below. All loops are bookended with a boxes designated as 'Start of…' and 'End of…' Loop. Loop boxes are titled in *italics* and numbered using the following naming convention: [Section]_L_[Sequential count].

Start of B_L_1 Loop (**BL1*):
REPEAT B1_5 – B1_5H FOR EACH AGE GROUP = 1 (HAVE A RATE IN B1_3A)

2. All questionnaire items within a loop are identified with a truncated loop title, preceded by a '*' and formatted *in italics* with blue font. A single questionnaire item may be included in none, one, or multiple loops and will be identified accordingly in the questionnaire with zero, one, or multiple loop titles.

B1_5C. **BL1*
How many hours per week does that cover?

_____

Variable names:

Variables in public-use data files are identified throughout the questionnaire, as in the examples below. Raw variables are prefixed with a "RV:" and formatted with orange font. Derived variables are prefixed with a "DV:" and formatted with green font. For a more detailed explanation of raw and derived variables, please refer to Section 3 of the User's Guide. Raw variables are generally listed once next to the questionnaire item used as their source. Derived variables are listed next to all the questionnaire items used as sources. For example, if a derived variable uses two questionnaire items as sources (e.g. one as numerator and one as denominator), the name of that derived variable will be identified next to each of these two questionnaire items.

B6. RV: CB9_SCHDL_WKS_PER_YEAR

How many weeks per year does your program provide care for children under age 13?

_____ Number of weeks

B5c. DV: CB9_SCHDL_VARY_PAY; DV: CB9_SCHDL_FLEX_HRS

Does your program permit parents to pay for and use varying numbers of hours of care each week?

1. YES, AT THEIR CONVENIENCE
2. YES, FROM A SET OF SCHEDULE OPTIONS
3. YES, BEYOND A MINIMUM NUMBER OF HOURS
4. NO → SKIP TO B6

Ranges:

Numeric open-ended responses throughout the questionnaire, such as number of years or weeks, have a pre-assigned lower and upper limit in the computerized questionnaire to minimize error. These ranges are shown directly beneath such open-ended responses, as in the example below. Ranges are prefixed with "RANGE:" in all caps and formatted with purple font.

B5d.

How many of the children in your program have variation in the number of paid hours of care each week?

_____ Number of children

RANGE: 0-999

Programmatic fills:

Some questions have customized text that is programmatically filled during computerized administration. A descriptor of the customized text is indicated, and users can tell that customized rather than generic text was visible during the interview because the text is bracketed and in CAPS. Programmatic fills within the questionnaire are contained within brackets […], as in the example below. The fill text within the brackets provides a brief description of what the fill is.

A2G9a. **AL1 *AL2*

In the past 12 months, has he/she contributed $500 or more for [CHILD NAME]'s basic needs, for example, food, clothing, or medical expenses?

1. Yes
2. No
3. DK/REF

Overview of 2019 NSECE Household Questionnaire and Changes from 2012 NSECE Questionnaire

2019 Category	2019 Construct	Page #s	Key changes from 2012 to 2019
Section A: Child Demographics	Number of children under age 6 living in household	A-1	Initial report on the total number of children living in the household was separated into two age groups: under 6 and six to thirteen Additional item about non-resident parent's financial contributions to child's basic needs Exclusion of item regarding work status of non-resident parent
	Number of children ages 6 to 13 living in household	A-1	
	Roster of each child under age 13 in household	A-2	
	Sex of each child in household	A-2	
	Dates of birth for each child in household	A-2	
	Country of birth for each child in household	A-2	
	Ethnicity of each child in household	A-4	
	Race of each child in household	A-5	
	Respondent's relationship to each child	A-5	
	Presence of each child's parent in the household	A-5	
	Physical, emotional, developmental, or behavioral condition for each child that affects care provided	A-5	
	Identification of children with non-resident parent(s)	A-6	
	Location of non-resident parent(s)	A-6	
	Educational attainment of non-resident parent(s)	A-7	
	Number of times non-resident parent(s) visited child in last 12 months	A-7	
	Whether non-resident parent(s) has contributed $500 or more to child in last 12 months	A-7	
	Identification of additional nonresident parents	A-7	
Section B: Respondent and Household Adults Demographics	Number of individuals over 13 years old living in household	B-1	Additional item regarding relationships in households with more than 2 parents Addition of three items regarding guardianship of children and relationship between parents in households with more than two parents to any children in the household Item about ethnicity was edited to reflect current OMB guidelines
	Roster of household members over 13	B-1	
	Age of each household member over 13	B-1	
	Sex of each household member over 13	B-1	
	Respondent's relationship to each household member over 13	B-2	
	Whether each household member has any children living in household for	B-2	
	Identification of each household member's children living in the household	B-2	
	Household member cares for children in household	B-3	
	Educational attainment of each household member over 13	B-3	
	Ethnicity of each household member over 13	B-3	
	Race of each household member over 13	B-4	
	Country of birth for each household member over 13	B-4	

2019 Category	2019 Construct	Page #s	Key changes from 2012 to 2019
	Year each household member first came to U.S.	B-6	
	Identification of any guardian for children in the household with no reported parents	B-7	
	Formality of guardian arrangement	B-7	
	Description of relationship between parents in the household with more than two parents present	B-7	
	Language usually spoken in household	B-7	
	Any relatives living nearby	B-8	
	Any nearby relative able to regularly care for children at no cost	B-8	
	Any nearby relative able to regularly care for children if paid	B-9	
Section C: Child Care: Types and Hours	Roster of individuals and organizations that cared for each child last week	C-1	Edits in reference period for surveys completed during the summer, from last week to typical week in May Additional items regarding care provided by individuals that refer to key characteristics of home-based providers captured in the home-based provider survey Additional item regarding child's age when regular care was first provided Additional items confirming child was cared for by specific organizational providers: - Head Start/Public Pre-K status for children under 6 in center-based care - Kindergarten for 5 year olds in center-based care - Elementary or middle school for children 5 and older
	Detailed schedule of non-parental care for each child last week	C-3	
	Identification of non-parental care providers who regularly care for child but did not care for child last week	C-7	
	Location of non-parental care for each regular, but not last week provider	C-7	
	Number of hours per week each regular, but not last week provider, usually cares for a child	C-8	
	Whether provider is individual or organization	C-10	
	Any respondent prior personal relationship to provider	C-10	
	Respondent's type of relationship to provider	C-11	
	Whether provider cares for 4 or more children	C-11	
	Whether provider receives any payment for caring for children	C-11	
	Whether respondent providers anything other than money to provider and frequency	C-11	
	Provider lives or provides care in household	C-12	
	Linkage of specific providers mentioned to nearby providers	C-12	
	Location of provider	C-12	
	Method of transportation to provider	C-14	
	Person responsible for taking child to provider	C-14	
	Any language difficulty speaking with provider	C-14	
	Provider offers single type of activity	C-14	
	Provider offers care on a drop-in basis	C-15	
	Provider regularly cares for child (at least 5 hours each week)	C-15	
	Age of child when provider began caring for them	C-15	
	Child enrolled in kindergarten	C-15	
	Child enrolled in Head Start or Public PreK	C-16	

2019 Category	2019 Construct	Page #s	Key changes from 2012 to 2019
	Provider is a school	C-16	
	Hours of the regular school day	C-16	
	Perception of specific types of care: nurturing environment	C-17	
	Perception of specific types of care: child prepared for school	C-17	
	Perception of specific types of care: child taught to get along with others	C-17	
	Perception of specific types of care: safe environment	C-18	
	Perception of specific types of care: affordable care	C-18	
	Perception of specific types of care: flexibility for parent	C-18	
Section D: Respondent and spouse employment schedules	Respondent/spouse/relevant HHM worked for pay last week	D-1	Content of section remains the same, but 2019 questionnaire only ask adult calendar to parents of any children in the household, excluding resident adult caregivers as eligible respondents Addition of item(s) regarding household member commute duration and move of transportation (once per adult) Edits in reference period for surveys completed during the summer, from last week to typical week in May
	Respondent/spouse/relevant HHM attended high school or college last week	D-1	
	Respondent/spouse/relevant HHM attended courses or training programs last week	D-1	
	Detailed schedule of work/school/training for each respondent/spouse/relevant HHM last week	D-2	
	Reconciliation of adult and child calendar to identify gaps in child care	D-4	
	Location where relevant HHM works most hours each week	D-4	
	How relevant HHM gets to work	D-5	
	How long it takes relevant HHM to get to work	D-5	
	How far in advance does relevant HHM know their work schedule	D-6	
	Did relevant HHM work a usual schedule last week	D-6	
	Occupation and industry of relevant household member	D-6	
	Current wage of relevant household member	D-6	
	Relevant household member ever worked for pay	D-7	
	Last job held by relevant household member	D-7	
	When last job was held by relevant household member	D-7	
	Hours worked each week at last job by relevant household member	D-7	
	Wage received at last job for relevant household member	D-8	
	Number of days last month a parent worked from home for a child care related reason	D-8	

2019 Category	2019 Construct	Page #s	Key changes from 2012 to 2019
	Number of work days missed in the last 3 months	D-9	
	Number of work days missed because child care provider was unavailable in the last 3 months	D-9	
	Number of work days missed because child was sick in the last 3 months	D-9	
	Any wages lost by respondent/spouse/HHM for missed work	D-9	
	Number of days late to work/left early in the last 3 months	D-9	
	Number of days late to work/left early for child care reasons in the last 3 months	D-9	
	Any wages lost by respondent/spouse/HHM for being late to work/leaving early	D-10	
	Number of days special child care arrangements made in the last 3 months because of unavailable provider	D-10	
	Number of days special child care arrangements made in the last 3 months because of any other reason	D-10	
	Respondent/spouse participates in flexible spending account at work	D-10	
Section J: Child Care Payment and Subsidy to Each Provider	Any payment from parent for each child care arrangement	J-1	Key content of this section is similar to what was asked in section E in 2012, but skip patterns are substantially modified so that more provider-child arrangements are eligible to answer items regarding subsidies, participation in Head Start/Pre-K, use of providers' sliding scale, and copayments. Change to skip patterns also allowed respondents to report cost information on children who use ECE providers located in public schools (e.g. preschool located in a K-8 school). Questions regarding subsidy receipt were only be asked to HHs that are likely be below 200 FPL To detect any payment from parent, item was rephrased so
	Amount parent pays for each child care arrangement	J-1	
	Child care provider paid for by someone/someplace else for each child care arrangement	J-2	
	Specific organizations/individuals who pay provider for each child care arrangement	J-2	
	Child care arrangement is free	J-3	
	Any payments or reimbursements paid to household for care at provider	J-3	
	Amount of payments/reimbursements paid directly to household for care at provider	J-3	
	Identification of who makes payments/reimbursements to household	J-3	
	Child care arrangement relies on sliding fee scale	J-4	
	Amount paid to provider is a subsidy co-pay	J-4	
	Proof of employment, in school, or in training required to enroll child in provider	J-5	
	Any assistance from a child subsidy program to pay provider for care.	J-5	
	Payment info for provider includes other children	J-5	

2019 Category	2019 Construct	Page #s	Key changes from 2012 to 2019
	Identification of other children included in provider payment information	J-6	that question asks if household pays anything directly for the care of each child rather than asking if the provider charges anything to the parents Exclusion of items regarding non-monetary pay given to providers
Section F: Non-parental Child Care Search	Date when respondent last searched for child care for selected child	F-1	2012 content remained the same, but random selection of child for whom last search for child care occurred was revised to favor young children.
	Last search included child care search for another child at same time	F-2	
	Main reason respondent initiated search for child care	F-2	
	Type of child care mostly used at time of last child care search	F-2	
	Importance of different aspects of non-parental care for selected child: Nurturing environment; educational preparedness; social interactions; safety; affordability; flexibility for parents	F-3	
	One or more than one provider considered during last child care search	F-4	
	Type of non-parental care provider(s) considered	F-4	
	How respondent learned of considered provider	F-4	
	Method(s) used by respondent to search for providers	F-5	
	Type(s) of information respondent collected about providers during search	F-5	
	Rate charged for care from considered provider(s)	F-6	
	Travel time to considered provider(s)	F-7	
	How well did considered providers' schedule cover needed hours of care	F-7	
	Respondent's overall quality rating for considered provider(s)	F-7	
	Any child care centers or organizations for school age children considered	F-8	
	Respondent considered someone they had a prior relationship with to care for child	F-8	
	Respondent considered home-based care from someone with no prior relationship to respondent	F-8	
	Result of child care search	F-8	
	Provider chosen after search (if two listed)	F-9	
	Main reason for choosing child care provider	F-9	

2019 Category	2019 Construct	Page #s	Key changes from 2012 to 2019
Section G: Household characteristics	Respondent/spouse/partner housing tenure	G-1	Rewording of Item measuring receipt of public assistance to specify TANF and SSI. Additional items about household receipt of Child Care subsidies in past 12 months, duration of subsidy receipt, and reason receipt of subsidies ended Additional items about household internet access.
	Car ownership	G-1	
	Total household income last month	G-1	
	Total household income last calendar year	G-2	
	Number of different job earners included in last year's total income	G-3	
	Any sources of income beyond job earnings included in last year's total income	G-4	
	Amount of last year's household income from sources other than job earnings	G-4	
	Any public assistance or welfare payments in last calendar year	G-4	
	Type of health insurance coverage for selected child	G-4	
	Number of respondent's other children under 13 with health insurance coverage	G-5	
	Level of food insecurity in household	G-5	
	Types of food assistance currently received	G-6	
	Any household members receive child care subsidies in last 12 months	G-6	
	Number of months in the past year a household member received child care subsidies	G-6	
	Main reason child care subsidies ended	G-6	
	Ability to borrow $500 from someone/someplace for 3 months	G-7	
	Any internet access in the home	G-7	
	Device used for internet access	G-7	
Section H: Parental Consent to Access Administrative Records	Confirmation respondent is able to authorize release of records for eligible children	H-1	
	If respondent is not able to provide authorization: Name and contact information of person able to authorize release of records for eligible children	H-1	
	Respondent is asked to grant permission to access administrative records for eligible children	H-1	
	Roster and date of birth for every child under 13 in the household for whom respondent gives permission	H-2	
	Full name of authorizing adult	H-3	
	Confirmation of household's address	H-3	

NATIONAL SURVEY OF **EARLY CARE & EDUCATION** | **2019**

Household Screener

Household Screener

S_INTRO.
Hello, my name is [NAME] and I'm from NORC at the University of Chicago. We're conducting a study sponsored by the U.S. Department of Health and Human Services about the supply and demand for social and educational services in your community. This will take about six minutes. Participation is voluntary and your responses will be kept private. May I speak to someone living in this household who is 18 years or older and is knowledgeable about the household?

1. Knowledgeable person 18 years or older available to talk →ASK S1
2. Knowledgeable person 18 years or older, but not available now → SHOW SCREEN THAT SAYS "INTERVIEWER: MAKE APPOINTMENT TO CALL/COME BACK"
3. No one in the household is 18 years or older → TERMINATE
4. DK/REF → SHOW SCREEN THAT SAYS "INTERVIEWER: MAKE APPOINTMENT TO CALL/COME BACK"

S1.
First, I'd like to know how many children under 6 years of age are living in your household?
Number of children under 6:_____

S1_1.
How many children between 6 and 13 years old live in this household?
Number of children between 6 and 13:_____

S1_2.
Do you personally regularly look after any children under age 13 who are not your own?
IF NEEDED: By regularly I mean five hours a week or more.

1. YES
2. NO

S1_3.
Does any other adult 18 years or older living in this household regularly look after any children under age 13 who are not his or her own?
IF NEEDED: By regularly I mean five hours a week or more.

1. YES
2. NO

IF S1_2 =1 AND/OR S1_3=1, ASK S1_4. ELSE, SKIP TO SKIP LOGIC BOX SC_S_1

S1_4.
Are children being looked after in someone's home or in a school or child-care center?

1. HOME
2. SCHOOL OR CENTER
3. BOTH
4. DK/REF

IF S1_3=1 AND S1_4 = (1 OR 3), ASK S1_5 A-C.
ELSE, SKIP TO SKIP LOGIC BOX SC_S_1

S1_5.
Please tell me the names of individuals 18 years or older living in this household, including yourself, who regularly look after children under age 13 who are not their own.
IF NEEDED: I am only interested in people looking after children in someone's home, not in a center or school.

a. _____
b. _____
c. _____

IF S1_2 =1 (YES) AND S1_3=2 (NO/BLANK) AND S1_4 = (1 OR 3)
What is your name?
d. _____

Skip Logic Box SC_S_1:
IF BOTH S1 AND S1_1=0 AND (NO PERSON MENTIONED IN S1_5A-S1_5D), ASSIGN ELIGIBILITY FLAG SO HH_ELIG=0 AND GO TO "END."
ELSE, GO TO "CREATE ELIGIBILITY FLAGS" RULES.

END.
We are looking for households with young children and people who provide home-based care to young children. Thanks very much for your time.

CREATE ELIGIBILITY FLAGS
HOUSEHOLD ELIGIBILITY: HH_ELIG FLAG RULES

- IF S1 >0, HH_ELIG=1.
- IF S1 =0 AND S1_1>0, CHECK RANDOM NUMBER TO DETERMINE WHETHER HOUSEHOLD IS SUB-SAMPLED IN OR OUT OF HOUSEHOLD INTERVIEW. IF SUB-SAMPLED FOR HOUSEHOLD INTERVIEW THEN HH_ELIG=2, IF SUBSAMPLED OUT THEN HH_ELIG=3.
    - IF THE CASE IS SUBSAMPLED OUT (HH_ELIG=3) GO TO S5_3.
- IF S1 =0 AND S1_1=0, HH_ELIG=0.

HOME-BASED (UNLISTED) ELIGIBILITY: HB_ELIG FLAG RULES

- IF S1_5 =NOT NULL, HB_ELIG=1.
- IF S1_5 =NULL, HB_ELIG=0.
- IF ADMINDUP PRELOAD=1 (1=CASE ON ADMIN LIST FOR LISTED HB PROVIDERS, 0=CASE IS NOT ON ADMIN LIST), HB_ELIG=2.

IF TELEPHONE INTERVIEW AND:
HH_ELIG=1 OR HB_ELIG=1, THEN ASK S1_6.
IF PERSONAL INTERVIEW, GO TO INSTRUCTION BEFORE S2A.

S1_6.
May I verify that you live at (ADDRESS)?

- YES → SKIP TO INSTRUCTIONS ABOVE S2A
- NO → ASK S1_7
- DON'T KNOW/REFUSED → ASK S1_7

S1_7.
May I know your street address?

ADDRESS: _____
CITY:_____
STATE:_____
ZIP:_____

IF HH_ELIG=1, AND HB_ELIG=0, ASK S2a.

IF HH_ELIG=0 AND HB_ELIG=1 AND:

- IF ADDRESS APPEARS IN PROVIDER SAMPLING FRAME, GO TO S5_3 AND TERMINATE. DO NOT SPAWN FOR HOME-BASED QUESTIONNAIRE.
- IF ADDRESS DOES NOT APPEAR IN THE PROVIDER SAMPLING FRAME, AND IF S1_5 HAS ONLY ONE NAME, GO TO S5. INTERVIEWER WILL USE SCREENER TO PURSUE HOME-BASED RESPONDENT. CASE DOES NOT GET HOUSEHOLD QUESTIONNAIRE, BUT DOES SPAWN HOME-BASED QUESTIONNAIRE.
- IF ADDRESS DOES NOT APPEAR IN THE PROVIDER SAMPLING FRAME, AND IF S1_5 HAS MORE THAN ONE NAME, RANDOMLY SELECT ONE HOME-BASED PROVIDER IN HOUSEHOLD FROM S1_5 THEN GO TO S5.

IF HH_ELIG=1 AND HB_ELIG=1 AND:

- IF ADDRESS APPEARS IN PROVIDER SAMPLING FRAME, GO TO S2A TO COMPLETE SCREENER. CASE WILL GET HOUSEHOLD QUESTIONNAIRE BUT DO NOT SPAWN FOR HOME-BASED QUESTIONNAIRE.

