INTERVIEWER: THE INFORMATION ON PAGES 1-2 SHOULD BE COLLECTED WHEN YOU FIRST CONTACT THE FAMILY BY PHONE. IF YOU ARE UNABLE TO COLLECT THIS INFORMATION DURING THE PHONE CALL, PLEASE FILL OUT THESE TWO SHEETS IN THE FAMILY’S HOUSEHOLD BEFORE YOU GIVE OUT EACH PARTICIPANT’S QUESTIONNAIRE PACKET.

(INTERVIEWER: IN ORDER TO DETERMINE WHO THE PRIMARY CARE GIVER (P) OF CHILD IS, ASK):

1. Out of the people living in this household, what is the name of the person who has the most responsibility for and knows the most about (CHILD)?

____________________________________
Name of Primary Care giver

2. What is this person’s relationship to (CHILD)?

____________________________________
Relationship of Primary Care giver to CHILD

(NOTE: IF YOU ARE NOT PRESENTLY SPEAKING WITH P, ASK TO SPEAK WITH P. IF P IS NOT AVAILABLE, COLLECT THIS INFORMATION AT A LATER TIME WHEN YOU CAN SPEAK WITH P. DO NOT COLLECT THIS INFORMATION FROM ANYONE BUT P.)

(INTERVIEWER: IN ORDER TO DETERMINE WHO THE SECONDARY CARE GIVER (SCG) OF CHILD IS, ASK):

3. Out of the people living in this household, what is the name of the person who has the SECOND most responsibility for and knows the second most about (CHILD)?

____________________________________
Name of Secondary Care giver

4. What is this person’s relationship to (CHILD)?

____________________________________
Relationship of Secondary Care giver to CHILD

(INTERVIEWER: IN ORDER TO DETERMINE WHO THE TARGET OLDER SIBLING (OS) OF (CHILD) IS, ASK):

5. Does (CHILD) have any older brothers or sisters?  

Yes 1  

No (IF NO, SKIP TO Q.7) 2

6. Out of (CHILD’s) older brothers and sisters living in this household, what is the name of the older brother or sister who is both under 18 and next in age to (CHILD)?

____________________________________
Name of Older Sibling
7. Please tell me the first names of all the people who are presently living in your household on a full-time basis, and what each one's relationship is to you, what their date of birth is, and what their sex is.

<table>
<thead>
<tr>
<th>Name</th>
<th>What is ......’s Relationship to you?</th>
<th>What is .....’s Date of Birth?</th>
<th>What is .....’s Sex (IF R DOESN'T KNOW DOB, THEN ASK FOR PERSON'S AGE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(RESPONDENT)</td>
<td>R</td>
<td></td>
<td>M F</td>
</tr>
<tr>
<td>(TARGET CHILD)</td>
<td></td>
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<td>M F</td>
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<tr>
<td>(TARGET OLDER SIB)</td>
<td></td>
<td></td>
<td>M F</td>
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<tr>
<td>(SCG)</td>
<td></td>
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<tr>
<td>(OTHER)</td>
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<td>M F</td>
</tr>
</tbody>
</table>

8. Do you have any children who do not live in your household?

Yes 1
No (IF NO, SKIP TO Q.9) 2

What are the names of children not living in the household? Who is ... living with? What is the Age of...?

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

9. Has (CHILD) ever been living in a separate household from you for at least two months?

Yes 1
No (IF NO, SKIP TO Q.11) 2

10. How many times?

(SPECIFY) ________________ (NOTE: PHONE CONTACT ENDS HERE.)
(Number of Times)

==============================================================================
In this interview, there are no right or wrong answers. We are just asking for your opinion. First, I am going to ask you some questions about your neighborhood.

11. How long have you lived in this neighborhood? ___________ ________ (YEARS) (MONTHS)

12. How satisfied are you with this neighborhood? (READ CATEGORIES)

<table>
<thead>
<tr>
<th>Very Satisfied</th>
<th>Somewhat Satisfied</th>
<th>Neither Satisfied nor Dissatisfied</th>
<th>Somewhat Dissatisfied</th>
<th>Very Dissatisfied</th>
</tr>
</thead>
<tbody>
<tr>
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<td>2</td>
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<td>5</td>
</tr>
</tbody>
</table>

13. Do you think you will be living in this neighborhood 5 years from now?

Yes       No
1         2

Now I would like to ask you some questions about activities people in your household participate in.

(INTEVIEWS: FOR EACH ACTIVITY, MOVE ACROSS FROM QUESTION 14 TO QUESTION 15).

14. During the last year, has anyone in your household participated in...

a. a community organization or tenant’s council?  2  1
   (IF NO, SKIP TO b)

b. local political activities?  2  1
   (IF NO, SKIP TO c)

c. civil rights activities?  2  1
   (IF NO, SKIP TO d)

d. an after-school recreational or athletic program for children?  2  1
   (IF NO, SKIP TO e)

e. an organized summer recreational program for children?  2  1
   (IF NO, SKIP TO f)

f. a scouting troop or youth club?  2  1
   (IF NO, SKIP TO g)
During the last year, has anyone in your household participated in...

(If Yes) Who participates in...?  
(Circle all that apply)

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<thead>
<tr>
<th></th>
<th>No</th>
<th>Yes</th>
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</thead>
<tbody>
<tr>
<td>g. literacy, GED, or tutoring programs?</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>(Child)</td>
<td>(R)</td>
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<tr>
<td></td>
<td>1</td>
<td>1</td>
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<tr>
<td>h. community volunteer programs?</td>
<td>2</td>
<td>1</td>
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<td>1</td>
<td>1</td>
</tr>
<tr>
<td>i. religious services or other religious activities (includes choir, youth group, and all church attendance)</td>
<td>2</td>
<td>1</td>
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<tr>
<td></td>
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<td>1</td>
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<td>j. other organizations or programs I have not mentioned?</td>
<td>2</td>
<td>1</td>
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<td></td>
<td>(If Yes, specify)</td>
<td></td>
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<td></td>
<td>Who participates in...?</td>
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<td>(Circle all that apply)</td>
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<td>(3)______________________</td>
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<td>16. Were you the leader or coach in any of the activities that your children belong to?</td>
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<tr>
<td>Yes</td>
<td>No</td>
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<td>1</td>
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</table>
17. Since (CHILD) began the first grade, has (he/she) been involved in...

a. After school sports programs?

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

(IF NO, SKIP TO b)

SPECIFY: ______________________________
(NAME OF PROGRAM)

How long? ____ (CIRCLE: )

<table>
<thead>
<tr>
<th>days</th>
<th>weeks</th>
<th>months</th>
<th>years</th>
<th>seasons</th>
<th>summers</th>
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<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
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</tbody>
</table>

(IF R ONLY GIVES ONE PROGRAM, ASK:) Any others?

SPECIFY: ______________________________
(NAME OF PROGRAM)

How long? ____ (CIRCLE: )

<table>
<thead>
<tr>
<th>days</th>
<th>weeks</th>
<th>months</th>
<th>years</th>
<th>seasons</th>
<th>summers</th>
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</table>

SPECIFY: ______________________________
(NAME OF PROGRAM)

How long? ____ (CIRCLE: )

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<thead>
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<th>months</th>
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</table>

b. Lessons (for example, in music, sports, dance, art)?

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<th>YES</th>
<th>NO</th>
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</table>

(IF NO, SKIP TO Q.18)

Which ones?: ______________________________
(TYPE OF LESSONS)

How long? ____ (CIRCLE: )

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<thead>
<tr>
<th>days</th>
<th>weeks</th>
<th>months</th>
<th>years</th>
<th>seasons</th>
<th>summers</th>
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<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
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</tbody>
</table>

(IF R ONLY GIVES ONE PROGRAM, ASK:) Any others?

SPECIFY: ______________________________
(TYPE OF LESSONS)

How long? ____ (CIRCLE: )

<table>
<thead>
<tr>
<th>days</th>
<th>weeks</th>
<th>months</th>
<th>years</th>
<th>seasons</th>
<th>summers</th>
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<td>4</td>
<td>5</td>
<td>6</td>
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</table>

SPECIFY: ______________________________
(TYPE OF LESSONS)

How long? ____ (CIRCLE: )

<table>
<thead>
<tr>
<th>days</th>
<th>weeks</th>
<th>months</th>
<th>years</th>
<th>seasons</th>
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</tbody>
</table>
18. Does (CHILD) have any special talents, skills or interests such as music, reading, art, athletics, drama, schoolwork or some other ability?

- Yes
- No

1
2

(IF YES, SKIP TO Q.20)

19. Is there something (he/she) is really good at or likes to do?

- Yes
- No

1
2

(IF NO, SKIP TO Q.23, PAGE 8)

(IF YES, SKIP TO Q.20)

20. What are these talents or interests? (PROBE FOR DETAILS IF ANSWER IS TOO GENERAL.)

(SPECIFY) ________________________________________
________________________________________
________________________________________

(IF ONLY ONE ANSWER IS GIVEN, ASK:) Any other talents?

- Yes
- No

1
2

(IF NO, SKIP TO Q.21)

(SPECIFY) ________________________________________
________________________________________
________________________________________

21. What have you done to help (CHILD) get better at (this/these) thing(s)?

(SPECIFY) ________________________________________
________________________________________
________________________________________

(IF ONLY ONE RESPONSE IS GIVEN, ASK:) Any other things you have done to help (CHILD) get better?

(SPECIFY) ________________________________________
________________________________________
________________________________________
Please use Response Scale #2 to choose your answer.
22. In the past six months, how often have you done the following things to help (CHILD) get better at (FIRST TALENT/INTEREST MENTIONED)?

How often have you...

**(REPEAT STEM FREQUENTLY)**

a. told (CHILD) this is a very important talent to have because it will help (him/her) in the future?

<table>
<thead>
<tr>
<th>Never</th>
<th>Almost</th>
<th>Occasionally</th>
<th>Sometimes</th>
<th>Very Often</th>
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</table>

b. praised (CHILD) when (he/she) did well in the activity?

<table>
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<tr>
<th>Never</th>
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<th>Sometimes</th>
<th>Very Often</th>
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c. told (CHILD) how to get better at the skill?

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<th>Never</th>
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<th>Sometimes</th>
<th>Very Often</th>
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<td>5</td>
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</tbody>
</table>

d. signed (CHILD) up for classes or programs to help (him/her) get better at the skill?

