



Child-Development- Supplement

FATHERS WHO LIVE OUTSIDE THE HOME OF THE TARGET CHILD Child Questionnaire

The University of Michigan
Survey Research Center
Institute for Social Research
Ann Arbor, MI 48106

SAMPLE LABEL

INTERVIEWER LABEL

THIS STATEMENT MUST BE READ TO ALL RESPONDENTS

This interview is completely voluntary and confidential. If we should come to any question you do not want to answer, let me know and we'll go on to the next question. Your answers will be kept completely confidential.

Date of IW: _____

Length of IW: _____

Length of Edit: _____

SEE PRIMARY CAREGIVER CHILD BOOKLET,
G2 & G3:

IS CHILD IN SCHOOL OR KINDERGARTEN?
Yes No

CHILD

NAME LABEL

SECTION A

A0. EXACT TIME NOW: _____

A1. About how far away from (CHILD) do you live?

_____ (ACTUAL OR ESTIMATED MILES)

A2. How often do you talk with (CHILD)'s mother about (CHILD)? Would you say several times a week, about once a week, one to three times a month, several times a year, about once a year, or less than once a year?

| | | | |
|----------------------------|-----------------------------|-------------------------|----------------------------|
| 1. SEVERAL TIMES A WEEK | 2. ABOUT ONCE A WEEK | 3. 1-3 TIMES A MONTH | 4. SEVERAL TIMES A YEAR |
| 5. ABOUT ONCE A YEAR | 6. LESS THAN ONCE A YEAR | 7. [IF VOL] NEVER | |

A3. In what month and year did you last live with (CHILD)?

| | | |
|-------|-------|------------------------|
| _____ | _____ | NEVER LIVED WITH CHILD |
| MONTH | YEAR | |

A4. In what month and year did you last see (CHILD)?

| | | |
|---------------|--------------|----------------------|
| _____ (MONTH) | _____ (YEAR) | HAS NEVER SEEN CHILD |
|---------------|--------------|----------------------|



NEXT PAGE, A7

A5. How often do you see or talk with (CHILD)? Would you say several times a week, about once a week, one to three times a month, several times a year, about once a year, or less than once a year?

| | | | |
|----------------------------|-----------------------------|-------------------------|----------------------------|
| 1. SEVERAL TIMES A WEEK | 2. ABOUT ONCE A WEEK | 3. 1-3 TIMES A MONTH | 4. SEVERAL TIMES A YEAR |
| 5. ABOUT ONCE A YEAR | 6. LESS THAN ONCE A YEAR | 7. [IF VOL] NEVER | |



NEXT PAGE, A7

A6. In 1996 about how many days did (CHILD) actually spend with you?

_____ DAYS

A7. INTERVIEWER CHECKPOINT

SEE A2, PAGE 1

1. R SPOKE WITH CHILD'S MOTHER ONCE A YEAR OR LESS
(A2 CODED 5, 6 OR 7) → GO TO A11

2. R SPOKE WITH CHILD'S MOTHER MORE THAN ONCE A YEAR
(A2 CODED 1, 2, 3, OR 4)

A8. How much influence do you have in making decisions about such things as education, religion, and health care for (CHILD)? Would you say none, some, or a great deal?

1. NONE
2. SOME
3. A GREAT DEAL

A9. Please tell me if you and (CHILD)'s mother have conflict over each of the following issues often, sometimes, hardly ever, or never.

| | OFTEN | SOME-TIMES | HARDLY EVER | NEVER |
|---|-------|------------|-------------|-------|
| a. Where (CHILD) lives. (Do you and (his/her) mother have conflict over this <u>often</u> , <u>sometimes</u> , <u>hardly ever</u> , or <u>never</u> ?) | 1 | 2 | 3 | 4 |
| b. How (CHILD) is raised. | 1 | 2 | 3 | 4 |
| c. Disciplining (him/her). | 1 | 2 | 3 | 4 |
| d. How you spend money on (him/her). | 1 | 2 | 3 | 4 |
| e. How she spends money on (CHILD). | 1 | 2 | 3 | 4 |
| f. The amount of time she spends with (CHILD). (Do you and [CHILD's] mother have conflict over this <u>often</u> , <u>sometimes</u> , <u>hardly ever</u> , or <u>never</u> ?) | 1 | 2 | 3 | 4 |
| g. (CHILD)'s mother's use of alcohol or drugs. | 1 | 2 | 3 | 4 |
| h. The friends she [(CHILD)'s mother] spends time with. | 1 | 2 | 3 | 4 |
| i. (CHILD)'s visits to you. | 1 | 2 | 3 | 4 |
| j. Her contribution to (CHILD)'s support. | 1 | 2 | 3 | 4 |

