C: Lane County Family Survey - Draft of 6/18/00
C: about 60 questions for households without kids/12-15 minutes
C: about 75 questions for households with kids/18-25 minutes

CATION

Q: HELLO1
T:
Hello, is this (phone number)?

1 YES
NO --> REFER TO INTERVIEWER INSTRUCTIONS

T14:
This is ______ calling from the University of Oregon Survey Research Laboratory. I'm calling to complete a survey we started previously.

1 OK TO CONTINUE
CTRL/END SKIPTO END

I:
Key 1

Q: HELLO2
T:
Hello, this is ______ calling from the University of Oregon Survey Research Laboratory. The Lane County Commission on Children and Families has asked us to conduct an 8-minute survey to improve children’s services in your region. I want to assure you I am not selling a thing and your answers are completely anonymous. (Please don't even tell me your name.) Do you have any questions about the survey before we begin?

PROBE: You don’t have to have children to take part in this survey.

1 NO QUESTIONS OR QUESTIONS ANSWERED
HAS QUESTIONS --> REFER TO INTERVIEWER INSTRUCTIONS

I:
Key 1

Q: COOPERAT
T:
We appreciate your cooperation. (I'd like to begin the survey now.)

1 OK
I:
Key 1

Q: GENERAL
T:
First, how do you think things are going for children and families in general in your community these days - excellent, good, fair or poor?

PROBE: Even if you (don’t have children/ never have had children), please give me your impressions (of how things are going for children and families in your community these days) (excellent, good, fair or poor)?

1 EXCELLENT
2 GOOD
3 FAIR
4 POOR

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1-4, 7-9

Q: SERV1
T:
Next, I have some questions about community services that you or members of your household or family may have used. Have you (or members of your household or family) ever used the public library services in your community?

PROBE: Members of your household are people who live with you. Your family is whatever it means to you.

NOTE: INCLUDE BOOKMOBILE

1 YES
2 NO --> SKIPTO SERV1C
3 IF VOLUNTEERED: NO COMMUNITY LIBRARY SERVICE

7 REFUSED
8 DON'T KNOW --> SKIPTO SERV2
9 NO ANSWER

I:
Key 1-3, 7-9
IF (ANS = 2) SKIPTO SERV1C
IF (ANS = 3) SKIPTO SERV1C
IF (ANS > 3) SKIPTO SERV2

Q: SERV1B
T:
Do the public library services meet (your/your household members’) needs completely, partly, or not at all?
1 COMPLETELY --> SKIPTO SERV2
2 PARTLY --> SKIPTO SERV2
3 NOT AT ALL --> SKIPTO SERV2
7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1-3, 7-9
SKIPTO SERV2

Q: SERV1C
T:
Why not? (Why haven’t you (or members of your household or family) used
library services (in your community)?)

PROBE: Which one has been the biggest barrier?

PROBE FROM LIST, CHOOSE ONE

R’S BARRIERS
1 LACK OF KNOWLEDGE
2 FEE FOR SERVICE
3 LITERACY ISSUES
4 LACK OF CHILD/ELDER CARE
5 FEAR OF LAW, OF BEING IDENTIFIED
6 TOO MUCH HASSLE/ TOO TIME-CONSUMING
7 TOO PERSONAL
8 LACK OF TRANSPORTATION/COMMUNICATION
9 SHAME/ EMBARRASSMENT/ PRIDE
10 NOT INTERESTED/ DON’T NEED IT
19 OTHER R BARRIER - SPECIFY

AGENCY’S BARRIERS
20 BAD LOCATION
21 LIMITED HOURS/ HOURS CHANGE
22 STAFF PEOPLE AREN’T NICE
23 CULTURAL INSENSITIVITY
24 WAITING LIST/ CAN’T WAIT
25 CONFUSING RULES, TOO MANY RULES
26 SERVICE NON-EXISTENT IN COMMUNITY
29 OTHER AGENCY BARRIER - SPECIFY