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<th>Almost</th>
<th>Occasionally</th>
<th>Sometimes</th>
<th>Very Often</th>
</tr>
</thead>
<tbody>
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<td>3</td>
<td>4</td>
<td>5</td>
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</table>

e. made sure (CHILD) practices the skill at home?

<table>
<thead>
<tr>
<th>Never</th>
<th>Almost</th>
<th>Occasionally</th>
<th>Sometimes</th>
<th>Very Often</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
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<td>3</td>
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</table>

f. done the activity with (CHILD)?

<table>
<thead>
<tr>
<th>Never</th>
<th>Almost</th>
<th>Occasionally</th>
<th>Sometimes</th>
<th>Very Often</th>
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g. watched (CHILD) do the activity?

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<th>Never</th>
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<th>Occasionally</th>
<th>Sometimes</th>
<th>Very Often</th>
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</table>
Have any of the following things happened to (CHILD)?

(INTERVIEWER, FOR EACH EVENT, MOVE ACROSS FROM QUESTION 23 TO QUESTION 25.)

<table>
<thead>
<tr>
<th>Event</th>
<th>Question</th>
<th>No</th>
<th>Yes</th>
<th>Action</th>
<th>a</th>
<th>b</th>
<th>c</th>
<th>d</th>
<th>e</th>
<th>f</th>
<th>g</th>
</tr>
</thead>
<tbody>
<tr>
<td>23.</td>
<td>a. gotten involved with the wrong kinds of kids?</td>
<td>No</td>
<td>Yes</td>
<td>__________________</td>
<td>Yes, but only a Yes,</td>
<td>2</td>
<td>1</td>
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<td></td>
<td>(IF NO, (IF NOTHING,</td>
<td>No</td>
<td>Little</td>
<td>A lot</td>
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<td></td>
<td>SKIP TO b)</td>
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<tr>
<td>24.</td>
<td>What did you do about it?</td>
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<tr>
<td>25.</td>
<td>Did your actions?</td>
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<tr>
<td>f. run away?</td>
<td>No</td>
<td>Yes</td>
<td>__________________</td>
<td>Yes, but only a Yes,</td>
<td>2</td>
<td>1</td>
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<tr>
<td>g. had serious emotional or psychological problems?</td>
<td>No</td>
<td>Yes</td>
<td>__________________</td>
<td>Yes, but only a Yes,</td>
<td>2</td>
<td>1</td>
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<td>SKIP TO Q.26)</td>
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</table>
26. Do you worry about certain things happening to (CHILD)?

   Yes  No
   1    2

(IF YES, SKIP TO Q.28)

27. Do you worry about problems at school, drugs, or something else like that?

   Yes  No (IF NO, SKIP TO Q.32)
   1    2

28. What kinds of things do you worry about happening to (CHILD)? (PROBE FOR DETAILS IF RESPONSE IS TOO GENERAL...LIKE IF R SAYS CHILD WILL GET IN TROUBLE ASK: WHAT KIND OF TROUBLE?)

   (SPECIFY) ______________________________________
                         ________________________
                         ________________________
                         ________________________

(IF ONE RESPONSE GIVEN ASK:) Are there any other things that you worry about happening to (CHILD)?

   Yes  No (IF NO, SKIP TO Q.29)
   1    2

   (SPECIFY) ______________________________________
                         ________________________
                         ________________________
                         ________________________

29. What are you doing to stop these things from happening to (CHILD)?

   (SPECIFY) ______________________________________
                         ________________________
                         ________________________
                         ________________________

(IF ONLY ONE RESPONSE GIVEN, ASK;) Are there any other things that you are doing to stop these things from happening to (CHILD)?

   Yes  No (IF NO, SKIP TO Q.30)
   1    2

   (SPECIFY) ______________________________________
                         ________________________
                         ________________________
                         ________________________
Please use Response Scale #2 to answer the following questions.

30. In the past six months, how often have you tried any of the following things to keep (CHILD) from getting involved in the things you worry about?

How often did you...

(grade)

STEM FREQUENTLY)

a. talk to (him/her) about (it/them)?

<table>
<thead>
<tr>
<th>Never</th>
<th>Almost</th>
<th>Occasionally</th>
<th>Sometimes</th>
<th>Very Often</th>
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<tbody>
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<td>1</td>
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</table>

b. keep (him/her) away from these dangers?

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<tr>
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<th>Almost</th>
<th>Occasionally</th>
<th>Sometimes</th>
<th>Very Often</th>
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</table>

c. point out how these dangers have destroyed the lives of specific people you know?

<table>
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<tr>
<th>Never</th>
<th>Almost</th>
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d. get (him/her) involved in good activities?

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<th>Almost</th>
<th>Occasionally</th>
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</table>

e. keep (him/her) at home as much as possible?

<table>
<thead>
<tr>
<th>Never</th>
<th>Almost</th>
<th>Occasionally</th>
<th>Sometimes</th>
<th>Very Often</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

f. threaten to punish (CHILD) for doing things that lead to the problems?

<table>
<thead>
<tr>
<th>Never</th>
<th>Almost</th>
<th>Occasionally</th>
<th>Sometimes</th>
<th>Very Often</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

31. How confident are you that you will be able to prevent the things you worry about from happening? (READ CATEGORIES)

1. Very confident
2. Fairly confident
3. Not so confident
4. Not confident at all
Now I would like to ask you some questions about (CHILD’s) friends.

32. How many of (CHILD's) good friend do you know? (READ CATEGORIES)

<table>
<thead>
<tr>
<th>Almost None</th>
<th>A Few</th>
<th>About half</th>
<th>Most</th>
<th>All</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

33. How many of (CHILD's) friends do you like and approve of? (READ CATEGORIES)

<table>
<thead>
<tr>
<th>Almost None</th>
<th>A Few</th>
<th>About half</th>
<th>Most</th>
<th>All</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

34. Do you think (CHILD) is getting different messages about what it means to be a successful person from (his/her) friends than from you?

Yes 1
No 2 (IF NO, SKIP TO Q.37)

35. What are the messages (he/she) is getting from (his/her) friends?

(SPECIFY)______________________________________________
_____________________________________________________
_____________________________________________________

36. What are the messages (he/she) is getting from you?

(SPECIFY)____________________________________________
____________________________________________________
_____________________________________________________

37. Do you feel that (CHILD) is being pulled between your values and the values of (his/her) peer group?

Yes 1
No 2 (IF NO, SKIP TO Q.38)

How?__________________________________________________
_____________________________________________________
_____________________________________________________
Now I would like to ask you some questions about your family rules and daily activities.

**INTERVIEWER:** FOR EACH RULE, MOVE ACROSS FROM QUESTION 38 TO QUESTION 39

<table>
<thead>
<tr>
<th>Rule Description</th>
<th>No</th>
<th>Yes</th>
<th>How regularly are these rules or expectations enforced?</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Maintaining a certain grade point average.</td>
<td>2</td>
<td>1</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>(IF NO, SKIP to b)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Doing homework</td>
<td>2</td>
<td>1</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>(IF NO, SKIP to c)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Doing household chores</td>
<td>2</td>
<td>1</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>(IF NO, SKIP to d)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. When and how much TV to watch.</td>
<td>2</td>
<td>1</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>(IF NO, SKIP to e)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. Which friends (CHILD) can go out with.</td>
<td>2</td>
<td>1</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>(IF NO, SKIP to f)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. Bed time.</td>
<td>2</td>
<td>1</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>(IF NO, SKIP to Q.40)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please use Response Scale #3.

<table>
<thead>
<tr>
<th>Question</th>
<th>Scale</th>
</tr>
</thead>
<tbody>
<tr>
<td>40. How often do you know where (CHILD) is in the course of the day?</td>
<td>Almost Never 1 Occasionally 2 About 1/2 the time 3 Sometimes 4 Almost Always 5</td>
</tr>
<tr>
<td>41. How often do you know who (CHILD) is with when (he/she) is not at home?</td>
<td>Almost Never 1 Occasionally 2 About 1/2 the time 3 Sometimes 4 Almost Always 5</td>
</tr>
</tbody>
</table>
Please use Response Scale #4.

42. Where does (CHILD) usually go after school?

1. Home, supervised by adult or older adolescent

2. Home, unsupervised

3. Somewhere else which is supervised (SPECIFY:)

4. Somewhere else which is unsupervised (SPECIFY:)

Please go back to Response Scale #2 to answer the following questions.

43. If you ask (CHILD) to do something and (he/she) does not do it, how often do you give up trying to get (him/her) to do it?

<table>
<thead>
<tr>
<th>Never</th>
<th>Almost</th>
<th>Occasionally</th>
<th>Sometimes</th>
<th>Very Often</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

44. If you warn (CHILD) that (he/she) will be punished if (he/she) does not stop doing something, how often do you actually punish (him/her) if (he/she) does not stop?

<table>
<thead>
<tr>
<th>Never</th>
<th>Almost</th>
<th>Occasionally</th>
<th>Sometimes</th>
<th>Very Often</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

45. If (CHILD) is punished, how often does the punishment work?

<table>
<thead>
<tr>
<th>Never</th>
<th>Almost</th>
<th>Occasionally</th>
<th>Sometimes</th>
<th>Very Often</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

46. If a punishment has been decided upon, how often can (CHILD) change it by talking you out of it?

<table>
<thead>
<tr>
<th>Never</th>
<th>Almost</th>
<th>Occasionally</th>
<th>Sometimes</th>
<th>Very Often</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

47. Does the kind of punishment you give (CHILD) depend on whether you are in a good or bad mood? (READ CATEGORIES)

It makes...

<table>
<thead>
<tr>
<th>No Difference</th>
<th>Some Difference</th>
<th>A Big Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

48. Do you feel you have found the right kind of discipline to deal with (CHILD)? (READ CATEGORIES)

<table>
<thead>
<tr>
<th>Never Situations</th>
<th>In Some Situations</th>
<th>Half of the Time</th>
<th>In Most Situations</th>
<th>In All Situations</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>
49. How much do you rely on (CHILD'S) older brothers and sisters to help in raising and taking care of (CHILD)?

(READ CATEGORIES)

<table>
<thead>
<tr>
<th>Not at all</th>
<th>A little</th>
<th>A lot</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

(IF NOT AT ALL, SKIP TO Q.51)

50. How (do/does) (he/she/they) help you?

(SPECIFY)__________________________________________  ____________________________

__________________________________________  ____________________________

__________________________________________  ____________________________

51. Is there anyone else in the household that you rely on to help in raising and taking care of (CHILD)?

Yes  No  (IF NO, SKIP TO Q. 53, Page 15)

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

52. What are the names of the people that you rely on to help in raising and taking care of (CHILD)?

Name  Relationship to R

a. ____________________  ____________________________

b. ____________________  ____________________________

c. ____________________  ____________________________

(FOR EACH PERSON LISTED, ASK :)  How does (a.) help?