A10. Did you do any of the following things for (CHILD) during the past year?

| | YES | NO |
|--|-----|----|
| a. Buy clothes, toys or presents. | 1 | 5 |
| b. Pay for camp or lessons. | 1 | 5 |
| c. Take (CHILD) on vacation. | 1 | 5 |
| d. Pay for dental or uninsured medical expenses. | 1 | 5 |
| e. Pay for (his/her) medical insurance. | 1 | 5 |
| f. Any other things? (SPECIFY): _____ | 1 | 5 |

A11. Next, I will read some statements about raising children. Thinking about (CHILD), please indicate on a scale from 1-5 the number that best describes how true each statement is, where 1 is not at all true, 5 is completely true and 2, 3, and 4 are somewhere in between.

| | NOT AT ALL TRUE | | | | COMPLETELY TRUE |
|--|-----------------|---|---|---|-----------------|
| a. (CHILD) seems to be harder to care for than most children. | 1 | 2 | 3 | 4 | 5 |
| b. There are some things that (CHILD) does that really bothers me a lot. | 1 | 2 | 3 | 4 | 5 |
| c. I find myself giving up more of my life to meet (CHILD)'s needs than I ever expected. | 1 | 2 | 3 | 4 | 5 |
| d. I often feel angry with (CHILD). | 1 | 2 | 3 | 4 | 5 |
| e. I would be doing better in my life without (CHILD). | 1 | 2 | 3 | 4 | 5 |

A12. How much schooling do you expect that (CHILD) will complete?

| | | |
|--|--|--|
| 01. 11TH GRADE OR LESS | 02. GRADUATE FROM HIGH SCHOOL | 03. POST-HIGH SCHOOL VOCATIONAL TRAINING |
| 04. SOME COLLEGE | 05. GRADUATE FROM 2 YEAR COLLEGE WITH ASSOCIATE'S DEGREE | 06. GRADUATE FROM 4 YEAR COLLEGE |
| 07. MASTER'S DEGREE OR TEACHING CREDENTIAL PROGRAM | 08. MD, LAW, PHD, OR OTHER DOCTORAL DEGREE | |

B0. INTERVIEWER CHECKPOINT

SEE A6, PAGE 2

- 1. A6 IS BLANK OR CHILD SPENT 0-11 DAYS WITH DAD IN 1996
 → EXACT TIME NOW: _____
 GO TO NEXT CHILD BOOKLET (IF ANY), OR TO HOUSEHOLD BOOKLET
- 2. CHILD SPENT 12+ DAYS WITH DAD

B1. Did you take parenting classes prior to the time of (CHILD)'s birth, right after (CHILD)'s birth, during (CHILD)'s first few years, at any other time, or did you never take parenting classes? (**CHECK ALL THAT APPLY**)

| | | |
|--|-----------------------------------|--------------------------------------|
| A. PRIOR TO THE TIME OF CHILD'S BIRTH | B. RIGHT AFTER CHILD'S BIRTH | C. DURING CHILD'S FIRST FEW YEARS |
| D. NEVER | E. OTHER TIME (SPECIFY): _____ | |

B2. How did you learn how to be a parent?

| | YES | NO |
|---|-----|----|
| a. From your mother? | 1 | 5 |
| b. Father or father-figure? | 1 | 5 |
| c. Grandmother? | 1 | 5 |
| d. Friends? | 1 | 5 |
| e. Books? | 1 | 5 |
| f. Personal experience such as teen baby sitting? | 1 | 5 |
| g. Classes such as Lamaze or school courses? | 1 | 5 |
| h. Television or video? | 1 | 5 |
| i. Trial and error? | 1 | 5 |
| j. Any other way? (SPECIFY): _____ | 1 | 5 |