CODES 1-10, 20-26 --> SKIPTO SERV2

97 REFUSED
98 DON’T KNOW
99 NO ANSWER

I:
num 1 99 2 0 22 50
IF (SERV1 = 3) ANS = 26
IF (ANS > 0)
   IF (ANS < 11) SKIPTO SERV2
ENDIF
IF (ANS > 10)
   IF (ANS < 19) REASK
ENDIF
IF (ANS > 19)
   IF (ANS < 27) SKIPTTO SERV2
ENDIF
IF (ANS > 26)
   IF (ANS < 29) REASK
ENDIF
IF (ANS > 29)
   IF (ANS < 97) REASK
ENDIF
IF (ANS > 96) SKIPTO SERV2

Q:SERV1CA
T:
OTHER BARRIERS SPECIFY

OPEN-ENDED

TYPE EXACT RESPONSE BELOW

I:
  opn 13 5 22 60 m n

Q:SERV2
T:
(Next,) do you (or members of your household or family) regularly use the public bus system (LTD/Lane Transit District)?

PROBE: Members of your household are people who live with you. Your family is whatever it means to you.

1 YES
2 NO --> SKIPTO SERV2C
3 IF VOLUNTEERED: NO LOCAL BUS SERVICE

7 REFUSED
8 DON'T KNOW --> SKIPTO SERV3
9 NO ANSWER

I:
Key 1-3, 7-9
IF (ANS = 2) SKIPTO SERV2C
IF (ANS = 3) SKIPTO SERV2C
IF (ANS > 3) SKIPTO SERV3

Q:SERV2B
T:
Does the public bus system meet (your/your household members’) needs completely, partly, or not at all?

1 COMPLETELY --> SKIPTO SERV3
2 PARTLY --> SKIPTO SERV3
3 NOT AT ALL --> SKIPTO SERV3

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1-3, 7-9
SKIPTO SERV3

Q:SERV2C
T:
Why not? (Why don’t you (or members of your household or family) regularly use the public bus system?)

PROBE: Which one has been the biggest barrier?

PROBE FROM LIST, CHOOSE ONE

R’S BARRIERS
1 LACK OF KNOWLEDGE
2 FEE FOR SERVICE
3 LITERACY ISSUES
4 LACK OF CHILD/ELDER CARE
5 FEAR OF LAW, OF BEING IDENTIFIED
6 TOO MUCH HASSLE/ TOO TIME-CONSUMING
7 TOO PERSONAL
8 SHAME/ EMBARRASSMENT/ PRIDE
9 NOT INTERESTED/ DON’T NEED IT
10 NOT INTERESTED/ DON’T NEED IT
11 LACK OF KNOWLEDGE
12 FEE FOR SERVICE
13 LITERACY ISSUES
14 LACK OF CHILD/ELDER CARE
15 FEAR OF LAW, OF BEING IDENTIFIED
16 TOO MUCH HASSLE/ TOO TIME-CONSUMING
17 TOO PERSONAL
18 SHAME/ EMBARRASSMENT/ PRIDE
19 NOT INTERESTED/ DON’T NEED IT
20 BAD LOCATION
21 LIMITED HOURS/ HOURS CHANGE
22 STAFF PEOPLE AREN’T NICE
23 CULTURAL INSENSITIVITY
24 WAITING LIST/ CAN’T WAIT
25 CONFUSING RULES, TOO MANY RULES
26 SERVICE NON-EXISTENT IN COMMUNITY
27 SERVICE NON-EXISTENT IN COMMUNITY
28 OTHER AGENCY BARRIER - SPECIFY
29 OTHER AGENCY BARRIER - SPECIFY