(SPECIFY)__________________________________________  ____________________________

__________________________________________  ____________________________

How does (b.) help?

(SPECIFY)__________________________________________  ____________________________

__________________________________________  ____________________________

How does (c.) help?

(SPECIFY)__________________________________________  ____________________________

__________________________________________  ____________________________

53. What about in the past, was there anyone who helped you to take care of (CHILD)?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No (IF NO SKIP TO Q.54)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

a. Who was that?  (SPECIFY) ___________________________
(RELATIONSHIP TO R)
____________________________________________________

Now, a few questions about health.

Please use Scale #5.

54. How would you rate (CHILD's) overall health?

<table>
<thead>
<tr>
<th>Poor</th>
<th>Fair</th>
<th>Good</th>
<th>Very good</th>
<th>Excellent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

55. Has (CHILD) had any accidents, health problems, pain, discomfort or a disability that make it difficult for (him/her) to do certain things?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No (IF NO, SKIP TO Q.56)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

What are these health conditions or disabilities?  (LIST UP TO 3 HEALTH CONDITIONS)

(SPECIFY) _______________________________________
_______________________________________________
_______________________________________________

Use scale #5 for the next question.

56. How would you rate your overall health?

<table>
<thead>
<tr>
<th>Poor</th>
<th>Fair</th>
<th>Good</th>
<th>Very good</th>
<th>Excellent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

57. Do you have any health conditions or disabilities that limit what you can do?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No (IF NO, SKIP TO Q.58, Page 16)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
</tr>
</tbody>
</table>

What are these health conditions or disabilities?

(SPECIFY) _______________________________________
_______________________________________________
_______________________________________________
58. How much do these health conditions or disabilities keep you from doing the activities most people routinely do?  
(READ CATEGORIES)  
<table>
<thead>
<tr>
<th>Not at all</th>
<th>A little</th>
<th>Some</th>
<th>A lot</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

Now I would like to ask some questions about (CHILD’s) education.

59. Does (CHILD) go to a special class or get special help in school because of an emotional, physical, or health problem?  
Yes  No (IF NO, SKIP TO Q.62)
| 1        | 2       |

60. What is the problem?  
SPECIFY_________________________________________  
________________________________________________  
________________________________________________  

61. What kind of special education class is (CHILD) in?  
SPECIFY_________________________________________  
________________________________________________  
________________________________________________  

62. Do you think that (CHILD) needs to attend a special class or get special help in school because of an emotional, physical, or health problem?  
Yes  No
| 1        | 2       |

63. Is (CHILD) in an honors or accelerated class for gifted children?  
Yes  No
| 1        | 2       |
64. Has (CHILD) been suspended, excluded, or expelled from school, or has (CHILD) cut classes in the past two school years?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>(IF NO, SKIP TO Q.65)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td></td>
</tr>
</tbody>
</table>

(SPECIFY): __________________________________________
(SUSPENSION/EXCLUSION/EXPULSION/SKIPPING CLASS)

Why? (SPECIFY): _______________________________________

a. How many times in the past two school years has this happened?

(SPECIFY)___________________________________________
(# OF TIMES)

b. What, if anything, did you do about it?

(SPECIFY)____________________________________________
_________________________________________
(IF "NOTHING", SKIP TO Q.65)

c. Did your actions help?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

65. Has (CHILD) failed or done very poorly in a class in the past two school years?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>(IF NO, SKIP TO Q.66)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td></td>
</tr>
</tbody>
</table>

a. How many times in the past two school years has this happened?

(SPECIFY)___________________________________________
(# OF TIMES)

b. What, if anything, did you do about it?

(SPECIFY)____________________________________________
_________________________________________
(IF "NOTHING", SKIP TO Q.66)

c. Did your actions help?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

66. If (CHILD) started doing poorly on schoolwork, what would you do?

(SPECIFY)____________________________________________
_________________________________________
_________________________________________
Please use Response Scale #6 for the next two questions.

67. If finances were not a problem and everything else went right, how far would you like to see (CHILD) go in school?

1. 8th grade or less
2. 9-11th grade
3. Graduate from high school
4. Post-high school vocational training
5. Some College
6. Graduate from 2 year college with Associates degree or other para professional degree
7. Graduate from 4 year college
8. Master’s degree or teaching credential program
9. MD, Law, PhD or other doctoral degree

68. Things often don’t go right, so how far do you think (CHILD) will actually go in school?

1. 8th grade or less
2. 9-11th grade
3. Graduate from high school
4. Post-high school vocational training
5. Some College
6. Graduate from 2 year college with Associates degree or other para professional degree
7. Graduate from 4 year college
8. Master’s degree or teaching credential program
9. MD, Law, PhD or other doctoral degree

69. Thinking back to the last school year, how many times, if ever, did you or your spouse...

a. phone or see a teacher or other school personnel about (CHILD’s) schoolwork?
   (SPECIFY)______________________ (IF ANSWER IS NEVER, # OF TIMES GO TO B)

   What kinds of things did you talk to them about?
   (SPECIFY)____________________________________
   ______________________________________

b. phone or see a teacher about (CHILD’s) good or bad school behavior?
   (SPECIFY)______________________ (IF ANSWER IS NEVER, # OF TIMES GO TO C)

   What kinds of things did you talk to them about?
   (SPECIFY)____________________________________
   ______________________________________

c. attend a parent/teacher conference?
   (SPECIFY)______________________ (IF ANSWER IS NEVER, # OF TIMES SEE INSTRUCTIONS ON THE BOTTOM OF THIS PAGE)

   What kinds of things did you talk to them about?
   (SPECIFY)____________________________________

( IF “NEVER” FOR a, b, and c ABOVE, SKIP TO Q.71, PAGE 19)
Please use Response Scale #7.
70. In general, were these interactions...

<table>
<thead>
<tr>
<th>very positive</th>
<th>somewhat positive</th>
<th>neutral</th>
<th>somewhat negative</th>
<th>very negative</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

Please use Response Scale #8 to answer the following questions.
71. In general, how satisfied were you last year with...

<table>
<thead>
<tr>
<th>Not too Satisfied</th>
<th>Somewhat Satisfied</th>
<th>Very Satisfied</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

a. the interest and ability shown by teachers at (CHILD’s) sixth grade school?

b. the quality of courses that were offered at (CHILD’s) sixth grade school?

c. the extra-curricular and sports activities and clubs at (CHILD’s) sixth grade school?

d. (CHILD’s) safety at (his/her) sixth grade school?

Please use Response Scale #8.
72. In general, how satisfied are you this year with...

<table>
<thead>
<tr>
<th>Not too Satisfied</th>
<th>Somewhat Satisfied</th>
<th>Very Satisfied</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

a. the interest and ability shown by teachers at (CHILD’s) school?

b. the quality of courses that are offered at (CHILD’s) school?

c. the extra-curricular and sports activities and clubs?

d. (CHILD’s) safety at school?

73. During the past year, have you considered changing (CHILD’s) school because you weren't satisfied with it? (IF NO, SKIP TO Q.75)
Yes 1
No 2

74. Did you actually do it?

Yes 1
No 2

75. During the past year have you considered getting (CHILD) into a tutoring program? (IF NO, SKIP TO Q.77, PAGE 20)

Yes 1
No 2

76. Did you get (CHILD) into a tutoring program?

Yes 1
No 2
Now I'm going to ask some questions about you, your relationships, and marriages.

84. First, where were you born?
   (SPECIFY) ________________________________ (IF R WAS BORN IN UNITED STATES, Town, State, Country SKIP TO Q.86)

85. What year did you move to the United States?  19____ YEAR

86. Who raised you during most of your childhood? Was it both your parents, your mom, dad, or someone else?
   (SPECIFY) ____________________________

87. How many brothers did you have while you were growing up? (INCLUDE STEP OR ADOPTED BROTHERS)
   (SPECIFY) ____________________________ (NUMBER OF BROTHERS)

88. How many sisters did you have while you were growing up? (INCLUDE STEP OR ADOPTED BROTHERS)
   (SPECIFY) ____________________________ (NUMBER OF SISTERS)

(IF QUESTIONS 87 AND 88 ARE BOTH ZERO, SKIP TO Q.90)

89. Were you the first child born in your family, the second child, or something else?
   (SPECIFY) __________________

90. When you were growing up would you say your family was... (READ CATEGORIES)

<table>
<thead>
<tr>
<th>Very Unhappy</th>
<th>Unhappy</th>
<th>Just So-So</th>
<th>Happy</th>
<th>Very Happy</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

91. How often do you see your mother now?
   (SPECIFY) _______________ per (CIRCLE ONE) day week month year deceased
   1 2 3 4 5

92. How often do you see your father now?
   (SPECIFY) _______________ per (CIRCLE ONE) day week month year deceased
   1 2 3 4 5

93. What is your current marital status? (READ CATEGORIES)

<table>
<thead>
<tr>
<th>Married</th>
<th>Widowed</th>
<th>Separated</th>
<th>Divorced</th>
<th>Never been Married</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

(IF NEVER MARRIED, SKIP TO Q 101, P.24)
105. Is one of the people we've been talking about the biological (father/mother) of (CHILD)?

