

**2017 LOS ANGELES COUNTY WIC SURVEY
 - WIC PARENTS QUESTIONNAIRE -**

Most of the questions in the rest of this survey will be about NAME.

1. And, NAME is a (boy) (girl). Is that correct? BOY1
 (OR CONFIRM GENDER OF SELECTED CHILD) (IF UNCERTAIN, GIRL.....2
 ASK: is NAME a boy or a girl?) (Q1)
2. In which month and year was NAME born? (Q2) _____ MONTH (RANGE 01-12)
 _____ YEAR (RANGE 2011 - 2017)
 REFUSEDREF
3. When was NAME first enrolled in the WIC program? Prior to (his) (her) birth 1
 (READ CATEGORIES ONLY IF NECESSARY) (Q3) At less than 6 months..... 2
 Between 6 and 11 months . 3
 During 1st year 4
 During 2nd year 5
 During 3rd year 6
 During 4th year 7
 NEVER ENROLLED IN WIC..... 8 → **SKIP TO Q5**
 DON'T KNOW DK
 REFUSED REF
4. Has NAME been enrolled in WIC without interruption since that time? (Q4) YES 1
 NO2
 DON'T KNOWDK
 REFUSED REF
5. Are you NAME's biological (mother/father)? (Q5) YES 1
 NO2
 REFUSED REF

IF Q5=NO, ASK:

6. Are you NAME's (READ LIST)? (Q6) Step (mother/father) 1
 Adoptive (mother/father)2
 Foster/legal guardian (mother/father).....3
 Grand (mother/father)4
 Another relative (e.g., aunt, uncle).....5
 OTHER/NOT RELATED6
 REFUSED REF

IF Q5 = YES OR Q6 = 1, 2 OR 3, ASK:

7. Does NAME's other parent or legal guardian live YES 1
 in this household? (Q7) NO2
 REFUSED REF

IF Q5=YES (BIOLOGICAL PARENT), ASK:

IF Q5=YES AND S2=FEMALE (BIOLOGICAL MOTHER), ASK:

8.	Most pregnancies are not planned. Did you plan your pregnancy with <u>NAME</u> ? (Q8)	YES.....1 NO2 DON'T KNOWDK REFUSEDREF
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9.	Was <u>NAME</u> born early as a pre-term baby? (IF NECESSARY:) A pre-term baby is one born at 36 weeks or earlier in pregnancy. (Q9a)	YES.....1 NO2 DON'T KNOWDK REFUSEDREF
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IF S2=FEMALE AND Q9=YES, ASK:

10.	How many weeks pregnant were you when <u>NAME</u> was born? (Q9aa)	_____ WEEKS IF MORE THAN 36 WEEKS, CATI WILL CHANGE Q9 TO A NO RESPONSE. DON'T KNOWDK REFUSEDREF
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11.	How much did <u>NAME</u> weigh at birth? (Q9b)	_____ LBS. (0-15) _____ OUNCES (0-15) .. DON'T KNOWDK REFUSEDREF
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12.	Right now, do you consider <u>NAME</u> to be overweight, underweight or about right for (his) (her) height? (Q12)	OVERWEIGHT1 UNDERWEIGHT2 ABOUT RIGHT3 DON'T KNOWDK REFUSEDREF
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13.	For classification purposes, we'd like to know what <u>NAME</u> 's racial background is. Is (he/she) White, Black or African-American, Asian, Pacific Islander, American Indian or Alaskan Native, a member of another race or a combination of these? (ANSWER CAN BE A MULTIPLE) (IF MIXED RACE, PLEASE PROBE FOR SPECIFIC RACES) (Q16)	WHITE1 BLACK/AFRICAN-AMERICAN.....2 ASIAN3 PACIFIC ISLANDER.....4 AMERICAN INDIAN/ALASKAN NATIVE.....5 HISPANIC/LATINO (VOLUNTEERED)6 OTHER (SPECIFY)7 DON'T KNOWDK REFUSEDREF
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IF Q13 = NOT HISPANIC/LATINO, ASK:

14.	Is <u>NAME</u> Latino or of Hispanic origin (IF NECESSARY, SAY: such as Mexican-American, Latin American, South American or Spanish-American?) (Q13)	YES.....1 NO2 DON'T KNOWDK REFUSEDREF
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IF Q5=YES AND S2=YES (BIOLOGICAL MOTHER), ASK:

15. During your pregnancy with NAME, how much weight did you gain? Would you say it was... (READ CATEGORIES)? (Q19a)
- 10 pounds or less 1
 11 – 15 pounds.....2
 16 – 20 pounds.....3
 21 – 25 pounds.....4
 26 – 30 pounds.....5
 31 – 35 pounds.....5
 36 – 40 pounds.....6
 More than 40 pounds7
 LOST WEIGHT (VOLUNTEERED)8
 NEEDS METRIC CONVERSION99
 DON'T KNOWDK
 REFUSEDREF
16. How much did you weigh right before your pregnancy with NAME? (Q19a1)
- _____ POUNDS
 NEEDS METRIC CONVERSION99
 DON'T KNOWDK
 REFUSEDREF
18. During your pregnancy with NAME, did you have gestational (JES-TAY-SHUN-UL) diabetes (DY-AH-BE-TEES)? (Q19b)
- YES 1
 NO2
 HAD DIABETES BEFORE PREGNANCY (VOL)....3
 DON'T KNOWDK
 REFUSEDREF
19. Since the birth of NAME did you return to work or begin a new job? (INTERVIEWER: DO NOT COUNT SCHOOL AS A JOB) (Q20)
- YES 1
 NO2
 REFUSEDREF

