

PEELS Wave 4 CATI SPECS

VARIABLE NOTE:

LOAD FILE CONTAINS ONLY CASES THAT COMPLETED ONE OF THE PREVIOUS 3 WAVES.

CHILD= (Child's first name)
=C_FNAME (Child's first name on load file)

CHILDLN = (Child's last name)
=C_LNAME (Child's last name on load file)

If CHDSEX1 = 1, display "him, he, or his." Else, display "her, she, or hers."

Box S-1

IF PHONE NUMBER IS FOR CONTACT PERSON AND NOT PARENT/GUARDIAN (FONE.WHOSFONE ≠1), GO TO SINTROL. ELSE, GO TO SINTRO

SINTRO

May I please speak with {TRAKFNAM} {TRAKLNAM}?

[Hello, my name is {INTERVIEWER}. I'm calling as part of a national study being conducted for the U.S. Department of Education about young children. You may have received a letter about it. Who would be the best adult to talk with about {CHILD}?]

- | | |
|--|------------------|
| 1. SUBJECT SPEAKING | (GO TO S2B) |
| 2. SUBJECT LIVES HERE – NOT AVAILABLE | (GO TO BOX S-1A) |
| 3. SUBJECT KNOWN LIVES AT ANOTHER NUMBER | (GO TO KNOWS) |
| 4. NEVER HEARD OF SUBJECT | (GO TO CHECKNO) |
| 5. TELEPHONE COMPANY RECORDING | (GO TO RECORD) |
| AM. ANSWERING MACHINE | (GO TO READMSG) |
| RT. RETRY DIALING | |
| GT. GO TO RESULT | |

Box S-1A

IF MKR (MOST KNOWLEDGEABLE RESPONDENT) HAS NOT ALREADY BEEN IDENTIFIED IN PREVIOUS CONTACT (MKRKNOWN ≠ 1), GO TO SINTRO2.
ELSE, GO TO BOX S-8.

SINTRO2

May I please speak with a member of your household who is at least 18 years old?

[My name is {INTERVIEWER}. I'm calling on behalf of the U.S. Department of Education regarding an important education study.]

- | | |
|---------------------|------------------|
| 1. SUBJECT SPEAKING | (GO TO S2B) |
| 2. NOT AVAILABLE | (GO TO CALLBACK) |
| GT. GO TO RESULT | |

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SINTROL

[Hello, my name is {INTERVIEWER}.]

I'm trying to reach the parent or guardian of {C_FNAME} {C_LNAME} regarding an important U.S. Department of Education study. Do you have any information that will help me locate this individual? For example, a telephone number, an address, or the name of someone else who may know how to locate him or her.

()

- 1. YES – HAS CONTACT INFORMATION (GO TO SUBJECT1)
- 2. NO – NO CONTACT INFORMATION (GO TO THANKPRB)
- 3. SUBJECT AT THIS NUMBER (GO TO SINTRO)
- 4. NEVER HEARD OF SUBJECT (GO TO CHECKNO)
- 5. TELEPHONE COMPANY RECORDING (GO TO RECORD)
- AM. ANSWERING MACHINE (GO TO READMSG)
- RT. RETRY DIALING
- GT. GO TO RESULT

S2B

[My name is {INTERVIEWER}. I'm calling on behalf of the U.S. Department of Education regarding an important education study. You may have received a letter about our brief followup interview this year. {CHILD} is part of this study and we spoke with you about {him/her} previously. Are you still the best adult to talk to about {CHILD}?] [IF RESPONDENT SAYS THEY DIDN'T GET THE LETTER: "It may not have arrived yet," AND CONTINUE.]

[IF NEEDED: Could you please tell me your name?]

() [X IF SCR N RESP]

{P_FNAME}
FIRST NAME _____
RFNAME

{P_LNAME}
LAST NAME _____
RLNAME

[PRESS ENTER TO CONTINUE.]

[TO GO TO RESULT CTRL/B AND ENTER GT.]

Box S-2

IF RFNAME = -7 OR -8, GO TO THANK1 AND REASREF1 AND CODE CASE REFUSAL "2", AND THEN GO TO HHSELECT (SCREENER COMPLETE).
IF SCR N RESP IS BLANK, GO TO INTRO 2.
ELSE, GO TO S9.

KNOWS

[My name is {INTERVIEWER}.]

[I'm trying to reach the parent or guardian of {C_FNAME} {C_LNAME} regarding an important U.S. Department of Education study. Do you have any information that will help me locate this individual? For example, a telephone number, an address, or the name of someone else who may know how to locate him/her.]

()

- 1. YES – HAS CONTACT INFORMATION (GO TO SUBJECT1)
- 2. NO – NO CONTACT INFORMATION (GO TO THANKPRB)
- 3. SUBJECT AT THIS NUMBER (GO TO SINTRO)

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VARIABLE NOTE:
If RLNAME = -1, display
"parent/guardian of..."
Else, display "{RFNAME}
{RLNAME}."
If SUBJECT1=2, overlay SUBJECT
2.
Else, do not display overlay.

SUBJECT1

[IS THIS INFORMATION FOR {PARENT/GUARDIAN OF {C_FNAME} {C_LNAME}}{RFNAME} {RLNAME}}?

()
[1. YES 2. NO]

[ENTER CORRECTIONS TO PARENT/GUARDIAN NAME, OR PRESS RETURN IF NAME IS CORRECT.]

FIRST NAME: {P_FNAME/RFNAME} LAST NAME: {P_LNAME/RLNAME}

[ENTER ALL CONTACT INFORMATION, USE SHIFT-8 (*) IF INFORMATION IS NOT KNOWN.]

TELEPHONE NUMBER: ()-()-()

STREET ADDRESS: _____ APT NO: _____

CITY: _____ STATE: _____ ZIP CODE: _____

[ENTER MESSAGE OR LOCATING INFORMATION FOR THE NEXT INTERVIEWER.]



Box S-4

IF PHONE NUMBER GIVEN, LOAD NEW NUMBER AND RETURN TO SCHEDULER AS 15.
ELSE, LOAD NEXT NUMBER FROM FILE.
IF ALL NUMBERS EXHAUSTED, CODE "10" (TRACING).

SUBJECT2

[ENTER CONTACT NAME.]

FIRST NAME: _____ LAST NAME: _____

[ENTER ALL CONTACT INFORMATION, USE SHIFT-8 (*) IF INFORMATION IS NOT KNOWN.]

[ENTER ANY CONTACT INFORMATION FOR THE SUBJECT, USE SHIFT-8 (*) IF NOT KNOWN.]