- Yes [ ]
- No [ ]

(IF NO, SKIP TO Q.107)

106. Which one?

(SPECIFY) ____________________ (# MARRIAGE/LIVE-IN)

107. Is (CHILD's) biological father still alive?

- Yes [ ]
- No [ ]
- Don't Know [ ]

(IF NO OR DON’T KNOW, SKIP TO Q.126)

108. Does (CHILD) know (his/her) biological father?

- Yes [ ]
- No [ ]
- Don’t Know [ ]

(IF NO OR DON’T KNOW, SKIP TO Q.126)

109. Has (CHILD) spent time with him during the last 5 years?

- Yes [ ]
- No [ ]
- Don’t Know [ ]

(IF NO OR DON’T KNOW, SKIP TO Q.126)

110. About how many days in the past year?

(SPECIFY) ____________________

Number of Days

111. When was the last time you saw (CHILD's) biological father?

(SPECIFY) ____________________ (CIRCLE ONE): days ago  weeks ago  months ago  years ago

112. Does (CHILD's) biological father live within an hour's drive of you?

- Yes [ ]
- No [ ]
- Don’t Know [ ]

113. What was the highest grade of school (CHILD's) biological father completed?

_______________ (GRADE)

Don’t Know

98

114. How old is he now?

(SPECIFY) ____________________ (Biological Father’s Age)

Don’t know

98
115. Is (CHILD's) biological father currently: (READ CATEGORIES)

Married  Living with Partner  Neither  Don’t Know
1  2  3  8

116. Is he presently employed, unemployed, in school, or something else? (READ CATEGORIES AND CIRCLE ALL THAT APPLY)

1. Employed
2. With a job, but not at work because of temporary illness, sick leave, vacation, labor dispute, bad weather
3. Unemployed
4. In School
5. Disabled
6. Keeping house
7. Other (SPECIFY) ______________________________

(IF ABOVE, IS 3 OR 5, SKIP TO Q.118.
IF ABOVE, IS 4 AND NOT 1 OR 2, SKIP TO Q.120.
IF ABOVE IS 6 OR 7 AND NOT 1 OR 2, SKIP TO Q.121.
IF ABOVE IS 1 OR 2, CONTINUE WITH 117.)

117. a. What is his main occupation?
   (SPECIFY) ______________________________
   (OCCUPATION)

b. Tell me more about what he actually does at the job? What are his main duties?
   (SPECIFY) ______________________________
   __________________________
   (DUTIES)

c. What kind of business, industry or field is that?
   (SPECIFY) ____________________________
   (BUSINESS OR INDUSTRY)

d. What do they do or make there?
   (SPECIFY) ____________________________
   (MAKE)

(If R Answered 117, Skip to Q.120)

(ASK Q. 118 AND Q.119 ONLY IF 3 OR 5 WAS AN ANSWER ON Q.116; OTHERWISE, SKIP TO Q.120)

118. What was his main occupation the last time he worked regularly?
   (SPECIFY) ______________________________
   (OCCUPATION)
119. How long ago was that?

(SPECIFY)____________ (CIRCLE ONE:) days ago  weeks ago  months ago  years ago

===========================================================================

(ASK Q.120 ONLY IF 4 WAS AN ANSWER ON Q.116; OTHERWISE, SKIP TO Q.121)

120. What is he studying to become?

(SPECIFY)________________________________________________________

121. In raising (CHILD), about how much responsibility does (his/her) biological father take:

(READ CATEGORIES)

None at all  A little  Some  A Lot
1  2  3  4

122. Is his relationship with (CHILD):

(READ CATEGORIES)

Not Very Close  Fairly Close  Quite Close  Extremely Close
1  2  3  4

123. How often do you and (CHILD's) biological father discuss matters concerning (CHILD):

(READ CATEGORIES)

Never  Rarely  Sometimes  Frequently
1  2  3  4

(IF NEVER, SKIP TO Q.126)

124. When you and (CHILD's) biological father make decisions about (CHILD), does he have:

(READ CATEGORIES)  (DO NOT READ)

Very Little Influence  Some Influence  A Great deal of Influence  We do not make Decisions Together
1  2  3  4  7

125. In raising (CHILD), how often do you and (his/her) biological father agree? (READ CATEGORIES)

(READ CATEGORIES)  (DO NOT READ)

Never  Sometimes  Usually  Always  Other
1  2  3  4  5

==================================================================

(IF BIOLOGICAL MOTHER LIVES IN THE HOUSEHOLD, SKIP TO Q. 143)

126. Is (CHILD's) biological mother still alive?

Yes  No  Don't Know
1  2  8

(IF NO OR DON'T KNOW, SKIP TO Q.143)
127. Does (CHILD) know (his/her) biological mother?
   Yes       No           Don't Know
   1          2           8
   (IF NO OR DON'T KNOW, SKIP TO Q.143)

128. Has (CHILD) spent time with her during the last 5 years?
   Yes       No           Don't Know
   1          2           8
   (IF NO OR DON'T KNOW, SKIP TO Q.143)

   How many days in the past year?
   (SPECIFY)________________
   Number of Days

129. When was the last time you saw (CHILD's) biological mother?
   (SPECIFY)__________ (CIRCLE ONE:)
   days ago       weeks ago       months ago       years ago
   1               2               3               4

130. Does (CHILD'S) biological mother live within an hour's drive of you?
   Yes       No           Don’t know
   1          2           8

131. What was the highest grade of school (CHILD's) biological mother completed?
   (SPECIFY)____________   Don’t know
   (GRADE)                 98

132. How old is she now?
   (SPECIFY) __________  Don’t Know
   (AGE)               98

133. Is (CHILD's) biological mother currently: (READ CATEGORIES)
   Married   Living with Partner   Neither   Don’t Know
   1          2                   3           8
134. Is she presently employed, unemployed, in school, or something else? (READ CATEGORIES, CIRCLE ALL THAT APPLY)

1. Employed
2. With a job, but not at work because of temporary illness, sick leave, vacation, labor dispute, bad weather
3. Unemployed
4. In School
5. Disabled
6. Keeping house
7. Other (SPECIFY) ______________________________

IF ABOVE, IS 3 OR 5, SKIP TO Q. 136.
IF ABOVE, IS 4 AND NOT 1 OR 2, SKIP TO Q. 137A, PAGE 30.
IF ABOVE IS 6 OR 7 AND NOT 1 OR 2, SKIP TO Q. 138, PAGE 30.
IF ABOVE IS 1 OR 2, CONTINUE WITH Q.135.

135.
a. What is her main occupation?

(SPECIFY) ___________________________________________

(OCCUPATION)

b. Tell me more about what she actually does at the job? What are her main duties?

(SPECIFY) ____________________________________________

_______________________________________________

(DUTIES)

c. What kind of business, industry or field is that?

(SPECIFY) ______________________________

(BUSINESS OR INDUSTRY)

d. What do they do or make there?

(SPECIFY) ______________________________

(MAKE)

(IF R ANSWERED Q.135, SKIP TO Q.137A)

(If R answered 3 or 5 on Q.134, continue with Q.136; otherwise skip to Q. 137)

136. What was her main occupation the last time she worked regularly?

(SPECIFY) ______________________________

(OCCUPATION)

137. How long ago was that?

(SPECIFY) ___________ (CIRCLE ONE): days ago weeks ago months ago years ago

1  2  3  4
137a. What is she studying to become?
(SPECIFY) __________________________

(ASK EVERYONE:)

138. In raising (CHILD), about how much responsibility does (his/her) biological mother take: (READ CATEGORIES)

None at All  A Little  Some  A Lot
1  2  3  4

139. Is her relationship with (CHILD): (READ CATEGORIES)

Not Very Close  Fairly Close  Quite Close  Extremely Close
1  2  3  4

140. How often do you and (CHILD's) biological mother discuss matters concerning (CHILD):

Never  Rarely  Sometimes  Frequently
1  2  3  4

(IF NEVER, SKIP TO Q.143)

141. When you and (CHILD's) biological mother make decisions about (CHILD), does she have: (READ CATEGORIES)

Very Little Influence  Some Influence  A Great Deal of Influence
1  2  3

(DO NOT READ) We don’t make decisions together

7

142. In raising (CHILD), how often do you and (his/her) biological mother agree... (READ CATEGORIES)

Never  Sometimes  Usually  Always
1  2  3  4

(IF R IS NOT MARRIED OR LIVING WITH A PARTNER, SKIP TO Q.161, PAGE 35)

(IF R IS MARRIED AND LIVING WITH SPOUSE/PARTNER, CONTINUE WITH Q.143)

Now I have some questions about (SPOUSE/PARTNER).

143. What is the highest grade of school (he/she) has completed? __________

GRADE

(IF R SAYS, "DON'T KNOW", ASK:) What is your best guess? _______
144. Is (he/she) presently employed, unemployed, in school, or something else? (READ CATEGORIES)

1. Employed
2. With a job, but not at work because of temporary illness, sick leave, vacation, labor dispute, bad weather
3. Unemployed
4. In School
5. Disabled
6. Keeping house
7. Other (SPECIFY) ________________________________

145. Does (he/she) do anything else for pay?

Yes  No
1  2

(IF Q.144 ABOVE, IS 3 OR 5, SKIP TO Q. 151.
IF Q. 144 ABOVE, IS 4 AND NOT 1 OR 2, SKIP TO Q. 153.
IF Q. 144 ABOVE IS 6 OR 7 AND NOT 1 OR 2, SKIP TO Q. 154.
IF Q. 144 ABOVE IS 1 OR 2, CONTINUE WITH Q.146)

146. How long has (he/she) been at (his/her) present job?

(SPECIFY) ________________________________  (CIRCLE ONE)  Weeks  Months  Years

1  2  3

147. What is (his/her) main occupation?

(SPECIFY) ________________________________ (OCCUPATION)

148. Tell me more about what (he/she) actually does at the job? What are (his/her) main duties?

(SPECIFY) ________________________________

______________________________ (DUTIES)

149. What kind of business, industry or field is that?

(SPECIFY) ________________________________ (BUSINESS OR INDUSTRY)

150. What do they do or make there?

(SPECIFY) ________________________________ (MAKE)
151. What was (his/her) main occupation the last time (he/she) worked regularly?

(SPECIFY) ____________________________________________

(OCCUPATION)

152. How long ago was that?

(SPECIFY) __________ (CIRCLE ONE: days ago weeks ago months ago years ago)

1 2 3 4

153. What is (he/she) studying to become?

(SPECIFY) ____________________________________________

154. In raising (CHILD), about how much responsibility does (SPOUSE/PARTNER) take:

(READ CATEGORIES)

None at All A Little Some A Lot

1 2 3 4

155. Is that amount: (READ CATEGORIES)

Too Little About the Right Amount Too Much

1 2 3

156. Is (his/her) relationship with (CHILD): (READ CATEGORIES)

Not Very Close Fairly Close Quite Close Extremely Close

1 2 3 4

157. How often do you and (spouse/partner) discuss matters concerning (CHILD): (READ CATEGORIES)

Never Rarely Sometimes Frequently

1 2 3 4

(IF NEVER, SKIP TO Q.160)

158. When you and (SPOUSE/PARTNER) make decisions about (CHILD), does (he/she) have: (READ CATEGORIES)

Very little Some A Great deal of Influence

1 2 3

We do not Decide Together

1 2 3

159. In raising (CHILD), how often do you and (SPOUSE/PARTNER) agree... (READ CATEGORIES)

Never Sometimes Usually Always

1 2 3 4
160. How well do you and your (spouse/partner) get along? (READ CATEGORIES)

Not Well at All  Not Very Well  Pretty Well  Very Well
1          2          3          4

(IF THERE IS A SCG OTHER THAN SPOUSE/PARTNER OR BIOLOGICAL PARENT ASK Q. 143A - 160A; OTHERWISE, SKIP TO Q. 161, PAGE. 35)

Now I have some questions about (SCG).