- IF ADDRESS DOES NOT APPEAR IN THE PROVIDER SAMPLING FRAME, AND IF S1_5 HAS ONLY ONE NAME, GO TO S2A. INTERVIEWER WILL USE SCREENER TO PURSUE HOUSEHOLD RESPONDENT. CASE GETS BOTH HOUSEHOLD QUESTIONNAIRE AND SPAWNS HOME-BASED QUESTIONNAIRE (HB R IS THE NAME THAT WAS ENTERED IN S1_5).
- IF ADDRESS DOES NOT APPEAR IN THE PROVIDER SAMPLING FRAME, AND IF S1_5 HAS MORE THAN ONE NAME, RANDOMLY SELECT ONE HOME-BASED PROVIDER IN HOUSEHOLD FROM S1_5 THEN GO TO S5 (HB R IS THE NAME THAT WAS RANDOMLY SELECTED).

S2a.

Is the parent/guardian of the youngest child in the household at least 18 years of age?

- YES → ASK S2
- NO → SKIP TO S3
- PARENT/GUARDIAN DOES NOT LIVE IN HOUSEHOLD → SKIP TO S3
- DK/REF → SKIP TO S3

S2.

May I speak to the parent/guardian of the youngest child in the household?

1. ALREADY SPEAKING WITH PARENT/GUARDIAN → SKIP TO S5_2
2. PARENT/GUARDIAN AVAILABLE → SKIP TO S5_2
3. PARENT/GUARDIAN LIVES IN HOUSEHOLD, NOT AVAILABLE AT THIS TIME → CALL BACK
4. PARENT/GUARDIAN NOT AVAILABLE DURING SURVEY PERIOD → ASK S3
5. PARENT/GUARDIAN DOES NOT LIVE IN HOUSEHOLD → ASK S3
6. DON'T KNOW/REFUSED → ASK S3

S3.

Is there anyone available at this time who is 18 years or older and knows how the youngest child spends his or her day?

1. YES → ASK S4
2. NO, NOT AVAILABLE → SHOW "INTERVIEWER: MAKE AN APPOINTMENT TO CALL BACK."
3. DON'T KNOW/REF → SHOW "INTERVIEWER: MAKE AN APPOINTMENT TO CALL BACK."

S4.

May I speak with him/her please?

1. YES → ASK S5_2
2. NO → SHOW "INTERVIEWER: SCHEDULE A CALL BACK TO CONDUCT HOUSEHOLD QUESTIONNAIRE."
3. DON'T KNOW/REF → SHOW "INTERVIEWER: SCHEDULE A CALL BACK TO CONDUCT HOUSEHOLD QUESTIONNAIRE."

S5.

May I speak to [SELECTED UNLISTED HOME-BASED PROVIDER]?

1. YES, ARE AVAILABLE → S5_2_END

2. NO, ARE NOT AVAILABLE AT THIS TIME → SHOW "INTERVIEWER: SCHEDULE A CALL BACK."
3. NO, ARE NOT AVAILABLE DURING SURVEY PERIOD → SELECT ANOTHER PROVIDER IF MORE THAN ONE PERSON IS MENTIONED IN S1_5 AND ASK S5 AGAIN. OTHERWISE, SKIP TO S5_3 AND TERMINATE.

S5_2.
Thank you very much. We'd like to ask some questions about the child care resources you use. Please give me one minute while I pull up the questionnaire.

S5_2_END.
Thank you very much. We'd like to ask some additional questions about your/their experiences looking after children. Please give me one minute while I pull up the questionnaire.

S5_3.
Thank you very much for your time. That is all I have. TERMINATE AND DO NOT SPAWN FOR HOME-BASED QUESTIONNAIRE (COMPLETED SCREENER).

Mail Household Screener

National Survey of Early Care and Education

If you have any questions, please call 1-877-778-2973

We are conducting an important study to learn about young children in your community and who cares for them when they are not with their parents. This information will help inform school districts, state and federal agencies, and private organizations in their efforts to improve access to quality child care for all children. This study is sponsored by the U.S. Department of Health and Human Services (DHHS). Please have an adult (18 years or older) who lives in this household answer the following questions. They will take only about six minutes, and your participation is voluntary. Your information will be kept private and used only for statistical purposes. If you have any questions or would prefer to answer these questions by phone, please call toll-free at 1-877-778-2973.

Q1. First, how many adults (18 years and older) live in this household?

_____*NUMBER OF ADULTS*

Q2. How many children under the age of 6, including babies, live in this household?

_____*NUMBER OF CHILDREN*

Q3. How many children between 6 and 13 years old live in this household?

_____*NUMBER OF CHILDREN*

Q4. Do you regularly look after any children under age 13 who are not your own for 5 hours a week or more? Please include children you may live with as well as children from other households.

1. YES
2. NO → SKIP TO Q6.

Q5. Do you look after those children in someone's home or in a school or child-care center?

1. Home
2. School or center
3. Both

Q6. Not including yourself, how many other adults in the household, if any, regularly look after any children under age 13 who are not his or her own, for 5 hours a week or more? Again, please include looking after children in this household.

_____Number of adults → ASK Q7.

IF Q6=0, THEN SKIP TO Q8

Q7. Do they look after children in someone's home or in a school or child-care center?

1. Home
2. School or center
3. Both

Q8. Are there any adults age 18 or over in this household who require assistance with daily activities such as eating or walking?

1. YES
2. NO

Q9. Does anyone in this household care for an adult who requires assistance with daily activities such as eating and walking? The care could be in this household or another.

1. YES
2. NO

Q10. In general, how do you feel about the quality and cost of child care and early education available to families with children in your community? Do you feel..

1. Very satisfied
2. Somewhat satisfied
3. Not satisfied at all
4. Or do you not have an opinion?

Q11. In general, how do you feel about the quality and cost of resources available to elderly or disabled people in your community? Do you feel..

1. Very satisfied
2. Somewhat satisfied
3. Not satisfied at all
4. Or do you not have an opinion?

Q12. What is the best way for us to reach you if we have any questions about your survey?

Name or Initial: _____ Phone: _ _ _ -_ _ _ -_ _ _ _

Email: _____

Thank you very much for your participation! Please return this form in the postage-paid envelope provided or mail it to:

National Survey of Early Care and Education
NORC at the University of Chicago
55 East Monroe Street, Ste 1900
Chicago, IL 60603
Toll-free number: 1-877-778-2973
nsece19@norc.org

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB number for this information collection is 0970-0391 and the expiration date is 10/31/2019. Please send comments regarding the time required for this survey or any other aspect of the described information collection to: NORC at the University of Chicago, 55 E Monroe St, Ste 3000, Chicago, IL, 60603, Attention: A. Rupa Datta.

NATIONAL SURVEY OF **EARLY CARE & EDUCATION** | **2019**

Household Questionnaire

Household Questionnaire

QUEXLANG. RV: HH9_QUEXLANG

PLEASE SELECT THE LANGUAGE IN WHICH YOU WOULD LIKE TO CONDUCT THE INTERVIEW.

1. ENGLISH
2. SPANISH

IF R RETURNED MAIL SCREENER, GO TO A_INTRO1.
ELSE GO TO A_INTRO2.

A_INTRO1.

Hello. I am _____from NORC at the University of Chicago. We are conducting a survey about how families use and think about child care and after-school programs. Someone in your household recently completed a short questionnaire for this study and we have some additional questions we'd like to ask. May I speak to the parent/guardian of the child under 13 in the household?

1. Speaking with parent/guardian → SKIP TO CHECK_S
2. Parent/guardian not available → SKIP TO ADR_3

ADR_3.

Thank you very much. I will try back at another time to reach the parent/guardian.
TERMINATE INTERVIEW AND ATTEMPT AT ANOTHER TIME.

CHECK_S

WAS THIS CASE COMPLETED ON OR AFTER MAY 29, 2019?

1. YES
2. NO

IF CHECK_S=1, THEN SKIP TO A_INTRO2 _S.
ELSE, ASK A_INTRO2.

A_INTRO2.

(Hello. I am _____from NORC at the University of Chicago.)

IF R SCREENED IN AS ELIGIBLE THROUGH MAIL/FIELD, READ: You have recently completed a short questionnaire for the NSECE. NSECE is a study…

IF R NOT SCREENED YET, READ: We are conducting a study…

…about how families use and think about child care for children under age 13. This study is funded by the U.S. Department of Health and Human Services, and conducted by NORC at the University of Chicago. Your participation in this study will help policy-makers and child care providers better understand and support the child care services that are most needed in your area.

This interview takes about an hour, and your participation is voluntary. You may choose not to answer any questions you don't wish to answer, or end the interview at any time. We have systems in place to protect your identity and keep your responses private. There is only a small chance that your information could be accidentally disclosed. For that reason we avoid questions that could cause difficulty for you. This study also has a Federal Certificate of Confidentiality from the government which protects researchers and other staff from being forced to release information that could be used to identify participants in court proceedings. You should understand, however, that we would take necessary action to prevent serious harm to children, including reporting to authorities.

Data collected for this study will be used for statistical purposes only, so that no individuals or organizations can be identified directly or indirectly in research findings. Identifiers such as your name and addresses will be considered private and can only be accessed for the study's research purposes by authorized personnel associated with this study.

1. R CONSENTS TO PARTICIPATE IN THE SURVEY
2. R DOES NOT CONSENT TO PARTICIPATE → BREAK OFF AND INQUIRE ABOUT ALTERNATE RESPONDENT

SKIP TO SECTION A.

A_INTRO2 _S

(Hello. I am _____from NORC at the University of Chicago.)

IF R SCREENED IN AS ELIGIBLE THROUGH MAIL/FIELD, READ: You have recently completed a short questionnaire for the NSECE. NSECE is a study…

IF R NOT SCREENED YET, READ: We are conducting a study…

…about how families use and think about child care for children under age 13. This study is funded by the U.S. Department of Health and Human Services, and conducted by NORC at the University of Chicago. Your participation in this study will help policy-makers and child care providers better understand and support the child care services that are most needed in your area.

This interview takes about 45 minutes, and your participation is voluntary. You may choose not to answer any questions you don't wish to answer, or end the interview at any time. We have systems in place to protect your identity and keep your responses private. There is only a small chance that your information could be accidentally disclosed. For that reason we avoid questions that could cause difficulty for you. This study also has a Federal Certificate of Confidentiality from the government which protects researchers and other staff from being forced to release information that could be used to

identify participants in court proceedings. You should understand, however, that we would take necessary action to prevent serious harm to children, including reporting to authorities.

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Section A. Child Demographics

S1_Check. DV: HH9_CHAR_NUMCH
First, how many children under 6 live in your household?

Number of children under 6 years: _____
Range: 0-10
-4. DK/REF

S1_SA. DV: HH9_CHAR_NUMCH
Next, how many children between six and thirteen years old live in your household?

Number of children 6 to 13 years old: _____
Range: 0-10
-4. DK/REF

IF S1 >0 AND/OR S1_SA>0, SKIP TO A1 IF BOTH S1 AND S1_SA=0 OR DK/REF, ASK S_PROBE

S_PROBE.
Someone in your household participated in an earlier part of our study and said that there were [X=SUM OF ALL CHILDREN UNDER 13 FROM SCREENER] children under age 13 living in this household. They may not be your own children or they may be living here only temporarily. Please tell me how many children under age 13 live in this household currently.

Number of children under 13: _____
Range: 0-10
-4. DK/REF

IF S_PROBE=0 OR DK/REF, SKIP TO S1_TERM ELSE SKIP TO A1

CREATE "S1" VARIABLE TO USE THROUGHOUT QUEX:

- IF R DID NOT GET S_PROBE, S1=SUM OF S1_Check AND S1_SA.
- IF S1_Check OR S1_SA=DK/REF, S1=THE REMAINING VALID VALUE.
- IF R DID GET S_PROBE, S1=S_PROBE.

THROUGHOUT QUEX, ANY TIME THE VALUE OF "S1" IS USED, USE THIS CALCULATED VARIABLE.

S1_TERM.
Thank you very much. That is all I have.

A1. RV: HH9_A1_CHILD_GIVEN_X (X=1-9 CHILDREN); DV: HH9_PARCH_X_Y (X=1-9 CHILDREN, Y=1-9 HHM); DV: HH9_RPARENTCH; DV: HH9_RGRANDPARENTCH; DV: HH9_RSTEPPARENTCH; DV: HH9_C14_SELECT

IF S1>1: [For each child under 13, starting with the youngest]…

Can you tell me the first names (or initials) of all of the children under 13 who usually live in this household?

Child #1: _____
Child #2: _____
Child #3: _____
Child #4: _____
Child #5: _____
Child #6: _____
Child #7: _____
Child #8: _____
Child #9: _____
Child #10: _____

Start of A_L_1 Loop (**AL1*):
ASK A1B-A2G10A FOR EACH CHILD LISTED IN A1

A1b. **AL1* RV: HHC9_GENDER_X (X=1-9 CHILDREN)

ASK IF NECESSARY: Is [CHILD NAME] a boy or a girl?

1. BOY
2. GIRL
3. DK/REF

A1c. **AL1* DV: HHC9_AGE_X (X=1-9 CHILDREN); DV: HH9_FLAG_AGE_IMPUTE_X (X=1-9 CHILDREN); DV: HH9_C0TO12_X (X=1-9 CHILDREN); DV: HH9_C0TO36_X (X=1-9 CHILDREN); DV: HH9_C0TO60_X (X=1-9 CHILDREN); DV: HH9_C36TO60_X (X=1-9 CHILDREN); DV: HH9_HHCOMP_NUMCH_0THRU5YRS; DV: HH9_HHCOMP_NUMCH_5THRU8YRS; DV: HH9_HHCOMP_NUMCH_9THRU12YRS; DV: HH9_HHCOMP_NUMCH_13THRU17YRS

In what month and year was [CHILD NAME] born?

MONTH: _____
Range: 1-12
YEAR: _____
Range: 2006-2019

A1c1. **AL1* RV: HHC9_COUNTRY_BORN_X (X=1-9 CHILDREN)
In what country was [CHILD NAME] born?

1. UNITED STATES → SKIP TO A2d
2. NOT IN U.S.
3. DK/REF → SKIP TO A2d

A1c1_CNTRY [drop down list] **AL1*
In what country was [CHILD NAME] born?

1. Don't know/Refused
2. Afghanistan
3. Akrotiri
4. Albania
5. Algeria
6. American Samoa
7. Andorra
8. Angola
9. Anguilla
10. Antarctica
11. Antigua and Barbuda
12. Argentina
13. Armenia
14. Aruba
15. Ashmore and Cartier Islands
16. Australia
17. Austria
18. Azerbaijan
19. Bahamas
20. Bahrain
21. Bangladesh
22. Barbados
23. Bassas da India
24. Belarus
25. Belgium
26. Belize
27. Benin
28. Bermuda
29. Bhutan
30. Bolivia
31. Bosnia and Herzegovina
32. Botswana
33. Bouvet Island
34. Brazil
35. British Indian Ocean Territory
36. British Virgin Islands
37. Brunei
38. Bulgaria
39. Burkina Faso
40. Burma
41. Burundi
42. Cambodia
43. Cameroon
44. Canada
45. Cape Verde
46. Cayman Islands
47. Central African Republic
48. Chad
49. Chile
50. China
51. Christmas Island
52. Clipperton Island
53. Cocos (Keeling) Islands
54. Colombia
55. Comoros
56. Congo
57. Cook Islands
58. Coral Sea Islands
59. Costa Rica
60. Cote d'Ivoire
61. Croatia
62. Cuba
63. Cyprus
64. Czech Republic
65. Denmark
66. Dhekelia
67. Djibouti
68. Dominica
69. Dominican Republic
70. Ecuador
71. Egypt
72. El Salvador
73. Equatorial Guinea
74. Eritrea
75. Estonia
76. Ethiopia
77. Europa Island
78. Falkland Islands (Islas Malvinas)
79. Faroe Islands
80. Fiji
81. Finland
82. France
83. French Guiana
84. French Polynesia
85. French Southern and Antarctic Lands
86. Gabon
87. Gambia
88. Gaza Strip
89. Georgia
90. Germany
91. Ghana
92. Gibraltar
93. Glorioso Islands
94. Greece
95. Greenland
96. Grenada
97. Guadeloupe
98. Guam
99. Guatemala
100. Guernsey
101. Guinea
102. Guinea-Bissau
103. Guyana
104. Haiti
105. Heard Island and McDonald Islands
106. Holy See (Vatican City)
107. Honduras
108. Hong Kong
109. Hungary
110. Iceland
111. India
112. Indonesia
113. Iran
114. Iraq

115. Ireland
116. Isle of Man
117. Israel
118. Italy
119. Jamaica
120. Jan Mayen
121. Japan
122. Jersey
123. Jordan
124. Juan de Nova Island
125. Kazakhstan
126. Kenya
127. Kiribati
128. North Korea
129. South Korea
130. Kuwait
131. Kyrgyzstan
132. Laos
133. Latvia
134. Lebanon
135. Lesotho
136. Liberia
137. Libya
138. Liechtenstein
139. Lithuania
140. Luxembourg
141. Macau
142. Macedonia
143. Madagascar
144. Malawi
145. Malaysia
146. Maldives
147. Mali
148. Malta
149. Marshall Islands
150. Martinique
151. Mauritania
152. Mauritius
153. Mayotte
154. Mexico
155. Micronesia, Federated States of
156. Moldova
157. Monaco
158. Mongolia
159. Montserrat
160. Morocco
161. Mozambique
162. Namibia
163. Nauru
164. Navassa Island
165. Nepal
166. Netherlands
167. Netherlands Antilles
168. New Caledonia
169. New Zealand
170. Nicaragua
171. Niger
172. Nigeria
173. Niue
174. Norfolk Island
175. Northern Mariana Islands
176. Norway
177. Oman
178. Pakistan
179. Palau
180. Panama
181. Papua New Guinea
182. Paracel Islands
183. Paraguay
184. Peru
185. Philippines
186. Pitcairn Islands
187. Poland
188. Portugal
189. Puerto Rico
190. Qatar
191. Reunion
192. Romania
193. Russia
194. Rwanda
195. Saint Helena
196. Saint Kitts and Nevis
197. Saint Lucia
198. Saint Pierre and Miquelon
199. Saint Vincent and the Grenadines
200. Samoa
201. San Marino
202. Sao Tome and Principe
203. Saudi Arabia
204. Senegal
205. Serbia and Montenegro
206. Seychelles
207. Sierra Leone
208. Singapore
209. Slovakia
210. Slovenia
211. Solomon Islands
212. Somalia
213. South Africa
214. South Georgia and the South Sandwich Islands
215. Spain
216. Spratly Islands
217. Sri Lanka
218. Sudan
219. Suriname
220. Svalbard
221. Swaziland
222. Sweden
223. Switzerland
224. Syria
225. Taiwan
226. Tajikistan
227. Tanzania
228. Thailand
229. Timor-Leste
230. Togo
231. Tokelau
232. Tonga
233. Trinidad and Tobago
234. Tromelin Island
235. Tunisia
236. Turkey
237. Turkmenistan
238. Turks and Caicos Islands
239. Tuvalu
240. Uganda
241. Ukraine
242. United Arab Emirates
243. United Kingdom
244. United States
245. Uruguay
246. Uzbekistan
247. Vanuatu
248. Venezuela
249. Vietnam
250. Virgin Islands
251. Wake Island
252. Wallis and Futuna
253. West Bank
254. Western Sahara
255. Yemen
256. Zambia
257. Zimbabwe

A2d. *AL1 DV: HHC9_RACE_X (X=1-9 CHILDREN)
Is [CHILD NAME] of Hispanic or Latino origin?