PHONE NUMBER: ()-()-()

STREET ADDRESS: _____ APT NO: _____

CITY: _____ STATE: _____ ZIP CODE: _____

[ENTER MESSAGE OR LOCATING INFORMATION FOR THE NEXT INTERVIEWER.]

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Box S-5

LOAD NEXT NUMBER FROM FILE. IF ALL NUMBERS EXHAUSTED, CODE "10" (TRACING).

RECORD

THE NUMBER YOU CALLED WAS:

()

1. CHANGED TO A NEW NUMBER (GO TO OVERLAY TO RECORD NEW #)
2. TEMPORARILY DISCONNECTED
3. NOW NON-PUBLISHED
4. NO LONGER WORKING/DISCONNECTED
5. NOT COMPLETED AS DIALED
6. NOT AVAILABLE IN AREA CODE
91. OTHER (SPECIFY): _____

Box S-6

IF RECORD = 1 AND NEW NUMBER RECORDED, LOAD NEW NUMBER AND RETURN TO SCHEDULER AS 15.
IF RECORD = 2, 3, 4,5, 6, OR 91, LOAD NEXT NUMBER FROM FILE.
IF ALL NUMBERS EXHAUSTED, CODE "10" (TRACING).

CHECKNO

ORIGINAL AREA CODE: {AREA}

I'd like to make sure that this number was dialed correctly. Is this {(AREA)} {EXCH}-{NUMBER}?

()

1. YES (GO TO KNOWS)
2. NO (GO TO CHECKOV)

CHECKov

[It seems I have dialed the wrong number. I will redial the number again.] Thank you for your time. Goodbye.

()

- RT. RETRY DIALING
NW. NON-WORKING NUMBER (DIALED 2X)

Box S-7

IF CHECKov = NW (NON-WORKING NUMBER), LOAD NEXT NUMBER FROM FILE.
IF ALL NUMBERS EXHAUSTED, CODE "10" (TRACING).

THANKPRB

Thank you for your help. Goodbye.

[PRESS RETURN TO CONTINUE.]

THANK1

Thank you, those are all the questions I have at this time.

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[PRESS RETURN TO CONTINUE.]

INTRO2

[Hello], may I speak to {RFNAME} {RLNAME}?

[My name is {interviewer name}] I'm calling as part of a national study being conducted for the U.S. Department of Education about young children.

- | | |
|---|-----------------|
| 1. SUBJECT SPEAKING | (GO TO S9) |
| 2. SUBJECT LIVES HERE – NEEDS APPOINTMENT | (GO TO BOX S8) |
| 3. SUBJECT KNOWN LIVES AT ANOTHER NUMBER | (GO TO KNOWS) |
| 4. NEVER HEARD OF SUBJECT | (GO TO CHECKNO) |
| 5. TELEPHONE COMPANY RECORDING | (GO TO RECORD) |
| AM. ANSWERING MACHINE | (GO TO READMSG) |
| RT. RETRY DIALING | |
| GT. GO TO RESULT | |

Box S-8

IF RRELEASE > 0 AND NEWMAXR < RRELEASE AND MCURSECT = -1, GO TO NEWRESP.
ELSE, GO TO CALLBACK.

S9. Participation in this study is voluntary and this year's telephone interview will only take about 15 of your time. Everything you say will be kept confidential and you may choose to not answer any question that I ask you. Nothing you say will ever be reported individually about you, {CHILD}, or your family, and no information you give will be shared with {CHILD}'s school or program. If you have any questions or concerns about the study, I can give you a toll-free number to call. [IF ASKED: The toll-free number is 1-xxx-xxx-xxxx.]

S9

()

- | | |
|----------------------------------|-----------------|
| 1. CONTINUE | |
| 2. NEED TO SELECT NEW RESPONDENT | (GO TO NEWRESP) |

Box S-9

Check to see if we are speaking to the same respondent who did the interview in Wave 3. If so, GO TO S10VERF to verify the information that was collected previously,

ELSE, GO TO S10

S10VERF

We previously recorded that you are {RSEX}, and you are {CHILD}'s {RESRPT}{RESTYPE}.
Is that correct?

- | | |
|---------------|--|
| 1. YES | (autocode S10 THROUGH S11B and GO TO S11C) |
| 2. NO | (GO TO S10) |
| -7 REFUSED | (GO TO S10) |
| -8 DON'T KNOW | (GO TO S10) |

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S10. [IF NECESSARY ASK: Are you male or female?]

RSEX

()

1. MALE (GO TO S11)
2. FEMALE (GO TO S11)

S11. To start, what is your relation to {CHILD}?

RESTYPE

()

1. MOTHER (GO TO S11B)
2. FATHER (GO TO S11B)
3. BROTHER (GO TO S11C)
4. SISTER (GO TO S11C)
5. GRANDMOTHER (GO TO S11C)
6. GRANDFATHER (GO TO S11C)
7. AUNT (GO TO S11C)
8. UNCLE (GO TO S11C)
9. COUSIN (GO TO S11C)
10. PARTNER OF CHILD'S PARENT (GO TO S11C)
91. OTHER RELATIVE (GO TO RSTYPov1)
- RESTYPOS** (SPECIFY): _____ (GO TO S11C)
92. NON-RELATIVE (GO TO RSTYPov2)
- RESTYPOS** (SPECIFY): _____ (GO TO S11C)
- 7. REFUSED (GO TO A11)
- 8. DON'T KNOW (GO TO A11)

**CONSISTENCY EDIT BETWEEN
S10 AND S11:**

If RESTYPE = 1, 4, 5, or 7, RSEX
cannot = 1.

If RESTYPE = 2, 3, 6, or 8, RSEX
cannot = 2.

S11B. Are you {CHILD}'s biological, adoptive, step or foster parent?

RESRPT

()

1. BIOLOGICAL (GO A11)
2. ADOPTIVE (GO A11)
3. STEP (GO TO S11C)
4. FOSTER (GO TO S11C)
- 7. REFUSED (GO TO S11C)
- 8. DON'T KNOW (GO TO S11C)

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S11C. Are you {CHILD}'s legal guardian?
RGUARD

()

- 1. YES (GO TO A11)
- 2. NO (GO TO A11)
- 7 REFUSED (GO TO A11)
- 8 DON'T KNOW (GO TO A11)

VARIABLE NOTE:
 If NEWMAXR ≠ RRELEASE, display
 "We have been trying..."
 Else, display "Who would be..."
 If NEWMAXR ≠ RRELEASE and
 RRELEASE ≠ 0, display () and
 YES/NO responses.
 Else, do not show display.

NEWRESP

{We have been trying to reach {RFNAME} {RLNAME} regarding an important education study, and have been unable to make contact. Is there another adult, age 18 or older, that we may be able/Who would be the best adult, age 18 or older,} to talk with about {CHILD}?