143a. What is the highest grade of school (he/she) has completed? __________

(GRADE)

(IF R SAYS, "DON'T KNOW", ASK:) What is your best guess? ______

144a. Is (he/she) presently employed, unemployed, in school, or something else? (READ CATEGORIES)

1. Employed
2. With a job, but not at work because of temporary illness, sick leave, vacation, labor dispute, bad weather
3. Unemployed
4. In School
5. Disabled
6. Keeping house
7. Other (SPECIFY) ______________________________

145a. Does (he/she) do anything else for pay?

Yes  No
1 2

(IF Q. 144a ABOVE, IS 3 OR 5, SKIP TO Q. 151a.
IF Q. 144a ABOVE, IS 4 AND NOT 1 OR 2, SKIP TO Q. 153a.
IF Q. 144a ABOVE IS 6 OR 7 AND NOT 1 OR 2, SKIP TO Q. 154a.
IF Q. 144a ABOVE IS 1 OR 2, CONTINUE WITH Q.146a)

146a. How long has (he/she) been at (his/her) present job?

(SPECIFY) ________________________________ (CIRCLE ONE) Weeks  Months  Years
1               2                3

147a. What is (his/her) main occupation?

(SPECIFY) ________________________________ (OCCUPATION)

148a. Tell me more about what (he/she) actually does at the job? What are (his/her) main duties?

(SPECIFY) ________________________________ (DUTIES)
149a. What kind of business, industry or field is that?

(SPECIFY) ______________________________________
(BUSINESS OR INDUSTRY)

150a. What do they do or make there?

(SPECIFY) ______________________________________
(MAKE)

(ASK Q. 151a-152a ONLY IF R ANSWERED 3 OR 5 TO Q.144a; OTHERWISE, SKIP TO Q.153a)

151a. What was (his/her) main occupation the last time (he/she) worked regularly?

(SPECIFY) _________________________________
(OCCUPATION)

152a. How long ago was that?

(SPECIFY) __________ (CIRCLE ONE:) days ago weeks ago months ago years ago
1 2 3 4

(ASK Q. 153a IF R ANSWERED 4 TO Q. 144a; OTHERWISE, SKIP TO Q. 154a)

153a. What is (he/she) studying to become?

(SPECIFY) ______________________________________

(ASK EVERYONE)

154a. In raising (CHILD), about how much responsibility does (SCG) take: (READ CATEGORIES)

None at All A Little Some A Lot
1 2 3 4

155a. Is that amount: (READ CATEGORIES)

Too Little About the Right Amount Too Much
1 2 3

156a. Is (his/her) relationship with (CHILD): (READ CATEGORIES)

Not Very Close Fairly Close Quite Close Extremely Close
1 2 3 4

157a. How often do you and (SCG) discuss matters concerning (CHILD): (READ CATEGORIES)

Never Rarely Sometimes Frequently
1 2 3 4

(IF NEVER, SKIP TO Q.160a)
158a. When you and (SCG) make decisions about (CHILD), does (he/she) have: (READ CATEGORIES) (DO NOT READ)

<table>
<thead>
<tr>
<th>Very little Influence</th>
<th>Some Influence</th>
<th>A Great deal of Influence</th>
<th>We do not Decide Together</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>7</td>
</tr>
</tbody>
</table>

159a. In raising (CHILD), how often do you and (SCG) agree... (READ CATEGORIES)

<table>
<thead>
<tr>
<th>Never</th>
<th>Sometimes</th>
<th>Usually</th>
<th>Always</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

160a. How well do you and your (SCG) get along? (READ CATEGORIES)

<table>
<thead>
<tr>
<th>Not Well at All</th>
<th>Not Very Well</th>
<th>Pretty Well</th>
<th>Very Well</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

Now I’d like to find out about your school and work experience.

161. What is the highest grade of school you have completed?

(GRADE COMPLETED)

162. What year was that?

(YEAR)

(IF R IS FOREIGN, SKIP TO Q.164)

163. Did you get a high school diploma or a GED?

Yes       No  (IF NO, SKIP TO Q. 169)

Which one? READ CATEGORIES. CIRCLE ONE.

Diploma  GED  (SKIP TO Q.165)

1      2

164. Did you complete high school or the equivalent in your country?

Yes       No  (IF NO, SKIP TO Q. 169)

1      2

(SPECIFY) TYPE OF HIGH SCHOOL DEGREE
Now I’d like to ask you some questions about your educational experiences since you graduated high school (or got your GED). Tell me about each of the times you were in a program that offered either an associates, BA, MA, or professional degree. Please do not include vocational or trade school experiences such as beauty school or auto mechanic school since I will be asking you about those experiences later on.

**(FOR EACH EXPERIENCE, GO ACROSS FROM Q.165 TO Q. 168 IN ORDER TO GET INFORMATION)**

<table>
<thead>
<tr>
<th>Please tell me about your...</th>
<th>165. What Years?</th>
<th>166. Did you graduate?</th>
<th>167. What degree did you get?</th>
<th>168. IF HIGHEST DEGREE...</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. First Educational</td>
<td>19___to</td>
<td>Yes No</td>
<td>(CIRCLE ONE) Associates (1)</td>
<td>(SPECIFY)</td>
</tr>
<tr>
<td>Experience</td>
<td>19_____</td>
<td>1 2</td>
<td>(SKIP TO b) Bachelors (2)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Masters (3)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Doctoral (MD, law, PhD) (4)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Other______ (5)</td>
<td></td>
</tr>
<tr>
<td>b. Second Educational</td>
<td>19___to</td>
<td>Yes No</td>
<td>(CIRCLE ONE) Associates (1)</td>
<td>(SPECIFY)</td>
</tr>
<tr>
<td>Experience</td>
<td>19_____</td>
<td>1 2</td>
<td>(SKIP TO c) Bachelors (2)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Masters (3)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Doctoral (MD, law, PhD) (4)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Other______ (5)</td>
<td></td>
</tr>
<tr>
<td>c. Third Educational</td>
<td>19___to</td>
<td>Yes No</td>
<td>(CIRCLE ONE) Associates (1)</td>
<td>(SPECIFY)</td>
</tr>
<tr>
<td>Experience</td>
<td>19_____</td>
<td>1 2</td>
<td>(SKIP TO d) Bachelors (2)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Masters (3)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Doctoral (MD, law, PhD) (4)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Other______ (5)</td>
<td></td>
</tr>
<tr>
<td>d. Fourth Educational</td>
<td>19___to</td>
<td>Yes No</td>
<td>(CIRCLE ONE) Associates (1)</td>
<td>(SPECIFY)</td>
</tr>
<tr>
<td>Experience</td>
<td>19_____</td>
<td>1 2</td>
<td>(SKIP TO e) Bachelors (2)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Masters (3)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Doctoral (MD, law, PhD) (4)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Other______ (5)</td>
<td></td>
</tr>
<tr>
<td>e. Fifth Educational</td>
<td>19___to</td>
<td>Yes No</td>
<td>(CIRCLE ONE) Associates (1)</td>
<td>(SPECIFY)</td>
</tr>
<tr>
<td>Experience</td>
<td>19_____</td>
<td>1 2</td>
<td>(SKIP TO Q.169) Bachelors (2)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Masters (3)</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>Doctoral (MD, law, PhD) (4)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Other______ (5)</td>
<td></td>
</tr>
</tbody>
</table>
169. Aside from schooling you've told me about, have you ever received vocational training for at least a month from any place other than public school or college--for example, a nursing, beauty, auto mechanic or trade school?  

Yes  
1  
No (IF NO, SKIP TO Q.171)  
2

170. Tell me about the kinds of training and which years you received them, right up until the present time.

<table>
<thead>
<tr>
<th>TYPE OF TRAINING</th>
<th>YEAR</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>19</td>
</tr>
<tr>
<td></td>
<td>19</td>
</tr>
<tr>
<td></td>
<td>19</td>
</tr>
</tbody>
</table>

171. Starting with the year that (CHILD) was born, have you had any jobs for at least 6 months?  

Yes  
1  
No (IF NO, SKIP TO Q.173)  
2

172. In which years since (CHILD) was born did you work outside the home, for pay, for at least 6 months?

<table>
<thead>
<tr>
<th>YEAR</th>
<th>YEAR</th>
</tr>
</thead>
<tbody>
<tr>
<td>19</td>
<td>19</td>
</tr>
<tr>
<td>19</td>
<td>19</td>
</tr>
<tr>
<td>19</td>
<td>19</td>
</tr>
</tbody>
</table>

173. Is your residence now: (READ CATEGORIES)

1. A house you own  
2. An apartment you own  
3. Owned by your parent  
4. A house you rent  
5. An apartment you rent  
6. A rehab project  
7. Other (SPECIFY)____________________ _________

174. Is this dwelling owned by the government or a housing authority? For example, is it public housing?  

Yes  
1  
No  
2
175. How many bedrooms do you have?

__________________________
(# of Bedrooms)

176. Since you have been living with (CHILD), about how many places have you lived in?

__________________________
(# PLACES LIVED)

(IF 1, SKIP TO Q.178)

177. Altogether, how many times has (CHILD) f schools because of a move?

__________________________
(# SCHOOL CHANGES)

178. Are you presently employed, unemployed, keeping house, or something else? (CIRCLE ALL THAT APPLY)

1. Employed
2. With a job, but not at work because of temporary illness, sick leave, vacation, labor dispute or bad weather
3. Unemployed
4. In school
5. Disabled
6. Keeping house
7. Other (SPECIFY): ____________________________

IF ABOVE, IS 3 OR 5 AND NOT 1 OR 2, SKIP TO Q.182.
IF ABOVE, IS 4 AND NOT 1 OR 2, SKIP TO Q. 181b.
IF ABOVE IS 6 OR 7, SKIP TO Q. 182.
IF ABOVE IS 1 OR 2 CONTINUE WITH Q. 179)

179. a. What is your main occupation?