B3. How often do you spend time with (CHILD) in each of the following activities? Would you say not at all, about once a year, several times a year, 1-3 times a month, about once a week, or several times a week?

| | NOT AT ALL | ABOUT ONCE A YEAR | SEVERAL TIMES A YEAR | 1 TO 3 TIMES A MONTH | ABOUT ONCE A WEEK | SEVERAL TIMES A WEEK |
|--|------------|-------------------|----------------------|----------------------|-------------------|----------------------|
| a. Leisure activities such as picnics, movies, sports, or visiting family friends. | 1 | 2 | 3 | 4 | 5 | 6 |
| b. Religious activities. | 1 | 2 | 3 | 4 | 5 | 6 |
| c. Talking, working on a project, or playing together. | 1 | 2 | 3 | 4 | 5 | 6 |
| d. School or other organized activities. | 1 | 2 | 3 | 4 | 5 | 6 |

B4. INTERVIEWER CHECKPOINT

SEE A4, PAGE 1

1. R HAS SEEN CHILD IN LAST MONTH → NEXT PAGE, B5
2. R HAS NOT SEEN CHILD IN LAST MONTH → TURN TO P. 8, B7

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B5. About how often in the past month have you:

| | NOT IN THE PAST MONTH | 1 OR 2 TIMES IN THE PAST MONTH | ABOUT ONCE A WEEK | SEVERAL TIMES A WEEK | EVERY DAY |
|--|-----------------------|--------------------------------|-------------------|----------------------|-----------|
| a. Hugged or shown physical affection to your child? Would you say <u>not in the past month</u> , <u>one or two times in the past month</u> , <u>about once a week</u> , <u>several times a week</u> , or <u>every day</u> ? | 1 | 2 | 3 | 4 | 5 |
| b. Told (CHILD) that you love (him/her)? | 1 | 2 | 3 | 4 | 5 |
| c. Spent time with (CHILD) doing one of (his/her) favorite activities? | 1 | 2 | 3 | 4 | 5 |
| d. Joked or played with (CHILD)? | 1 | 2 | 3 | 4 | 5 |
| e. Talked with (CHILD) about things (he/she) is especially interested in? | 1 | 2 | 3 | 4 | 5 |
| f. Told (CHILD) you appreciated something (he/she) did? | 1 | 2 | 3 | 4 | 5 |

- B6. Now I'd like to ask about things you and (CHILD) did together in the past month. These things might be done together anywhere, they don't have to be done at home. For each please tell me if you did not do it in the past month with (CHILD), did it one or two times in the past month, about once a week, several times a week, or every day.

| (How often have you....) | | NOT IN THE PAST MONTH | 1 OR 2 TIMES IN THE PAST MONTH | ABOUT ONCE A WEEK | SEVERAL TIMES A WEEK | EVERY DAY |
|--------------------------|--|-----------------------------|---|-------------------------|----------------------------|--------------|
| a. | Washed or folded clothes together? | 1 | 2 | 3 | 4 | 5 |
| b. | Done dishes together? | 1 | 2 | 3 | 4 | 5 |
| c. | Gone to the store with (CHILD)? | 1 | 2 | 3 | 4 | 5 |
| d. | Looked at books or read stories with (him/her)? | 1 | 2 | 3 | 4 | 5 |
| e. | Talked to (him/her) about your family? | 1 | 2 | 3 | 4 | 5 |
| f. | Prepared food together? (<u>Not in the past month, one or two times in the past month, about once a week, several times a week, or every day?</u>) | 1 | 2 | 3 | 4 | 5 |
| g. | Done arts and crafts together? | 1 | 2 | 3 | 4 | 5 |
| h. | Played sports or did outdoor activities together? | 1 | 2 | 3 | 4 | 5 |
| i. | Cleaned the house together? | 1 | 2 | 3 | 4 | 5 |
| j. | Built or repaired something together? | 1 | 2 | 3 | 4 | 5 |
| k. | Worked or played on a computer or played video games with (CHILD)? | 1 | 2 | 3 | 4 | 5 |
| l. | Worked on homework with (him/her)? | 1 | 2 | 3 | 4 | 5 |
| m. | Played a board game or card game or did puzzles with (him/her)? | 1 | 2 | 3 | 4 | 5 |