NEWMKR

()

- 1. YES (GO TO RFNAME)
- 2. NO (MAINTAIN RFNAME AND RLNAME AND GO TO BOX S-11 THEN TO CB.)
- 7. REFUSED (MAINTAIN RFNAME AND RLNAME AND GO TO BOX S-11 THEN TO CB.)
- 8. DON'T KNOW (MAINTAIN RFNAME AND RLNAME AND GO TO BOX S-11 THEN TO CB.)

FIRST NAME _____ LAST NAME _____
RFNAME RLNAME

Box S-11

IF RFNAME = -7 OR -8, GO TO THANK1 AND REASREF1 AND CODE CASE REFUSAL "2" AND RETAIN RFNAME AND RLNAME.
 UPDATE ALL RFNAME AND RLNAME FIELDS. STORE ORIGINAL DATA IN OLDRFNAM/OLDRNLAM. GO TO HHSELECT.

READMSG

[PLEASE READ THE FOLLOWING MESSAGE INTO THE ANSWERING MACHINE.]

Hello, this is {INTERVIEWER} and I'm calling on behalf of the U.S. Department of Education regarding an important education study called PEELS that your family agreed to take part in. We'll call back another time. If you would like to schedule an appointment for your telephone interview, please call 1-xxx-xxx-xxxx. Thank you.

[PRESS ENTER TO CONTINUE.]

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RESTART2

THIS IS A RESTART CASE THAT WILL BEGIN AT QUESTION {SECTION}
Hello, may I please speak with {RFNAME} {RLNAME}?

[My name is {INTERVIEWER}. I'm calling back on behalf of the U.S. Department of Education. We talked to you earlier regarding an important education study. We are calling you now to complete the interview.]

()

- | | | |
|-----|--|-----------------------|
| 1. | SUBJECT AVAILABLE/COMING TO PHONE | (GO TO START SECTION) |
| 2. | SUBJECT LIVES HERE – NEEDS APPOINTMENT | (GO TO CALLBACK) |
| 3. | SUBJECT KNOWN LIVES AT ANOTHER NUMBER | (GO TO KNOWS) |
| 4. | NEVER HEARD OF SUBJECT | (GO TO CHECKNO) |
| 5. | TELEPHONE COMPANY RECORDING | (GO TO RECORD) |
| AM. | ANSWERING MACHINE | (GO TO READMSG) |
| RT. | RETRY DIALING | |
| GT. | GO TO RESULT | |

A11. Does {CHILD} live with you now? [NOTE: IN CASES OF JOINT CUSTODY, CHILD IS CONSIDERED LIVING WITH A PARENT IF CHILD NORMALLY SPENDS AT LEAST 4 NIGHTS A WEEK WITH THE PARENT.] [IF NEEDED: IF PARENT ANSWERS DON'T KNOW OR REFUSED: It is very important that we have this information in order to ask the remainder of our questions correctly. Does {CHILD} live with you now?]

CHDLVNOW

()

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

PROGRAMMER'S NOTE:

Don't allow REFUSED or DON'T
KNOW for A22.

A22. What is {CHILD}'s current grade level?
IF NEEDED: The current year means the 2006-2007 school year.

CHCURGRD

()

1. NOT IN SCHOOL
2. PRESCHOOL
3. KINDERGARTEN
4. FIRST GRADE
5. SECOND GRADE
6. THIRD GRADE
7. FOURTH GRADE
8. UNGRADED

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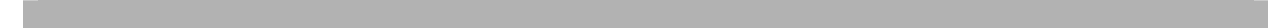
B6a. When we spoke with you last and asked about {CHILD}'s physical, sensory, learning or other disabilities or problems you told us that {he/she} had (a) (SEE BELOW). Is that still correct?

BPRVDISB

- | | |
|--|---|
| 1. {RESPONSE01 FROM PREVIOUS WAVE B5 } | 9. {RESPONSE01 FROM PREVIOUS WAVE B5 } |
| 2. {RESPONSE01 FROM PREVIOUS WAVE B5 } | 10. {RESPONSE01 FROM PREVIOUS WAVE B5 } |
| 3. {RESPONSE01 FROM PREVIOUS WAVE B5 } | 11. {RESPONSE01 FROM PREVIOUS WAVE B5 } |
| 4. {RESPONSE01 FROM PREVIOUS WAVE B5 } | 12. {RESPONSE01 FROM PREVIOUS WAVE B5 } |
| 5. {RESPONSE01 FROM PREVIOUS WAVE B5 } | 13. {RESPONSE01 FROM PREVIOUS WAVE B5 } |
| 6. {RESPONSE01 FROM PREVIOUS WAVE B5 } | 14. {RESPONSE01 FROM PREVIOUS WAVE B5 } |
| 7. {RESPONSE01 FROM PREVIOUS WAVE B5 } | 15. {RESPONSE01 FROM PREVIOUS WAVE B5 } |
| 8. {RESPONSE01 FROM PREVIOUS WAVE B5 } | |

()

- | | |
|---------------|-----------------|
| 1. YES | (GO TO B6c) |
| 2. NO | (GO TO BOX B-6) |
| -7 REFUSED | (GO TO BOX B-6) |
| -8 DON'T KNOW | (GO TO BOX B-6) |



BOX B-6

IF ONLY ONE DISABILITY IMPORTED FROM PREVIOUS WAVE B5, GO TO B6c.
ELSE, GO TO B6b.

PROGRAMMERS NOTE:
Each Yes response "1" in previous Wave that is a No "2" in B6a, it will be set to 3 in Wave 3.

B6b. Which previous disabilities doesn't {he/she} have now?
[DO NOT READ RESPONSES ALOUD UNLESS RESPONDENT NEEDS A PROMPT.]
[CODE ALL THAT APPLY, CTRL/P TO EXIT.]