IF Q19=YES, ASK:

20. How old was NAME when you first returned to work or began work? (IF NECESSARY:) Just your best estimate. (RECORD ANSWER IN YEARS AND MONTHS AND WEEKS) (IF < 2 YEARS, RECORD IN MONTHS) (Q21)
- _____ YEARS (UPPER=AGE OF CHILD)
 _____ MONTHS
 _____ WEEKS
 REFUSEDREF

21. While you were pregnant with NAME, which of the following describes what you thought you would do with regard to breast-feeding NAME – (READ CATEGORIES)? (Q22)
1. You knew you would breast-feed NAME 1
 2. You thought you might breast-feed NAME .2
 3. You knew you would not breast-feed NAME 3
 4. You didn't know what to do about breast-feeding NAME4
 DON'T KNOWDK
 REFUSEDREF
22. Was NAME born in a hospital? (Q22x)
- YES 1
 NO 2 - SKIP TO Q26
 REFUSEDREF - SKIP TO Q26

IF Q22=YES, ASK:

23. Was the hospital in Los Angeles County? (Q22y)
- YES..... 1
 NO 2
 REFUSEDREF

IF Q23=1, ASK:

24.	What was the name of the hospital where <u>NAME</u> was born? (IF KAISER, PROVIDENCE OR UCLA, ASK:) Which one? (Q22z)	ENTER HOSPITAL CODE..... <table border="1" style="display: inline-table; width: 40px; height: 20px; vertical-align: middle;"></table>	
		DON'T KNOW	DK
		REFUSED	REF

25. The next questions ask about things that may have happened at the hospital where NAME was born. (READ ITEMS IN ORDER) (Q23)

	<u>YES</u> <u>NO</u> <u>DK</u> <u>REF</u>
a. Did you breast-feed <u>NAME</u> in the hospital?	1 2 DK REF

(INTERVIEWER: COUNT ANY ATTEMPTS AT BREASTFEEDING AS A "YES" RESPONSE)

(IF Q25a = YES, ASK:)

	<u>YES</u> <u>NO</u> <u>DK</u> <u>REF</u>
b. Was <u>NAME</u> fed only breast milk at the hospital?	1 2 DK REF

c. Did you breastfeed <u>NAME</u> in the first hour after birth?	1 2 DK REF
d. Did the hospital give you formula to take home?	1 2 DK REF
e. Did the hospital give you a telephone number to call for help with breast-feeding?	1 2 DK REF

IF Q22 = NO OR REF OR Q25a = NO, ASK:

26.	Have you ever breast-fed <u>NAME</u> ? (Q24)	YES	1
		NO	2
		REFUSED.....	REF

IF Q25a =YES OR Q26 = YES, ASK:

27.	How old was <u>NAME</u> the first time (he/she) was given anything besides breast milk? This includes formula, baby food, juice, cow's milk, sugar water or anything else you fed your baby. (READ CATEGORIES) (Q25)	less than 1 week	1
		1 week but less than 1 month.....	2
		1 month but less than 3 months	3
		3 months but less than 6 months	4
		at 6 months.....	5
		– or – have you not fed your baby anything besides breast milk	6
		MORE THAN 6 MONTHS (VOLUNTEERED).....	7
		DON'T KNOW.....	DK
		REFUSED.....	REF

IF Q27 = 1, 2, 3, 4, 5 OR 7, ASK:

28.	How old was <u>NAME</u> the first time (he) (she) was given formula? (INTERVIEWER: IF LESS THAN 1 WEEK, ENTER 0) (Q25a)	_____ WEEKS (0-52)	
		WAS NEVER GIVEN FORMULA.....	98
		DON'T KNOW.....	DK
		REFUSED.....	REF

29.	Are you currently breast-feeding <u>NAME</u> ? (Q26)	YES	1
		NO	2
		REFUSED.....	REF

IF Q29 = NO, ASK:

30.	How old was <u>NAME</u> when you completely stopped breast-feeding (him/her)? (RECORD ANSWER IN MONTHS) (Q27)	_____ MONTHS (UPPER=AGE OF CHILD)	
		IF LESS THAN 1 MONTH, ENTER 0	
		DON'T KNOW.....	DK
		REFUSED.....	REF

IF Q19 = YES AND Q20 = 0, 1, OR 2 YEARS, ASK:

31.	When you went back to work, did your workplace have accommodations for you to breast-feed? This includes giving you a break time and a place to pump milk or breast-feed your baby. (Q29)	YES	1
		NO	2
		REFUSED.....	REF

32.	During <u>NAME'S</u> first year, did any professional visit your home to provide information about parenting <u>NAME</u> , such as a nurse, social worker or home visitor? (Q30)	YES	1
		NO	2
		DON'T KNOW.....	DK
		REFUSED.....	REF

IF YES, ASK:

33.	During the time you were receiving these services, about how often did someone come to your home? Was it once, twice, 3 to 5 times, 6 to 10 times, or 11 or more times? (Q31)	ONCE	1
		TWICE	2
		3 – 5 TIMES	3
		6 - 10 TIMES	4
		11 OR MORE TIMES	5
		DON'T KNOW.....	DK
		REFUSED.....	REF

ASK ALL EXCEPT Q27=6 OR NAME IS LESS THAN 4 MONTHS OLD (FROM S3 OR S10):