(SPECIFY) ________________________________
(OCCUPATION)

b. Tell me about what you actually do at the job. What are the main duties?

(SPECIFY) __________________________________

________________________________________
(DUTIES)

c. What kind of business, industry or field is it?

(SPECIFY) ________________________________
(BUSINESS OR INDUSTRY)

d. What do they do or make there?

(SPECIFY) ________________________________
(MAKE)
e. How many hours per week do you work at this job?

(HOURS PER WEEK)

180. How much money do you make at this job, before taxes?

$_____________________________ (CIRCLE ONE)   Hour  Week  Month  Year

1  2  3  4

181. How long have you been working at your present job?

____________________ (CIRCLE)   Days  Weeks  Months  Years

1  2  3  4

(SKIP TO Q. 181B IF ANSWER IS 1 DAY OR MORE AND ANSWERED 4 TO Q.178)
(SKIP TO Q.186 IF ANSWER IS 1 DAY OR MORE AND DID NOT ANSWER 4 TO Q.178)

(ASK THE FOLLOWING QUESTION ONLY IF ANSWERED 4 TO Q.178; OTHERWISE, SKIP TO Q.182)

181b. What are you studying to become?

(SPECIFY)__________________________________________________________

(SKIP IF ANSWERED 3,4,5, OR 6 TO Q.178; OTHERWISE, SKIP TO Q.186)

182. Are you presently looking for paid work?

Yes (IF YES, SKIP TO Q.184)    No
   1  2

183. Why not?

(SPECIFY)

__________________________________________________________

__________________________________________________________

__________________________________________________________

184. How long have you been looking for work?

____________________ (CIRCLE)   Days  Weeks  Months  Years

1  2  3  4

185. Have you been looking for full-time or part-time work? (READ CATEGORIES)

Full-time    Part-time    Either, don't care    Depends    Don't know
   1   2   3   4   8

185a. What do you consider to be your main occupation or type of work?

(MAIN OCCUPATION)
185b. When was the last time you worked for pay outside of the home?  
<table>
<thead>
<tr>
<th></th>
<th>Days ago</th>
<th>Weeks ago</th>
<th>Months ago</th>
<th>Years ago</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

185c. How much did you work at that time?  
(READ CATEGORIES)  
<table>
<thead>
<tr>
<th>Full-time</th>
<th>Part-time</th>
<th>Either, don't care</th>
<th>Depends</th>
<th>Don't know</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>8</td>
</tr>
</tbody>
</table>

186. During 1991, did you contribute any money for living expenses to anyone who did not live with you?  
Yes              No  (IF NO, SKIP TO Q.188)  
1               2

187. How many people?  
(SPECIFY)__________  
(# OF PEOPLE)

188. Do you have any of the following?  
<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>a.</td>
<td>1</td>
</tr>
<tr>
<td>b.</td>
<td>1</td>
</tr>
<tr>
<td>c.</td>
<td>1</td>
</tr>
<tr>
<td>d.</td>
<td>1</td>
</tr>
<tr>
<td>e.</td>
<td>1</td>
</tr>
<tr>
<td>f.</td>
<td>1</td>
</tr>
</tbody>
</table>

189. From which of these sources did you receive income in 1990?  
(CIRCLE ALL THAT APPLY)  
<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>a.</td>
<td>1</td>
</tr>
<tr>
<td>b.</td>
<td>1</td>
</tr>
<tr>
<td>c.</td>
<td>1</td>
</tr>
<tr>
<td>d.</td>
<td>1</td>
</tr>
<tr>
<td>e.</td>
<td>1</td>
</tr>
<tr>
<td>f.</td>
<td>1</td>
</tr>
<tr>
<td>g.</td>
<td>1</td>
</tr>
<tr>
<td>h.</td>
<td>1</td>
</tr>
<tr>
<td>i.</td>
<td>1</td>
</tr>
<tr>
<td>j.</td>
<td>1</td>
</tr>
</tbody>
</table>
Please look at Response Scale #10 for the following answers.

190. From all sources of income you mentioned, tell me your total family income before taxes in 1990.

**INTERVIEWER, IF R IS UNCERTAIN, ASK:** What would be your best guess?

1. Less than $5,000
2. Between $5,000-9,999
3. Between $10,000-14,999
4. Between $15,000-19,999
5. Between $20,000-24,999
6. Between $25,000-29,999
7. Between $30,000-34,999
8. Between $35,000-39,999
9. Between $40,000-44,999
10. Between $45,000-49,999
11. Between $50,000-54,999
12. Between $55,000-59,999
13. Between $60,000-64,999
14. Between $65,000-69,999
15. Between $70,000-74,999
16. More than $75,000

191. Think again over the past 12 months. Generally, at the end of each month do you end up with...

**READ CATEGORIES**

<table>
<thead>
<tr>
<th>Not Enough to Make Ends Meet</th>
<th>Just Enough to Make Ends Meet</th>
<th>Some Money Left Over</th>
<th>More than Enough Money Left Over</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

192. During the past year has (CHILD) tried to earn money so that (he/she) could help you by paying for (his/her) own clothes, activities, school fees, or things like that?

Yes           No
1              2

193. How upset or worried are you because you do not have enough money to pay for things? **READ CATEGORIES**

<table>
<thead>
<tr>
<th>Not at all Upset or Worried</th>
<th>A Little Upset or Worried</th>
<th>Somewhat Upset or Worried</th>
<th>Very Upset or Worried</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>
193a. In the past year, has your family... *(READ CATEGORIES AND CIRCLE ALL THAT APPLY)*

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. gone more heavily into debt than usual?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>b. fallen behind in paying bills?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>c. cut back on social activities and entertainment expenses?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>d. changed food shopping or eating habits to save money?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>e. postponed medical or dental care because of a lack of funds?</td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

The following questions ask about important changes you may have experienced during the past year. Please tell me which events happened to you (or your SPOUSE/PARTNER) during the past 12 months.

194. During the **PAST 12 MONTHS**, did you (or your SPOUSE/PARTNER)...

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. change jobs for a worse one?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>b. change jobs for a better one?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>c. get demoted, have trouble at work, or trouble with the boss?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>d. get a promotion or major pay increase?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>e. get laid off or fired?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>f. take a cut in wage or salary?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>g. get into trouble with the law?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>h. become a victim of a violent crime?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>i. have a serious injury?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>j. have one of your children get seriously ill?</td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>
195. During the past 12 months, did...

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. (CHILD) have a serious injury or accident?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>(SPECIFY)_______________________</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. someone close to you die?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>(SPECIFY)_______________________</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(RELATIONSHIP)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. someone close to you get seriously ill or injured?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>(SPECIFY)_______________________</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(RELATIONSHIP)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(SPECIFY)_______________________</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(INJURY OR ACCIDENT)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. someone close to you become the victim of a violent crime?</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>(SPECIFY)_______________________</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(RELATIONSHIP)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. a close friend or relative have a child die?</td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

---

Now I’d like to ask a few questions about your religious and spiritual life.

196. Do you have a religious preference?

<table>
<thead>
<tr>
<th>Option</th>
<th>Yes</th>
<th>No (IF NO, SKIP TO Q.198)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

(SPECIFY)_______________________

(RELIGIOUS PREFERENCE)

197. How often do you attend religious services and/or other activities at your place of worship?

<table>
<thead>
<tr>
<th>Frequency</th>
<th>days</th>
<th>weeks</th>
<th>months</th>
<th>years</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

(SPECIFY)_______________________ (CIRCLE ONE)

Please use Response Scale #2 for the next two questions.

198. When you have difficulties in your family, work, or personal life, how often do you seek spiritual comfort or support?

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Never</th>
<th>Almost</th>
<th>Occasionally</th>
<th>Sometimes</th>
<th>Very</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

(IF NEVER OR ALMOST NEVER, SKIP TO Q.200)

199. When you seek spiritual comfort and support how often does that help you deal with your problems?

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Never</th>
<th>Almost</th>
<th>Occasionally</th>
<th>Sometimes</th>
<th>Very</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>
The next few questions are about your ethnic or racial roots. In many parts of the country, schools are experiencing different degrees of racial tension which sometimes can affect school atmospheres, people’s goals, and people’s attitudes. We would like to ask you some questions about how your racial background may affect you and (CHILD). You may find some of these questions sensitive. Please feel free to let me know if there are any questions you don’t feel comfortable with or you prefer to skip.

200. What is your race or ethnicity (for example, do you think of yourself as...White/European Descent, Black/African-American, Latino/Hispanic, Asian/Oriental, or something else)?

(SPECIFY)___________________________

(IF R DOES NOT SAY WHITE/EUROPEAN DESCENT, BLACK/AFRICAN-AMERICAN, LATINO/HISPANIC, OR ASIAN/ORIENTAL, ASK: ) Would you consider yourself to be... 
(READ CATEGORIES)

<table>
<thead>
<tr>
<th>Asian/Oriental</th>
<th>Black/African American</th>
<th>Latino/Hispanic</th>
<th>White/European</th>
<th>None of these</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>8</td>
</tr>
</tbody>
</table>

(IF ASIAN/ORIENTAL SKIP TO Q.201, P.45.)

(IF BLACK/AFRICAN-AMERICAN SKIP TO Q. 209, P. 47)

(IF LATINO/HISPANIC SKIP TO Q. 217, P.49.)

(IF WHITE/EUROPEAN DESCENT SKIP TO Q.225, P.51.)

(IF NONE OF THESE, SKIP TO Q.232, P.53)
(FOR ASIANS/ORIENTALS ONLY.)

Please use Response Scale #11.
201. How important is being (Asian/Oriental) to you?

Not at all A Little Somewhat Very
Important Important Important Important
1 2 3 4

Please use Response Scale #2.
202. Do you talk in the family about being (Asian/Oriental)?

Almost Never Occasionally Sometimes Very
Never 1 2 3 4 Often 5

203. Has being (Asian/Oriental) affected the goals you have for (CHILD)?

Yes No (IF NO, SKIP TO Q.204)
1 2

In what ways?

____________________________________________

____________________________________________

____________________________________________

____________________________________________

204. Now I would like to know some more about how being (Asian/Oriental) affects your experiences in general and at (CHILD’s) school. Again, we realize that some of these questions may be sensitive. We would like to assure you that we do not intend to offend anyone and that you are welcome to skip any questions you find uncomfortable.

Please use Response Scale #2.
Over your lifetime, in general, how often have you felt discriminated against because you are (Asian/Oriental)?