() () () () () () () () () () () () () () () ()

- | | |
|--|---|
| 1. {RESPONSE01 FROM PREVIOUS WAVE B5 } | 9. {RESPONSE01 FROM PREVIOUS WAVE B5 } |
| 2. {RESPONSE01 FROM PREVIOUS WAVE B5 } | 10. {RESPONSE01 FROM PREVIOUS WAVE B5 } |
| 3. {RESPONSE01 FROM PREVIOUS WAVE B5 } | 11. {RESPONSE01 FROM PREVIOUS WAVE B5 } |
| 4. {RESPONSE01 FROM PREVIOUS WAVE B5 } | 12. {RESPONSE01 FROM PREVIOUS WAVE B5 } |
| 5. {RESPONSE01 FROM PREVIOUS WAVE B5 } | 13. {RESPONSE01 FROM PREVIOUS WAVE B5 } |
| 6. {RESPONSE01 FROM PREVIOUS WAVE B5 } | 14. {RESPONSE01 FROM PREVIOUS WAVE B5 } |
| 7. {RESPONSE01 FROM PREVIOUS WAVE B5 } | 15. {RESPONSE01 FROM PREVIOUS WAVE B5 } |
| 8. {RESPONSE01 FROM PREVIOUS WAVE B5 } | |



B6c.Are there new or additional problems or disabilities that have been identified since the previous interview?
BDISNEW

()

- | | |
|----------------|-----------------------|
| 1. YES |(Go to B6d) |
| 2. NO |(Go to Box B-5A) |
| -7 REFUSED |(Go to Box B-5A) |
| -8 DON'T KNKOW |(Go to Box B-5A) |



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Box B5A

IF SUM OF DISABILITIES IN B6A, DELETIONS IN B6B, AND ADDITIONS IN B6D IS >1, THEN GO TO B5A AND THEN TO BINTRO.
ELSE, AUTOCODE THE ONE DISABILITY IN B5A AND GO TO BINTRO.

B5A. Which of those disabilities that you told me about is {CHILD}'s main delay or disability?

BMAINDB

()

1	{RESPONSE01 FROM B5 PREVIOUS WAVE/B6abd }	9	{RESPONSE09 FROM B5 PREVIOUS WAVE/B6abd }
2	{RESPONSE02 FROM B5 PREVIOUS WAVE/B6abd }	10	{RESPONSE10 FROM B5 PREVIOUS WAVE/B6abd }
3	{RESPONSE03 FROM B5 PREVIOUS WAVE/B6abd }	11	{RESPONSE11 FROM B5 PREVIOUS WAVE/B6abd }
4	{RESPONSE04 FROM B5 PREVIOUS WAVE/B6abd }	12	{RESPONSE12 FROM B5 PREVIOUS WAVE/B6abd }
5	{RESPONSE05 FROM B5 PREVIOUS WAVE/B6abd }	13	{RESPONSE13 FROM B5 PREVIOUS WAVE/B6abd }
6	{RESPONSE06 FROM B5 PREVIOUS WAVE/B6abd }	14	{RESPONSE14 FROM B5 PREVIOUS WAVE/B6abd }
7	{RESPONSE07 FROM B5 PREVIOUS WAVE/B6abd }	15	{RESPONSE15 FROM B5 PREVIOUS WAVE/B6abd }
8	{RESPONSE08 FROM B5 PREVIOUS WAVE/B6abd }	16	{RESPONSE16 FROM B5 PREVIOUS WAVE/B6abd }

BINTRO. Now I want to ask you about how well {CHILD} does some things. I'm going to start with hearing.

[PRESS ENTER TO CONTINUE.]

B16a. This question asks you to assess {CHILD}'s hearing without any hearing devices like a hearing aid. Compared to other children about the same age, would you say {CHILD}...

HEARCMP

()

- 1. Hears normally.....(GO TO B17a)
- 2. Might have a hearing problem, or(GO TO B17a)
- 3. Does have a hearing problem?.....(GO TO B17a)
- 7. REFUSED.....(GO TO B17a)
- 8. DON'T KNOW.....(GO TO B17a)

B17a. How is {CHILD}'s eyesight? Would you say {he/she}...

CHDEYEST

()

- 1. Sees normally without glasses or contacts,(GO TO B18)
- 2. Might have a vision problem, or(GO TO B18)
- 3. Does have a vision problem?(GO TO B18)
- 7. REFUSED.....(GO TO B18)
- 8. DON'T KNOW.....(GO TO B18)

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B18. Now I'd like to ask some questions about {CHILD}'s communication skills. Compared with other children about the same age, how would you describe {CHILD}'s **understanding** of verbal or nonverbal communication (signs, gestures, symbol systems)? Would you say {he/she}...

VERBCOMM

()

1. Understands just as well as other children,
2. Has a little trouble understanding,
3. Has a lot of trouble understanding, or
4. Does not understand at all?
- 7. REFUSED
- 8. DON'T KNOW

B19. Compared with other children about the same age, how **well** does {CHILD} make {his/her} needs known to you and others? Communication can be any form, for example crying, pointing, or talking. Would you say {he/she}...

NDSKNWN

()

1. Communicates just as well as other children,
2. Has a little trouble communicating,
3. Has a lot of trouble communicating, or
4. Does not communicate at all?
- 7. REFUSED
- 8. DON'T KNOW

Box B20a

If NDSKNWN=4 (DOES NOT COMMUNICATE AT ALL), skip B20a and autocode EASYUNDR = 5 and GO TO B22.
If NDSKNWN= -7 or -8, then go to B22.
Else, go to B20a.

B20a. **How** does {CHILD} make {his/her} needs known to you? Does {he/she} primarily use...

HOWCOM1

()

1. Spoken words, or
2. Some other way of communicating? (NOTE: ENTER 2 IF "NO COMMUNICATION")
- 7. REFUSED
- 8. DON'T KNOW

B21b. When {CHILD} talks to people {he/she} doesn't know well, is {he/she}...

EASYUNDR

()

1. Very easy to understand,
2. Fairly easy to understand,
3. Somewhat hard to understand, or
4. Very hard to understand?
5. DOES NOT OR WILL NOT TALK AT ALL
- 7. REFUSED
- 8. DON'T KNOW

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B22. Next, I want to ask about {CHILD}'s physical abilities. How well does {he/she} use {his/her} hands and fingers for things like buttoning a shirt or using a spoon, pencil, or scissors? Would you say {he/she}...[NOTE: IF R REPORTS DIFFERENTLY FOR EACH ARM/HAND, CODE THE ARM/HAND THAT HAS THE MOST TROUBLE. THIS DOES NOT REFER TO TEMPORARY DIFFICULTIES SUCH AS A BROKEN ARM.]

BARMSFMS

()

1. Uses {his/her} hands and fingers normally,
2. Has a little trouble using them,
3. Has a lot of trouble using them, or
4. Has no use at all of {his/her} hands and fingers?
5. MISSING ONE OR BOTH HANDS
- 7. REFUSED
- 8. DON'T KNOW

B23. How well does {he/she} use {his/her} arms and hands for things like throwing, lifting, or carrying? Would you say {he/she}...[NOTE: IF R REPORTS DIFFERENTLY FOR EACH ARM/HAND, CODE THE ARM/HAND THAT HAS THE MOST TROUBLE. THIS DOES NOT REFER TO TEMPORARY DIFFICULTIES SUCH AS A BROKEN ARM.]