34.	How often does <u>NAME</u> currently eat any food including meals and snacks from a fast food restaurant, like McDonald's, Taco Bell, Burger King, KFC, or another similar place? (READ CATEGORIES) (Q32a)	4+ times per week	1
		1-3 times per week	2
		less than once a week but at least once a month	3
		less than once a month	4
		-or- never	5
		DON'T KNOW	DK
35.	On an average day, about how many servings of fruits does <u>NAME</u> eat? (IF NECESSARY, SAY: Just your best estimate.) (Q32b)	_____ FRUITS PER DAY (0-15)	
		DON'T KNOW	DK
		REFUSED	REF
36.	On an average day, about how many servings of vegetables does <u>NAME</u> eat? (IF NECESSARY, SAY: Just your best estimate.) (Q32c)	_____ VEGETABLES PER DAY (0-15)	
		DON'T KNOW	DK
		REFUSED	REF
37.	On an average day, how many times does <u>NAME</u> drink milk? (IF NECESSARY, SAY: Just your best estimate.) (Q32e)	_____ TIMES PER DAY (0-15)	
		DON'T KNOW	DK
		REFUSED	REF

IF Q37 > 0, ASK:

38.	What kind of milk does <u>NAME</u> most drink? (READ CATEGORIES) (Q32f)	whole (full fat) milk	1
		reduced fat milk (1%).....	2
		reduced fat milk (2%).....	3
		non-fat milk.....	4
		chocolate milk	5
		soy milk	6
		rice milk	7
		formula	8
		-or- breast milk	9
		OTHER	10
DON'T KNOW.....	DK		
REFUSED.....	REF		

39.	On an average day, how many times does <u>NAME</u> drink chocolate milk or sweetened milk? (Q32g)	_____ TIMES PER DAY (0-15)	
		DON'T KNOW	DK
		REFUSED	REF

40.	On an average day, how many times does <u>NAME</u> drink water? (Q32gg)	_____ TIMES PER DAY (0-15) DON'T KNOWDK REFUSEDREF
41.	On an average day, how many times does <u>NAME</u> drink 100% fruit juice? (IF NECESSARY:) Please only count drinks that are 100% juice. (Q32h)	_____ TIMES PER DAY (0-15) DON'T KNOWDK REFUSEDREF
42.	On an average day, how many other fruit juice drinks that are not 100% juice, such as Sunny Delight, Capri Sun, or lemonade does <u>NAME</u> drink? (IF NECESSARY:) Please count a 12-ounce can, bottle or glass as one drink. (Q32i)	_____ DRINKS PER DAY (0-15) SOME BUT LESS THAN 1 FULL SERVING98 DON'T KNOWDK REFUSEDREF
43.	On an average day, about how many sweetened drinks such as Gatorade, Kool Aid, or Red Bull does <u>NAME</u> drink? (IF NECESSARY:) Please count a 12-ounce can, bottle or glass as one drink. (Q32j)	_____ DRINKS PER DAY (0-15) SOME BUT LESS THAN 1 FULL SERVING98 DON'T KNOWDK REFUSEDREF
44.	On an average day, about how many diet sodas such as Diet Coke or Diet Mountain Dew, does <u>NAME</u> drink? (IF NECESSARY:) Please count a 12-ounce can, bottle or glass as one drink. (Q32l)	_____ DRINKS PER DAY (0-15) SOME BUT LESS THAN 1 FULL SERVING98 DON'T KNOWDK REFUSEDREF
45.	On an average day, about how many regular sodas such as Coke or Mountain Dew, does <u>NAME</u> drink? Do <u>not</u> include diet sodas or sugar-free drinks. (IF NECESSARY:) Please count a 12-ounce can, bottle or glass as one drink. (Q32k)	_____ DRINKS PER DAY (0-15) SOME BUT LESS THAN 1 FULL SERVING 98 DON'T KNOW DK REFUSED..... REF
46.	On an average day, how many times does <u>NAME</u> eat sweets or sweetened foods, such as sweetened cereals, fruit bars, pop-tarts, donuts, cookies and candies? (Q32m)	_____ SWEETS PER DAY (0-15) DON'T KNOW DK REFUSED..... REF

47.	Have you received any information about healthy eating or exercise in the past year from places other than WIC? (Q33a)	YES 1 NO 2 DON'T KNOW DK REFUSED REF
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IF YES, ASK:

48.	Where did you receive this information? (READ IN RANDOM ORDER) (ANSWER CAN BE A MULTIPLE)	The doctor's office or a clinic 1 At school or child care..... 2 On TV or radio..... 3 On the Internet or in an app..... 4 - or - someplace else (READ LAST) 5 DON'T KNOW DK REFUSED REF
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IF Q48= 1, 2 OR 5 ASK:

49.	Which of the following best describes how you received this information about healthy eating or exercise? (READ IN RANDOM ORDER) (new)	Someone talked to a group of us 1 Someone talked with me personally 2 I was given written information 3 SOME OTHER WAY (DO NOT READ) 4 DON'T KNOW DK REFUSED REF
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IF Q49= 1, ASK:

50.	How many such talks did you attend on healthy eating or exercise in the past year? (READ CATEGORIES IF NECESSARY) (new)	1 1 2 2 3 3 4-5 4 MORE THAN 5 5 DON'T KNOW DK REFUSED REF
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IF Q49= 2, ASK:

51.	Did this person talk to you for more than 10 minutes? (new)	YES1 NO..... 2 DON'T KNOWDK REFUSEDREF
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52. In a typical 24-hour day, about how many hours of sleep, _____ HOURS (0-24) including naps, does NAME get in total? Just your best estimate. (new)
DON'T KNOWDK
REFUSEDREF
54. In a typical week, how many days does NAME use a park, playground or other safe place to play – every day, 3 to 6 days, 1 to 2 days or never? (Q34a)
EVERY DAY1
3-6 DAYS2
1-2 DAYS3
NEVER4
DON'T KNOW DK
REFUSEDREF
55. How would you rate your community on being a safe place – excellent, good, only fair or poor? (Q34b)
EXCELLENT1
GOOD2
ONLY FAIR3
POOR4
DON'T KNOW DK
REFUSEDREF
58. Have you had any concerns about NAME's development that is, whether NAME is developing as (he/she) should be? (new)
YES 1
NO 2
DON'T KNOWDK
REFUSED REF

IF Q58= YES, ASK:

59.	Which of the following concerns you the most? (READ IN RANDOM ORDER) (ONLY ONE ANSWER PERMITTED) (new)	Speech and language 1 Social/emotional development 2 Behavioral development 3 Movement or motor skills 4 (His/her) overall health5 - or - something else (READ LAST) 6 DON'T KNOW DK REFUSED REF
60.	Who do you talk to about your concerns? (READ IN RANDOM ORDER) (ANSWER CAN BE A MULTIPLE) (new)	<u>NAME</u> 's doctor 1 <u>NAME</u> 's teacher 2 A family member 3 WIC staff 4 Child therapist5 Some one else (READ NEXT TO LAST) 6 - or – no one (READ LAST) 7 DON'T KNOW DK REFUSED REF

61a. Is NAME covered by health insurance or any other kind of health care plan? (IF NECESSARY, SAY:) This includes health insurance obtained through an employer, purchased directly, HMOs or pre-paid plans like Kaiser, government programs such as Medi-Cal, Medicaid, Covered California, military programs such as Tri-Care, or through the Indian Health Service. (Q36)

YES..... 1
 NO 2
 DON'T KNOWDK
 REFUSED REF

IF Q61a=NO, ASK:

61b.	Is <u>NAME</u> covered under a government program, such as Medi-Cal, Medicaid or Covered California? (new)	YES..... 1 (GO TO Q62) NO2 DON'T KNOWDK REFUSED REF
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IF Q61a =YES OR 61b=YES, ASK:

62.	Was there ever a time in the past year when <u>NAME</u> was without health insurance coverage of any kind? (new)	YES..... 1 NO2 DON'T KNOWDK REFUSED REF
63.	How concerned are you that <u>NAME</u> will be without health insurance coverage of any kind at some point in the next twelve months – very concerned, somewhat concerned, not too concerned or not at all concerned? (new)	VERY CONCERNED 1 SOMEWHAT CONCERNED2 NOT TOO CONCERNED3 NOT AT ALL CONCERNED4 DON'T KNOWDK REFUSED REF

64. Which of the following best describes the place you take NAME most often for medical care... (READ CATEGORIES)? (Q37)

A private doctor's office (including HMOs or Kaiser) 1
 A hospital outpatient clinic2
 A hospital emergency room3
 A county or community clinic.....4
 – or – Somewhere else5
 NONE6
 DON'T KNOWDK
 REFUSED REF

65. Has NAME ever visited the dentist? (Q38a)

YES..... 1
 NO 2
 DON'T KNOW DK
 REFUSED..... REF

The next few questions are about your use of childcare, preschool or kindergarten for NAME. Please include any kind of arrangement where someone other than you or NAME's other parent takes care of NAME on a regular basis. (revised)

66. How many hours is NAME currently in any kind of childcare _____ HOURS PER WEEK (0-80) during a typical week? Just your best estimate. (Q39)
 DON'T KNOW DK
 REFUSED..... REF

IF Q66= 0, ASK:

67a.	Do you have any plans to enroll <u>NAME</u> in preschool or nursery school? (Q40)	YES.....1 NO2 DON'T KNOWDK REFUSEDREF
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IF Q66= 1-10 HOURS, ASK:

67b.	To confirm, is that ___ hours per day or ___ hours per week? (IF PER DAY, RETURN TO Q66 AND REENTER CORRECTED NUMBER) (new)	PER DAY 1 PER WEEK 2 DON'T KNOW DK REFUSED REF
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IF Q66 >0 HOURS PER WEEK, ASK:

68. Do you use the following types of childcare for NAME on a regular basis? (READ ITEMS, ASKING:) Do you use this type of childcare for NAME on a regular basis? (IF NECESSARY: We don't need to know where, but are just interested in the type of program.) (Q41)

	YES	NO	DK	REF
b. Does someone care for <u>NAME</u> in their home (Q41b)	1	2	DK	REF
c. Does someone care for <u>NAME</u> in your home (other than you or <u>NAME</u> 's other parent) (Q41c)	1	2	DK	REF
a. A childcare center (Q41a).....	1	2	DK	REF
d. Preschool or kindergarten (includes transitional kindergarten, Head Start)	1	2	DK	REF

IF Q68a= YES, IMMEDIATELY ASK:

69a1.	Is the childcare center licensed? (Q42a)	YES..... 1 NO 2 DON'T KNOW..... DK REFUSED..... REF
69a2.	Is the place where you take <u>NAME</u> to childcare within one mile of where you live? (new)	YES..... 1 NO 2 DON'T KNOW..... DK REFUSED..... REF

IF Q68b= YES, IMMEDIATELY ASK:

69b1.	Is this person a <u>relative</u> , such as a brother, sister or grandparent, or a <u>non-relative</u> , such as a friend, neighbor, nanny or au pair? (Q43)	RELATIVE 1 NON-RELATIVE..... 2 DON'T KNOW DK REFUSED..... REF
69b2.	Is this person a licensed childcare provider? (Q43x)	YES..... 1 NO 2 DON'T KNOW..... DK REFUSED..... REF
69b3.	Is the place where you take <u>NAME</u> within one mile of where you live? (new)	YES..... 1 NO 2 DON'T KNOW..... DK REFUSED..... REF

IF Q68c= YES, IMMEDIATELY ASK:

69c1.	Is this person a <u>relative</u> , such as a brother, sister or grandparent, or a <u>non-relative</u> , such as a friend, neighbor, nanny or au pair? (Q43)	RELATIVE 1 NON-RELATIVE..... 2 DON'T KNOW DK REFUSED..... REF
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IF Q68d= YES, IMMEDIATELY ASK:

69d1.	Is the place where you take <u>NAME</u> to preschool or kindergarten within one mile of where you live? (new)	YES..... 1 NO 2 DON'T KNOW..... DK REFUSED..... REF
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70.	Overall, how easy or difficult is it for you to get childcare or pre-school that meets the needs of your family -- very easy, somewhat easy, somewhat difficult, or very difficult? (new)	VERY EASY 1 SOMEWHAT EASY2 SOMEWHAT DIFFICULT.....3 VERY DIFFICULT4 DOES NOT NEED IT (VOLUNTEERED)5 DON'T KNOWDK REFUSED REF
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IF Q68A, 68B OR 68D= YES, ASK:

71.	Are you aware that some childcare programs in Los Angeles County are rated based on their quality? (new)	YES..... 1 NO 2 DON'T KNOW DK REFUSED..... REF
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73.	Do you receive assistance from outside sources to help pay for <u>NAME's</u> childcare or preschool, such as from (READ CATEGORIES)? (ANSWER CAN BE A MULTIPLE) (new)	A childcare voucher1 A scholarship2 -or- from some other source.....3 NO, DO NOT RECEIVE ASSISTANCE4 DON'T KNOWDK REFUSEDREF
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74.	At what age did you or other members of your household first begin storybook reading with <u>NAME</u> ... (READ CATEGORIES)? (Q54)	less than 6 months 1 6-11 months 2 1 year 3 2 years 4 3 years 5 4 years or later 6 HAVE NOT READ TO <u>NAME</u> YET 7 DON'T KNOW DK REFUSED REF
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IF Q74 = 1-6, ASK:

75.	How many days in a typical week do you or other members of your household read to <u>NAME</u> -- every day, 3 to 6 days, 1 to 2 days or never? (Q55)	EVERY DAY1 3-6 DAYS2 1-2 DAYS3 NEVER4 DON'T KNOWDK REFUSEDREF
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IF Q75 = 1, 2 OR 3, ASK:

76.	In the past week, when you or other members of your household read storybooks with <u>NAME</u> , about how much time was usually spent reading with <u>NAME</u> ... (READ CATEGORIES)? (NOTE TO INTERVIEWER: QUESTION REFERS TO TIME SPENT PER SITTING) (Q56)	less than 5 minutes.....1 5-15 minutes2 16-30 minutes3 more than 30 minutes.....4 DON'T KNOWDK REFUSEDREF
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77.	How many days in a typical week do you or other members of your household tell stories to <u>NAME</u> – every day, 3 to 6 days, 1 to 2 days, or never? (Q57a)	EVERY DAY 1 3-6 DAYS 2 1-2 DAYS 3 NEVER 4 DON'T KNOW DK REFUSED REF
78.	How many days in a typical week do you or other members of your household teach letters, words, or numbers to <u>NAME</u> – every day, 3 to 6 days, 1 to 2 days, or never? (Q57b)	EVERY DAY 1 3-6 DAYS 2 1-2 DAYS 3 NEVER 4 DON'T KNOW DK REFUSED REF
79.	How many days in a typical week do you or other members of your household play music or sing songs with <u>NAME</u> – every day, 3 to 6 days, 1 to 2 days, or never? (Q57c)	EVERY DAY 1 3-6 DAYS 2 1-2 DAYS 3 NEVER 4 DON'T KNOW DK REFUSED REF
81.	In the past month, has anyone in your household visited a public library with <u>NAME</u> ? (Q57E)	YES..... 1 NO 2 DON'T KNOW DK REFUSED REF
82.	About how many children's books do you have in your house, including library books? (READ CATEGORIES, IF NECESSARY) (Q57f)	NONE 1 1-10 2 11-25 3 26-50 4 MORE THAN 50 5 DON'T KNOW DK REFUSED REF
82x.	How frequently do you read stories with <u>NAME</u> using an electronic device, such as a phone, tablet or computer – every day, 3-6 days a week, 1-2 days a week, less often than this, or never? (new)	EVERY DAY 1 3-6 DAYS A WEEK 2 1-2 DAYS A WEEK 3 LESS OFTEN THAN THIS 4 NEVER 5 DON'T KNOW DK REFUSED REF
83.	How often do you access the Internet – every day, 3-6 days a week, 1-2 days a week, less often than this, or never? (Q58a)	EVERY DAY 1 3-6 DAYS A WEEK 2 1-2 DAYS A WEEK 3 LESS OFTEN THAN THIS 4 NEVER 5 DON'T KNOW DK REFUSED REF