Never Almost Occasionally Sometimes Very
Never 1 2 Occasionally 3 Sometimes 4 Very Often 5

(IF NEVER, SKIP TO Q.205)

How?

____________________________________________

____________________________________________

____________________________________________

____________________________________________
205. Have you experienced discrimination at (CHILD’s) school because you are (Asian/Oriental)?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

**How?**

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

*(If R only mentions one response given above, ask:)* Anything else?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

205a. Do you think it has been harder for you to get ahead in life because you are (Asian/Oriental)?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

In what ways has it been harder for you?  

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

206. Do you think (CHILD) is getting different messages about what it means to be a successful (Asian/Oriental) adolescent from (his/her) friends than from you?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

207. What are the messages (CHILD) gets from (his/her) friends?

**SPECIFY:**

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

208. What are the messages (CHILD) gets from you?

**SPECIFY:**

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

*(If R is Asian/Oriental, go to Q.232, P.53)*
(FOR BLACKS/AFRICAN AMERICANS ONLY.)

Please use Response Scale # 11.
209. How important is being (Black/African-American) to you?

<table>
<thead>
<tr>
<th>Not at all Important</th>
<th>A Little Important</th>
<th>Somewhat Important</th>
<th>Very Important</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

Please use Response Scale #2.
210. Do you talk in the family about being (Black/African American)?

<table>
<thead>
<tr>
<th>Never</th>
<th>Almost Never</th>
<th>Occasionally</th>
<th>Sometimes</th>
<th>Very Often</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

211. Has being (Black/African-American) affected the goals you have for (CHILD)?

Yes
No  (IF NO, SKIP TO Q.212)

1  2

In what ways?
____________________________________________
____________________________________________
____________________________________________
____________________________________________

212. Now I would like to know some more about how being (Black/African American) affects your experiences in general and at (CHILD’s) school. Again, we realize that some of these questions may be sensitive. We would like to assure you that we do not intend to offend anyone and that you are welcome to skip any questions you find uncomfortable.

Please use Response Scale #2.
Over your lifetime, in general, how often have you felt discriminated against because you are (Black/African American)?

<table>
<thead>
<tr>
<th>Never</th>
<th>Almost Never</th>
<th>Occasionally</th>
<th>Sometimes</th>
<th>Very Often</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

(IF NEVER, SKIP TO Q. 213)

How?
____________________________________________
____________________________________________
____________________________________________
____________________________________________
213. Have you experienced discrimination at (CHILD’s) school because you are (Black/African American)?

Yes 1  No (IF NO, SKIP TO Q.213a) 2

How? ____________________________________________

_____________________________________________

_____________________________________________

( IF R ONLY GIVES ONE RESPONSE GIVEN ABOVE, ASK:) Anything else?

_____________________________________________

_____________________________________________

_____________________________________________

213a. Do you think it has been harder for you to get ahead in life because you are (Black/African American)?

Yes 1  No (IF NO, SKIP TO Q. 214) 2

In what ways?

_____________________________________________

_____________________________________________

_____________________________________________

214. Do you think (CHILD) is getting different messages about what it means to be a successful (Black/African American) adolescent from (his/her) friends than from you?

Yes 1  No (IF NO, SKIP TO Q.232, P.53) 2

215. What are the messages (CHILD) gets from (his/her) friends?

SPECIFY: _______________________________________

_____________________________________________

_____________________________________________

216. What are the messages (CHILD) gets from you?

SPECIFY: _______________________________________

_____________________________________________

_____________________________________________

( IF R IS BLACK, SKIP TO Q.232, P.53)
(FOR LATINOS/HISPANICS ONLY.)

Please use Response Scale # 11.
217. How important is being (Latino/Hispanic) to you?

<table>
<thead>
<tr>
<th>Not at all</th>
<th>A Little</th>
<th>Somewhat</th>
<th>Very</th>
</tr>
</thead>
<tbody>
<tr>
<td>Important</td>
<td>Important</td>
<td>Important</td>
<td>Important</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

Please use Response Scale #2.
218. Do you talk in the family about being (Latino/Hispanic)?

<table>
<thead>
<tr>
<th>Never</th>
<th>Almost</th>
<th>Occasionally</th>
<th>Sometimes</th>
<th>Very</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>Never</td>
<td>Occasionally</td>
<td>Sometimes</td>
<td>Very</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

219. Has being (Latino/Hispanic) affected the goals you have for (CHILD)?

Yes  No  (IF NO, SKIP TO Q.220)

1  2

In what ways?

_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

220. Now I would like to know some more about how being (Latino/Hispanic) affects your experiences in general and at (CHILD’s) school. Again, we realize that some of these questions may be sensitive. We would like to assure you that we do not intend to offend anyone and that you are welcome to skip any questions you find uncomfortable.

Please use Response Scale #2.
Over your lifetime, in general, how often have you felt discriminated against because you are (Latino/Hispanic)?

Never  Almost  Occasionally  Sometimes  Very

(IF NEVER, SKIP TO Q.221)

<table>
<thead>
<tr>
<th>Never</th>
<th>Almost</th>
<th>Occasionally</th>
<th>Sometimes</th>
<th>Very</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

How?

_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________
221. Have you experienced discrimination at (CHILD’s) school because you are (Latino/Hispanic)?

Yes 1
No  (IF NO, SKIP TO Q.221a) 2

How? ________________________________________________
____________________________________________
____________________________________________
____________________________________________

(IF R ONLY MENTIONS ONE RESPONSE GIVEN ABOVE, ASK:) Anything else?
____________________________________________
____________________________________________
____________________________________________
____________________________________________

221a. Do you think it has been harder for you to get ahead in life because you are (Latino/Hispanic)?

Yes 1
No  (IF NO, SKIP Q. 222) 2

In what ways?
____________________________________________
____________________________________________
____________________________________________

222. Do you think (CHILD) is getting different messages about what it means to be a successful (Latino/Hispanic) adolescent from (his/her) friends than from you?

Yes 1
No  (IF NO, SKIP TO Q. 232, P.53) 2

223. What are the messages (CHILD) gets from (his/her) friends?

SPECIFY: ____________________________________________
____________________________________________
____________________________________________

224. What are the messages (CHILD) gets from you?

SPECIFY: ____________________________________________
____________________________________________

(IF R IS LATINO/HISPANIC, GO TO Q.232, P.53)
225. Besides being White, is there any other ethnic group you identify with? *(IF R DOESN'T UNDERSTAND, SAY: "SOME PEOPLE ARE WHITE AND IRISH, WHITE AND JEWISH")*

Yes

No *(IF NO, SKIP TO Q.229)*

(SPECIFY) _______________________________

226. How important is being (ETHNICITY) to you?

<table>
<thead>
<tr>
<th>Not at all Important</th>
<th>A Little Important</th>
<th>Somewhat Important</th>
<th>Very Important</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

*(IF R SAYS Not at all important or a little important, SKIP TO Q.229)*

227. Do you talk in the family about being (ETHNICITY)?

<table>
<thead>
<tr>
<th>Never</th>
<th>Almost</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

228. Has being (ETHNICITY) affected the goals you have for (CHILD)?

Yes

No *(IF NO, SKIP TO Q.229)*

In what ways?

____________________________________________

____________________________________________

____________________________________________

____________________________________________

229. Now I would like to know how being White affects your experiences in general and at (CHILD’s) school. Again, we realize that some of these questions may be sensitive. We would like to assure you that we do not intend to offend anyone and that you are welcome to skip any questions you find uncomfortable.

Please use Response Scale #2.

Do you talk in the family about being White?

<table>
<thead>
<tr>
<th>Never</th>
<th>Almost</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>
230. Please use Response Scale #2.
Over your lifetime, in general, how often have you felt discriminated against because you are White?

<table>
<thead>
<tr>
<th>Never</th>
<th>Almost Never</th>
<th>Occasionally</th>
<th>Sometimes</th>
<th>Very Often</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

(IF NEVER, SKIP TO Q. 231)

How?

_____________________________________________
_____________________________________________
_____________________________________________
_____________________________________________
_____________________________________________

231. Have you experienced discrimination at (CHILD’s) school because you are white?

Yes 1 No (IF NO, SKIP TO Q. 231a) 2

How?

_____________________________________________
_____________________________________________
_____________________________________________
_____________________________________________
_____________________________________________

(IF R ONLY MENTIONS ONE RESPONSE GIVEN ABOVE, ASK:) Anything else?

_____________________________________________
_____________________________________________
_____________________________________________
_____________________________________________
_____________________________________________

231a. Do you think it has been harder for you to get ahead in life because you are White?

Yes 1 No (IF NO, SKIP TO Q. 232) 2

In what ways?

_____________________________________________
_____________________________________________
_____________________________________________
_____________________________________________

(IF R IS WHITE, GO TO Q. 232. P. 53)
ASK ALL R’S...

232. Do you think White and Black kids are treated differently at (CHILD’s) school?

Yes 1
No 2 (IF NO, SKIP TO Q.233)

In what ways?
(SPECIFY) ______________________________________
____________________________________
_______________________________________

(IF R, DOES NOT HAVE A SPOUSE/PARTNER, SKIP TO Q. 235 )

233. Is (SPOUSE/PARTNER) of the same racial background as you?

Yes 1
No 2

(IF YES, SKIP TO QUESTION 235)

234. What is (SPOUSE/PARTNER) racial background?

(SPECIFY)________________________________________

235. What is your child’s racial background?

(SPECIFY)________________________(IF THE SAME AS BOTH PARENTS, SKIP TO Q.236)
(RACE)

(IF MORE THAN ONE BACKGROUND, ASK:) Which of these backgrounds plays the most predominant role in (CHILD’s) life?

Most Predominant Background

(INTERVIEWER: USE THE MOST PREDOMINANT BACKGROUND FOR THE REMAINDER OF THE INTERVIEW)

236. Do you think it will be harder for (CHILD) to get ahead in life because (he/she) is (RACE)?

Yes 1
No 2 (IF NO, SKIP TO Q. 236a)

In what ways?
___________________________________________
___________________________________________
___________________________________________
Please use Response Scale #12.

236a. How much do you think people will discriminate against (CHILD) because (he/she) is (RACE)?