B7. INTERVIEWER CHECKPOINT

| | |
|---|---|
| <input type="checkbox"/> | 1. CHILD IS AGE 3-12 |
| <input type="checkbox"/> | 2. CHILD IS AGE 0-2 → EXACT TIME NOW: _____ |
| GO TO NEXT CHILD BOOKLET (IF ANY) OR TO HOUSEHOLD BOOKLET. | |

B8. For the next set of statements, tell me whether they are often true, sometimes true, or not true according to (CHILD)'s behavior.

| | OFTEN TRUE | SOMETIMES TRUE | NOT TRUE |
|---|---------------|-------------------|-------------|
| a. (He/She) has sudden changes in mood or feeling. | 1 | 2 | 3 |
| b. (He/She) feels or complains that no one loves (him/her). | 1 | 2 | 3 |
| c. (He/She) is rather high strung, tense and nervous. | 1 | 2 | 3 |
| d. (He/She) cheats or tells lies. | 1 | 2 | 3 |
| e. (He/She) is too fearful or anxious. | 1 | 2 | 3 |
| f. (He/She) argues too much. | 1 | 2 | 3 |
| g. (He/She) has difficulty concentrating, cannot pay attention for long. (Is this <u>often true</u> , <u>sometimes true</u> , or <u>not true</u> ?) | 1 | 2 | 3 |
| h. (He/She) is easily confused, seems to be in a fog. | 1 | 2 | 3 |
| i. (He/She) bullies or is cruel or mean to others. | 1 | 2 | 3 |
| j. (He/She) is disobedient. | 1 | 2 | 3 |
| k. (He/She) does not seem to feel sorry after (he/she) misbehaves. | 1 | 2 | 3 |
| l. (He/She) has trouble getting along with other children. | 1 | 2 | 3 |
| m. (He/She) is impulsive, or acts without thinking. | 1 | 2 | 3 |
| n. (He/She) feels worthless or inferior. | 1 | 2 | 3 |
| o. (He/She) is not liked by other children. (Is this <u>often true</u> , <u>sometimes true</u> , or <u>not true</u> ?) | 1 | 2 | 3 |

| | OFTEN TRUE | SOMETIMES TRUE | NOT TRUE |
|--|---------------|-------------------|-------------|
| p. (He/She) has a lot of difficulty getting (his/her) mind off certain thoughts. [INTERVIEWER: IF NEEDED, ADD "has obsessions."] | 1 | 2 | 3 |
| q. (He/She) is restless or overly active, cannot sit still. | 1 | 2 | 3 |
| r. (He/She) is stubborn, sullen, or irritable. | 1 | 2 | 3 |
| s. (He/She) has a very strong temper and loses it easily. | 1 | 2 | 3 |
| t. (He/She) is unhappy, sad or depressed. | 1 | 2 | 3 |
| u. (He/She) is withdrawn, does not get involved with others. | 1 | 2 | 3 |
| v. (He/She) breaks things on purpose or deliberately destroys (his/her) own or another's things. | 1 | 2 | 3 |
| w. (He/She) clings to adults. (Is this <u>often true</u> , <u>sometimes true</u> , or <u>not true</u> ?) | 1 | 2 | 3 |
| x. (He/She) cries too much. | 1 | 2 | 3 |
| y. (He/She) demands a lot of attention. | 1 | 2 | 3 |
| z. (He/She) is too dependent on others. | 1 | 2 | 3 |
| aa. (He/She) feels others are out to get (him/her). | 1 | 2 | 3 |
| bb. (He/She) hangs around with kids who get into trouble. | 1 | 2 | 3 |
| cc. (He/She) is secretive, keeps things to (himself/herself). | 1 | 2 | 3 |
| dd. (He/She) worries too much. | 1 | 2 | 3 |