BARMSGMS

()

1. Uses {his/her} arms and hands normally,
2. Has a little trouble using one or both,
3. Has a lot of trouble using one or both, or
4. Has no use at all of one or both arms or hands?
5. MISSING ONE OR BOTH ARMS
- 7. REFUSED
- 8. DON'T KNOW

B24. How well does {CHILD} use {his/her} legs and feet? Would you say {he/she}...[NOTE: IF R REPORTS DIFFERENTLY FOR EACH LEG/FOOT, CODE THE SIDE THAT HAS THE MOST TROUBLE. DO NOT INCLUDE TEMPORARY DIFFICULTIES, SUCH AS A BROKEN LEG.]

BLEGSWEL

()

1. Uses both legs and feet normally,
2. Has a little trouble using one or both,
3. Has a lot of trouble using one or both, or
4. Has no use at all of one or both legs or feet?
5. MISSING ONE OR BOTH LEGS
- 7. REFUSED
- 8. DON'T KNOW

B26. Now I have some questions about {CHILD}'s health. Compared with other children about the same age, would you say {his/her} general health is...

BHLTHCMP

1. Excellent,
2. Very good,
3. Good,
4. Fair, or
5. Poor?
- 7. REFUSED
- 8. DON'T KNOW

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B27a. Are {CHILD}'s activities limited in **any way** because of a health problem?

ACTLMTD

()

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

If B5a ≠ NA (IS NOT EQUAL TO BNODIS) display, "who do not have special needs." Else, do not show display.

C3. For the next series of questions, I'd like you to compare {CHILD} to children about the same age {who do not have special needs}. Some children are good at paying attention to things and staying focused on what they are doing. Does this sound...[IF NEEDED: By "staying focused," we mean able to continue what {he/she} is doing even when other things are going on around {him/her}.]

CBPYATTN

1. Very much like {CHILD},
2. A little like {him/her}, or
3. Not like {him/her}?
- 7 REFUSED
- 8. DON'T KNOW

C5. Some children are restless, fidget a lot, and have trouble sitting still. Does this sound...[IF NEEDED: By "very active and restless," we mean always on the move even when presented with tasks appropriate for {his/her} age that require sitting still.]

CBRSTLSS

1. Very much like {CHILD},
2. A little like {him/her}, or
3. Not like {him/her}?
- 7 REFUSED
- 8. DON'T KNOW

C8. Some children get very distracted by sights and sounds, and can't screen them out very well. Does this sound...

CBDSTRCT

1. Very much like {CHILD},
2. A little like {him/her}, or
3. Not like {him/her}?
- 7 REFUSED
- 8. DON'T KNOW

PEELS Wave 4 CATI SPECS

C9. Some children have a great deal of difficulty adjusting to changes in their routines or schedules. Does this sound...

CBCHANGE

1. Very much like {CHILD},
 2. A little like {him/her}, or
 3. Not like {him/her}?
 - 7 REFUSED
 - 8. DON'T KNOW
-

C10. Some children are frequently anxious or depressed. Does this sound...

CBDEPRSD

1. Very much like {CHILD},
 2. A little like {him/her}, or
 3. Not like {him/her}?
 - 7 REFUSED
 - 8. DON'T KNOW
-

C12. Would you say that {CHILD}...

CBPLAYNG

1. Has no trouble playing with other children,
 2. Has some trouble playing with other children, or
 3. Has a lot of trouble playing with other children?
 4. NOT AROUND OTHER CHILDREN
 - 7 REFUSED
 - 8. DON'T KNOW
-

C15. Some children have a lot of trouble making or keeping friends. Does this sound...

CBFRIEND

1. Very much like {CHILD},
 2. A little like {him/her}, or
 3. Not like {him/her}?
 - 7 REFUSED
 - 8. DON'T KNOW
-

C16. When some children are with other children their same age, they take turns and cooperate. Does this sound...

CBTKTURN

1. Very much like {CHILD},
 2. A little like {him/her}, or
 3. Not like {him/her}?
 4. CHILD NEVER INTERACTS WITH PEERS
 - 7 REFUSED
 - 8. DON'T KNOW
-

PEELS Wave 4 CATI SPECS

C18. Would you say that {CHILD} is...[IF NEEDED: By “manage,” we mean any behaviors or things that you might do to get the child to cooperate to the extent appropriate in daily activities or be redirected to other activities when necessary to get {him/her} to do what you want {him/her} to do.]

CBMANAGE

1. Easy to manage,
 2. Sometimes hard to manage, or
 3. Often hard to manage?
 - 7 REFUSED
 - 8. DON'T KNOW
-

C21. Compared with other children about the same age, does {CHILD} learn, think, and solve problems...

CBLEARN

1. Better than other children {his/her} age,
 2. As well as other children,
 3. Slightly less well than other children, or
 4. Much less well than other children?
 - 7 REFUSED
 - 8. DON'T KNOW
-

C22. Can {CHILD} recognize... [NOTE: THIS COULD ALSO MEAN RECOGNIZING THE BRAILLE ALPHABET.]

CBALPHBT

1. All the letters of the alphabet,
 2. Most of them,
 3. Some of them, or
 4. None of them?
 - 7 REFUSED
 - 8. DON'T KNOW
-

C23. How high can {CHILD} count? Would you say...

CBCOUNT

1. Not at all,
 2. Up to five,
 3. Up to 10,
 4. Up to 20,
 5. Up to 50, or
 6. Up to 100 or more?
 - 7 REFUSED
 - 8. DON'T KNOW
-

PEELS Wave 4 CATI SPECS

C24. Can {CHILD} identify the colors, yellow, blue, and green by name? Would you say...

CBCOLORS

1. None of them,
2. Some of them, or
3. All of them?
4. CHILD IS BLIND
- 7 REFUSED
- 8. DON'T KNOW

Box C-1

IF C24 = 4, -7 OR -8 GO TO BOX DINTRO.
ELSE, GO TO C25a.

C25a. Is {CHILD} able to read storybooks on {his/her} own now?

CBRDSTRY

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

Box C-2

IF C25a=2, -7, OR -8, GO TO BOX DINTRO.
ELSE, GO TO C25b.

C25b. Does {CHILD} actually read the words written in the book, or does {he/she} look at the book and pretend to read? Would you say {he/she}...

CBRDWORD

1. Reads the written words,
2. Pretends to read,
3. Does both, or
4. Does neither?
- 7 REFUSED
- 8. DON'T KNOW

BOX DINTRO

IF A22=1 GO TO E1
ELSE GO TO **DKINTRO**..