1. Yes
2. No
3. DK/REF

A2e. *AL1 DV: HHC9_RACE_X (X=1-9 CHILDREN)
Is [CHILD NAME]…?
SELECT ONE OR MORE

5. American Indian or Alaska Native
3. Asian
2. Black or African American
4. Native Hawaiian or Other Pacific Islander
1. White
6. Other
7. Added: Hispanic
-4. DK/REF

IF A2e=6 ASK A2e_6OS ELSE, SKIP TO A2F

A2e_6OS. *AL1
(PLEASE SPECIFY:) _____
-4. DK/REF

A2f. *AL1 DV: HH9_RPARENT; DV: HH9_HHCOMP_NUMPARENTS; DV: HH9_RELATED; DV: HH9_HHCOMP_RELATIONS_NONREL; DV: HH9_HHCOMP_NUMMOTHER; DV: HH9_HHCOMP_NUMFATHER; DV: HH9_PARENT_STRUCTURE; DV: HH9_PARCH_X_Y (X=1-9 CHILDREN, Y=1-9 HHM); DV: HH9_RPARENTCH; DV: HH9_RGRANDPARENTCH; DV: HH9_RSTEPPARENTCH
What is [CHILD NAME]'s relationship to you?

1. Son or daughter (biological or adopted)
2. Stepson or stepdaughter
3. Brother or sister
4. Grandchild
5. Foster child
6. Other relative (e.g., niece or nephew)
7. Other nonrelative
8. DK/REF

A2g. **AL1*

IF A2f = 3, 4, 5, 6, 7 OR 8: Does [CHILD NAME] have a parent in the household?

IF A2f =1 OR 2: Does [CHILD NAME] have another parent in the household?

INTERVIEWER: IF PARENT TEMPORARILY OUT OF TOWN/OUT OF COUNTRY ON BUSINESS OR AWAY ON MILITARY DEPLOYMENT, SELECT 'YES' TO THIS QUESTION

1. Yes
2. No
3. If volunteered: mother deceased
4. If volunteered: father deceased
5. DK/REF

A2h. **AL1* RV: HHC9_CONDITION_X (X=1 - 9 CHILDREN)

Does [CHILD NAME] have a physical, emotional, developmental, or behavioral condition that affects the way you provide care for [him/her]?

1. Yes
2. No
3. DK/REF

Skip Logic Box A_S_1:
IF THIS IS THE FIRST CHILD AND IF HH SCREENER VAR S2=5 OR A2G=2 THEN SKIP TO A2G2
ELSE IF THIS IS THE SECOND OR LATER CHILD, AND S2=5 OR A2G=2, ASK A2G1
IF A2G = 1, 3, 4, OR 5, SKIP TO END OF A_L_1 LOOP

Start of A_L_2 Loop (**AL2*):
ASK A2G1-A2G10A ONCE FOR EACH CHILD LISTED IN A1 WHO ANSWERED A2G2=2 OR WHEN A2G10A=1

A2G1. **AL1 *AL2*

You mentioned that [CHILD NAME]'s parent does not live in the household. Have you already told me about that other parent?

IF YES, SELECT WHICH CHILD'S PARENT IS ALSO THE PARENT OF THIS CHILD:

1. YES, [CHILD1]
2. YES, [CHILD2]
3. YES, [CHILD3]
4. YES, [CHILD4]
5. YES, [CHILD5]
6. YES, [CHILD6]
7. YES, [CHILD7]
8. YES, [CHILD8]
9. YES, [CHILD9]
10. YES, [CHILD10]

11. No, parent not previously mentioned
12. DK/REF → SKIP TO A2G10

A2G2. **AL1 *AL2* DV: HH9_DIS_HHNONRESPAR_C_X_Y (X=1-2 PARENTS, Y=1-9 CHILDREN)
You mentioned that [CHILD NAME]'s parent does not live in the household. Can you tell me the zip code or city and state where he/she lives?

1. ENTER ZIP CODE
2. ENTER CITY AND STATE → SKIP TO A2G2_CS
3. If volunteered: mother deceased → SKIP TO A2G10
4. If volunteered: father deceased → SKIP TO A2G10
5. DK/REF → SKIP TO A2G10

A2G2_ZIP. **AL1 *AL2* DV: HH9_DIS_HHNONRESPAR_C_X_Y (X=1-2 PARENTS, Y=1-9 CHILDREN)
ENTER PARENT'S ZIP CODE.

ZIP CODE: _____
-4. DK/REF

SKIP TO A2G8

A2G2_CS. **AL1 *AL2* DV: HH9_DIS_HHNONRESPAR_C_X_Y (X=1-2 PARENTS, Y=1-9 CHILDREN)
ENTER PARENT'S CITY AND STATE.

CITY: _____
-4. DK/REF
STATE: _____
-4. DK/REF

A2G8. **AL1 *AL2*
What is the highest grade or level of schooling he/she has completed? **READ IF NECESSARY**

1. 8th grade or less
2. 9th-12th grade no diploma
3. High school graduate or GED completed
4. Some college credit but no degree
5. Associate degree (AA, AS)
6. Bachelor's degree (BA, BS, AB)
7. Graduate or professional degree
8. DK/REF

A2G9. **AL1 *AL2*

In the past 12 months, about how many times has he/she seen [CHILD NAME]?

TIMES: _____
Range: 0-999
-4. DK/REF

A2G9a. **AL1 *AL2*

In the past 12 months, has he/she contributed $500 or more for [CHILD NAME]'s basic needs, for example, food, clothing, or medical expenses?

1. Yes
2. No
3. DK/REF

A2g10. **AL1 *AL2*

Have you accounted for two parents for this child?

1. Yes → SKIP TO END OF A_L_1 LOOP
2. No

A2G10A. **AL1 *AL2*

Does [CHILD NAME] have another parent who doesn't live in this household?

1. Yes → LOOP TO A2G1 AND ASK ABOUT ANOTHER PARENT
2. No
3. DK/REF

End of A_L_2 Loop (**AL2*):
REPEAT A2G1-A2G10A ONCE FOR EACH CHILD LISTED IN A1 WHEN A2G10A=1

End of A_L_1 Loop (**AL1*):
REPEAT A1B-A2G10A FOR EACH CHILD LISTED IN A1

Section B. Respondent and Household Adults Demographics

B1a1. DV: HH9_HHCOMP_MEMBERS; DV: HH9_WEEKLY_COST_CARE_TC_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_COPAY_FLAG_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS)
These next questions are about your family and the other people who live in your household and who are 13 years old or older. Including yourself, how many people 13 years old or older live in your household?

NUMBER OF PEOPLE: _____
Range: 1-99
-4. DK/REF

INTERVIEWER INSTRUCTION: IDENTIFY ALL HOUSEHOLD MEMBERS FIRST, THEN ASK QUESTIONS ABOUT EACH PERSON.
B1A. RV: HH9_B1A_NAME_GIVEN_X (X=1-9 HHM); DV: HH9_RSPOUSEPARTNER_LOOP
IF FIRST HHM: Now please tell me the first names (or initials) of individuals over the age of 13 who usually live here. We will start with you. Can you please state your first name or initials?
IF SECOND OR HIGHER HHM: (Please tell me the name (or initials) of the next individual over the age of 13 who usually lives here.)

NAME: _____
-4. DK/REF → SKIP TO SKIP LOGIC BOX B_S_7

Start of B_L_1 Loop (*BL1):
ASK B1B-B1O_1 FOR EACH NAMED HHM LISTED IN B1A1 WHERE B1A1≠ DK/REF OR BLANK

Now I have some questions about each person in the household. The questions may be different for different people. Let me start with you.

B1b. *BL1 RV: HH9_HHM_AGE_X (X=1-9 HHM); DV: HH9_ECON_INCOME_POVRATCAT; DV: HH9_POV_RATIO_TC; DV: HH9_INC_POV_THRESHOLD; DV: HH9_PRGCH_X_Y (X=1-9 CHILDREN, Y=1-9 HHM)
IF FIRST HHM: How old are you?
IF SECOND OR HIGHER HHM: How old is [HHM NAME]?
IF NEEDED: Your best guess is fine.

AGE: _____
Range: 1-99
-4. DK/REF

B1c. *BL1 RV: HH9_RGENDER; DV: HH9_HHCOMP_NUMMOTHER; DV: HH9_HHCOMP_NUMFATHER
IF NOT OBVIOUS:
IF FIRST HHM: Are you male or female?

IF SECOND OR HIGHER HHM: Is [HHM NAME] male or female?

1. Male
2. Female
3. DK/REF

Skip Logic Box B_S_1:
IF HHMEM NOT R, ASK B1D
ELSE SKIP TO SKIP LOGIC BOX B_S_2

B1d. *_BL1_ DV: HH9_HHCOMP_NUMMOTHER; DV: HH9_HHCOMP_NUMFATHER; DV: HH9_OADULT_X (X=1-9 HHM); DV: HH9_RPARTNER_X (X=1-9 HHM); DV: HH9_PARENT_STRUCTURE; DV: HH9_PRGCH_X_Y (X=1-9 CHILDREN, Y=1-9 HHM); DV: HH9_RSPOUSEPARTNER_LOOP; DV: HH9_INC_POV_THRESHOLD; DV: HH9_RELATED; DV: HH9_HHCOMP_RELATIONS_NONREL
What is your relationship to [HHM NAME]?

1. Spouse (i.e., legally married)
2. Partner (i.e., not legally married)
3. Parent or Parent-in-law
4. Child or child-in-law
5. Sibling or sibling-in-law
6. Other relative
7. Non-relative
8. DK/REF
9. Added: Friend/roommate
10. Added: Rental relationship (landlord, tenant, etc)
11. Added: Live-in nanny
12. Added: Other household staff
13. Added: Relative of partner, boyfriend/girlfriend
14. Added: Partner of related HH member
15. Added: Ex-wife/husband/partner

IF B1D=7 ASK B1D_SPEC ELSE, SKIP TO B1E

B1D_SPEC. *_BL1_
(PLEASE SPECIFY:) _____
-4. DK/REF

Skip Logic Box B_S_2:
IF B1B >= 14 AND HHMEM NOT R, ASK B1E
ELSE SKIP TO SKIP LOGIC BOX B_S_3

B1e. *_BL1_ DV: HH9_HHCOMP_NUMMOTHER; DV: HH9_HHCOMP_NUMFATHER; DV: HH9_PARENT_STRUCTURE; DV: HH9_PARCH_X_Y (X=1-9 CHILDREN, Y=1-9 HHM); DV: HH9_RPARTNER_X (X=1-9 HHM)

IF NOT OBVIOUS, **ASK**:

Does [HHM NAME] have any children under the age of 13 in this household?

IF NEEDED: Please include biological and adopted children.

1. Yes
2. No → SKIP TO B1f
3. DK/REF → SKIP TO B1f

B1e_1. *_BL1_ DV: HH9_PARCH_X_Y (X=1-9 CHILDREN, Y=1-9 HHM); DV: HH9_PRGCH_X_Y (X=1-9 CHILDREN, Y=1-9 HHM)

Who are [HHM NAME]'s children in this household?

SELECT ALL THAT APPLY

1. Child1
2. Child2
3. Child3
4. Child4
5. Child5
6. Child6
7. Child7
8. Child8
9. Child9

Skip Logic Box B_S_3:
IF B1B >= 14, B1D ≠1 OR 2, B1E = 2 OR 3AND , ASK B1F
ELSE SKIP TO B1J

B1f. *_BL1_

Does [HHM NAME] ever look after the young children in the household?

IF NEEDED: How about for more than 5 hours at a time?

1. Yes
2. No
3. DK/REF

Skip Logic Box B_S_4:
IF B1D≠1, B1E≠1, and B1F≠1, SKIP TO END OF B_L_1 LOOP
ELSE, ASK B1J

B1j. *_BL1_ DV: HH9_ANNUAL_INCOME_IMP_TC

What is the highest grade or level of schooling that [you have/[HHM NAME] has] ever completed?

INTERVIEWER: READ IF NECESSARY

1. 8th grade or less
2. 9th-12th grade no diploma
3. High school graduate or GED completed
4. Some college credit but no degree
5. Associate degree (AA, AS)
6. Bachelor's degree (BA, BS, AB)
7. Graduate or professional degree
8. DK/REF

Skip Logic Box B_S_5:
IF FIRST HHM, ASK B1M
IF SECOND OR HIGHER HHM, SKIP TO SKIP LOGIC BOX B_S_6

B1m. **BL1*
What is your ethnicity?

1. Hispanic or Latino
2. Not Hispanic or Latino
3. DK/REF

B1n. **BL1* RV: HH9_B1N_1_1; RV: HH9_B1N_2_1; RV: HH9_B1N_3_1; RV: HH9_B1N_4_1; RV: HH9_B1N_5_1; RV: HH9_B1N_6_1
What is your race…
SELECT ONE OR MORE

5. American Indian or Alaska Native
3. Asian
2. Black or African American
4. Native Hawaiian or Other Pacific Islander
1. White
6. IF VOLUNTEERED: OTHER
7. DK/REF

Skip Logic Box B_S_6:
IF HHM IS R OR B1E=1, ASK B1O
ELSE, SKIP TO END OF B_L_1 LOOP

B1o. **BL1*

IF FIRST HHM: In which country were you born?

IF SECOND OR HIGHER HHM: In which country was [HHM NAME] born?

1. United States → SKIP TO SKIP LOGIC BOX B_S_7
2. Not in U.S.
3. DK/REF → SKIP TO SKIP LOGIC BOX B_S_7

B1o_CNTRY **BL1*

IF FIRST HHM: In which country were you born?

IF SECOND OR HIGHER HHM: In which country was [HHM NAME] born?

[drop down]

1. Don't know/Refused
2. Afghanistan
3. Akrotiri
4. Albania
5. Algeria
6. American Samoa
7. Andorra
8. Angola
9. Anguilla
10. Antarctica
11. Antigua and Barbuda
12. Argentina
13. Armenia
14. Aruba
15. Ashmore and Cartier Islands
16. Australia
17. Austria
18. Azerbaijan
19. Bahamas
20. Bahrain
21. Bangladesh
22. Barbados
23. Bassas da India
24. Belarus
25. Belgium
26. Belize
27. Benin
28. Bermuda
29. Bhutan
30. Bolivia
31. Bosnia and Herzegovina
32. Botswana
33. Bouvet Island
34. Brazil
35. British Indian Ocean Territory
36. British Virgin Islands
37. Brunei
38. Bulgaria
39. Burkina Faso
40. Burma
41. Burundi
42. Cambodia
43. Cameroon
44. Canada
45. Cape Verde
46. Cayman Islands
47. Central African Republic
48. Chad
49. Chile
50. China
51. Christmas Island
52. Clipperton Island
53. Cocos (Keeling) Islands
54. Colombia
55. Comoros
56. Congo
57. Cook Islands
58. Coral Sea Islands
59. Costa Rica
60. Cote d'Ivoire
61. Croatia
62. Cuba
63. Cyprus
64. Czech Republic
65. Denmark
66. Dhekelia
67. Djibouti
68. Dominica
69. Dominican Republic
70. Ecuador
71. Egypt
72. El Salvador
73. Equatorial Guinea
74. Eritrea
75. Estonia
76. Ethiopia
77. Europa Island
78. Falkland Islands (Islas Malvinas)
79. Faroe Islands
80. Fiji
81. Finland
82. France
83. French Guiana
84. French Polynesia
85. French Southern and Antarctic Lands
86. Gabon
87. Gambia
88. Gaza Strip
89. Georgia
90. Germany
91. Ghana
92. Gibraltar
93. Glorioso Islands
94. Greece
95. Greenland
96. Grenada
97. Guadeloupe
98. Guam
99. Guatemala
100. Guernsey
101. Guinea
102. Guinea-Bissau
103. Guyana
104. Haiti
105. Heard Island and McDonald Islands

106. Holy See (Vatican City)
107. Honduras
108. Hong Kong
109. Hungary
110. Iceland
111. India
112. Indonesia
113. Iran
114. Iraq
115. Ireland
116. Isle of Man
117. Israel
118. Italy
119. Jamaica
120. Jan Mayen
121. Japan
122. Jersey
123. Jordan
124. Juan de Nova Island
125. Kazakhstan
126. Kenya
127. Kiribati
128. North Korea
129. South Korea
130. Kuwait
131. Kyrgyzstan
132. Laos
133. Latvia
134. Lebanon
135. Lesotho
136. Liberia
137. Libya
138. Liechtenstein
139. Lithuania
140. Luxembourg
141. Macau
142. Macedonia
143. Madagascar
144. Malawi
145. Malaysia
146. Maldives
147. Mali
148. Malta
149. Marshall Islands
150. Martinique
151. Mauritania
152. Mauritius
153. Mayotte
154. Mexico
155. Micronesia, Federated States of
156. Moldova
157. Monaco
158. Mongolia
159. Montserrat
160. Morocco
161. Mozambique
162. Namibia
163. Nauru
164. Navassa Island
165. Nepal
166. Netherlands
167. Netherlands Antilles
168. New Caledonia
169. New Zealand
170. Nicaragua
171. Niger
172. Nigeria
173. Niue
174. Norfolk Island
175. Northern Mariana Islands
176. Norway
177. Oman
178. Pakistan
179. Palau
180. Panama
181. Papua New Guinea
182. Paracel Islands
183. Paraguay
184. Peru
185. Philippines
186. Pitcairn Islands
187. Poland
188. Portugal
189. Puerto Rico
190. Qatar
191. Reunion
192. Romania
193. Russia
194. Rwanda
195. Saint Helena
196. Saint Kitts and Nevis
197. Saint Lucia
198. Saint Pierre and Miquelon
199. Saint Vincent and the Grenadines
200. Samoa
201. San Marino
202. Sao Tome and Principe
203. Saudi Arabia
204. Senegal
205. Serbia and Montenegro
206. Seychelles
207. Sierra Leone
208. Singapore
209. Slovakia
210. Slovenia
211. Solomon Islands
212. Somalia
213. South Africa
214. South Georgia and the South Sandwich Islands
215. Spain
216. Spratly Islands
217. Sri Lanka
218. Sudan
219. Suriname
220. Svalbard
221. Swaziland
222. Sweden
223. Switzerland
224. Syria
225. Taiwan
226. Tajikistan
227. Tanzania
228. Thailand
229. Timor-Leste
230. Togo
231. Tokelau
232. Tonga
233. Trinidad and Tobago
234. Tromelin Island
235. Tunisia
236. Turkey
237. Turkmenistan
238. Turks and Caicos Islands
239. Tuvalu
240. Uganda
241. Ukraine
242. United Arab Emirates
243. United Kingdom
244. United States
245. Uruguay
246. Uzbekistan
247. Vanuatu
248. Venezuela
249. Vietnam
250. Virgin Islands
251. Wake Island
252. Wallis and Futuna
253. West Bank

B1o_1. *BL1

IF FIRST HHM: In what year did you first come to USA?

IF SECOND OR HIGHER HHM: In what year did [he/she] first come to USA?

YEAR: _____

Range: 1900-2019

-4. DK/REF

End of B_L_1 Loop (*BL1)*:*

REPEAT B1B-B1O_1 FOR EACH NAMED HHM LISTED IN B1A1 WHERE B1A1≠ DK/REF OR BLANK

Skip Logic Box B_S_7 (B_HHSTR_CHK):

ASK B1_CUST FOR EACH CHILD WHERE A2F≠1 AND A2G=2

IF ALL CHILDREN HAVE AT LEAST ONE PARENT IN HH AND NO MORE THAN TWO PARENTS IN HH, SKIP TO B2

B1_CUST. DV: HH9_PRGCH_X_Y (X=1-9 CHILDREN, Y=1-9 HHM)

I do not have a parent recorded for [CHILD] in this household. Who is a guardian for [CHILD]?

1. [HHM1]
2. [HHM2]
3. [HHM3]
4. [HHM4]
5. [HHM5]
6. [HHM6]
7. [HHM7]
8. [HHM8]
9. [HHM9]
10. [HHM10]
11. [HHM11]
12. [HHM12]
13. [HHM13]
14. [HHM14]
15. [HHM15]
16. No guardian → SKIP TO B2
17. Guardian or parent outside of household only → SKIP TO B2
18. DK/REF → SKIP TO B2

B1_CUST_a.
Is that a formal relationship such as foster care or legal guardianship, or an informal arrangement?