CODES 1-10, 20-26 --> SKIPTO SERV3

97 REFUSED
98 DON'T KNOW
99 NO ANSWER

I:
num 1 99 2 0 22 50
IF (SERV2 = 3) ANS = 26
IF (ANS > 0)
    IF (ANS < 8) SKIPTO SERV3
ENDIF
IF (ANS = 8) REASK
IF (ANS = 9) SKIPTO SERV3
IF (ANS > 10)
    IF (ANS < 19) REASK
ENDIF
IF (ANS > 19)
    IF (ANS < 27) SKIPTTO SERV3
ENDIF
IF (ANS > 26)
    IF (ANS < 29) REASK
ENDIF
IF (ANS > 29)
    IF (ANS < 97) REASK
ENDIF
IF (ANS > 96) SKIPTO SERV3

Q:SERV2CA
T:
OTHER BARRIERS - SPECIFY

OPEN-ENDED

TYPE EXACT RESPONSE BELOW
Q:SERV3
T: Have you (or a member of your household or family) ever needed or wanted adult education, job skills, or job training in your community?

PROBE: Members of your household are people who live with you. Your family is whatever it means to you.

1 YES
2 NO --> SKIPTO SERV4
7 REFUSED
8 DON'T KNOW --> SKIPTO SERV3C
9 NO ANSWER

Q:SERV3A
T: Were (you/she/he) able to find adult education, job skills or training in your community that met (your/that person’s) needs (at that time)?

1 YES
2 NO --> SKIPTO SERV3C
3 IF VOLUNTEERED: DID NOT LOOK --> SKIPTO SERV3C
7 REFUSED
8 DON'T KNOW
9 NO ANSWER

Q:SERV3B
T: Did that adult education, job skills or training meet (your/that person’s) needs completely, partly, or not at all (at that time)?

1 COMPLETELY --> SKIPTO SERV4
2 PARTLY --> SKIPTO SERV4
3 NOT AT ALL --> SKIPTO SERV4
7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1-3, 7-9
SKIPTO SERV4

Q: SERV3C
T:
Why not? (What kept (you/that person) from finding adult education, job
skills or training (at that time)?)

PROBE: Which one has been the biggest barrier?

PROBE FROM LIST, CHOOSE ONE

R’S BARRIERS
1 LACK OF KNOWLEDGE
2 FEE FOR SERVICE
3 LITERACY ISSUES
4 LACK OF CHILD/ELDER CARE
5 FEAR OF LAW, OF BEING IDENTIFIED
6 TOO MUCH HASSLE/ TOO TIME-CONSUMING
7 TOO PERSONAL
8 LACK OF TRANSPORTATION/COMMUNICATION
9 SHAME/ EMBARRASSMENT/ PRIDE
10 NOT INTERESTED/ DON’T NEED IT
19 OTHER R BARRIER - SPECIFY
19 OTHER AGENCY BARRIER - SPECIFY

CODES 1-10, 20-26 --> SKIPTO SERV4

97 REFUSED
98 DON’T KNOW
99 NO ANSWER

I:
num 1 99 2 0 22 50
IF (ANS > 0)
    IF (ANS < 11) SKIPTO SERV4
ENDIF
IF (ANS > 10)
    IF (ANS < 19) REASK
ENDIF
IF (ANS > 19)
    IF (ANS < 27) SKIPTTO SERV4
ENDIF
IF (ANS > 26)
    IF (ANS < 29) REASK
ENDIF
IF (ANS > 29)
    IF (ANS < 97) REASK
ENDIF
IF (ANS > 96) SKIPTO SERV4

Q: SERV3CA
T:
OTHER BARRIERS - SPECIFY

OPEN-ENDED

TYPE EXACT RESPONSE BELOW

I:
opn 13 5 22 60 m n

Q:SERV4
T:
Have you (or members of your household or family) ever needed or wanted emergency help for housing, food, clothing, or paying your heating bill or telephone bill?

PROBE: Members of your household are people who live with you. Your family is whatever it means to you.

1 YES
2 NO --> SKIPTO SERV5
7 REFUSED
8 DON'T KNOW --> SKIPTO SERV5
9 NO ANSWER

I:
Key 1,2, 7-9
IF (ANS > 1) SKIPTO SERV5

Q:SERV4A
T:
Were (you/she/he) able to find emergency help (for housing, food, clothing, or utilities) that met (your/her/his/your family’s) needs (at that time)?