DKINTRO

Now I am going to ask you some questions about {CHILD}'s school.

[PRESS ENTER TO CONTINUE.]

PEELS Wave 4 CATI SPECS

DK7. Which of the following best describes the school {CHILD} attends? Is it...

DESCSCHL

()

- 1. A regular school that serves a wide variety of students,
 - 2. A school that serves only students with disabilities,
 - 3. A school that specializes in a particular subject area or theme, sometimes called a magnet school,
 - 4. A charter school,
 - 5. An alternative school, or
 - 6. CHILD IS HOME-SCHOOLED
91. Another kind of school?

DSCSCLOS (Specify): _____

- 7. REFUSED
- 8. DON'T KNOW

DK22. How far in school do you expect {CHILD} to go? Would you say you expect {him/her} to...

FARSCHL

()

- 1. Not graduate from high school,
- 2. Graduate from high school,
- 3. Attend some college or take post secondary vocational courses,
- 4. Receive a 2- or 3-year college degree (AA DEGREE) or vocational school diploma,
- 5. Earn a 4-year college degree (BA, BS DEGREE), or
- 6. Earn a graduate degree (MA, MBA, Ph.D., JD, MD)?
- 7. REFUSED
- 8. DON'T KNOW

BOX DK22

IF DK7=6 (CHILD IS HOMESCHOOLED), GO TO E1.
ELSE, GO TO DK26.

DK26. The study is interested in learning how the children we are following are doing in school. We would like to send {CHILD}'s teacher a questionnaire that asks about some of the things {he/she} is doing in school.

[PRESS ENTER TO CONTINUE.]

DK27. What is the name of {CHILD}'s teacher? [NOTE: IF CHILD HAS MORE THAN ONE TEACHER, ASK FOR THE TEACHER THAT KNOWS THE CHILD BEST.]

DKTCHNAM

NAME _____

- 7. REFUSED
- 8. DON'T KNOW

PEELS Wave 4 CATI SPECS

DK28. What is the full name of the school {CHILD} attends now? [NOTE: IF CHILD HAS BEEN ENROLLED IN MORE THAN ONE SCHOOL DURING THIS SCHOOL YEAR, ASK FOR THE MOST RECENT OR CURRENT ENROLLMENT.]

DKSCLNAM

NAME _____

- 7. REFUSED
- 8. DON'T KNOW

DK29. Where is that located? [NOTE: IF STREET ADDRESS IS UNKNOWN, GET CITY, STATE, AND AS MUCH OF THE STREET ADDRESS AS POSSIBLE.]

DKSCLADD **ADDRESS:** _____

DKSCCITY **CITY:** _____

DKSCSTAT **STATE:** _____

- 7. REFUSED
- 8. DON'T KNOW

DK30. What is the phone number of the school?

PHONE: (_____) _____ - _____

DKSCAREA **DKSCEXCH** **DKSCLOCL**

- 7. REFUSED
- 8. DON'T KNOW

E1. Now I'd like to ask you about special services your child may be receiving. Within the past two months, did {CHILD} have an IEP or did {he/she} receive special education or other services for a special need or disability, such as speech therapy, physical therapy, or some other help?

EHAVEIEP

()

- 1. YES..... (GO TO BOX E-3)
- 2. NO (GO TO E2)
- 7. REFUSED..... (GO TO E2)
- 8. DON'T KNOW..... (GO TO E2)

E2. Does {CHILD} now have a 504 plan for classroom accommodations because of {his/her} special needs? [IF NEEDED: By a 504 plan, we mean a documented program of instructional and/or assessment provisions to assist students with special needs who are in a regular education setting, as required by Section 504 of the Vocational Rehabilitation Act.]

EHAVE504

()

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

PEELS Wave 4 CATI SPECS

BOX E-3
 IF **Q2GLEVEL** = 3, 4, 5, 6, 7 or 8 AND **DK7** ≠ 6, -7 or -8 (NOT IN PRESCHOOL AND NOT HOME-SCHOOLED, DON'T KNOW OR REFUSED), GO TO E3.
 ELSE, GO TO INTROE1.

E3. Which of the following best describes where {CHILD} spends {his/her} time at school? Does {he/she}...
ETMEINGE

()

1. Spend the entire time in the general education class working only with the general education teaching staff,
 2. Spend the entire time in the general education class and specialists come in and work with {him/her} there,
 3. Spend most of the time in the general education class but is taken out of the classroom to receive some special services,
 4. Spend some time in the general education class and some time in a special education class for children with special needs, or
 5. Spend the entire day in a special class for children with special needs?
91. OTHER (GO TO E3OV)
 -7. REFUSED
 -8. DON'T KNOW

E3OV. **ETIMEOTH** (SPECIFY): _____

INTROE1

My next set of questions refer to the services {CHILD} is receiving.

[PRESS ENTER TO CONTINUE.]

E7a. Does {CHILD} get any special education or therapy services at this time?
ANYSERV

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

BOX E-7A
 IF E7A = 1, GO TO E8.
 ELSE, GO TO HINTRO.

E8. I'm going to read a list of services. For each service, please tell me if {CHILD} has received this service within the last two months.

[1= YES, 2 = NO, -7 = REFUSED, -8 = DON'T KNOW]

- | | | |
|-----------------|---|-------|
| ESPCHTX | a. Speech or language therapy? | _____ |
| EOCCUPTX | b. Occupational therapy? | _____ |
| EPHYSTX | c. Physical therapy? | _____ |
| ESEINSCL | d. Special education or instruction in school
[IF NEEDED: extra help, an aide, special program]? | _____ |
| ETUTORNG | e. Tutoring or help for learning problems? | _____ |

PEELS Wave 4 CATI SPECS

E9a. Is {CHILD} receiving any other services?

EOTHSRVC

()

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

BOX E-8

IF E9A = 1, GO TO E9b.
ELSE, GO TO E16.

E9b. What other services is {CHILD} receiving?

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

() () () () () () () () () () () () () ()

- EAUDIOSV** 1. AUDIOLOGICAL SERVICES
- EAUDIOTX** 2. AUDITORY INTEGRATION THERAPY
- EBEHAVTX** 3. BEHAVIOR THERAPY (APPLIED BEHAVIOR ANALYSIS (ABA), LOVAAS)
- EFEEDING** 4. FEEDING RELATED SERVICES (NUTRITION, DIETICIAN)
- EMUSICTX** 5. MUSIC OR ART THERAPY
- ENURSING** 6. NURSING
- EPLAYTX** 7. PLAY THERAPY OR PLAY GROUP
- EPSCYHTX** 8. PSYCHOLOGICAL THERAPY/MENTAL HEALTH/SOCIAL WORK
- ERESPITE** 9. RESPITE CARE
- ESENSORY** 10. SENSORY INTEGRATION THERAPY
- ETRANSPT** 11. TRANSPORTATION
- EVISION** 12. VISION SERVICES
- ESVCSOTH** 91. OTHER
- ESVCSROS** (SPECIFY): _____
- 7. REFUSED
- 8. DON'T KNOW

E16. How would you rate the general **quality** of the special education and therapy services {CHILD} is getting? Would you say it is...