<table>
<thead>
<tr>
<th>Not at All</th>
<th>A Little</th>
<th>Some</th>
<th>A Lot</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

(IF ABOVE ANSWER IS NOT AT ALL, SKIP TO Q.241)

237. In what ways will people discriminate against (CHILD)?

(SPECIFY) _________________________________________

_____________________________________

_____________________________________

238. What kinds of things are you doing for (CHILD) to protect (him/her) from being discriminated against because (he/she) is (RACE)?

(SPECIFY) _________________________________________

_____________________________________

_____________________________________

239. Are you trying to teach (him/her) any special things to help (him/her) deal with discrimination?

Yes 1            No 2 (IF NO, SKIP TO Q.241)

240. What are you teaching (him/her)?

(SPECIFY) _________________________________________

_____________________________________

_____________________________________

==============================================================================

Please use Response Scale #2.

241. Over your lifetime, in general, how often have you felt discriminated against because of your sex?

<table>
<thead>
<tr>
<th>Never</th>
<th>Almost</th>
<th>Occasionally</th>
<th>Sometimes</th>
<th>Very Often</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>
241a. Do you think it has been harder for you to get ahead in life because of your sex?

Yes  
1  
No (IF NO, SKIP TO Q.242)  
2  

In what ways?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

242. Do you think it will be harder for (CHILD) to get ahead in life because of (his/her) sex?

Yes  
1  
No (IF NO, SKIP TO Q.242a)  
2  

In what ways?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

242a. Do you think (CHILD) will be discriminated against because of (his/her) sex?

Yes  
1  
No (IF NO, SKIP TO Q.244)  
2  

243. What kinds of things do you do for your child to protect (him/her) from being discriminated against because (CHILD) is (male/female)?

(SPECIFY) __________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

==============================================================================
Now I would like to ask you some questions about some of your family rules.

244. Do you have rules for (CHILD) about what time to be home on **weekend nights**?

   Yes 1
   No 2  **(IF NO, SKIP TO Q.245)**

   a. What is that time?_________________________
   SPECIFY TIME

   Please use Response Scale #3 for the next two questions.

   b. How regularly is this rule enforced?

       | Almost         | Occasionally   | About 1/2 the time | Sometimes | Almost | Always |
       | Never         |               |                   |       |       |       |
       | 1             | 2             | 3                  | 4     | 5     |

   c. How often do you know if (CHILD) comes home by this time?

       | Almost         | Occasionally   | About 1/2 the time | Sometimes | Almost | Always |
       | Never         |               |                   |       |       |       |
       | 1             | 2             | 3                  | 4     | 5     |

245. Do you have rules for (CHILD) about what time to be home on **school nights**?

   Yes 1
   No 2  **(IF NO, SKIP TO Q.246)**

   a. What is that time?_________________________
   SPECIFY TIME

   Please use Response Scale #3 for the next two questions.

   b. How regularly is this rule enforced?

       | Almost         | Occasionally   | About 1/2 the time | Sometimes | Almost | Always |
       | Never         |               |                   |       |       |       |
       | 1             | 2             | 3                  | 4     | 5     |

   c. How often do you know if (CHILD) comes home by this time?
Now I’d like to ask some questions about (CHILD’s) education.

246. Parents often can’t help their child at home as much as they would like. What are the things that limit how much time you spend with your child.

SPECIFY________________________________________
________________________________________________
________________________________________________
________________________________________________
________________________________________________

(IF ONE RESPONSE GIVEN ABOVE, ASK:) Anything else?

247.  Yes 1  No (IF NO, SKIP TO Q.248) 2

SPECIFY________________________________________
________________________________________________
________________________________________________
________________________________________________

Please use Response Scale #12.

248. How much do these kinds of things limit the amount of time you have at home to help (CHILD) with (his/her) school work?

Not at all 1  A little 2  Some 3  A Lot 4
249. Before your child entered the seventh grade:

a. Did the Jr. High school hold any meetings or orientations for parents of new Jr. High students?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Don’t Know</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>8</td>
</tr>
</tbody>
</table>

(IF NO OR DON'T KNOW, SKIP TO Q.251)

b. Did you attend?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

(IF YES, SKIP TO d)

c. Why didn’t you attend?

______________________________________________
______________________________________________

(SKIP TO Q.251)

d. Did you find these meetings useful or informative? (READ CATEGORIES)

<table>
<thead>
<tr>
<th>Not Useful</th>
<th>Neutral</th>
<th>Yes, Mildly Useful</th>
<th>Yes, Very Useful</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

e. Did you get a tour of the Jr. High?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

f. Did you meet any of the teachers (CHILD) is taking classes from?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

Please use Response Scale #7.

250. Were these experiences:

<table>
<thead>
<tr>
<th>very positive</th>
<th>somewhat positive</th>
<th>neutral</th>
<th>somewhat negative</th>
<th>very negative</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

251. Have you done these things any time at (CHILD's) school this year?
Have you...

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

a. Helped the teacher in the classroom or on class trips

b. Helped in the library, cafeteria, playground, or office

c. Done fund-raising for PTA

d. Something else? SPECIFY:____________________

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>
Now I’d like to ask you some more questions about (CHILD’s) school.

Please use Response Scale #14 for the next few questions.

252. Do you feel you understand how to interpret your child’s standardized test scores? (READ CATEGORIES)

<table>
<thead>
<tr>
<th>Yes, Definitely</th>
<th>I think I do</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

253. Do you know what courses your child had to choose from this year? (READ CATEGORIES)

<table>
<thead>
<tr>
<th>Yes, Definitely</th>
<th>I think I do</th>
<th>No (IF NO, SKIP TO Q.255)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

254. How did you find out? (DON’T READ CATEGORIES)

a. my child told me (1)

b. the school informed me (2)

c. I already knew because I have had children in this school before (3)

d. neighbors/friends/relatives told me (4)

e. other (SPECIFY) ____________________________________________ (5)

255. Do you know which courses your child would have to take in order to get into college preparatory courses in high-school? (READ CATEGORIES)

<table>
<thead>
<tr>
<th>Yes, all</th>
<th>Yes, Most</th>
<th>Yes, Some</th>
<th>I think so</th>
<th>No (IF NO, SKIP TO Q.257)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

256. How did you find out? Please tell me all that apply: (DON’T READ CATEGORIES)

a. my child told me (1)

b. the school informed me (2)

c. I already knew because I have had children in this school before (3)

d. neighbors/friends/relatives told me (4)

e. other (SPECIFY) ____________________________________________ (5)

257. Sometimes children in the seventh grade are placed in classes based on their ability level (remedial, basic, intensive). Was your child placed in classes based on (his/her) ability level?

YES  NO  DON’T KNOW (IF NO OR DON’T KNOW, SKIP TO Q.261)

| 1 | 2 | 8 |

258. Do you know which ability level classes your child is in?

YES  NO

| 1 | 2 |

Please use Response Scale #12 for the next few questions.

259. How involved was (CHILD) in making this decision?

<table>
<thead>
<tr>
<th>Not at All</th>
<th>A Little</th>
<th>Some</th>
<th>A Lot</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

260. How involved were you in making this decision?

<table>
<thead>
<tr>
<th>Not at All</th>
<th>A Little</th>
<th>Some</th>
<th>A Lot</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>
Please use Response Scale #15 for the next two questions.

261. How much do (CHILD’s) teachers care about what (CHILD’s) home life is like?
   
<table>
<thead>
<tr>
<th>Not at All</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>A Great Deal</th>
<th>5</th>
</tr>
</thead>
</table>

262. How much do you think the school staff would do to help parents find family services that are available outside of the school if they were needed (for example, Health Department, AFDC, or the Department of Human Services)?

<table>
<thead>
<tr>
<th>Not at All</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>A Great Deal</th>
<th>5</th>
</tr>
</thead>
</table>

263. How far do you live from your child's school (for example: miles, blocks, minutes by car, minutes by public transportation, minutes walking)

   (SPECIFY)___________________(CIRCLE ONE) miles blocks by car minutes by public transportation minutes walking
   1 2 3 4 5

264. Have any of your other children attended this school?

   Yes  No
   1   2

265. Were you given a choice as to which school your child could attend this year?

   Yes  No (IF NO, GO ON TO Q.267)
   1   2

266. Why did you choose this school?

   (SPECIFY)_________________________________________
   ___________________________________________________
   ___________________________________________________

267. Is (CHILD’S) school involved in any special school-wide programs that you know of?

   Yes  No  don’t know (IF NO OR DON’T KNOW, GO ON TO Q.269)
   1 2 8

268. What are these programs?

   (SPECIFY)_________________________________________
   ___________________________________________________
   ___________________________________________________

   (NAME AND/OR DESCRIPTION OF PROGRAMS)
Please use Scale #16.

269. Thinking about the last two weeks, about how often did (CHILD) do each of the following during out of school time?

<table>
<thead>
<tr>
<th>Activity</th>
<th>Never</th>
<th>Once or Twice</th>
<th>At Least Once a Week</th>
<th>Several Times per Week</th>
<th>Daily Less than 1 hr.</th>
<th>Daily More than 1 hr.</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Music, art, drama, or dance</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>b. sports or other physical activities</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>c. hanging out with friends</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>d. Watching news or educational TV</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>e. Watching music videos (MTV)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>f. Watching other TV programs</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>g. Playing Nintendo or other video games</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>h. reading for pleasure</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>i. doing homework</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>j. helping around the house</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>k. working for pay away from home</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
</tbody>
</table>

270. In an average week, about how much time do you spend reading newspapers, magazines or books at home? (READ CATEGORIES)

1. less than 1 hour
2. 1-2 hours
3. 3-5 hours
4. more than 5 hours

==============================================================================
This is just about the end of the interview. We have a few more questions for you which deal with what you thought of this interview. We would also like to give you a chance to add anything else which you think is important.

271. Would you like to explain any of your answers further?

Yes 1  No (IF NO, SKIP TO Q.272) 2

(SPECIFY)  ___________________________________________

____________________________________________________

____________________________________________________

272. Were there any questions that made you feel particularly uncomfortable?

Yes 1  No (IF NO, SKIP TO Q.273) 2

(SPECIFY)  ___________________________________________

____________________________________________________

____________________________________________________

273. Are there any questions we did not ask you that you think may be important in understanding parent’s involvement in their child’s education?

Yes 1  No (IF NO, SKIP TO Q.274) 2

(SPECIFY)  ___________________________________________

____________________________________________________

____________________________________________________

274. Anything else that you would like to add?

Yes 1  No (IF NO, SAY THANK YOU.) 2

(SPECIFY)  ___________________________________________

____________________________________________________

____________________________________________________

THANK YOU!!!!