1. Foster
2. Legal, not foster
3. Informal

LOOP TO B1_CUST FOR ANY CHILDREN UNDER 13 FOR WHOM NO PARENTS ARE LISTED

IF CHILD UNDER 13 IN HH HAS 3 OR MORE BIOLOGICAL OR ADOPTIVE PARENTS LISTED (A2F=1,2 AND/OR CHILD IS SELECTED IN B1E_1), ASK B1_STRUCT
ELSE, SKIP TO B2

B1_STRUCT.
I see that there are [x] number of parents of young children in this household. Could you describe the family, marriage or other relationships between the [x] parents?
INTERVIEWER: FOR EXAMPLE, 1 PARENT MAY BE THE DAUGHTER OF ANOTHER PARENT, OR TWO SISTERS AND THEIR HUSBANDS MAY BE LIVING IN THE SAME HOUSEHOLD.

VERBATIM: _____

Open-ended responses coded into created codeframe:

1. Parent and adult children both had minor children and lived together
2. Parents were siblings living together sometimes with partners/spouses
3. Parents were friends living together sometimes with partners/spouses
4. Parents were cousins living together sometimes with partners/spouses
5. Parents confirmed relation not specified
6. Parents confirmed and a combination of all of the above
7. Parents confirmed but it is two or more different families renting one home an living together
8. Reported Additional Adults in error
9. Other
-1. DK/REF

B2.
Now I have some additional questions about your household and other family. These questions are about the whole household and not just individual people.

What language is usually spoken in this household? **CHECK ALL THAT APPLY**

LANGUAGE:

0 No other language provided
1 Arabic
2 Armenian
3 Chinese
4 English
5 French (including Patois, Cajun)
6 French creole
7 German
8 Greek
9 Guajarati
10 Hebrew
11 Hindi
12 Hungarian
13 Italian
14 Japanese
15 Korean
16 Laotian
17 Miao, Hmong
18 Mon-Khmer, Cambodian
19 Navajo
20 Persian
21 Polish
22 Portuguese or Portuguese Creole
23 Russian
24 Serbo-Croatian
25 Spanish or Spanish Creole
26 Tagalog
27 Thai
28 Urdu
29 Vietnamese
30 Yiddish
31 Other
32 DK/REF
33 American Sign Language
34 Amharic
35 Albanian
36 Bengali
37 Bulgarian
38 Burmese
39 Cape Verdean
40 Chamorro
41 Chuukese
42 Creole
43 Czech
44 Creole
45 Dutch
46 Ethiopian
47 Fijian
48 African dialects
49 Igbo
50 Ilocano
51 Indian dialects
52 Indonesian
53 Moratai
54 Jamaican/Haitian Creole
55 Kannada
56 Karen
57 Kurdish
58 Lakota
59 Latvian
60 Mixteco
61 Nepali
62 Mongolian
63 Norwegian
64 Oromo
65 Pashto
66 Punjabi
67 Romanian
68 Samoan
69 Somali
70 Swahili
71 Tamil
72 Telugu
73 Tigrinya
74 Turkish
75 Twi
76 Ukrainian
77 Visyan/Cebuano/Bisaya
78 Yoruba
79 Malayalam
80 Pennsylvanian Dutch
81 Tongan
82 Nahuatl
83 Hawaiian
84 Mandinka
85 Finnish
86 Pidgin
87 Sesotho

IF B2=31 ASK B2_SPEC
ELSE, SKIP TO B3

B2_SPEC.
SPECIFY LANGUAGE: _____
-4. DK/REF

B3. RV: HH9_RELATIONS_NEAR; DV: HH9_RELATIONS_CARE
[Does your child/Do your children] have any relatives who live within 45 minutes of your child's home? Please include relatives on your side of the family as well as relatives of the child's other parent.
IF NEEDED: Please report all relatives, even if they could not or would not provide care for a child.

1. Yes
2. No → SKIP TO BEGINNING OF SECTION C
3. DK/REF → SKIP TO BEGINNING OF SECTION C
4. IF VOLUNTEERED: YES, BUT CHILD HAS NO RELATIONSHIP WITH THEM → SKIP TO BEGINNING OF SECTION C

B3b. RV: HH9_RELATIONS_UNPAID; DV: HH9_RELATIONS_CARE
Would any of these relatives be able to care for your child/children on a regular basis with no payment or only payment that covers transportation costs?

1. Yes
2. No
3. DK/REF

B3c. RV: HH9_RELATIONS_PAID; DV: HH9_RELATIONS_CARE
Would any of these relatives be able to care for your child if you were to pay them?

1. Yes
2. No
3. DK/REF

Section C. Child Care: Types and Hours

Summer Skip Logic Box S_S_1:
IF CHECK_S=1, SKIP TO C1_INTRO_S
ELSE ASK C1_INTRO

Now I'd like to understand your child care schedule last week.

C1_INTRO.
[READ FOR FIRST CHILD ONLY:] In addition to a child's parents, a child may be cared for by other adults in the household, by relatives or friends outside of the household, or by a child-care professional in a center or someone's home. Older children may sometimes care for themselves. Next I have some questions about various people who cared for your child/children during the last week (that is, Monday, [MONDAY DATE] to Sunday, [SUNDAY DATE]).

SKIP TO INSTRUCTION BEFORE C1

C1_INTRO_S.
Now I'd like to understand your child care schedule in a typical week in May.

[READ FOR FIRST CHILD ONLY:] In addition to a child's parents, a child may be cared for by other adults in the household, by relatives or friends outside of the household, or by a child-care professional in a center or someone's home. Older children may sometimes care for themselves. Next I have some questions about various people who regularly cared for your child/children in a typical week in May.

Summer Skip Logic Box S_S_2:
SKIP TO START OF SUMMER LOOP S_L_1

Start of C_L_1 Loop (**CL1*):
ASK C1-C1A_MORE FOR EACH CHILD LISTED IN A1

C1. **CL1*
[Let's start with [CHILD 1 NAME]./Now let's talk about [CHILD X NAME]./Can you tell me who else cared for [CHILD X NAME] last week?] Please tell me all of the people or organizations that cared for [him/her] last week. Do not include any parent of a child under 13 in this household or his or her spouse.

IF CHILD AGE 5 YEARS OR MORE: If your child attended regular school for any grade from kindergarten through eighth grade, please tell me the name of that school. If [CHILD NAME] also attended a before or after-school program, either at the school or somewhere else, please mention that program separately.

Please also include any other activities, such as playdates or babysitters.
[IN SLOTS 1-15, LIST ALL HHMS WHO ARE NOT THE RESPONDENT, ARE NOT THE RESPONDENT'S SPOUSE (HH_B1D_RLTION_R_X NOT 1), AND DO NOT HAVE A CHILD IN THE HH (HH_B1E_HAVECHILD_X NOT 1).]

1. [HHM 1]
2. [HHM 2]
3. [HHM 3]
4. [HHM 4]
5. [HHM 5]
6. [HHM 6]
7. [HHM 7]
8. [HHM 8]
9. [HHM 9]
10. [HHM 10]
11. [HHM 11]
12. [HHM 12]
13. [HHM 13]
14. [HHM 14]
15. [HHM 15]
16. [PROV 1]
17. [PROV 2]
18. [PROV 3]
19. [PROV 4]
20. [PROV 5]
21. [PROV 6]
22. [PROV 7]
23. [PROV 8]
24. [PROV 9]
25. [PROV 10]
26. [PROV 11]
27. [PROV 12]
28. [PROV 13]
29. [PROV 14]
30. [PROV 15]
31. ADD PROVIDER
32. CHILD HIM/HERSELF
33. USED PARENTAL CARE ONLY
34. DK/REF

IF C1=31, THEN ASK C1A1
IF C1=33, THEN SKIP TO C3
ELSE, SKIP TO C1A_MORE

C1A1. **CL1*
ENTER PROVIDER NAME:

_____
-4. DK/REF

C1A_MORE. **CL1*
Is there another provider for [CHILD]?

1. Yes → LOOP TO C1 FOR [CHILD], NEXT PROVIDER
2. No
3. DK/REF

End of C_L_1 Loop:
REPEAT C1-C1A_MORE FOR ALL CHILDREN LISTED IN A1

Skip Logic Box C_S_1:
IF CHILD IS EQUAL TO OR GREATHER THAN 8 YEARS OLD (CALCULATED FROM A1C) AND HAS NO PROVIDERS LISTED IN C1, ASK C1_SA_CHECK
ELSE, SKIP TO C2_INTRO

C1A_SA_CHECK. I don't have any providers recorded for [CHILD]. Some children his or her age who do not have any providers are home-schooled or have an illness or disability that limits their activities. Is there anything you'd like to share about how [CHILD] spends his or her time?

VERBATIM: _____

1. Home-schooled
2. Illness/Disability/Special Needs
3. Self-Care by Child
4. At home with parent/parental care
5. Formal arrangements
6. With family or friends (non-parent)
7. Various activities, possibly unsupervised
8. Informal/Ad hoc Arrangements
9. Vacations, holidays or other breaks, possibly unsupervised
10. Other
-4. DK/REF

LOOP TO C1A_SA_CHECK FOR ANY CHILD THAT MEETS THE CRITERIA IN SKIP LOGIC BOX C_S_1.

C2_INTRO.

Now I'd like to understand your child care schedule last week.

Start of C_L_2 Loop (**CL2*)*:*
ASK C2-C4C2 FOR EACH CHILD LISTED IN A1

Start of C_L_3 Loop(**CL3*)*:*
ASK C2-C2A2 UNTIL CHILD CARE SCHEDULE IS COMPLETE FOR ALL DAYS, MONDAY-SUNDAY, FOR CHILD

C2. **CL2 *CL3* DV: HH9_CHCAL_R_X_Z; DV: HH9_BLOCKTIME_Z; DV: HH9_BLOCKDAY_Z
INTERVIEWER INSTRUCTION: FOR EACH CARE ARRANGEMENT REPORTED BY RESPONDENT, SELECT PROVIDER FROM THE DROP-DOWN MENU AND ASK C2A1 AND C2D BELOW. IF A PROVIDER CARED FOR CHILD MULTIPLE TIMES IN THE DAY, EACH SESSION OF CARE SHOULD BE REPORTED SEPARATELY.

IF NEEDED: Please tell me about last week, even if it was an unusual week. I'll ask you other questions about your usual schedule later on.

	C2. Thinking about **last [DAY]** (that is, [DATE]), who cared for [CHILD NAME]? Do not include any parent of a child under 13 in this household or his or her spouse.	**C2A1.** What time **last [DAY]** did [PROVIDER] start to care for [CHILD NAME]? START TIME:	**C2D**. When did the care with [PROVIDER] end last [DAY]? END TIME:	
1	1. Select Provider 2. [prov] 3. [prov] 4. [prov] 5. [prov] 6. [prov] 7. [prov] 8. [prov] 9. [prov] 10. [prov] 11. [prov] 12. [prov] 13. [prov] 14. [prov] 15. [prov] 16. [prov] 17. [prov] 18. [prov] 19. [prov] 20. [prov] 21. [prov] 22. Used parental care only	_____ -4. DK/REF	_____ -4. DK/REF	And who cared for him/her next that day?

2	1. Select Provider 2. [prov] 3. [prov] 4. [prov] 5. [prov] 6. [prov] 7. [prov] 8. [prov] 9. [prov] 10. [prov] 11. [prov] 12. [prov] 13. [prov] 14. [prov] 15. [prov] 16. [prov] 17. [prov] 18. [prov] 19. [prov] 20. [prov] 21. [prov] 22. Used parental care only	_____ -4. DK/REF	_____ -4. DK/REF	
3	1. Select Provider 2. [prov] 3. [prov] 4. [prov] 5. [prov] 6. [prov] 7. [prov] 8. [prov] 9. [prov] 10. [prov] 11. [prov] 12. [prov] 13. [prov] 14. [prov] 15. [prov] 16. [prov] 17. [prov] 18. [prov] 19. [prov] 20. [prov] 21. [prov] 22. Used parental care only	_____ -4. DK/REF	_____ -4. DK/REF	

4	1. Select Provider 2. [prov] 3. [prov] 4. [prov] 5. [prov] 6. [prov] 7. [prov] 8. [prov] 9. [prov] 10. [prov] 11. [prov] 12. [prov] 13. [prov] 14. [prov] 15. [prov] 16. [prov] 17. [prov] 18. [prov] 19. [prov] 20. [prov] 21. [prov] 22. Used parental care only	_____ -4. DK/REF	_____ -4. DK/REF	
5	1. Select Provider 2. [prov] 3. [prov] 4. [prov] 5. [prov] 6. [prov] 7. [prov] 8. [prov] 9. [prov] 10. [prov] 11. [prov] 12. [prov] 13. [prov] 14. [prov] 15. [prov] 16. [prov] 17. [prov] 18. [prov] 19. [prov] 20. [prov] 21. [prov] 22. Used parental care only	_____ -4. DK/REF	_____ -4. DK/REF	

C2D2. **CL2 *CL3*

Thinking about [CHILD NAME]'s schedule for last week, was any day's schedule last week the same as last [Monday/Tuesday/Wednesday/Thursday/Friday/Saturday/Sunday]?

SELECT ALL THAT APPLY

PROVIDER:	START TIME:	END TIME:

1. Monday
2. Tuesday
3. Wednesday
4. Thursday
5. Friday
6. Saturday
7. Sunday
8. NO IDENTICAL DAYS → LOOP TO C2 FOR NEXT DAY OF THE WEEK

C2A2. **CL2 *CL3*

IF NEEDED: Sometimes a child's schedule on a specific day is different from his/her regular schedule for that day of the week.

Was [CHILD NAME]'s schedule last [DAY SELECTED IN C2D2] identical to [ORIGINAL DAY] that week, or were there some differences in when or where s/he spent time those two days?

PROVIDER:	START TIME:	END TIME:

1. Identical → LOOP TO next day of week in C2A2 if indicated as identical in c2d2
2. some differences → LOOP TO CURRENT DAY OF WEEK IN C2

End of C_L_3 Loop (**CL3*):
REPEAT C2-C2A2 UNTIL CHILD CARE SCHEDULE IS COMPLETE FOR ALL DAYS, MONDAY-SUNDAY, FOR CHILD

Start of C_L_4 Loop (**CL4*):
ASK C3-C4B FOR UP TO 2 PROVIDERS PER CHILD

C3. **CL2 *CL4* DV: HH9_PTYPE_Y (Y=1-14 PROVIDERS)

Does anyone else regularly care for [CHILD NAME], even if they didn't happen to care for [him/her] last week? By regularly I mean at least five hours each week.

1. YES
2. NO → SKIP TO SKIP LOGIC BOX C_S_2
3. DK/REF → SKIP TO SKIP LOGIC BOX C_S_2

C4. **CL2 *CL4* DV: HH9_PTYPE_Y (Y=1-14 PROVIDERS)
Who usually provides care for [CHILD NAME] but didn't do so last week?
NAME:

_____
-4. DK/REF

C4a. **CL2 *CL4* DV: HH9_CARELOC_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS)
Does that care usually take place at your home or somewhere else?

1. R's home
2. Somewhere else
3. DK/REF

C4b. **CL2 *CL4* DV: HH9_REGCARE_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS)
How many hours per week does [C4 PROVIDER] usually care for [CHILD NAME]?
NAME:

_____
-4. DK/REF

End of C_L_4 Loop (**CL4*):
REPEAT C3-C4B FOR UP TO 2 PROVIDERS PER CHILD

Skip Logic Box C_S_2:
IF MORE THAN ONE CHILD, SKIP TO C4C
IF ONLY ONE CHILD OR LAST CHILD WHICH HAS COMPLETED THE C_L_3 LOOP, SKIP TO C5

Start of Summer Loop S_L_1 (**SL1*):
ASK C3_S-CS_2 FOR EACH CHILD LISTED IN A1
ASK C3_S- CS_2 FOR UP TO 4 PROVIDERS PER CHILD WHO USUALLY PROVIDED CARE IN A TYPICAL WEEK IN MAY

C3_S. **SL1*
Did anyone regularly care for [CHILD NAME] in a typical week in May? By regularly I mean at least five hours each week.

IF CHILD AGE 5 YEARS OR MORE: If your child attended regular school for any grade from kindergarten through eighth grade, please tell me the name of that school. If [CHILD NAME] also attended a before or after-school program, either at the school or somewhere else, please mention that program separately.

Do not include any parent of a child under 13 in this household or his or her spouse.

Please also include any other regular activities, such as regular playdates or babysitters.

1. YES
2. NO → SKIP TO END OF C_L_2 LOOP
3. DK/REF → SKIP TO END OF C_L_2 LOOP

C4_S. **SL1* DV: HH9_PTYPE_Y (Y=1-14 PROVIDERS)
Who usually provided care for [CHILD NAME] in a typical week in May?
NAME:

_____
-4. DK/REF

C4a_S. **SL1*
Did that care usually take place at your home or somewhere else?

1. R's home
2. Somewhere else
3. DK/REF

C4b_S. **SL1* DV: HHC9_NPC_HRSWEEK_TOCP_X (P=1-9 TOC, X=1-9 CHILDREN)
How many hours per week did [C4 PROVIDER] usually care for [CHILD NAME]?

_____ Number of hours
Range: 1-168
-4. DK/REF

CS_1. **SL1*
How many of those hours were between 8am and 6pm Monday through Friday?

_____ Number of hours
Range: 1-168

CS_2. **SL1*
About how many of the hours that [CHILD] was with [C4 PROVIDER] were you (and your spouse/partner) in work-related activities such as work, school, training or commuting to these activities?

_____ Number of Hours
Range: 1-168

End of Summer Loop S_L_1:
REPEAT C3_S-CS_2 UNTIL UP TO FOUR PROVIDERS HAVE BEEN LISTED FOR THE CHILD
REPEAT FOR EACH CHILD LISTED IN A1

Summer Skip Logix Box S_S_3:
SKIP TO SUMMER SKIP LOGIC BOX S_S_4

C4c. **CL2*
Was (CHILD)'s schedule last Monday the same as another child's Monday schedule?

1. Yes
2. No → LOOP TO C2 FOR THIS CHILD, MONDAY

C4C1. **CL2*
Which child had the same [DAY] schedule?

1. [Child 1]
2. [Child 2]
3. [Child 3]
4. [Child 4]
5. [Child 5]
6. [Child 6]
7. [Child 7]
8. [Child 8]
9. [Child 8]
10. [Child 10]

C4C2. **CL2*
IF NEEDED: Sometimes a (CHILD)'s schedule on a specific day is different from his/her regular schedule for that day of the week.
Was [CHILD NAME]'s schedule last [DAY] identical to [CHILD SELECTED IN C4C1]'s schedule, or were there some differences in when or where s/he spent time last [DAY]?

1. identical → LOOP TO c2d2
2. some differences → LOOP TO C2 for [child] on [day]

End of C_L_2 Loop (**CL2*):
REPEAT C2-C4C2 UNTIL CHILD CARE SCHEDULE IS COMPLETE FOR ALL DAYS, MONDAY-SUNDAY, FOR THIS CHILD
REPEAT C2-C4C2 FOR EACH CHILD LISTED IN A1

C5.
Now I have a few more questions about each (person/organization) that cares for your (child/children).