IF Q83=1,2,3 OR 4, ASK:

84.	How do you access the Internet most of the time? Is it a through a computer, a cell phone or some other device? (ANSWER CAN BE A MULTIPLE) (Q58b)	COMPUTER 1 CELL PHONE 2 OTHER DEVICE 3 DON'T KNOW DK REFUSED REF
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88. In the past week, about how many times have you praised NAME for doing something worthwhile – never, once, several times or almost every day? (Q59)
- NEVER 1
 ONCE 2
 SEVERAL TIMES 3
 ALMOST EVERY DAY 4
 DON'T KNOW DK
 REFUSED REF
90. How many days in a typical week does NAME need to be disciplined for (his) (her) behavior – every day, 3 to 6 days per week, 1 to 2 days per week or never? (Q62)
- EVERY DAY 1
 3-6 DAYS 2
 1-2 DAYS 3
 NEVER 4
 DON'T KNOW DK
 REFUSED REF

The next two questions ask about the amount of time that NAME watches television and the amount of time NAME looks at screens other than a TV.

91. On an average day, how many hours does NAME watch television? Only include time when (he) (she) is sitting and watching TV. Just your best estimate. (Q64)
- _____ HOURS (0-12)
 LESS THAN 1 HOUR..... 0
 NEVER X
 DON'T KNOW DK
 REFUSED REF

IF CHILD IS 1 YEAR OR OLDER FROM S7 OR S10, ASK:

92. On an average day, how many hours does NAME spend looking at a screen other than a TV? Just your best estimate? Please include phones, tablets or computer screens. (Q64a revised)
- _____ HOURS (0-12)
 LESS THAN 1 HOUR..... 0
 NEVER..... X
 DON'T KNOW..... DK
 REFUSED..... REF

95. Do you have someone you can turn to if you needed practical help, like getting a ride somewhere, or help with shopping or cooking a meal? (new)
- YES 1
 NO 2
 DON'T KNOW DK
 REFUSED REF

96. Do you have someone you can turn to if you needed someone to comfort or listen to you? (new)
- YES 1
 NO 2
 DON'T KNOW DK
 REFUSED REF

97. Is NAME the only child for whom you have received WIC, or are you now or have you ever received WIC services for other children (or pregnancies)? (Q66)
- ONLY CHILD..... 1
 OTHER CHILDREN/PREGNANCIES 2
 DON'T KNOW DK
 REFUSED REF

IF Q97=2 (OTHER CHILDREN), ASK:

98. Counting all of your (IF BIOLOGICAL MOTHER, SAY: pregnancies and) children, about how many months or years in total have you received WIC services? (Q67)
- _____ MONTHS (0-11 MONTHS)
 _____ YEARS (0-20 YEARS)
 DON'T KNOW DK
 REFUSED REF

99. Think about the past two weeks, how often have you been bothered by... (READ ITEM AND SAY) – not at all, several days, more than half the days or nearly every day? (Q78)
- | | NOT
AT ALL | SEVERAL
DAYS | MORE THAN
HALF THE DAYS | NEARLY
EVERY DAY | DK | REF |
|--|---------------|-----------------|----------------------------|---------------------|----|-----|
| a. having <u>little</u> interest or pleasure in doing things | 1 | 2 | 3 | 4 | DK | REF |
| b. feeling down, depressed or hopeless | 1 | 2 | 3 | 4 | DK | REF |

Now, some questions about yourself...

101a. What is your age? (Q87a) _____ YEARS (0-100)
 REFUSEDREF

IF Q101A=REFUSED, ASK:

101b. We don't need to know exactly, but generally speaking are you between ages... (READ CATEGORIES)? (Q87b)	15-171
	18-242
	25-293
	30-394
	40-445
	45-496
	50-597
	60-648
	65 or older9
DO NOT READ →	REFUSEDREF

102. For classification purposes, we'd like to know what your racial background is. Are you White, Black or African-American, Asian, Pacific Islander, American Indian or an Alaskan native, a member of another race or a combination of these? (ANSWER CAN BE A MULTIPLE) (IF MIXED RACE, PLEASE PROBE FOR SPECIFIC RACES) (Q91)

WHITE	1
BLACK/AFRICAN-AMERICAN.....	2
ASIAN.....	3
PACIFIC ISLANDER	4
AMERICAN INDIAN/ALASKAN NATIVE.....	5
HISPANIC/LATINO (VOLUNTEERED)	6
OTHER (SPECIFY)	7
DON'T KNOW	DK
REFUSED	REF

IF ASK:

103. Are you of Latino or Hispanic origin? (IF NECESSARY, SAY: such as Mexican-American, Latin American, South American, or Spanish-American)? (Q88)	YES, HISPANIC.....1
	NO, NON-HISPANIC
	DON'T KNOW
	REFUSED

104a. What is the highest level of school you have completed or the highest degree you have received? (IF HIGH SCHOOL, ASK:) What was the highest grade you completed? (ONLY READ ANSWER CATEGORIES IF NECESSARY) (Q96a)

NO FORMAL SCHOOLING	1
8TH GRADE OR LESS	2
GRADES 9-12, NOT A HIGH SCHOOL GRAD.....	3
HIGH SCHOOL GRADUATE	4
SOME COLLEGE/TRADE SCHOOL/ ASSOCIATE DEGREE.....	5
(4-YEAR) COLLEGE GRADUATE	6
POST GRADUATE DEGREE.....	7
DON'T KNOW	DK
REFUSED	REF