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B9. Thinking about (CHILD), please tell me how much each statement applies to (CHILD) on a scale from 1-5, where 1 means “not at all like my child,” 5 means “totally like my child,” and 2, 3 and 4 are somewhere in between.

| | NOT AT ALL LIKE CHILD | | | | TOTALLY LIKE CHILD |
|---|-----------------------|---|---|---|--------------------|
| | 1 | 2 | 3 | 4 | 5 |
| a. Is cheerful, happy. | 1 | 2 | 3 | 4 | 5 |
| b. Waits (his/her) turn in games and other activities. | 1 | 2 | 3 | 4 | 5 |
| c. Does neat, careful work. | 1 | 2 | 3 | 4 | 5 |
| d. Is curious and exploring, likes new experiences. | 1 | 2 | 3 | 4 | 5 |
| e. Thinks before (he/she) acts, is not impulsive. | 1 | 2 | 3 | 4 | 5 |
| f. Gets along well with other children. | 1 | 2 | 3 | 4 | 5 |
| g. Usually does what I tell (him/her) to do. | 1 | 2 | 3 | 4 | 5 |
| h. Can get over being upset quickly. | 1 | 2 | 3 | 4 | 5 |
| i. Is admired and well-liked by other children. | 1 | 2 | 2 | 4 | 5 |
| j. Tries to do things for (himself/herself), is self-reliant. | 1 | 2 | 3 | 4 | 5 |

B10. INTERVIEWER CHECKPOINT

| | |
|--------------------------------|--|
| SEE INSIDE OF FACESHEET | |
| <input type="checkbox"/> | 1. CHILD IS IN SCHOOL OR KINDERGARTEN |
| <input type="checkbox"/> | 2. CHILD IS NOT IN SCHOOL OR KINDERGARTEN → TURN TO P. 13, B16 |

B11. The next set of questions is also about (CHILD)’s schooling and some activities that you may have participated in.

| | YES | NO |
|--|-----|----|
| a. Before the start of the school year, did you obtain information about who will be (CHILD)s' teacher? | 1 | 5 |
| b. Did you meet with (CHILD)'s teacher? | 1 | 5 |
| c. Is there more than one teacher that (CHILD) could have been assigned to for (his/her) current grade or age level? | 1 | 5 |
| d. Did you request a particular teacher for (CHILD)? | 1 | 5 |

- B12. During the current school year, how often have you participated in any of the following activities at (CHILD)'s school? Would it be not in the current school year, once, or more than once?

| | NOT IN THE CURRENT SCHOOL YEAR | ONCE | MORE THAN ONCE |
|--|--------------------------------------|------|----------------------|
| a. Volunteered in the classroom, school office, or library? | 1 | 2 | 3 |
| b. Had a conference with (CHILD)'s teacher? | 1 | 2 | 3 |
| c. Had a conference with (CHILD)'s school principal? | 1 | 2 | 3 |
| d. Had an informal conversation with (CHILD)'s teacher? | 1 | 2 | 3 |
| e. Had an informal conversation with (his/her) principal? | 1 | 2 | 3 |
| f. Made a presentation to (CHILD)'s class? (<u>Not in the current school year</u> , <u>once</u> , or <u>more than once</u> ?) | 1 | 2 | 3 |
| g. Observed (his/her) classroom? | 1 | 2 | 3 |
| h. Attended a school event in which (CHILD) participated such as a play, sporting event or concert? | 1 | 2 | 3 |
| i. Attended a school event in which (CHILD) did <u>not</u> participate? | 1 | 2 | 3 |
| j. Attended a meeting of the PTA or other such organization? | 1 | 2 | 3 |
| k. Met with a school counselor? | 1 | 2 | 3 |

B13. I am going to read a list of things that may make it difficult for a parent to be involved in their child’s school activities and assignments. How often has each of these made it difficult for you to be involved? Would it be not in the current school year, once, or more than once?