Start of C_L_5 Loop (*CL5):
ASK C5-C8_1 FOR EACH PROVIDER (LISTED IN C2 AND C4)

Skip Logic Box C_S_3:
IF NO PROVIDERS SELECTED FOR ANY CHILD IN HH, SKIP TO END OF C_L_5 LOOP
IF PROVIDER IS NON-RESIDENT PARENT, SKIP TO C9

Summer Skip Logic Box S_S_4:
IF CHECK_S =1 SKIP TO C5A
IF CHECK_S=2:
IF PROVIDER IS A HH MEMBER, SKIP TO C5E

C5A. *CL5 DV: HH9_BPQUALFLAG_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_WEEKLY_COST_CARE_TC_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_INDIVPROV_Y (Y=1-14 PROVIDERS); DV: HH9_PRIORREL_Y (Y=1-14 PROVIDERS); DV: HH9_BPSOURCEFLAG_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_TYPEOFCARE_AGG_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS)
IF NOT OBVIOUS, ASK: Is [PROVIDER] an individual or an organization?

1. Individual
2. INDIVIDUAL WITH FAMILY DAY CARE
3. Organization → SKIP TO C6
4. DK/REF → SKIP TO C8

C5C. *CL5 DV: HH9_BPSOURCEFLAG_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_PRIORREL_Y (Y=1-14 PROVIDERS); DV: HH9_TYPEOFCARE_AGG_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS)
Did you have a personal relationship with (PROVIDER) before s/he began caring for your child/children?

1. YES
2. NO → SKIP TO C5CB2
3. DK/REF → SKIP TO C5CB2

C5CA. *CL5
What is your relationship to (PROVIDER)?

1. R is provider's former spouse/partner → SKIP TO C5CB2
2. R is provider's child/son/daughter-in-law
3. R is provider's brother or sister or brother or sister-in-law → SKIP TO C5CB2
4. R is provider's other relative
5. R is provider's friend → SKIP TO C5CB2
6. R is provider's neighbor → SKIP TO C5CB2
7. DK/REF

C5CB. **CL5*

IF C5CA = 2: So (PROVIDER) Is the CHILD's grandparent?

IF C5CA = 4 or 7: Is this [CHILD]'s grandparent?

1. Yes
2. No
3. DK/REF

C5CB2. **CL5*

As far as you know, does (PROVIDER) care for a total of four or more children each week, not counting his or her own children?

1. Yes
2. No
3. DK/REF

C5E. **CL5* DV: HH9_PAID_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_TYPEOFCARE_AGG_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS)

Does this person usually receive payment for looking after your child(ren)?

1. Yes → SKIP TO C5D
2. No
3. DK/REF

C5E1. **CL5*

Do you give [PROVIDER] anything other than money in exchange for caring for [CHILD]? For example, do you provide groceries or transportation, or do work such as caring for children or small repair jobs in exchange for the care that [CHILD] receives?

1. Yes
2. No → SKIP TO C5D
3. DK/REF → SKIP TO C5D

C5E2. **CL5*

How often do you give these things?

(SPECIFY) _____

-4. DK/REF

1. Hourly
2. Daily
3. Once per week
4. Multiple times per week
5. Once per month
6. Multiple times per month

7. Every 2 months/Bi-monthly
8. Yearly/Quarterly/Semester/Seasonally
9. Per Visit
10. As needed/Varies/Depends
11. All the time/Regularly
12. No frequency provided
13. Other
14. DK/REF

C5D. **CL5* DV: HH9_HHMPROV_Y (Y=1-14 PROVIDERS); DV: HH9_CARELOC_X_Y
IF NOT OBVIOUS: Does this individual live in this household or provide care in this household?

1. YES, LIVES HERE → SKIP TO START OF C_L_6 LOOP
2. YES, PROVIDES CARE HERE BUT DOES NOT LIVE HERE → SKIP TO START OF C_L_6 LOOP
3. NO, NEITHER LIVES HERE NOR PROVIDES CARE HERE → SKIP TO C8
4. DK/REF → SKIP TO C8

C6. **CL5* DV: HH9_DIS_HHPROD_C_X (X=1-14 PROVIDERS); DV: HH9_DIS_PROV_CH_C_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS)
IF NOT OBVIOUS: What is the full name of [PROVIDER NAME]?
INTERVIEWER INSTRUCTION: RE-ENTER FULL NAME OF PROVIDER IF OBVIOUS.

_____

C7. **CL5* DV: HH9_DIS_HHPROD_C_X (X=1-14 PROVIDERS); DV: HH9_DIS_PROV_CH_C_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS)
I have a list of most child care providers in the area, and I'll see if this program is on my list. In that case, I won't have to ask you quite as many questions about their care.
SELECT STATE PROVIDER LOCATED IN
IF STATE NOT LISTED, SELECT "NOT ON LIST".

C7_2. **CL5*
IN WHAT CITY IS [PROVIDER NAME] LOCATED?
CITY:

C7_3. **CL5*
PLEASE SELECT PROVIDER. IF PROVIDER NOT LISTED, SELECT "NOT ON LIST".

Skip Logic Box C_S_4:
IF PROVIDER FOUND IN C7_3 LIST, SKIP TO C1B
ELSE ASK C8

C8. **CL5* DV: HH9_DIS_HHPROD_C_X (X=1-14 PROVIDERS); DV: HH9_DIS_PROV_CH_C_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS)

IF C5A=2 OR 3: [I'm not finding the listing.] Could you tell me the street address where (s/he lives/they are)?

IF NEEDED: Your answers to this and all other questions will be confidential and released only in statistical form.

IF NEEDED: Could I know just the zip code and the intersection nearest provider? You can just tell me two cross-streets and the zip code, or the city and state and cross streets.

IF NEEDED: We know that the location of child care is very important to parents and children. We only want the location of the provider in order to understand the distances between providers, the child's home, and other important locations.

1. ENTER ADDRESS
2. ENTER ZIP AND CROSS STREETS → SKIP TO C8_CROSS
3. ENTER CITY/STATE AND CROSS STREETS → SKIP TO C8_CROSS2
4. DK/REF → SKIP TO C1B

C8_ADDR2. **CL5*

ENTER ADDRESS INFORMATION:

ADDRESS: _____
-4. DK/REF
CITY: _____
-4. DK/REF
STATE: _____
-4. DK/REF
ZIP:_____
-4. DK/REF

SKIP TO C1B

C8_CROSS. **CL5*

CROSS-STREETS

ZIP : _____
-4. DK/REF
STREET 1: _____
-4. DK/REF
STREET 2:_____
-4. DK/REF

SKIP TO C1B

C8_CROSS2. **CL5*
CROSS-STREETS

CITY: _____
-4. DK/REF
STATE: _____
-4. DK/REF
STREET 1: _____
-4. DK/REF
STREET 2:_____
-4. DK/REF

C1B. **CL5*
How did your child/children usually get to [PROVIDER] last week?
INTERVIEWER INSTRUCTION: CODE ONE PER CHILD, DO NOT PROBE FOR ADDITIONAL.

1. Walking or bicycle
2. Car
3. Public transportation
4. School bus
5. Other
6. DK/REF

C1C. **CL5*
Who usually took your child/children there?

1. [LIST OF PROVIDERS AND PARENTS]
32. DK/REF

Skip Logic Box C_S_5:
IF C5A = 2 OR 3 (ORG OR FAM DAY CARE), OR C5A = 1 AND C5C= 2, SKIP TO C11
ELSE, SKIP TO START OF C_L_6 LOOP

C11. **CL5*
Do you have any difficulties talking with (PROVIDER/your caregiver at PROVIDER) because both of you aren't comfortable speaking the same language?

1. YES
2. NO
3. DK/REF

Skip Logic Box C_S_6:
IF C5A = 3, ASK C8_3
ELSE SKIP TO START OF C_L_6 LOOP

C8_3. **CL5* DV: HH9_SINGLEACT_Y (Y=1-14 PROVIDERS); DV: HH9_TYPEOFCARE_AGG_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS)
Some organizations provide a single type of activity for children, that many children may participate in for only a couple of hours each week. These could include tutoring programs, sports, or music or dance lessons.

Would you say that [PROVIDER] offers a single type of activity or more than one type of activity?

1. Single
2. More than one
3. DK/REF

C8_4. **CL5* DV: HH9_DROPIN_Y (Y=1-14 PROVIDERS); DV: HH9_TYPEOFCARE_AGG_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS)
Some organizations offer drop-in care that parents can use on an unscheduled basis and without signing up in advance. Gyms, shopping malls, community centers and churches are some places that can offer drop-in care.

Do you use [PROVIDER] on a drop-in basis?

1. YES
2. NO
3. DK/REF

Start of C_L_6 Loop (**CL6*)*:*
ASK C9-C8_1 EACH CHILD, STARTING WITH THE YOUNGEST, CARED FOR BY PROVIDER LISTED IN C2 AND C4)

C9. **CL5 *CL6* DV: HH9_REGCARE_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS)
Does [PROVIDER] care for [CHILD] regularly? By regularly, we mean at least five hours each week**.**

1. YES
2. NO
3. DK/REF

C5F. **CL5 *CL6*
How old was [CHILD] when [PROVIDER] started regularly looking after him or her?
ENTER 0 YRS 0 MONTHS IF PROVIDER HAS CARED FOR CHILD SINCE BIRTH.

_____ Months
Range: 0-12
_____ Years
Range: 0-13

Skip Logic Box C_S_7:
IF PROVIDER NOT AN ORGANIZATION (C5A ≠ 3), THEN SKIP TO END OF C_L_5 LOOP
ELSE IF PROVIDER AN ORG (C5A=3), SKIP TO SKIP LOGIC BOX C_S_8

Skip Logic Box C_S_8 (CHK_C8C):
IF CHILD IS 54 MONTHS TO 71 MONTHS, ASK C8C
IF CHILD 72 MONTHS OR OLDER, SKIP TO SKIP LOGIC BOX C_S_9
IF CHILD IS < 54 MONTHS SKIP TO C8_2

C8C. **CL5 *CL6* DV: HH9_KINDERG_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_PUBPREK_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_TYPEOFCARE_AGG_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS)
Is [CHILD] enrolled in kindergarten (IF CALIFORNIA: or transitional kindergarten) at [PROVIDER]?

1. Yes (KINDERGARTEN OR CALIFORNIA TRANSITIONAL KINDERGARTEN) → SKIP TO SKIP LOGIC BOX C_S_9.
2. No (INCLUDES Pre-Kindergarten)
3. DK/REF

C8_2. **CL5 *CL6* DV: HH9_PUBPREK_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_BPSOURCEFLAG_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_HEADSTART_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_TYPEOFCARE_AGG_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS)
At [PROVIDER], does [CHILD] participate in a Head Start program, a Public Pre-Kindergarten program, such as [LOCAL NAME FOR PRE_K], another kind of preschool, or something else?
SELECT FIRST MENTION

1. HEAD START
2. PUBLIC PRE-KINDERGARTEN
3. ANOTHER KIND OF PRESCHOOL
4. SOMETHING ELSE
5. DK/REF

SKIP TO END OF C_L_6 LOOP

Skip Logic Box C_S_9 (CHK_C8a):
IF CHILD 60 MONTHS OR OLDER AND [PROVIDER] IS AN ELEMENTARY SCHOOL IN SAMPLE FRAME, ASK C8A
ELSE, SKIP TO C8_1

C8A. **CL5 *CL6* DV: HH9_BPSOURCEFLAG_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_SCHOOL_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_TYPEOFCARE_AGG_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS)

INTERVIEWER: CODE OR ASK IF NECESSARY: Is [PROVIDER NAME] a regular school such as a K to 6 or K to 8 elementary school or grades 6-8 middle school?

1. Yes
2. No → SKIP TO END OF C_L_5 LOOP
3. DK/REF → SKIP TO END OF C_L_5 LOOP

C8_1. **CL5 *CL6*
Last week, what were the hours of the regular school day at [PROVIDER]?
IF HOURS VARIED BY DAY, RECORD LONGEST DAY LAST WEEK.

START TIME: _____
-4. DK/REF
END TIME: _____
-4. DK/REF

End of C_L_6 Loop (**CL6*):
REPEAT C9-C8_1 EACH NEXT CHILD CARED FOR BY THIS PROVIDER (LISTED IN C2 AND C4)

End of C_L_5 Loop (**CL5*):
REPEAT C5A-C8_1 FOR EACH PROVIDER (LISTED IN C2 AND C4)

C14INTRO.
These next questions are about how you view different types of childcare or after-school care for children of the same age as [SELECTED CHILD]. Please think about each type of care in general, not any specific program you know of. The types of care I will ask you about are: center care, relative or friend care, home-based care from someone you didn't previously know, and parental care.

Start of C_L_7 Loop (**CL7*):
ASK C14_1-C14_6 FOR ALL TYPES OF CARE

C14_1. **CL7* RV: HH9_C14_1_X (X=1-4 TOC)
[Let's start with center care. Examples of center care include preschools, Head Start, an after school program at school, or a child care center.
/Let us continue with relative or friend care, where a relative or close family friend cares for a child in the relative's/friend's home or the child's home.
/Next let us think about family care, where an individual has a child care business in his or her own home and cares for a few or several children there.
/Last, let us talk about parental care, where the parents are the only care providers a child has.]
Now how would you rate it on having a nurturing environment for children of the same age as [SELECTED CHILD IN C14_SELECT]? Would you say: excellent, good, fair, poor?

1. Excellent

2. Good
3. Fair
4. Poor
5. No opinion
6. DK/REF

C14_2. **CL7* RV: HH9_C14_2_X (X=1-4 TOC)
How would you rate (center care/relative or friend care/family day care/parental care) on helping children be ready to learn in school for children of the same age as [SELECTED CHILD IN C14_SELECT]? Would you say excellent, good, fair, poor?

1. Excellent
2. Good
3. Fair
4. Poor
5. No opinion
6. DK/REF

C14_3. **CL7* RV: HH9_C14_3_X (X=1-4 TOC)
How about (center care/relative or friend care/family day care/parental care) for teaching children how to get along with other children? (Would you say it is excellent, good, fair, poor very good, somewhat good, or not very good for children of the same age as [SELECTED CHILD IN C14_SELECT]?)

1. Excellent
2. Good
3. Fair
4. Poor
5. No opinion
6. DK/REF

C14_4. **CL7* RV: HH9_C14_4_X (X=1-4 TOC)
How about safety in center care/relative or friend care/family day care/parental care (for children of the same age as [SELECTED CHILD IN C14_SELECT])? (Would you say it is excellent, good, fair, poor for children of the same age as [SELECTED CHILD IN C14_SELECT]?)

1. Excellent
2. Good
3. Fair
4. Poor
5. No opinion
6. DK/REF

C14_5. **CL7* RV: HH9_C14_5_X (X=1-4 TOC)
How about affordability of center care/relative or friend care/family care/parental care ()? (Would you say this type of care is excellent, good, fair, poor in terms of parents being able to afford it?)

1. Excellent
2. Good
3. Fair
4. Poor
5. No opinion
6. DK/REF

C14_6. **CL7* RV: HH9_C14_6_X (X=1-4 TOC)
How about flexibility for parents who use center care/relative or friend care/family care/parental care? (Would you say this type of care is excellent, good, fair, poor for parents' flexibility?)

1. Excellent
2. Good
3. Fair
4. Poor
5. No opinion
6. DK/REF

End of C_L_7 Loop:
REPEAT C14_1-C14_6 FOR ALL TYPES OF CARE

Section D. Respondent and Spouse Employment Schedules

Start of D_L_1 Loop (**DL1*):
ASK SECTION D FOR R, AND R'S SPOUSE IF ANY IN HOUSEHOLD (HH_B1D_RLTION_R_X = 1), AND FOR ANY OTHER PARENT OF A CHILD UNDER 13 IN HH (HH_B1E_HAVECHILD_X = 1), AND FOR ANY ADULT WHO IS A GUARDIAN (SELECTED IN B1_CUST)

D1A. **DL1* RV: HH9_D1A_WORK_X (X=1-9 HHM); DV: HH9_ECON_PARWORK; DV: HH9_ECON_PARWST; DV: HH9_PARWORK_STATUS; DV: HH9_PARWST_STATUS
I'm going to ask you about [your/HHMEM's] current work situation. Last week, did (you/s/he) do any work for pay?
IF NEEDED: Please include freelance work, work in the military, work for a family-owned business even if (you/s/he) did not get paid, and work on (your/his/her) own business or farm.

1. YES
2. NO
3. DK/REF

D1B. **DL1* RV: HH9_D1B_SCHOOL_X (X=1-9 HHM); DV: HH9_PARWST_STATUS; DV: HH9_ECON_PARWST
Last week, (did you/was s/he) attend classes in a high school, college or university?

1. YES, ATTENDED
2. NO, NOT ATTENDED
3. DK/REF

D1C. **DL1* RV: HH9_D1C_TRAINING_X (X=1-9 HHM); DV: HH9_PARWST_STATUS; DV: HH9_ECON_PARWST
Other than high school, college, or university, did (you/s/he) attend any courses or training programs last week designed to help people find a job, improve their job skills, or learn a new job?

1. YES, IN TRAINING
2. NO, NOT IN TRAINING
3. DK/REF

Summer Skip Logic Box S_S_5:
IF CHECK_S=1, SKIP TO SKIP LOGIC BOX D_S_2
ELSE, GO TO START LOOP BOX D_L_2

Start of D_L_2 Loop (**DL2*):
ASK D1D – D1D_C3 FOR ANY PARENT OF A CHILD < 13 IN THE HH OR ANY SPOUSE OR PARTNER OF A PARENT OF A CHILD < 13 OR A GUARDIAN IN A NON-PARENTAL HH

D1D. **DL1 *DL2* DV: HH9_ADCAL_X_Y; DV: HH9_BLOCKTIME_Z; DV: HH9_BLOCKDAY_Z

Next, I'd like to ask you about (your/his/her) day-to-day (work/school/training) schedule last week.

IF D1A=1 THEN DISPLAY "WORK'" AS AN OPTION IN THE CALENDAR DROP DOWN
IF D1B=1 THEN DISPLAY "SCHOOL" AS AN OPTION IN THE CALENDAR DROP DOWN
IF D1C=1 THEN DISPLAY "TRAINING" AS AN OPTION IN THE CALENDAR DROP DOWN

SELECT ACTIVITY FROM THE DROP-DOWN MENU AND ASK D1D_1 AND D1D_2 BELOW. IF R DID AN ACTIVITY MULTIPLE TIMES IN THE DAY, EACH SCHEDULE SHOULD BE REPORTED SEPARATELY.

	D1D. **DL1 *DL2* Thinking about last [DAY], [DATE], did you go to work/school/training?	**D1D_1.** **DL1 *DL2* What time did you begin [work/school/training] on **last [DAY]**? (Please include time you spent commuting to and from [work/school/training] in your response.) TIME STARTED:	**D1D_2.** **DL1 *DL2* What time did you end [work/school/training] on **last [DAY]**? TIME ENDED:	And did you attend work/ school/ training any other time that day?
SCHEDULE 1	1. Select Activity 2. Work 3. School 4. Training 5. NO WORK/SCH/TRNG ACTIVITY 6. DK/REF	_____ -4. DK/REF	_____ -4. DK/REF	
SCHEDULE 2	1. Select Activity 2. Work 3. Schoo0l 4. Training 5. NO WORK/SCH/TRNG ACTIVITY 6. DK/REF	_____ -4. DK/REF	_____ -4. DK/REF	

SCHEDULE 3	1. Select Activity 2. Work 3. School 4. Training 5. NO WORK/SCH/TRNG ACTIVITY 6. DK/REF	_____ -4. DK/REF	_____ -4. DK/REF	
SCHEDULE 4	1. Select Activity 2. Work 3. School 4. Training 5. NO WORK/SCH/TRNG ACTIVITY 6. DK/REF	_____ -4. DK/REF	_____ -4. DK/REF	
SCHEDULE 5	1. Select Activity 2. Work 3. School 4. Training 5. NO WORK/SCH/TRNG ACTIVITY 6. DK/REF	_____ -4. DK/REF	_____ -4. DK/REF	

D1D_C2. **DL1 *DL2*

What day(s) last week is (are) the same as [your/his/her] [DAY OF WEEK] schedule last week for work, school or training?