1 YES
2 NO --> SKIPTO SERV4C
3 IF VOLUNTEERED: DID NOT LOOK --> SKIPTO SERV4C
7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1-3, 7-9
IF (ANS = 2) SKIPTO SERV4C
IF (ANS = 3) SKIPTO SERV4C
IF (ANS > 3) SKIPTO SERV5

Q:SERV4B
T:
Did that help meet (your/her/his/your family’s) needs completely, partly, or not at all (at that time)?

1 COMPLETELY --> SKIPTO SERV5
2 PARTLY --> SKIPTO SERV5
3 NOT AT ALL --> SKIPTO SERV5
I:
Key 1-3, 7-9
SKIP TO SERV5

Q: SERV4C
T:
Why not? (What kept you from finding emergency help (at that time)?)

PROBE: Which one has been the biggest barrier?

PROBE FROM LIST, CHOOSE ONE

R'S BARRIERS
1 LACK OF KNOWLEDGE
2 FEE FOR SERVICE
3 LITERACY ISSUES
4 LACK OF CHILD/ELDER CARE
5 FEAR OF LAW, OF BEING IDENTIFIED
6 TOO MUCH HASSLE/ TOO TIME-CONSUMING
7 TOO PERSONAL
8 LACK OF TRANSPORTATION/COMMUNICATION
9 SHAME/ EMBARRASSMENT/ PRIDE
10 NOT INTERESTED/ DON'T NEED IT
19 OTHER R BARRIER - SPECIFY

AGENCY'S BARRIERS
20 BAD LOCATION
21 LIMITED HOURS/ HOURS CHANGE
22 STAFF PEOPLE AREN'T NICE
23 CULTURAL INSENSITIVITY
24 WAITING LIST/ CAN'T WAIT
25 CONFUSING RULES, TOO MANY RULES
26 SERVICE NON-EXISTENT IN COMMUNITY
29 OTHER AGENCY BARRIER - SPECIFY

CODES 1-10, 20-26 --> SKIP TO SERV5

97 REFUSED
98 DON'T KNOW
99 NO ANSWER

I:
num 1 99 2 0 22 50
IF (ANS > 0)
  IF (ANS < 11) SKIP TO SERV5
ENDIF
IF (ANS > 10)
  IF (ANS < 19) REASK
ENDIF
IF (ANS > 19)
  IF (ANS < 27) SKIP TO SERV5
ENDIF
IF (ANS > 26)
  IF (ANS < 29) REASK
ENDIF
IF (ANS > 29)
  IF (ANS < 97) REASK
ENDIF
IF (ANS > 96) SKIP TO SERV5
Q:SERV4CA
T:
OTHER BARRIERS - SPECIFY

OPEN-ENDED

TYPE EXACT RESPONSE BELOW

I:
opn 13 5 22 60 m n

Q:SERV5
T:
Have you (or members of your household or family) ever needed or wanted health or medical care in your community, including drug or alcohol treatment, for yourself, a parent, a family member, or a child?

PROBE: This can be any adult or child you care about (not only a relative).

PROBE: Members of your household are people who live with you. Your family is whatever it means to you.

1 YES
2 NO --> SKIPTO SERV6

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1,2, 7-9
IF (ANS > 1) SKIPTO SERV6

Q:SERV5A
T:
Were (you/she/he) able to find health or medical care in your community (including drug or alcohol treatment) that met (your/her/his/your family's) needs (at that time)?

1 YES
2 NO --> SKIPTO SERV5C
3 IF VOLUNTEERED: DID NOT LOOK --> SKIPTO SERV5C

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1-3, 7-9
IF (ANS = 2) SKIPTO SERV5C
IF (ANS = 3) SKIPTO SERV5C
IF (ANS > 3) SKIPTO SERV6

Q:SERV5B
T:
Did that health or medical care meet (your/her/his/your family's) needs completely, partly, or not at all (at that time)?