EQULSRVC

()

- 1. Excellent,
- 2. Good,
- 3. Fair, or
- 4. Poor?
- 5. MIXED – SOME OK, SOME NOT
- 7. REFUSED
- 8. DON'T KNOW

HINTRO

My next questions are about {CHILD}'s household. I'd like to learn a little about the people who live with {CHILD}.

[PRESS ENTER TO CONTINUE.]

PEELS Wave 4 CATI SPECS

VARIABLE NOTE:
 RFNAME = R's first name. This is collected in the screener.
 If A11=1, display "Let's start with you, I have your first name as {RFNAME}. What is your age?"
 Else, do not display.

H1b. Please tell me the first names and ages of all the people who normally live in the household with {CHILD}. Please do not include anyone staying there temporarily who usually lives somewhere else. {Let's start with you, I have your first name as {RFNAME}. What is your age?}

[IF RESP IS A HH MEMBER & NOT SHOWN, ADD NAME/AGE/SEX AND INDICATE IN COMMENTS]
 [USE ARROW KEYS. CTRL/D=DELETE LINE. ESC=LEAVE MATRIX. TYPE OVER=CORRECT.]

ENUM.PERSNUM	ENUM.FNAME	ENUM.AGE	ENUM.SEX: M/F	ENUM.EXRESP
02				
03				
04				
05				
06				
07				
More below				

- 7. REFUSED
- 8. DON'T KNOW

VARIABLE NOTE:
NUMBER = the number of the last line not blank in the matrix in H1b.
 (NOTE: IN THIS WAY NUMBER INCLUDES CHILD.)

H1BVERF. I have recorded {NUMBER} people living in {CHILD}'s household. Have we missed anyone who is temporarily away, or any babies or small children? Please do not include anyone staying there temporarily who usually lives somewhere else.

()

- 1. MATRIX CORRECT (GO TO BOX RELINTRO)
- 2. RETURN TO MATRIX (RETURN TO MATRIX)

Box RELINTRO

DO NOT ALLOW A HH OF ONLY 1 CHILD.
 IF NO ONE WITH AGE >=18 IS ENUMERATED, GO TO **NOHHGE18**. IF R CONFIRMS NO ADULT HH MEMBERS, CAPTURE AN INTERVIEWER COMMENT. ELSE RETURN TO MATRIX
 IF NO ONE BUT R AND CHILD IN HH AND H1BVERF = 1 (MATRIX CORRECT), GO TO H5A.
 ELSE, GO TO RELINTRO.

PEELS Wave 4 CATI SPECS

NOHHGE18

I have recorded that there are no adults age 18 or older in {child}'s household. Is that correct?
[IF R REFUSES/DOES NOT KNOW ADULT HH MEMBER AGES, ENTER 1 AND RECORD "RF" OR "DK" IN
COMMENTS TO CONTINUE.]

HHMEM18

(xx)

1. YES (CONTINUE)
2. NO (GO BACK TO MATRIX TO CORRECT)

RELINTRO

Now I'd like to ask how all the people in {CHILD}'s household are related to {him/her}.

[PRESS ENTER TO CONTINUE.]

BOX H1c

AUTOCODE H1C AND H1D (HOW RELATED TO CHILD) FOR EACH ENUM.PERNUM WITH
CORRESPONDING RESTYPE and RESPRNT (S11 AND S11B RELATION TO CHILD)

VARIABLE NOTE:

- FNAME = The first name of each family member listed in the matrix in H1b.
- [AGE/SEX] = The age and sex of corresponding FNAME listed in H1b.
- Display each name in succession and record the answer for each household member.

H1c. How is {FNAME} {[AGE/SEX]} related to {CHILD}?

ENUM.RELATION

()

1. MOTHER (GO TO H1d)
 2. FATHER (GO TO H1d)
 3. BROTHER (GO TO BOX H3a)
 4. SISTER (GO TO BOX H3a)
 5. GRANDMOTHER (GO TO BOX H3a)
 6. GRANDFATHER (GO TO BOX H3a)
 7. AUNT (GO TO BOX H3a)
 8. UNCLE (GO TO BOX H3a)
 9. COUSIN (GO TO BOX H3a)
 10. PARTNER OF CHILD'S PARENT (GO TO BOX H3a)
 91. OTHER RELATIVE (GO TO RSTYPOV1)
- ENUM.RELATOS** (SPECIFY): _____ (GO TO BOX H3a)
92. NON-RELATIVE (GO TO RSTYPOV2)
- ENUM.RELATOS** (SPECIFY): _____ (GO TO BOX H3a)
- 7. REFUSED (GO TO BOX H3a)
 - 8. DON'T KNOW (GO TO BOX H3a)

PEELS Wave 4 CATI SPECS

VARIABLE NOTE:
If H1c = 1, display "she".
Else, display "he".

H1d. Is {he/she} {CHILD}'s biological, adoptive, step, or foster parent?
CHIL.MOMTYPE/CHIL.DADTYPE

()

- 1. BIOLOGICAL
2. ADOPTIVE
3. STEP
4. FOSTER
-7. REFUSED
-8. DON'T KNOW

Box H3a
IF R AND CHILD ARE ONLY MEMBERS OF HH, AUTOCODE SPOUSE = 2 AND GO TO H5a.
IF A11= 1 (CHILD LIVES WITH RESPONDENT), GO TO H3a.
ELSE, GO TO H5a.

H3a. Do you have a spouse or partner who lives in this household?
SPOUSE

()

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

H5a. Now I'd like to ask some questions about you. Do you have a paid job now? [NOTE: WORKING AS A TEMP WOULD BE INCLUDED IF IT IS DONE USUALLY, MOST WEEKS.]
PAIDJOB

()

- 1. YES (GO TO H5b)
2. NO (GO TO Box H11a)
-7. REFUSED..... (GO TO Box H11a)
-8. DON'T KNOW..... (GO TO Box H11a)

H5b. In an average week, about how many hours do you work for pay? [NOTE: IF R DOESN'T KNOW EXACT NUMBER, CODE DON'T KNOW TO GET TO THE NEXT QUESTION.]
HRSWOK

() [S: 1-80] [H: 1-120]..... (GO TO Box H11a)
NUMBER

- 7. REFUSED..... (GO TO H5c)
-8. DON'T KNOW..... (GO TO H5c)

PEELS Wave 4 CATI SPECS

H5c. Do you usually work...