1. Monday
2. Tuesday
3. Wednesday
4. Thursday
5. Friday
6. Saturday
7. Sunday
8. No identical days

Skip Logic Box D_S_1:
IF DAY SELECTED DAY SELECTED IN D1D_C2, SKIP TO D1D_C3
ELSE, SKIP TO SKIP LOGIC BOX D_S_2

Gap Check Logic Box:
COMPARE EMPLOYMENT SCHEDULES (D1D Grid) AGAINST CHILD CARE SCHEDULES (C2 Grid) ON LAST [DAY], IF THERE ARE PERIODS OF ONE HOUR OR MORE WHEN CHILD NOT IN ANY CARE AND PARENT(S) AT WORK/SCHOOL/TRAINING, ASK CHK3
FOR THE GAP CHECK, ASK UP TO 7 GAPS ABOUT FOR EACH CHILD AND DAY

Start of D_L_3 Loop (*DL3):
ASK CHK3 – CHK3_SPECIFY FOR ALL CHILDREN WITH GAPS IN CARE

CHK3. *DL1 *DL2 *DL3
It seemed that (CHILD) was not in any care and you (and your spouse/partner) were at work/school/training from [INSERT SPELL OF TIME]. Was (CHILD) with you (and/or your spouse/partner) at work/school/training, or did he/she care for himself/herself during that period of time?

1. Child with r/r spouse/partner at work/school/training
2. Child with r/spouse/partner and r/spouse not at work/school/training
3. Child cared for him/herself
4. Child with sibling less than 18
6. Child with a parent who doesn't live in this HH
5. OTHER ARRANGEMENT

IF CHK3 = 5, ASK CHK3_SPECIFY
ELSE, SKIP TO END OF LOOP BOX D_L_3

CHK3_SPECIFY. *DL1 *DL2 *DL3
ENTER ANY ADDITIONAL INFORMATION ABOUT CHILD CARE GAP:

_____

End of D_L_3 Loop (*DL3):
REPEAT CHK3 – CHK3_SPECIFY FOR ALL CHILDREN WITH GAPS IN CARE

D1D_C3. *DL1 *DL2
Sometimes people's schedule on a specific day is different from their regular schedule for that day of the week. Thinking about last [DAY SELECTED IN D1D_C2] , was your/his/her schedule last [DAY SELECTED IN D1D_C2] identical to last [DAY D1D_C2 ASKED ABOUT] that week, or were there some differences in when you/he/she arrived at or left work, school, or training on those two days?

1. Identical → CHECK FOR GAPS, GO TO NEXT DAY
2. Some differences → LOOP TO D1D FOR DAY SELECTED IN D1D_C2

End of D_L_2 Loop (*DL2):
REPEAT D1D – D1D_C3 FOR ANY PARENT OF A CHILD < 13 IN THE HH OR ANY SPOUSE OR PARTNER OF A PARENT OF A CHILD < 13 OR A GUARDIAN IN A NON-PARENTAL HH

Skip Logic Box D_S_2:
IF HHM IS CHILD'S PARENT OR PARENT'S SPOUSE, ASK D2
ELSE, SKIP TO SKIP LOGIC BOX D_S_5

Start of D_L_4 Loop (*DL4):
ASK D2_1 – D5D FOR ALL PARENT'S AND SPOUSES OF PARENTS

D2_1INTRO. *DL1 *DL4
The next questions are about the people in this household who have young children or are caring for them. I may have different questions about each of you.

Skip Logic Box D_S_3:
IF D1A = 1, ASK D2
ELSE, SKIP TO D4

These next questions are about [you/[NAME]].

D2_1. *DL1 *DL4
Where is the place that (you/he/she) work(s) the most hours each week? Please tell me the address or nearest major intersection.

1. Work from home → SKIP TO D2_2
2. No set workplace → SKIP TO D2_2
3. Enter address
4. Enter cross-streets → SKIP TO D2_CROSS
5. DK/REF → SKIP TO D2_2

D2_ADDR. *DL1 *DL4
ENTER ADDRESS INFORMATION:

ADDRESS _____
-4. DK/REF
CITY _____
-4. DK/REF
STATE _____
-4. DK/REF
ZIP _____
-4. DK/REF

SKIP TO D2_TRANS

D2_CROSS. **DL1 *DL4*
CROSS-STREETS

STREET 1 _____
-4. DK/REF
STREET 2 _____
-4. DK/REF
CITY _____
-4. DK/REF

D2_TRANS. **DL1 *DL4*
How (do you/ does he/she) usually get to work?

1. car
2. public transportation
3. Bicycle
4. taxi or carpool
5. walking
6. VARIES/ OTHER METHOD
7. DK/REF

D2_COMMUTE. **DL1 *DL4*
On average, how long does it take (you/him/her) to make the trip to or from work? IF NECESSARY: Your best guess is fine.

_____ minutes for one-way commute

D2_2. **DL1 *DL4* RV: HH9_D2_2_X (X=1-9 HHM)
How far in advance (do you/he/she) usually know what days and hours you/he/she will need to work?

1. one week or less
2. between 1 and 2 weeks
3. between 3 and 4 weeks
4. 4 weeks or more
5. DK/REF

D2_3. **DL1 *DL4* RV: HH9_D2_3_X (X=1-9 HHM)
Did (you/she/he) work (your/his/her) usual schedule last week, is there no usual schedule, or was last week's schedule not the usual one?

1. Usual schedule
2. No usual schedule
3. Last week unusual
4. DK/REF

D2. *DL1 *DL4

What kind of work (do you/does he/she) do?

RECORD JOB OR OCCUPATION NAME IN TABLE BELOW.

IF NECESSARY: What is (your/his/her) title or the name of (your/his/her) job?

PROBE: What are the usual activities on that job?

[PERSON X]

_____

-4. DK/REF → SKIP TO D3D

D2A. *DL1 *DL4

What kind of business is that?

RECORD FIRM NAME OR INDUSTRY DESCRIPTION IN TABLE BELOW.

IF NECESSARY: What does the company make or do?

[PERSON X]

_____

-4. DK/REF → ASK D3D

D3D. *DL1 *DL4 RV: HH9_D3D_UNIT_X (X=1-9 HHM); RV: HH9_D3D_WAGE_TC_X (X=1-9 HHM)

About how much are you paid at that job?

[D2 JOB NAME]

RECORD WAGE:_____

-4. DK/REF

Is that per…?

RECORD UNIT:

1. Per hour
2. Per day
3. Per week
4. Bi-weekly
5. Per month
6. Per year
7. OTHER
8. DK/REF

Skip Logic Box D_S_4:
IF D1A=1 SKIP TO END OF D_L_4 LOOP
ELSE, ASK D4

D4. *DL1 *D4 RV: HH9_D4_EVERWRK_X (X=1-9 HHM)

[Have you/has he/she] ever worked for pay?

1. Yes
2. No → SKIP TO END D_L_4 LOOP
3. DK/REF → SKIP TO END OF D_L_4 LOOP

D5A. **DL1 *DL4*
What was the last job that (you/he/she) had? What was the job title or what were the main duties of the job?

_____

D5B. **DL1 *DL4* RV: HH9_D5B_LASTWRKMOYR_R_X (X=1-9 HHM)
When did you/he/she last work at that job?
INTERVIEWER INSTRUCTION: ENTER 33/33 IF R STILL WORKS THERE

MONTH: _____
Range: 1-12, 33
YEAR: _____
Range: 1900-2019, 33

D5C. **DL1 *DL4* RV: HH9_D5C_HOUR_X (X=1-9 HHM)
About how many hours [did/do] (you/he/she) usually work at that job each week [when (you/he/she) stopped working there]? Would you say it was less than 15, between 15 and 30, or more than 30 hours per week?

1. LESS THAN 15
2. 15 TO 30
3. MORE THAN 30
4. DK/REF

D5D. **DL1 *DL4* RV: HH9_D5D_WAGE_TC_X (X=1-9 HHM); RV: HH9_D5D_UNIT_X (X=1-9 HHM)
About how much (were you/was he/she/are you) paid at that job? Your best estimate is fine.

AMOUNT: _____
-4. DK/REF

PER UNIT OF TIME

1. Per hour
2. Per day
3. Per week
4. Bi-weekly
5. Per month
6. Per year
7. OTHER
8. DK/REF

End of D_L_4 Loop (*DL4):
REPEAT D2_1 – D5D FOR ALL PARENT'S AND SPOUSES OF PARENTS

Skip Logic Box D_S_5:
IF HH ONLY USES PARENTAL CARE, SKIP TO SKIP LOGIC BOX D_S_6
ELSE IF R, ANOTHER PARENT OF CHILD <13, OR REGULAR CAREGIVER IN HH EMPLOYED (D1A1 = 1), ASK D9A

For these next questions, please think about the adults in the household who have young children or care for them at least 5 hours per week. That is [INSERT NAME(S)].

D9A. *DL1 RV: HH9_D9A_CCAREDAY
How many days in the past month did [one of] you work from home for a child-care related reason, such as wanting to stay nearby for a sick child, you didn't have a child-care arrangement in place, or your child-care provider was sick?

DAYS: _____
Range: 0-31
-4. DK/REF

D10. *DL1 RV: HH9_D10_DAYMISSED
During the past 3 months, how many days of work have [one of] you missed for any reason? Don't include scheduled holidays or vacation days.

DAYS: _____
Range: 0-100
-4. DK/REF

IF D10 = 0, SKIP TO D11
ELSE, ASK D10A

D10A. *DL1 RV: HH9_D10A_CCAREMISS
How many of these days did [one of] you miss because your provider was sick or on vacation?

DAYS: _____
Range: 0-100
-4. DK/REF

D10B. *DL1 RV: HH9_D10B_KIDSICK
How many days did [one of] you miss because a child was sick and had to stay home?

DAYS: _____
Range: 0-100
-4. DK/REF

Skip Logic Box D_S_6:
IF D10A > 0 OR D10B > 0, ASK D10C
ELSE, SKIP TO D11

D10C. **DL1* RV: HH9_D10C_MISSNOPAY
Did that person lose any pay because of missed work?

1. YES
2. NO

D11. **DL1* RV: HH9_D11_DAYLATE
During the past 3 months, how many days did [one of] you get to work late or have to leave early for any reason?

DAYS: _____
Range: 0-100
-4. DK/REF

IF D11 = 0, SKIP TO D12
ELSE, ASK D11A

D11A. **DL1* RV: HH9_D11A_DAYEARLY
How many of these days did [one of] you get to work late or leave early because of child care responsibilities?

DAYS: _____
Range: 0-100
-4. DK/REF

IF D11A = 0, SKIP TO D12
ELSE, ASK D11B

D11B. **DL1* RV: HH9_D11B_DAYLOSEPAY
Did that person lose any pay because of getting to work late or leaving early?

1. YES
2. NO

D12. **DL1* RV: HH9_D12_DAYSPEC
Approximately how many days in the last 3 months did [one of] you have to make special arrangements for (CHILD)'s care because a provider was sick or unavailable? Don't count days that were holidays anyway.

DAYS: _____
Range: 0-100
-4. DK/REF

D13. **DL1* RV: HH9_D13_DAYSPEC_OTH

Approximately how many days in the last 3 months did [one of] you have to make special arrangements for (CHILD)'s care for some other reason (for example, a child was sick, transportation broke down, or any other reason)? Don't count days that were holidays anyway.

DAYS: _____

Range: 0-100

-4. DK/REF

Skip Logic Box D_S_6:
IF R OR R'S SPOUSE EMPLOYED (D1A1=1), ASK D15. ELSE SKIP TO SUMMER SKIP LOGIC BOX S_S_5

D15. **DL1* RV: HH9_D15_FLEXACCT

Do you or your spouse participate in a cafeteria-style flexible spending account at work so that you can pay for child care expenses out of pre-tax income?

1. Yes
2. No
3. DK/REF

Summer Skip Logic Box S_S_5:
IF CHECK_S=1, ASK D2_INTRO
ELSE, SKIP TO SECTION J

DS_INTRO.

Now I will ask you some questions about a typical week in May.

Start of S*ummer Loop S_L_2* (**SL2*)*:*
ASK DS_1 – DS_2C FOR ALL SPECIFIED INDIVIDUALS

DS_1. **DL1 *SL2*

In a typical week in May, how many hours did (you/[HHMEM]) spend working and commuting to and from work? Please enter 0 if you did not work any hours in a typical week.

_____ hours

-4. DK/REF

IF DS_1 = 0, SKIP TO END OF SUMMER LOOP S_L_2
ELSE, ASK DS_2

DS_2. **DL1 *SL2*
How many of these hours were Monday through Friday between 8am and 6pm?

_____ hours
-4. DK/REF

DS_2a. **DL1 *SL2*
In May, did (you/[HHMEM]) usually work or commute to and from work any hours Monday through Friday before 8am?

1. Yes
2. No
3. DK/REF

DS_2b. **DL1 *SL2*
In May, did (you/[HHMEM]) usually work or commute to and from work any hours Monday through Friday after 6pm?

1. Yes
2. No
3. DK/REF

DS_2c. **DL1 *SL2*
In May, did (you/[HHMEM]) usually work or commute to and from work any hours on Saturdays or Sundays?

1. Yes
2. No
3. DK/REF

End of *Summer Loop S_L_2* (**SL2*)*:*
REPEAT DS_1 – DS_2C FOR ALL SPECIFIED INDIVIDUALS

Skip Logic Box D_S_7:
IF DS_1 > 0 FOR R AND FOR R'S SPOUSE, ASK DS_3
ELSE, SKIP TO SECTION J

DS_3. **DL1*
In a typical week in May, how many hours were both you and your spouse or partner at work or commuting at the same time?

_____ hours
Range: 0-168
-4. DK/REF

IF DS_3 > 0, ASK DS_4
ELSE, SKIP TO SECTION J

DS_4. **DL1*

How many of those hours were between 8am and 6pm Monday through Friday?

_____ hours

Range: <= DS_3

-4. DK/REF

End of D_L_1 Loop (**DL1*):

REPEAT SECTION D FOR R, AND R'S SPOUSE IF ANY IN HOUSEHOLD (HH_B1D_RLTION_R_X = 1), AND FOR ANY OTHER PARENT OF A CHILD UNDER 13 IN HH (HH_B1E_HAVECHILD_X = 1), AND FOR ANY ADULT WHO IS A GUARDIAN (SELECTED IN B1_CUST)

Section J. Nonparental Care Payment and Subsidy to Each Provider

Skip Logic Box J_S_1
IF ANY PROVIDER IS (1) NOT DROP-IN (C8_4 ≠ 1) AND (2) NOT SINGLE SITE (C8_3 ≠ 1) AND (3) NOT INDIVIDUAL UNPAID PRIOR RELATIONSHIP (DO NOT ENTER WHEN C5C = 1 AND C5E = 2)
AND (4) IF CHILD IS NOT IN ELEMENTARY/MIDDLE SCHOOL (C8B_X ≠ 1) AND (5) NOT IRREGULAR CARE (C9_X ≠ 2) GO TO START OF J_L_1 LOOP
ELSE, SKIP TO SECITON F

Start of J_L_1 Loop (*JL1):
ASK SECTION J (J1 – J11_SAME) FOR EACH CHILD AND PROVIDER, STARTING WITH THE YOUNGEST CHILD

INTERVIEWER CHECK 1. *JL1
HAS PAYMENT, REIMBURSEMENT AND SUBSIDY FOR THIS CHILD IN THIS ARRANGEMENT ALREADY BEEN COVERED IN A PREVIOUS LOOP'S RESPONSE?
[CHECK IF OTHER CHILDREN USE THE SAME PROVIDER AND J11=2 AND J11_OTHCHLDRN=THIS CHILD]

1. YES → SKIP TO END OF J_L_1 LOOP
2. NO/NOT SURE

INTERVIEWER CHECK 2. *JL1
IS PAYMENT, REIMBURSEMENT AND SUBSIDY FOR THIS CHILD IN THIS ARRANGEMENT THE SAME AS THE PAYMENT, REIMBURSEMENT AND SUBSIDY FOR ANOTHER CHILD IN THIS ARRANGEMENT?
[CHECK IF OTHER CHILDREN USE THE SAME PROVIDER AND J11_SAME=THIS CHILD]

1. YES → SKIP TO END OF J_L_1 LOOP
2. NO/NOT SURE

J1_E1. *JL1 DV: HH9_WEEKLY_COST_CARE_TC_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_WEEKLY_PAYMENT_TC_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_COPAY_FLAG_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_FLAG_J2_OUT_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_TYPEOFCARE_AGG_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS)
Now I have some more questions about the regular child care arrangements you use. We will start with your youngest child and (his/her) arrangements. [SHOW THIS SENTENCE JUST ONE TIME]

Do you pay [PROVIDER FILLED IN FROM C1A] anything directly for the care of [CHILD]? Please include payments even if you are later reimbursed.

1. Yes
2. No → SKIP TO J3_E2
3. DK/REF → SKIP TO J3_E2

J2_E7. *JL1 DV: HH9_WEEKLY_COST_CARE_TC_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_WEEKLY_PAYMENT_TC_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_FLAG_J2_OUT_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS)

How much do you pay this [PROVIDER]?

$_____

-4. DK/REF → SKIP TO J3

J2A_E7_A. *JL1 DV: HH9_WEEKLY_COST_CARE_TC_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_WEEKLY_PAYMENT_TC_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_FLAG_J2_OUT_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS)

Is that per hour, per day, per week, bi-weekly, monthly, or something else?

1. Per Hour
2. Per day
3. Per week
4. Every other week
5. Per month
6. Something else
7. DK/REF
8. Added: Per year
9. Added: School year
10. Added: Per X # months
11. Added: Semester
12. Added: Session
13. Added: Quarter
14. Added: Half-day
15. Added: One -time fee
16. Added: Flat rate
17. Added: Per X # weeks
18. Added: Whole program
19. Added: Per X # days
20. Added: Varies/Depends/Occasionally

IF J2_E7_A = 6, ASK J2A_E7_OS
ELSE, SKIP TO J3_E2

J2A_E7_OS. *JL1

Please specify: _____

J3_E2. *JL1 DV: HH9_OTHPAYPROV_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS)

Is the [PROVIDER] IF J1 = 1 THEN ADD: [also] paid by any person or program for the care of (CHILD)? Do not include payments or reimbursements that go directly to you.

1. Yes
2. No
3. DK/REF

Skip Logic Box J_S_2:
IF J3_E2 = 2 AND IF J1_E1 = 2, SKIP TO J5_E5
ELSE, IF J3_E2 = 2, SKIP TO J9_E9
ELSE, IF J3_E2 = 3, SKIP TO J9_E9
ELSE, ASK J4_E3

J4_E3. *JL1*
Who pays them? MARK ALL THAT APPLY

8. A government agency such as for welfare, employment services or child development
9. A non-government organization such as a community group or a religious institution
10. The child's parent who lives outside of this household
11. Other family or friend
6. An Employer
7. Other
12. Don't Know/Refused

Skip Logic Box J_S_3:
IF J3_E2 = 2 AND IF J1_E1 = 2, ASK J5_E5
ELSE, SKIP TO J9_E9

J5_E5. *JL1* DV: HH9_WEEKLY_COST_CARE_TC_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_WEEKLY_PAYMENT_TC_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS)
So this care is provided free by [PROVIDER]?

1. Yes
2. No
3. DK/REF

J9_E9. *JL1* DV: HH9_WEEKLY_COST_CARE_TC_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_WEEKLY_PAYMENT_TC_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); HH9_SUBSIDY_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_ANY_SUBS_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS)
Do you receive payments or reimbursements that are paid directly to you to cover some portion of the payments you make to [PROVIDER] for [CHILD]'s care?

1. Yes
2. No → SKIP TO SKIP LOGIC BOX J_S_4
3. DK/REF → SKIP TO SKIP LOGIC BOX J_S_4

J9A_E9A. *JL1* DV: HH9_WEEKLY_COST_CARE_TC_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_WEEKLY_PAYMENT_TC_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); HH9_SUBSIDY_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_ANY_SUBS_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS)

How much do you receive in payments or reimbursements that are paid directly to you for [PROVIDER]?