1 COMPLETELY
2 PARTLY
3 NOT AT ALL

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1-3, 7-9

Q:SERV5C
T:
Has a lack of health insurance, not enough insurance coverage, or insurance problems ever prevented you (or your family members) from getting needed health or medical care in your community (including drug or alcohol treatment)?

1 YES
2 NO

IF SERV5A EQ 1, SKIPTO SERV6, ELSE CONTINUE

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1,2, 7-9
IF (SERV5A = 1) SKIPTO SERV6

Q:SERV5D
T:
Has anything else kept you (or your family) from finding or receiving health or medical care in your community (including drug or alcohol treatment)? (What is that?)

PROBE: Which one has been the biggest barrier?

PROBE FROM LIST, CHOOSE ONE

R’S BARRIERS
1 LACK OF KNOWLEDGE
2 FEE FOR SERVICE
3 LITERACY ISSUES
4 LACK OF CHILD/ELDER CARE
5 FEAR OF LAW, OF BEING IDENTIFIED
6 TOO MUCH HASSLE/ TOO TIME-CONSUMING
7 TOO PERSONAL
8 LACK OF TRANSPORTATION/COMMUNICATION
9 SHAME/ EMBARRASSMENT/ PRIDE
10 NOT INTERESTED/ DON’T NEED IT

AGENCY’S BARRIERS
20 BAD LOCATION
21 LIMITED HOURS/ HOURS CHANGE
22 STAFF PEOPLE AREN’T NICE
23 CULTURAL INSENSITIVITY
24 WAITING LIST/ CAN’T WAIT
25 CONFUSING RULES, TOO MANY RULES
26 SERVICE NON-EXISTENT IN COMMUNITY
29 OTHER AGENCY BARRIER - SPECIFY
19 OTHER R BARRIER - SPECIFY

CODES 1-10, 20-26 --> SKIPTO SERV6
97 REFUSED
98 DON'T KNOW
99 NO ANSWER

I:
num 1 99 2 0 21 50
IF (ANS > 0)
   IF (ANS < 11) SKIPTO SERV6
ENDIF
IF (ANS > 10)
   IF (ANS < 19) REASK
ENDIF
IF (ANS > 19)
   IF (ANS < 27) SKIPTTO SERV6
ENDIF
IF (ANS > 26)
   IF (ANS < 29) REASK
ENDIF
IF (ANS > 29)
   IF (ANS < 97) REASK
ENDIF
IF (ANS > 96) SKIPTO SERV6

Q:SERV5DA
T:
OTHER BARRIERS - SPECIFY

OPEN-ENDED

TYPE EXACT RESPONSE BELOW

I:
opn 13 5 22 60 m n

Q:SERV6
T:

Have you (or members of your household or family) needed or wanted mental health care, counseling, or crisis intervention in your community for yourself, a parent, a family member, or a child?

PROBE: This can be any adult or child you care about (not only a relative).

PROBE: Members of your household are people who live with you. Your family is whatever it means to you.

1 YES
2 NO --> SKIPTO SERV7
7 DON'T KNOW --> SKIPTO SERV7

7 REFUSED
8 DON'T KNOW
9 NO ANSWER
Q:SERV6A
T:
Were (you/she/he) able to find mental health care (counseling, or crisis intervention) in your community that met (your/her/his/your family’s) needs (at that time)?

1 YES  
2 NO --> SKIPTO SERV6C  
3 IF VOLUNTEERED: DID NOT LOOK --> SKIPTO SERV6C

7 REFUSED  
8 DON'T KNOW  
9 NO ANSWER

Q:SERV6B
T:
Did that mental health care (counseling, or crisis intervention) meet (your/her/his/your family’s) needs completely, partly, or not at all (at that time)?