USLYWK

()

- 1. Less than 20 hours a week,
- 2. 20 to 35 hours a week, or
- 3. More than 35 hours a week?
- 7. REFUSED
- 8. DON'T KNOW



BOX H11a
 IF H3a = 1 (R has a spouse or partner in HH), GO TO H11a.
 ELSE, GO TO H32a.

H11a. Does your spouse or partner have a paid job now?

SPPDJOB

- 1. YES(Go to H11b)
- 2. NO(Go to H32a)
- 7. REFUSED.....(Go to H32a)
- 8. DON'T KNOW.....(Go to H32a)



H11b. In an average week, about how many hours does your spouse or partner work for pay? [NOTE: IF R DOESN'T KNOW EXACT NUMBER, CODE DON'T KNOW TO GET TO NEXT QUESTION.]

HSPWORK

- () [S: 1-80] [H: 1-120].....(Go to H32a)
- NUMBER
- 7. REFUSED.....(Go to H11c)
- 8. DON'T KNOW.....(Go to H11c)



H11c. Would you say your spouse or partner usually works...

SPUSLWK

- 1. Less than 20 hours a week,
- 2. 20 to 35 hours a week, or
- 3. More than 35 hours a week?
- 7. REFUSED
- 8. DON'T KNOW



H32a. In studies like these, households are sometimes grouped according to income. Please tell me which group best describes the total income of all persons in your household over the past year, including salaries or other earnings, money from public assistance, child support, retirement, and so on, for all household members. Was your household income in the past year...

INCME

()

- 1. \$25,000 or less, or(Go to H32b)
- 2. More than \$25,000?(Go to H32c)
- 7. REFUSED.....(GO TO HVERF)
- 8. DON'T KNOW.....(GO TO HVERF)



PEELS Wave 4 CATI SPECS

H32b. Was it...

HOWMCH

()

- 1. \$5,000 or less, or..... (GO TO **HVERF**)
- 2. \$5,001 to \$10,000..... (GO TO **HVERF**)
- 3. \$10,001 to \$15,000..... (GO TO **HVERF**)
- 4. \$15,001 to \$20,000, or (GO TO **HVERF**)
- 5. \$20,001 to \$25,000?..... (GO TO **HVERF**)
- 7. REFUSED..... (GO TO **HVERF**)
- 8. DON'T KNOW..... (GO TO **HVERF**)

H32c. Was it...

INC25_50

()

- 1. \$25,001 to \$30,000,
- 2. \$30,001 to \$35,000,
- 3. \$35,001 to \$40,000,
- 4. \$40,001 to \$45,000,
- 5. \$45,001 to \$50,000,
- 6. \$50,001 to \$75,000, or
- 7. More than \$75,000?
- 7. REFUSED
- 8. DON'T KNOW

HVERF. We'll be taking a year off from interviewing next year, but we'll be eager to talk with you again in 2009 to see how you and {CHILD} are doing then. That interview will be the final one and will ask different questions than the others. We want to make sure we don't lose track of you. Let me please verify your name and contact information.

[VERIFY AND PRESS ENTER IF CORRECT.]

{RFNAME} {RLNAME}

HFNAMCON FIRST NAME..... **HLNAMCON** LAST NAME

H34a. Do you have an e-mail address?

HRESPEM

()

- 1. YES (GO TO H34b)
- 2. NO (GO TO H35)
- 7. REFUSED..... (GO TO H35)
- 8. DON'T KNOW (GO TO H35)

H34b What is your e-mail address?

HRESPEAD

E-MAIL ADDRESS

PEELS Wave 4 CATI SPECS

VARIABLE NOTE:

IF ANY OF P_ADDR, P_ADDR2, P_CITY, P_STATE, OR P_ZIP = -1, DO NOT SHOW DISPLAY AND DO NOT ALLOW RETURN IN BLANK FIELD.

H35. I would like to verify what we have as your current residence.

[VERIFY ADDRESS AND PRESS ENTER IF CORRECT. PROBE FOR APARTMENT NUMBER IF APPLICABLE.]

{P_ADDR}

STREET & APARTMENT NUMBER
HRESPADD

{P_ADDR2}

ADDRESS LINE #2
HRSPADD2

{P_CITY}

CITY
HREPCIT

{P_STATE}

STATE
HRESPST

{P_ZIP}

ZIP
HRESPZIP

H35a. Is this a good address for you to receive mailings about the study in the future?

HPARMAIL

()

1. YES (GO TO H36a)
2. NO (COLLECT MAILING ADDRESS)

STREET & APARTMENT NUMBER
HMAILADD

ADDRESS LINE #2
HMAIADD2

{M_CITY}
CITY
HMAILCIT

STATE
HMAILST

ZIP
HMAILZIP

PROGRAMMER'S NOTE:

HCON1EAD can accept a blank response.

PEELS Wave 4 CATI SPECS

H36a. Could you please give me the name, address, and phone number of someone **who does not currently live with you** who is likely to know where you are in the future?

_____ FIRST NAME HCON1FN	_____ LAST NAME HCON1LN
_____ STREET & APARTMENT NUMBER HCON1ADD	
_____ CITY HCON1CIT	
_____ STATE HCON1ST	_____ ZIP HCON1ZIP
PHONE: (_____) _____ - _____ HCON1ARE HCON1EXC HCON1LOC	
_____ E-MAIL HCON1EAD	



BOX H36b

IF ALL FIELDS IN H36a = -7 OR -8, GO TO END.
ELSE, GO TO H36b.

H36b. What is this person's relationship to {CHILD}?

HCON1REL

- ()
1. BIOLOGICAL MOTHER
 2. ADOPTIVE MOTHER
 3. STEPMOTHER
 4. FOSTER MOTHER
 5. BIOLOGICAL FATHER
 6. ADOPTIVE FATHER
 7. STEPFATHER
 8. FOSTER FATHER
 9. LEGAL GUARDIAN
 10. SISTER/STEP SISTER
 11. BROTHER/STEP BROTHER
 12. AUNT
 13. UNCLE
 14. GRANDMOTHER
 15. GRANDFATHER
 16. COUSIN
 17. FRIEND/NEIGHBOR
 91. OTHER (GO TO **HCON1ROS**)
- HCON1ROS** (SPECIFY): _____



END. Thank you very much for helping us with this important study we will contact you again in a couple of years for the final interview.

[PRESS ENTER TO EXIT.]