$_____
-4. DK/REF → SKIP TO J9_1

J9B_E9B. *JL1 DV: HH9_WEEKLY_COST_CARE_TC_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_WEEKLY_PAYMENT_TC_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); HH9_SUBSIDY_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_ANY_SUBS_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS)
Is that per hour, per day, per week, bi-weekly, monthly, or something else?

1. Per hour
2. Per day
3. Per week
4. Every other week
5. Per month
6. Something else (SPECIFY:_____)
7. DK/REF/No Response
8. Added: Per year

J9_1. *JL1
Who makes these payments or reimbursements that are paid directly to you? (If more than one, please select the payer covering the highest amount).

8. A government agency such as for welfare, employment services or child development
9. A non-government organization such as a community group or a religious institution
10. The child's parent who lives outside of this household
11. Other family or friend
6. An Employer
7. Other
-1. Don't Know/Refused

Skip Logic Box J_S_4:
IF (S1 + S1_SA+ B1a1) >=8, THEN J10_ subelig = 1 AND SKIP TO SKIP LOGIC BOX J_S_5
ELSE IF (S1 + S1_SA+ B1a1) <= 7, ASK J10 _subelig

J10_subelig. *JL1 DV: HH9_WEEKLY_COST_CARE_TC_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_SUBSIDY_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_ANY_SUBS_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_COPAY_FLAG_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS)
In order to understand whether or not child care is affordable to American families, we need to know your household's income. Was your total household income in 2018, before taxes and other deductions, below

IF (S1 + S1_SA + B1a1) = 2: [$26,000]
IF (S1 + S1_SA + B1a1) = 3: [$39,000]
IF (S1 + S1_SA + B1a1) = 4: [$52,000]
IF (S1 + S1_SA + B1a1) = 5: [$65,000]

IF (S1 + S1_SA + B1a1) = 6: [$78,000]
IF (S1 + S1_SA + B1a1) = 7: [$91,000]?

1. Yes
2. No
3. DK/REF

Skip Logic Box J_S_5:
IF J10_subelig = 2, SKIP TO SKIP LOGIC BOX J_S_6
ELSE, IF J10_subelig = 1 OR J10_subelig = 3 AND J1_E1 = 1, ASK J6_E6
ELSE, SKIP TO J8A_E2A

J6_E6. *JL1*
Now think about the money you pay for [PROVIDER]. Sometimes the amount of money that a parent is charged for a child care arrangement or program depends on how much the family earns. This is sometimes called a sliding fee scale.

Is the amount you pay to [PROVIDER] determined by how much money you earn?

1. Yes
2. No
3. DK/REF

J7_E4. *JL1* DV: HH9_COPAY_FLAG_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS)
Is this amount you pay provider [PROVIDER] a co-payment for a child care subsidy paid to the provider?

1. Yes
2. No
3. DK/REF

J8A_E2A. *JL1*
Did you have to provide any proof that you were employed, in school, in training or searching for work in order to enroll your child with this provider?

1. Yes
2. No
3. DK/REF

J8B_E2B. *JL1*

As far as you know, do you receive any help from a child care subsidy program such as [STATE CCDF PGM] to pay [PROVIDER] for your child's care?

1. Yes
2. No
3. DK/REF

Skip Logic Box J_S_6
IF R HAS MORE THAN ONE CHILD WHO USES PROVIDER AND THIS IS THE FIRST CHILD USING THIS PROVIDER AND PROVIDER IS INDIVIDUAL (C5A = 1), THEN ASK J11
ELSE, IF R HAS MORE THAN ONE CHILD WHO USES PROVIDER AND THIS IS THE FIRST CHILD USING THIS PROVIDER AND PROVIDER IS NOT INDIVIDUAL (C5A ≠ 1), SKIP TO START OF J_L_2 LOOP

J11. *JL1* DV: HH9_WEEKLY_COST_CARE_TC_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_WEEKLY_PAYMENT_TC_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_PAID_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS)

Is the information that you told me about for payment, reimbursement and subsidy arrangements for (CHILD) in (PROVIDER) only for (CHILD), or does it cover more than one child?

1. Child only → SKIP TO START OF J_L_2 LOOP
2. Other children
3. DK/REF → SKIP TO START OF J_L_2 LOOP

J11_OTHCHLDRN. *JL1* DV: HH9_WEEKLY_PAYMENT_TC_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_WEEKLY_COST_CARE_TC_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_PAID_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS)

Which children?

1. Child 1
2. Child 2
3. Child 3
4. Child 4
5. Child 5
6. Child 6
7. Child 7
8. Child 8
9. Child 9
10. Child 1
-4. DK/REF

Start of J_L_2 Loop (*JL2*):
ASK J11_SAME FOR ALL CHILDREN WHO RECEIVE CARE FROM PROVIDER AND WERE NOT REPORTED TO BE IN J11_OTHCHILDREN

J11_SAME. **JL1 *JL2* DV: HH9_WEEKLY_COST_CARE_TC_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_WEEKLY_PAYMENT_TC_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS); DV: HH9_PAID_X_Y (X=1-9 CHILDREN, Y=1-14 PROVIDERS)

You have other children who receive care from [PROVIDER] as well.

Is the information that you told me about for payment, reimbursement and subsidy arrangements for (CHILD) in (PROVIDER) the same as the payment, reimbursement and subsidy for (OTHER CHILD) in (PROVIDER)?

1. Yes
2. No
3. DK/REF

End of J_L_2 Loop (**JL2*):
REPEAT J11_SAME FOR ALL CHILDREN WHO RECEIVE CARE FROM PROVIDER AND WERE NOT REPORTED TO BE IN J11_OTHCHILDREN

End of J_L_1 Loop (**JL1*):
REPEAT SECTION J FOR EACH CHILD AND PROVIDER

IF THERE IS ANOTHER PROVIDER FOR THIS CHILD, RETURN TO INSTRUCTIONS BEFORE J1 AND ASK SECTION J FOR NEXT PROVIDER FOR THIS CHILD.

IF THERE IS NOT ANOTHER PROVIDER FOR THIS CHILD, RETURN TO INSTRUCTIONS BEFORE J1 AND ASK SECTION J FOR NEXT CHILD, PROVIDER 1.

IF THERE ARE NO MORE PROVIDERS AND NO MORE CHILDREN, GO TO SECTION F.

Section F. Non-Parental Child Care Search

ASK SECTION F QUESTIONS ABOUT CHILD SELECTED IN C14

F2_INTRO.
Next, I'm going to ask you some questions about your latest search for child care, whether or not a new arrangement resulted from the search. We are interested in things like what you were looking for, how you were searching, and what you considered during your search.

[FOR SCHOOL AGE CHILDREN: Please think about before or after-school care you searched for, or activities, lessons or other programs outside of the regular school day.]

F2.
Please think about the last time you searched for care for [SELECTED CHILD NAME].

What year and month was that?

IF NEEDED: Please think about when you last wanted to start a new arrangement for someone to care for him/her, even if you knew who would provide that care. What year and month was that?

ENTER 99 IF R DID NOT DO SEARCH

MONTH: _____
Range: 1-12, 99
-4. DK/REF
YEAR: _____
Range: 99, 1990-2019
-4. DK/REF

IF YEAR=99, GO TO G1
ELSE IF MONTH=99 AND YEAR=DK/REF, GO TO G1
ELSE IF MONTH=DK/REF AND YEAR=DK/REF, GO TO G1
ELSE IF MONTH=DK/REF AND YEAR=2 YEARS AGO OR MORE, GO TO G1
ELSE IF MONTH=99 AND YEAR=10 YEARS AGO OR MORE, GO TO G1
ELSE IF LAST SEARCH 25 MONTHS OR MORE AGO, GO TO G1
ELSE, GO TO SKIP LOGIC FOX F_S_1

Skip Logic Box F_S_1:
IF S1>1 (TWO OR MORE CHILDREN IN THE HH) THEN GO TO F2A
ELSE GO TO F3

F2A. RV: HH9_F2A_CHILD_X (X=1-9 CHILDREN)
Were you also searching for care for another child at the same time?

CODE ALL THAT APPLY

1. NO OTHER CHILD
2. Child1
3. Child2
4. Child3
5. Child4
6. Child5
7. Child6
8. Child7
9. Child8
10. Child9
11. Child10
12. DK/REF

F3. RV: HH9_F3_REASON_R

What is the main reason that you were looking for child care at that time?

1. SO THAT I COULD WORK/CHANGE IN WORK SCHEDULE
2. TO PROVIDE MY CHILD EDUCATIONAL OR SOCIAL ENRICHMENT
3. TO GIVE ME SOME RELIEF
4. TO FILL IN GAPS LEFT BY MY MAIN PROVIDER OR BEFORE/AFTER SCHOOL
5. WASN'T SATISFIED WITH CARE
6. WANTED TO REDUCE CHILD CARE EXPENSES
7. PROVIDER STOPPED PROVIDING CARE
8. CHILD NO LONGER ELIGIBLE FOR PREVIOUS CARE (E.G., AGED OUT OR SUMMER BREAK)
11. SO THAT R OR R'S SPOUSE COULD GO TO SCHOOL/SCHOOL SCHEDULE CHANGED
9. OTHER
10. DK/REF
12. Added: Family moved to new area
13. Added: Change in family/household composition (e.g., death, divorce, pregnancy, new baby, etc.)
14. Added: Health problems created need for care arrangement
15. Added: Needed a provider who was closer to home or work
16. Added: Wanted to give PROVIDER relief
17. Added: PROVIDER moved
18. Added: Care during a temporary commitment by parent(s)/R (e.g., scrapbooking meeting, PTA meeting, bible study, date night, birthday party, weekend getaway, to run errands, Medical or Doctor Appointment)
19. Added: Needed care that could provide transportation to/from school
20. Added: A specific extra curricular activity (e.g., violin lessons, skiing lessons)
21. Added: Child WANTED to go to program
22. Added: To learn what care arrangements were available/to learn about other options in case I needed one

23. Added: Child needed a special kind of help (e.g., speech therapy, special needs, disabled, bilingual, etc.)
24. Added: Specific reason not given

IF F3 = 9, ASK F3_OS
ELSE, SKIP TO F4

F3_OS.
SPECIFY: _____
-4. DK/REF

F4. RV: HH9_F4_TYPE_R
At the time of that last search, what type of child care were you mostly using for [SELECTED CHILD NAME]?

1. Parental care only
2. Home-based provider I had prior personal relationship with
3. Home-based provider I didn't have prior personal relationship with
4. Center-based care
5. OTHER
6. DK/REF
7. Added: Siblings (child's)
8. Added: Single activity care arrangement
9. Added: Home-based provider - relationship uncertain
10. Added: Child not born yet/just been born/not yet adopted or in custody
11. Added: Summer Camp
12. Added: Combination of center-based and home-based care (e.g., camp and family care, school and grandma, etc.)
13. Added: Combination of all (1-4)
14. Added: Child cared for him/herself

IF F4 = 5, ASK F4_OS
ELSE, SKIP TO C14A_GRID

F4_OS.
SPECIFY: _____
-4. DK/REF

C14A_GRID.

Characteristics of care may be more or less important for different children depending on the age or personality of the child.

	1. Very Important	2. Somewhat Important	3. Not Very Important	4. NO OPINION	5. DK/REF
C14A. Thinking about [SELECTED CHILD NAME], how important was a loving environment for him/her? Would you say very important, somewhat important, or not very important? RV: HH9_C14A_1_NURTUR					
C14A_2. How about helping children being ready to learn in school? (Would you say it was very important, somewhat important, or not very important for [SELECTED CHILD NAME])? RV: HH9_C14A_2_EDU					
C14A_3. How about learning how to get along with other children? (Would you say it was very important, somewhat important, or not very important for [SELECTED CHILD NAME])? RV: HH9_C14A_3_SOC					
C14A_5. How about affordability? (Would you say it was very important, somewhat important, or not very important)? RV: HH9_C14A_4_AFFORD					

	1. Very Important	2. Somewhat Important	3. Not Very Important	4. NO OPINION	5. DK/REF
C14A_6. How about flexibility for you? (Would you say it was very important, somewhat important, or not very important)? RV: HH9_C14A_5_FLEX					

F5. RV: HH9_F5_MULTIPLE; DV: HH9_F6A_PERSONAL; DV: HH9_F6A_NOPERSONAL; DV: HH9_F6A_CENTER; DV: HH9_F6A_OTH; DV: HH9_F6B_FRIEND; DV: HH9_F6B_REFER; DV: HH9_F6B_AD; DV: HH9_F6B_OTH; DV: HH9_F9C_CENTER; DV: HH9_F9C_PERSONAL; DV: HH9_F9C_NOPERSONAL; DV: HH9_F9C_OTH
Thinking about your last child care search for [SELECTED CHILD NAME] in [YEAR from F2], did you consider more than one provider as part of your search or did you consider only one provider? Please include providers you asked about, read about, or talked to, even if you didn't consider them seriously in your decision.

1. More than one provider considered →SKIP TO F7
2. Only one provider considered
3. DK/REF → SKIP TO F10

F6A. RV: HH9_F6A_PRVTYPE; DV: HH9_F6A_PERSONAL; DV: HH9_F6A_NOPERSONAL; DV: HH9_F6A_CENTER; DV: HH9_F6A_OTH
IF NOT ALREADY STATED: What type of provider is this?

1. Home-based provider I had prior personal relationship with → SKIP TO F10
2. Home-based provider I didn't have prior personal relationship with
3. Center-based care
4. OTHER
5. DK/REF

F6B. RV: HH9_F6B_KNWLEDGE2; DV: HH9_F6B_FRIEND; DV: HH9_F6B_REFER; DV: HH9_F6B_AD; DV: HH9_F6B_OTH
How did you know about this provider?
RECORD VERBATIM AND CODE

_____
-4. DK/REF

1. Self/family members/friends work or worked in the center
2. Knew provider personally
3. Self/friends/family have used this provider in the past

4. Provider has good reputation in the community
5. No other providers of this type in the area
6. Saw advertisement online or elsewhere
7. Resource and referral agency
8. DK/REF

SKIP TO SKIP LOGIC BOX F_S_2

F7. RV: HH9_F7_SEARCH_M_X_R (X=01-18 SELECT ALL THAT APPLY VARIABLES)
How did you look for providers in your last search?
CODE FIRST TWO MENTIONS. DO NOT READ RESPONSES EXCEPT TO PROBE.

1. ASKED FRIENDS AND FAMILY WITH CHILDREN
2. ASKED PROVIDERS I KNEW ALREADY
7. ASKED A HEALTHCARE PROVIDER, CLERGY MEMBER, OR OTHER PROFESSIONAL
18. USED SOCIAL MEDIA TO LEARN ABOUT PROVIDERS FROM PEOPLE I DON'T KNOW WELL
3. CONSULTED A RESOURCE AND REFERRAL AGENCY OR LOCAL COMMUNITY ORGANIZATION THAT HELPS PARENTS FIND CHILD CARE
4. POSTED AN AD OR RESPONDED TO AN AD
5. LOOKED IN PAPER DIRECTORIES FOR CHILD CARE PROVIDERS
10. LOOKED IN ELECTRONIC DIRECTORIES FOR CHILD CARE PROVIDERS
6. GOT HELP FROM A WELFARE OR SOCIAL SERVICES CASEWORKER
8. OTHER
9. DK/REF
11. Added: Drove/rode around
12. Added: Asked School
13. Added: Previous Experience with Provider (e.g., through older siblings)
14. Added: Made phone calls
15. Added: In person visits
16. Added: Near home or work/location
17. Added: Referral through church

IF F7 = 8, ASK F7_OS
ELSE, SKIP TO F8B

F7_OS.
SPECIFY: _____
-4. DK/REF

F8B. RV: HH9_F8B_INFO_X (X=1-16 SELECT ALL THAT APPLY VARIABLES)
What was the specific information you tried to learn about providers?
RECORD VERBATIM AND CODE UP TO THREE MENTIONS, DO NOT READ CATEGORIES

_____
-4. DK/REF

1. Type of care
2. Hours of care
3. Willingness to accept or availability of subsidies
4. Financial aid available
5. Fees charged
6. Geographic location
7. Public transportation accessibility
8. Content of program
9. Year round care
10. Services provided (e.g., transportation, meals, etc.)
11. Languages spoken
12. Curriculum/philosophy (including religion)
13. Licensing status
14. Teacher tenure/turnover
15. Other
16. DK/REF

F9.
I am going to ask you some more questions about the providers you considered most carefully before you made your final decision. Please think about the 2 providers you considered the most carefully. I'll ask you about them one by one.

Start of F_L_1 Loop (**FL1*):
ASK F9C – F9M FOR FIRST AND SECOND PROVIDER CONSIDERED

F9C. **FL1* RV: HH9_F9C_TYPE_X_R (X=1-2 PROVIDERS); DV: HH9_F9C_CENTER; DV: HH9_F9C_PERSONAL; DV: HH9_F9C_NOPERSONAL; DV: HH9_F9C_OTH
What type of provider was the [first/second] provider you considered?

1. Home-based provider I had prior personal relationship with
2. Home-based provider I didn't have prior personal relationship with
3. Center-based care
4. OTHER
5. DK/REF
6. Added: Single activity provider (fencing, gymnastics, etc.)
7. Added: Summer camp

8. Added: Home-based provider - prior relationship unspecified
9. Added: Sibling
10. Added: Did not consider a 2nd provider (applicable for HH_F9C_TYPE_2 only)
11. Added: myself

IF F9C = 4, ASK F9C_OS
ELSE, SKIP TO F9E

F9C_OS. *FL1*

SPECIFY: _____

-4. DK/REF

F9E. *FL1*

How much would it have cost you to have that provider care for [SELECTED CHILD NAME]?

_____

Range: 0-99999

-4. DK/REF → SKIP TO F9J

F9F. *FL1*

Is that per…

1. Hour
2. Day
3. Week
4. Month
5. OTHER
6. DK/REF
7. Added: Year
8. Added: School Year
9. Added: Summer
10. Added: Semester
11. Added: Session
12. Added: Bi-weekly/every 2 weeks
13. Added: For X # weeks (specific number)
14. Added: For X # hours (specific number)
15. Added: For X # months (specific number)
16. Added: For X # days (specific number)
17. Added: For X # classes (specific number)
18. Added: One time fee/registration fee
19. Added: Season/occasion
20. Added: Whole program/total costs
21. Added: Not monetary payment

IF F9F = 4, ASK F9F_OS
ELSE, SKIP TO F9J

F9F_OS. *FL1
SPECIFY: _____
-4. DK/REF

F9J. *FL1
How many minutes would it take in travel time for you or some one else to take [SELECTED CHILD NAME] to that provider?

_____
Range: 1-999
-4. DK/REF

F9L. *FL1 RV: HH9_F9L_COVERHRS_X (X=1-2 PROVIDERS)
How well would the provider's schedule have covered the hours of care you needed?

1. Would have covered hours of care I needed
2. Would have covered most of hours I needed
3. Would not have covered most of hours I needed
4. Would not have covered hours at all
5. DK/REF

F9M. *FL1 RV: HH9_F9M_QUAL_X (X=1-2 PROVIDERS)
How would you rate the overall quality of that provider?

1. Best I can imagine
2. Better than I had expected to find for my child
3. Good for my child
4. Good enough for my child, but not as good as I'd wish for
5. Only good enough for the short-term
6. Not good enough for my child
7. DK/REF

End of F_L_1 Loop (*FL1):
REPEAT F9C – F9M FOR FIRST AND SECOND PROVIDER CONSIDERED

Skip Logic Box F_S_2:
IF F6A ≠ 3 AND F9C ≠ 3, ASK F10
ELSE, SKIP TO SKIP LOGIC BOX F_S_3

F10. RV: HH9_F10_CENTER

Did you consider any [child-care] centers or organizations for [school-age] children as part of your search?