IF Q104A = HIGH SCHOOL GRADUATE, ASK:

104b. Was that by graduating from high school or by passing a high school equivalency exam? (ONLY READ ANSWER CATEGORIES IF NECESSARY) (Q96b)	HIGH SCHOOL GRADUATE
	GED EXAM.....
	DID NOT GRADUATE HIGH SCHOOL ... (RE-CODE Q104A).....
	DON'T KNOW
	REFUSED

105. Are you currently working for pay full-time (at least 35 hours or more), part-time, or not at all? (Q97)

FULL-TIME	1
PART-TIME	2
NOT WORKING.....	3
DON'T KNOW	DK
REFUSED	REF

IF SPOUSE/PARTNER LIVING IN HOUSEHOLD (FROM Q7):

106.	Thinking about the employment situation of your spouse or partner, is he or she currently working for pay full-time (at least 35 hours or more), part-time or not at all? (Q98)	FULL-TIME1 PART-TIME2 NOT WORKING3 REFUSEDREF
107.	Is NAME'S (father) (mother) an active part of (his) (her) life? (Q98x)	YES.....1 NO2 REFUSEDREF
108.	What is your current height without shoes? (Q99)	_____ FEET (2-7) _____ INCHES (0-11) NEEDS METRIC CONVERSION.....99 REFUSEDREF
109.	What is your current weight without shoes? (Q100)	_____ LBS (75-450) NEEDS METRIC CONVERSION.....99 REFUSEDREF
110a.	Are <u>you yourself</u> covered by health insurance or any other kind of health care plan? (IF NECESSARY, SAY:) This includes health insurance obtained through an employer, purchased directly, HMOs or pre-paid plans like Kaiser, government programs such as Medicare, Medi-Cal, Medicaid, Covered California, military programs such as Tri-Care, or through the Indian Health Service. (Q100x)	YES, COVERED1 NO, NOT COVERED2 DON'T KNOWDK REFUSEDREF

IF Q110A=NO, ASK:

110b.	Are you covered under a government program, such as Medi-Cal, Medicaid or Covered California? (new)	YES.....1 NO2 DON'T KNOWDK REFUSEDREF
111.	Did you experience any changes to your health insurance as a result of the Affordable Care Act, also known as Obama Care? (Q100y)	YES.....1 NO2 DON'T KNOWDK REFUSEDREF

IF Q110=YES, COVERED (PARENT CURRENTLY HAS HEALTH INSURANCE), ASK:

112.	In the past year, was there ever a time when you were without health insurance coverage of any kind? (new)	YES.....1 NO2 DON'T KNOWDK REFUSEDREF
113.	How concerned are you that you will be without health insurance coverage of any kind at some point in the next twelve months – very concerned, somewhat concerned, not too concerned, or not at all concerned? (new)	VERY CONCERNED1 SOMEWHAT CONCERNED2 NOT TOO CONCERNED3 NOT AT ALL CONCERNED4 DON'T KNOWDK REFUSEDREF

IF RESPONDENT IS FEMALE (FROM S2), ASK:

114. Are you currently pregnant? (Q101) YES.....1
 NO2
 DON'T KNOWDK
 REFUSEDREF

IF Q114= YES, ASK:

115. About how many weeks pregnant are you? (Q102) 1-13 WEEKS1
 14-26 WEEKS2
 27 OR MORE WEEKS3
 DON'T KNOWDK
 REFUSEDREF

116. How much did you weigh prior to your current pregnancy? (Q104) _____ LBS (75-450)
 NEEDS METRIC CONVERSION.....99
 DON'T KNOWDK
 REFUSEDREF

117. Including yourself, how many people currently live in your household? (Q106) _____ (0-30)

IF MORE THAN ONE PERSON LIVING IN HOUSEHOLD, ASK:

118. (Including yourself,) how many are adults age 18 or older? (Q107) _____ (1-30)

119. How many are children between the ages of 0 and 5? (Q108) _____ (0-30)

120. How many are between the ages of 6 and 17? (Q109) _____ (0-30)

121. In the last twelve months, have you or has anyone in your household used an EBT card for food stamps to buy food? (Q111) YES.....1
 NO2
 DON'T KNOWDK
 REFUSEDREF

122. I'm going to read several statements that people have made about their food situation. For each please tell me whether the statement was often true, sometimes true or never true for your household in the last 12 months, that is, since last (April/May/June/July). (READ STATEMENTS) (Q112)

OFTEN SOMETIMES NEVER DK REF

a. The first statement is, "The food that we bought just didn't last, and we didn't have money to get more." Was that often, sometimes or never true for your household in the last 12 months? 1..... 2 3DK REF

b. "We couldn't afford to eat balanced meals." Was that often, sometimes or never true for your household in the last 12 months? 1..... 2 3DK REF

123. In the last 12 months, that is since last (April/May/June/July), did you or other adults in your household ever cut the size of your meals or skip meals because there wasn't enough money for food? (Q112a1) YES.....1
 NO2
 DON'T KNOWDK
 REFUSEDREF

IF Q123=YES, ASK:

124. How often did this happen – almost every month, some months but not every month or in only 1 or 2 months? (Q112b1) ALMOST EVERY MONTH.....1
 SOME MONTHS, NOT EVERY2
 ONLY 1 OR 2 MONTHS.....3
 DON'T KNOWDK
 REFUSEDREF