| | NOT IN THE CURRENT SCHOOL YEAR | ONCE | MORE THAN ONCE | IF VOL: INAP |
|--|--------------------------------------|------|-------------------|-----------------|
| a. How often has your work schedule made it difficult for you to be involved? | 1 | 2 | 3 | N |
| b. Lack of information provided by the school? | 1 | 2 | 3 | N |
| c. Difficulty understanding the assignments? | 1 | 2 | 3 | N |
| d. Information sent by the school is in a language you do not understand? | 1 | 2 | 3 | N |
| e. How often has lack of transportation made it difficult for you to be involved? | 1 | 2 | 3 | N |
| f. School staff is unresponsive to your concerns? | 1 | 2 | 3 | N |
| g. Phone calls are not returned by the school staff? | 1 | 2 | 3 | N |
| h. Child care problems? | 1 | 2 | 3 | N |
| i. Are there any other things that made it difficult for you to be involved? (SPECIFY): _____ | 1 | 2 | 3 | N |

- B14. Since the beginning of the school year, please tell me how often you discussed the following with (CHILD): never, rarely, occasionally, or regularly?

| | NEVER | RARELY | OCCASIONALLY | REGULARLY |
|---|-------|--------|--------------|-----------|
| a. School activities or events of particular interest to (CHILD). | 1 | 2 | 3 | 4 |
| b. Things (CHILD) has studied in class. | 1 | 2 | 3 | 4 |
| c. (CHILD)'s experiences in school. | 1 | 2 | 3 | 4 |

- B15. Please tell me whether the next two statements about (CHILD) are often true, sometimes true, or not true.

| | OFTEN TRUE | SOMETIMES TRUE | NOT TRUE |
|--|------------|----------------|----------|
| a. (He/She) is disobedient at school. | 1 | 2 | 3 |
| b. (He/She) has trouble getting along with teachers. | 1 | 2 | 3 |

- B16. Think now about how things are going in general in (CHILD)'s life. Please rate each of the following parts of (CHILD)'s life as either excellent, good, fair, or poor. First...

| | EXCELLENT | GOOD | FAIR | POOR | IF VOL: INAP |
|---|-----------|------|------|------|--------------|
| a. (His/Her) health. | 1 | 2 | 3 | 4 | N |
| b. (His/Her) friendships. | 1 | 2 | 3 | 4 | N |
| c. (His/Her) relationship with you. | 1 | 2 | 3 | 4 | N |
| d. (CHILD) feelings about (himself/herself). | 1 | 2 | 3 | 4 | N |
| e. (His/Her) prospects for the future. | 1 | 2 | 3 | 4 | N |
| f. (His/Her) relationships with brothers, sisters, or other children (he/she) lives with. | 1 | 2 | 3 | 4 | N |
| g. (CHILD) relationship with a teacher or caregiver. | 1 | 2 | 3 | 4 | N |
| h. (His/Her) relationship with (his/her) mother. | 1 | 2 | 3 | 4 | N |

B17. How many close friends does (CHILD) have?

_____ (NUMBER OF CLOSE FRIENDS)

B18. How many of (CHILD)'s close friends do you know by sight and by first and last name? Do you know all of them, most of them, about half, only a few, or none of them?

- 1. ALL OF THEM
- 2. MOST OF THEM
- 3. ABOUT HALF
- 4. ONLY A FEW
- 5. NONE OF THEM

B19. When (CHILD) is staying with you, about how often do you know who (CHILD) is with when (he/she) is not at home? Would you say you know who (he/she) is with all of the time, most of the time, some of the time or only rarely?

- 1. ALL OF THE TIME
- 2. MOST OF THE TIME
- 3. SOME OF THE TIME
- 4. ONLY RARELY
- 5. [IF VOL.] CHILD NEVER STAYS WITH ME

B20. EXACT TIME NOW: _____

**GO TO NEXT CHILD BOOKLET (IF ANY)
OR TO HOUSEHOLD BOOKLET.**

SECTION C: INTERVIEWER OBSERVATIONS

- C1. Please provide a few words about this interview which might help editors and coders understand any **potentially confusing situations**.

- C2. Elaborate on any **ambiguous or conflicting information** in this interview that you want editors and coders to know about.

- C3. How would you describe the interview situation? Please add any other clarifying remarks that will be helpful to editors or coders when this interview is processed. If this R should be **recontacted for missing information** from Ann Arbor, is there something else we should be aware of?

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J