1. Yes
2. No
3. DK/REF

Skip Logic Box F_S_3:
IF F6A ≠ 1 AND F9C ≠ 1, ASK F11
ELSE, SKIP TO SKIP LOGIC BOX F_S_4

F11. RV: HH9_F11_FFN

Did you consider asking someone you know to care for your child, for example a family member, friend or neighbor?

1. Yes
2. No
3. DK/REF

Skip Logic Box F_S_4:
IF F6A ≠ 2 AND F9C ≠ 2, ASK F12
ELSE SKIP TO F13

F12. RV: HH9_F12_FAMILY

As part of your search, did you consider someone who provides care at home but whom you didn't know before?

1. Yes
2. No
3. DK/REF

F13. RV: HH9_F13_RESULT_M_R; RV: HH9_RESULT

What was the result of this search for child care?

1. Found care
2. Stayed with existing provider
3. Decided not to use care other than parents
4. Gave up search for another reason
5. OTHER
6. DK/REF
7. Still searching/looking
8. Added: Provider selected but on wait list/no openings at this time/waiting to hear if accepted
9. Added: Waiting to hear about funding

10. Added: New provider no longer needed/Not yet needed at this time due to not finding a job yet or child's age
11. Added: Did not qualify/Not accepted
12. Added: R selected provider but it did not work out
13. Added: Decided to use family and friends
14. Added: Search unsuccessful/ Did not find care
15. Added: Other Recoded To: Found Care

IF F13 = 5, ASK F13_OS
ELSE, SKIP TO SKIP LOGIC BOX F_S_5

F13_OS.
SPECIFY: _____
-4. DK/REF

Skip Logic Box F_S_5:
IF F5 = 1 AND F13 = 1 ASK F13A
ELSE, SKIP TO F14

F13A. RV: HH9_F13A_CHOOSE
Did you choose the first or second provider you told me about?

1. [FIRST PROVIDER TYPE FROM F9C]
2. [SECOND PROVIDER TYPE FROM F9C]
3. DK/REF

F14. RV: HH9_F14_REASON_R
What was the main reason you made that decision?

1. Had no other choices
2. Cost
3. Schedule
4. Location
5. Quality of care
6. Best feeling
7. Provider had space available
8. OTHER
9. DK/REF
10. Added: Still looking
11. Added: Had prior relationship with provider
12. Added: Provider had no spots available
13. Added: Household circumstances changed
14. Added: Liked program content curriculum/activities
15. Added: Concerns with program quality (e.g., safety, crowding, number of adults, etc.)

16. Added: Program's ability to care for children with special needs
17. Added: Convenience/flexibility
18. Added: Decided to take care of child myself (or spouse decided to)
19. Added: Child's choice (wanted or did not want)
20. Added: Did not find work, no job
21. Added: Transportation (or lack thereof)
22. Added: To interact with other children
23. Added: Waiting to hear back from program/ not started yet
24. Added: Did NOT like curriculum or lack of education
25. Added: Did not qualify
26. Added: Did not change providers
27. Added: Met all my needs
28. Added: Medical/health
29. Added: Moving/moved
30. Added: Uncomfortable with strangers watching my child

-4. DK/REF

IF F14 = 8, ASK F14_OS
ELSE, SKIP TO SECTION G

F14_OS.

SPECIFY: _____

-4. DK/REF

Section G. Household Characteristics

G1. RV: HH9_ECON_OWNHOME; DV: HH9_ANNUAL_INCOME_IMP_TC
Do [you/you or your spouse/you or your partner] own this home, do you rent, or something else?

1. Own → SKIP TO G2
2. Rent → SKIP TO G2
3. Other, neither own nor rent
4. DK/REF

G1A. RV: HH9_G1A_LIVING
What is your situation?

1. Live with parent(s)
2. Live with spouse's/partner's parent(s)
3. Housing is part of job compensation; live-in servant; housekeeper; gardener; farm laborer
4. Housing is a gift paid for by an HU resident other than R or spouse/partner
5. Housing is a gift paid for by a friend or relative outside of the HU
6. Housing paid for by a government agency/welfare/charitable institution
7. Sold home, not moved out of it yet
8. Living in house which R will inherit; estate in progress
9. Living in temporary quarters (garage, shed) while home is under construction
10. Live here without formal arrangements; staying temporarily; squatting
11. Other
12. DK/REF

G2. RV: HH9_ECON_OWNCAR
Do you have a car?

1. Yes
2. No
3. DK/REF

G3. DV: HH9_ECON_INCOME_ANNUAL; DV: HH9_ECON_INCOME_MONTHLY; DV: HH9_INC_TAX_ADJ_FACTOR
Approximately what was your total household income *last month*?
IF NEEDED: Please include the income of anyone who contributes to household expenses and child care costs. Also include any child support you may receive if that contributes to household expenses or child care costs. Include income from pensions or from government programs like food stamps or unemployment insurance.

TOTAL INCOME: $_____
Range: 0-999999999
-4. DK/REF → SKIP TO G3B

G3A. DV: HH9_INC_TAX_ADJ_FACTOR; DV: HH9_ECON_INCOME_ANNUAL; DV: HH9_ECON_INCOME_MONTHLY; DV: HH9_INC_PROB_AFTER_TAX_REPORT
Is that before or after taxes and other deductions?

1. Before taxes
2. After taxes
3. DK/REF

SKIP TO G4A

G3B. DV: HH9_ECON_INCOME_MONTHLY
Let me assure you that your responses to this and all other questions in this survey will not be revealed to any agency except in summary form for all study participants combined. This information helps us better describe the affordability of different types of early care and education. Which of the following categories do you think best describes your total household income after taxes from all sources last month. Just stop me when I get to the right category:

1. Less than $1200
2. $1200 to $1999
3. $2000 to $2999
4. $3000 to $4199
5. $4200 to $5499
6. $5500 or more
7. DK/REF

G4A. DV: HH9_ECON_INCOME_POVRATCAT; DV: HH9_POV_RATIO_TC; DV: HH9_ANNUAL_INCOME_RAW_TC; DV: HH9_ANNUAL_INCOME_IMP_TC; DV: HH9_ANNUAL_INCOME_IMP_INDICATOR; DV: HH9_ECON_INCOME_ANNUAL
And how about all of last year, that is, 2018. What was the total amount of your household income that year?

Total amount for the past 12 months: $_____ → SKIP TO G4B
Range: 0-999999999
-4. DK/REF → ASK G4A1

G4A1. DV: HH9_ECON_INCOME_ANNUAL; DV: HH9_ECON_INCOME_POVRATCAT; DV: HH9_POV_RATIO_TC; DV: HH9_ANNUAL_INCOME_RAW_TC; DV: HH9_ANNUAL_INCOME_IMP_TC; DV: HH9_ANNUAL_INCOME_IMP_INDICATOR
In order to understand whether or not child care is affordable to American families, we need to know your household's income. You may not be able to give us an exact figure, but was your household income last year through wages and salaries from all jobs $30,000 or more?

1. Yes, $30,000 OR MORE
2. No, less than $30,000 → SKIP TO G4A5
3. DK/REF → SKIP TO G4A5

G4A2. DV: HH9_ANNUAL_INCOME_IMP_INDICATOR; DV: HH9_ECON_INCOME_ANNUAL; DV: HH9_ECON_INCOME_POVRATCAT; DV: HH9_POV_RATIO_TC; DV: HH9_ANNUAL_INCOME_RAW_TC; DV: HH9_ANNUAL_INCOME_IMP_TC
Would it amount to $50,000 or more?

1. YES
2. NO → SKIP TO G4A4
3. DK/REF → SKIP TO G4A4

G4A3. DV: HH9_ANNUAL_INCOME_IMP_TC; DV: HH9_ANNUAL_INCOME_IMP_INDICATOR; DV: HH9_ECON_INCOME_ANNUAL; DV: HH9_ECON_INCOME_POVRATCAT; DV: HH9_POV_RATIO_TC; DV: HH9_ANNUAL_INCOME_RAW_TC
Would it amount to $75,000 or more?

1. YES
2. NO
3. DK/REF

SKIP TO G4B

G4A4. DV: HH9_ANNUAL_INCOME_RAW_TC; DV: HH9_ANNUAL_INCOME_IMP_TC; DV: HH9_ANNUAL_INCOME_IMP_INDICATOR; DV: HH9_ECON_INCOME_ANNUAL; DV: HH9_ECON_INCOME_POVRATCAT; DV: HH9_POV_RATIO_TC
Would it amount to $40,000 or more?

1. YES
2. NO
3. DK/REF

SKIP TO G4B

G4A5. DV: HH9_POV_RATIO_TC; DV: HH9_ANNUAL_INCOME_RAW_TC; DV: HH9_ANNUAL_INCOME_IMP_TC; DV: HH9_ANNUAL_INCOME_IMP_INDICATOR; DV: HH9_ECON_INCOME_ANNUAL; DV: HH9_ECON_INCOME_POVRATCAT
Would it amount to $15,000 or more?

1. YES
2. NO → SKIP TO G4A7
3. DK/REF → SKIP TO G4A7

G4A6. DV: HH9_ECON_INCOME_POVRATCAT; DV: HH9_POV_RATIO_TC; DV: HH9_ANNUAL_INCOME_RAW_TC; DV: HH9_ANNUAL_INCOME_IMP_TC; DV: HH9_ANNUAL_INCOME_IMP_INDICATOR; DV: HH9_ECON_INCOME_ANNUAL
Would it amount to $20,000 or more?

1. YES
2. NO
3. DK/REF

SKIP TO G4B

G4A7. DV: HH9_ECON_INCOME_ANNUAL; DV: HH9_ECON_INCOME_POVRATCAT; DV: HH9_POV_RATIO_TC; DV: HH9_ANNUAL_INCOME_RAW_TC; DV: HH9_ANNUAL_INCOME_IMP_TC; DV: HH9_ANNUAL_INCOME_IMP_INDICATOR
Would it amount to $10,000 or more?

1. Yes
2. No
3. DK/REF

G4B. RV: HH9_ECON_EARNERS; DV: HH9_ANNUAL_INCOME_IMP_TC
How many different people's job earnings did you count in that 2018 household income?

NUMBER OF PEOPLE: _____
Range: 1-20
-4. DK/REF

G4c.
Again, thinking about the 2018 household income that you reported, *was any of that from sources other than job earnings* -- for example, from child support, pensions, government assistance programs, or interest from a bank account?

1. YES
2. NO → SKIP TO G4B1
3. DK/REF → SKIP TO G4B1

G4d.
How much of your 2018 total household income was from sources other than job earnings?

Amount from non-job sources: _____ → SKIP TO G4B1
Range: 0-999999999
-4. DK/REF → ASK G4E

G4e.
You may not be able to give us an exact figure for, but were non-job household earnings in 2018

1. Less than $2,500
2. $2,500 to less than $5,000
3. $5,000 to less than $7,500
4. $7,500 to less than $10,000
5. $10,000 to less than $12,500
6. $12,500 to less than $15,000
7. $15,000 to less than $20,000
8. $20,000 or more
9. DK/REF

G4B1. RV: HH9_WELFARE
In the last calendar year did your household receive any payments from a welfare or public assistance program like the Supplemental Security Income or SSI program or from TANF or Temporary Assistance for Needy Families?

1. Yes
2. No
3. DK/REF

(QUESTION G10 ASKS ABOUT CHILD SELECTED IN C14)
G10. RV: HH9_G10_INSURE_X_R (X=1-18 SELECT ALL THAT APPLY VARIABLES)
What kind of health insurance or health care coverage does [SELECTED CHILD NAME] have?
CODE FIRST MENTION, USE CATEGORIES TO PROBE AS NEEDED

1. Private Health Insurance Plan from your employer or workplace
2. Private Health Insurance Plan through your spouse or partner's workplace
3. Private Health Insurance Plan purchased directly
4. Private Health Insurance Plan through a state or local government or community program, including a marketplace from healthcare.gov
5. Medicaid
6. Medicare
7. Military Health Care/VA or Champus/Tricare/Champ – VA
8. No coverage of any type
9. Other Specify
10. Added: Private Health Insurance plan through CHILD's parents or other relatives (e.g., grandparents, aunts/uncles, or siblings, etc.)
11. Added: Private Health Insurance Source unspecified
12. Added: Health Insurance through Union, College/University, or Church
13. Added: Supplemental Insurance Plan
14. Added: Charity care, Local clinic, Sliding scale, etc.

15. Added: Privately purchased limited coverage plan
16. Added: Coverage from another (possibly prior) employer (includes cobra)
17. Added: Indian Health Services
18. Added: Other state/local public health insurance (local and state health plans)
-4. DK/REF

IF G10 = 9, ASK G10_OS
ELSE, SKIP TO SKIP LOGIC BOX G_S_1

g10_OS.
PLEASE SPECIFY: _____
-4. DK/REF

Skip Logic Box G_S_1:
IF S1>1 (TWO OR MORE CHILDREN IN THE HH) THEN GO TO G10A
ELSE GO TO G11

G10A. RV: HH9_G10A_OTHINSURE
Of your children under age 13 other than (YOUNGEST CHILD), how many have some sort of health insurance or health care coverage?

NUMBER OF CHILDREN: _____
Range: 0-10
-4. DK/REF

G11. RV: HH9_ECON_EAT; DV: HH9_ANNUAL_INCOME_IMP_TC
Which of these statements best describes the food eaten in your household in the last 12 months: We always had enough to eat, sometimes we did not have enough to eat, or often, we did not have enough to eat?
CODE ONE ONLY

1. Always enough to eat
2. Sometimes not enough to eat
3. Often not enough to eat
4. DK/REF

G12. DV: HH9_PUBASSIST
Do you or your [child/children] receive food stamps, WIC or participate in a reduced or free school meals program?
CODE ALL THAT APPLY
IF NEEDED: By school meals I mean reduced or free lunch, breakfast program or after school meals program for children of low-income families.
IF NEEDED: WIC is the Women, Infants and Children supplemental nutrition program.

	1. YES	2. NO	3. DK/REF
Food stamps RV: HH9_ECON_FOODSTAMP			
WIC only RV: HH9_ECON_WIC			
School meals program RV: HH9_ECON_FREELUNCH			

G12B. RV: HH9_SUBSIDY_PAST

In the past 12 months, did anyone in this household receive child care subsidies for children of working parents, such as from [PROGRAM NAME]? These programs may also be open to parents who are in school or training.

1. Yes
2. No → SKIP TO G13
3. DK/REF → SKIP TO G13

G12C.

How many months in the past year did anyone in this household receive child care subsidies?

_____

Range: 0-12

G12D.

What was the main reason that child care subsidies ended?

1. PARENT LOST ELIGIBILITY DUE TO INCREASED INCOME
2. PARENT LOST ELIGIBILITY DUE TO NO LONGER MEETING WORK, SCHOOL OR TRAINING REQUIREMENTS
3. PARENT LOST ELIGIBILITY DUE TO OTHER OR UNKNOWN REASONS
4. CHILD DID NOT NEED CARE ANYMORE
5. DID NOT LIKE CARE
6. SUBSIDY PROGRAM WAS TOO DIFFICULT TO PARTICIPATE IN
7. STILL RECEIVING SUBSIDIES

G13. RV: HH9_ECON_BORROW

If you needed to borrow $500 for three months, is there some person or place you could borrow it from?
IF NEEDED: I'm just asking a hypothetical question.

1. Yes
2. No
3. DK/REF

G14. RV: HH9_INTERNET

Do you have access to the Internet at home?

1. Yes
2. No → SKIP TO BEGINNING OF SECTION H
3. DK/REF → SKIP TO BEGINNING OF SECTION H

G14a.

Is your Internet access using

a. A cellphone or tablet

RV: HH9_INTERNET_CELL

1. Yes
2. No

b. A desktop or laptop computer

RV: HH9_INTERNET_COMPUTER

1. Yes
2. No

Section H. Parental Consent to Access Administrative Records

H1.
I need to verify that I am speaking with someone who can authorize the release of state government program records for [NAME(S) OF ELIGIBLE CHILD(REN)]. Are you that person?

1. Yes → SKIP TO H4
2. No
3. DK/REF

H2.
May I know who would be able to authorize such a release?
ENTER PHONE NUMBER AS ###-###-####

NAME: _____
-4. DK/REF
PHONE: _____
-4. DK/REF
RELATIONSHIP TO CHILD: _____
-4. DK/REF

SKIP TO H7_ADDR

H4.
PLEASE ENTER YOUR INTERVIEWER ID

_____

REPEAT H5 FOR EACH CHILD IN HH

Start of H_L_1 Loop (**HL1*):
ASK H5 – H6 FOR EACH CHILD IN HH

H5. **HL1*
We are asking your permission to search state or local government records for child-care subsidy, Supplemental Nutritional Assistance Program (Food Stamps), TANF, WIC, Medicaid, or other programs that provide assistance to families. We would give the state agency basic information that identifies [CHILD NAME], and request that information about [his/her] participation in government programs be sent to the U.S. Department of Health and Human Services or its contractors, for study purposes only. Do we have your permission to do so?

1. Yes → SKIP TO H6
2. No

H3. **HL1*

(SUGGESTED SCRIPT) State or local government program records can provide additional information about the child care and financial assistance for care that a child and his/her family may be receiving. (**IF NEEDED:** For example, some pre-schools or after-school programs may be receiving government subsidies that parents are not aware of. These subsidies would be recorded in state program data on child care subsidies or such child care-related programs as Head Start or Universal Pre-Kindergarten.) NORC requests your permission to search child-care related government program records for information about your child or about the providers who serve your children. Even if your (child has/children have) not received subsidies or (has/have) never been in child care, it is still important for us to have your permission so that we can compare families like yours against those that do enroll in programs. We would not provide the state agency with any of the answers you've told me today, other than your name and the name(s) of your child/ren, and enough information to find them in state records.

All information about your child and your child's care provider will be considered private and used for study purposes only. Any names of children, as well as any names of childcare providers, will not be used in reporting the study results. We will never release any information that may identify you or your child. The information will be reported in statistical form to the U.S. Department of Health and Human Services as part of the results of this study.

1. Continue
2. Respondent still refuses ONLY CHOOSE THIS WHEN YOU HAVE MADE ALL APPROPRIATE AVERSIO**N ATTEMPTS** → SKIP TO INSTRUCTION BEFORE H7_ADDR

IF R HAS GIVEN PERMISSION FOR AT LEAST ONE CHILD AND H3=2, GO TO H6 AND DISPLAY ROWS FOR THE CHILD/REN WITH PERMISSION.
IF R STILL REFUSES FOR ALL CHILDREN, SKIP TO SKIP LOGIC BOX H_S_1.

H6. **HL1*

Can you please tell me the full name and date of birth for each child under age 13 in your household?
CHILD/REN'S FULL NAME(S)

	FULL NAME:	**DOB MONTH:**	**DOB DAY:**	**DOB YEAR:** Range: 1995-2012
1.				
2.				
3.				
4.				
5.				
6.				
7.				

	FULL NAME:	DOB MONTH:	DOB DAY:	DOB YEAR: Range: 1995-2012
8.				
9.				
10.				

End of H_L_1 Loop (*HL1):
REPEAT H5 – H6 FOR EACH CHILD IN HH

H6_ADULT.
As the authorizing adult, can you please tell me your full name?

NAME: _____
-4. DK/REF

Skip Logic Box H_S_1:
IF R RETURNED MAIL SCREENER AND ADR_1 IS BLANK (I.E., NOT CONFIRMED ADDRESS) GO TO H7_ADDR
ELSE GO TO H7

H7_ADDR.
Our records have [ADDRESS1], [ADDRESS2], [CITY], [STATE], [ZIP]. Can I confirm that you are still living at that address?

1. Correct → SKIP TO H7
2. Not correct

H7_ADDR2.
What is your correct address then?

ADDRESS: _____
CITY: _____
STATE: _____
ZIP: _____

H7.
Thank you very much for speaking with me today. Those are all of the questions I have for you. Your contribution is greatly appreciated and will help improve the understanding of the experiences and preferences of parents regarding the care of their young children.