125.	In the last 12 months, did you ever eat less than you felt you should because there wasn't enough money for food? (Q113)	YES.....1 NO2 DON'T KNOWDK REFUSEDREF					
126.	In the last 12 months, were you ever hungry but didn't eat because there wasn't enough money for food? (Q114)	YES.....1 NO2 DON'T KNOWDK REFUSEDREF					
127.	Which of the following best describes where you currently live – in a home owned by your parents or relatives, in an apartment or home that you own, or in an apartment or home that you rent? (Q115)	PARENTS/RELATIVE'S HOME1 HOME THAT YOU OWN.....2 RENTER3 OTHER4 DON'T KNOWDK REFUSEDREF					
128.	How easy or difficult is it for you to find housing – very difficult, somewhat difficult, somewhat easy or very easy? (Q116)	VERY DIFFICULT1 SOMEWHAT DIFFICULT2 SOMEWHAT EASY3 VERY EASY4 DON'T KNOWDK REFUSEDREF					
129.	How easy or difficult is it for you to <u>pay for</u> housing – very difficult, somewhat difficult, somewhat easy or very easy? (Q117)	VERY DIFFICULT1 SOMEWHAT DIFFICULT2 SOMEWHAT EASY3 VERY EASY4 NOT APPLICABLE (DON'T PAY FOR HOUSING) ..5 DON'T KNOWDK REFUSEDREF					
130.	How much did your household pay for rent or for a mortgage last month? (READ CATEGORIES) (new)	Nothing.....1 Less than \$500 a month.....2 \$500 to \$999 a month3 \$1,000 to \$1,499 a month4 \$1,500 to \$1,999 a month5 \$2,000 or more a month6 DON'T KNOWDK REFUSEDREF					
132.	In the past three years, how many different places have you lived, including your current residence? (Q118)	_____ DIFFERENT PLACES (1-20) DON'T KNOWDK REFUSEDREF					
133.	Have you ever heard of the organization First 5 L-A? (Q119)	YES.....1 NO2 DON'T KNOWDK REFUSEDREF					
135.	What is your current zip code? (ALL ZIP CODES MUST BEGIN WITH "9" AND INCLUDE 5 DIGITS) (Q126)	ZIP CODE <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center; width: 100px;"> <tr> <td style="width: 20px; height: 20px;"> </td> <td style="width: 20px; height: 20px;"> </td> <td style="width: 20px; height: 20px;"> </td> <td style="width: 20px; height: 20px;"> </td> <td style="width: 20px; height: 20px;"> </td> </tr> </table> DON'T KNOW 99998 REFUSED 99999					

136. The following are things that might happen to some people. Please tell me if any of these things happened to you since NAME was born. (READ ITEMS IN RANDOM ORDER, AND ASK) Did this happen since NAME was born? (new)

	YES	NO	DK	REF
() a. I got separated or divorced from my partner	1	2	DK	REF
() b. I had to move because of problems paying the rent or mortgage.....	1	2	DK	REF
() c. I did not have a regular place to sleep at night (or had to move from house to house).....	1	2	DK	REF
() d. I was homeless (or had to sleep outside, or stay in a car or a shelter)	1	2	DK	REF
() e. My partner lost their job or I lost my job.....	1	2	DK	REF
() f. My partner or I had our pay or hours cut back	1	2	DK	REF

139. I am going to read some reasons why parents often say they participate in WIC. For each, please tell me if this is a reason why you are participating in WIC. (READ ITEMS IN RANDOM ORDER) (new)

	YES	NO	DK	REF	INAP
() b. Are the fruits and vegetables a reason why you stay on WIC	1	2	DK	REF	INAP
() c. Is the breastfeeding support a reason why you stay on WIC	1	2	DK	REF	INAP
() d. Is the information and advice provided by WIC staff a reason why you stay on WIC	1	2	DK	REF	INAP
() e. Is the infant formula to feed your baby a reason why you stay on WIC	1	2	DK	REF	INAP
() f. Are the WIC classes and group sessions a reason why you stay on WIC	1	2	DK	REF	INAP
() g. Are the children's books that WIC staff provide a reason why you stay on WIC	1	2	DK	REF	INAP

140. Do you ever find it hard to stay on WIC? (new)

YES.....	1
NO	2
DON'T KNOW	DK
REFUSED	REF

IF Q140=YES, ASK:

141. Which of the following is a reason why you find it hard to stay on WIC? (READ ITEMS IN RANDOM ORDER) (new)	YES	NO	DK	REF
() a. There are too many requirements	1	2	DK	REF
() b. There are too many appointments	1	2	DK	REF
() c. It's hard to get to the WIC agency	1	2	DK	REF
() d. It's not worth it.....	1	2	DK	REF
() e. I don't like using the WIC checks to shop.....	1	2	DK	REF
() f. I don't like the WIC foods	1	2	DK	REF
() g. It is harder for me to use than other government assistance programs.....	1	2	DK	REF

142. Finally, what services would you like to receive from WIC that you are currently not receiving? (new)

ANYTHING MENTIONED	1
NOTHING MENTIONED	2
DON'T KNOW	DK
REFUSED	REF

IF Q142=1 (ANYTHING MENTIONED), ASK:

143. What are they? (PROBE) Any others? (new)

144. One last question. We may want to conduct a follow-up survey in the future. Would it be okay if we called you back at that time to ask you some additional questions? (Q127)

YES	1
NO.....	2
DON'T KNOW	DK
REFUSED	REF

These are all the questions I have. Thank you very much for your cooperation. (IF NECESSARY: We will be mailing you a gift card within the next two weeks.) (HANG UP)