1 COMPLETELY  
2 PARTLY  
3 NOT AT ALL

7 REFUSED  
8 DON'T KNOW  
9 NO ANSWER

Q:SERV6C
T:
Has a lack of health insurance, not enough insurance coverage, or insurance problems ever prevented you (or your family members) from getting mental health care, counseling, or crisis intervention in your community?

1 YES  
2 NO

IF SERV6A EQ 1, SKIPTO SERV7 ELSE CONTINUE

7 REFUSED  
8 DON'T KNOW  
9 NO ANSWER
I:
Key 1,2, 7-9
IF (SERV6A = 1) SKIPTO SERV7
Q:SERV6D
T:
Has anything else kept you (or your family members) from finding mental
health care, counseling, or crisis intervention? (What is that?)

PROBE: Which one has been the biggest barrier?

PROBE FROM LIST, CHOOSE ONE

R’S BARRIERS
1 LACK OF KNOWLEDGE                     AGENCY’S BARRIERS
2 FEE FOR SERVICE                        20 BAD LOCATION
3 LITERACY ISSUES                        21 LIMITED HOURS/ HOURS CHANGE
4 LACK OF CHILD/ELDER CARE               22 STAFF PEOPLE AREN’T NICE
5 FEAR OF LAW, OF BEING IDENTIFIED       23 CULTURAL INSENSITIVITY
6 TOO MUCH HASSLE/ TOO TIME-CONSUMING    24 WAITING LIST/ CAN’T WAIT
7 TOO PERSONAL                           25 CONFUSING RULES, TOO MANY RULES
8 LACK OF TRANSPORTATION/COMMUNICATION   26 SERVICE NON-EXISTENT IN
COMMUNITY
9 SHAME/ EMBARRASSMENT/ PRIDE            29 OTHER AGENCY BARRIER - SPECIFY
10 NOT INTERESTED/ DON’T NEED IT
19 OTHER R BARRIER - SPECIFY

CODES 1-10, 20-26 --> SKIPTO SERV7

97  REFUSED
98  DON’T KNOW
99  NO ANSWER

I:
num 1 99 2 0 22 50
IF (ANS > 0)
   IF (ANS < 11) SKIPTO SERV7
ENDIF
IF (ANS > 10)
   IF (ANS < 19) REASK
ENDIF
IF (ANS > 19)
   IF (ANS < 27) SKIPTO SERV7
ENDIF
IF (ANS > 26)
   IF (ANS < 29) REASK
ENDIF
IF (ANS > 29)
   IF (ANS < 97) REASK
ENDIF
IF (ANS > 96) SKIPTO SERV7
Q:SERV6DA
T:
   OTHER BARRIERS - SPECIFY
OPEN-ENDED

TYPE EXACT RESPONSE BELOW

I:
opn 13 5 22 60 m n

Q:SERV7
T:
Have you (or members of your household or family) ever needed or wanted help solving community alcohol and drug-related problems?

PROBE: For example, getting rid of drug dealers hanging around, arranging drug-prevention programs for youth (such as DARE, or dealing with adults who buy teenagers alcohol).

PROBE: Your community is whatever it means to you.

PROBE: Members of your household are people who live with you. Your family is whatever it means to you.

1 YES
2 NO --> SKIPTO SERV8
7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1,2, 7-9
IF (ANS > 1) SKIPTO SERV8

Q:SERV7A
T:
Were (you/she/he) able to find help (for those community alcohol and drug problems) that met (your/his/her/your community’s) needs (at that time)?

1 YES
2 NO --> SKIPTO SERV7C
3 IF VOLUNTEERED: DID NOT LOOK --> SKIPTO SERV7C

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1-3, 7-9
IF (ANS = 2) SKIPTO SERV7C
IF (ANS = 3) SKIPTO SERV7C
IF (ANS > 3) SKIPTO SERV8

Q:SERV7B
T:
Did that help meet (your/his/her/your community’s) needs completely, partly, or not at all (at that time)?
1 COMPLETELY --> SKIPTO SERV8
2 PARTLY --> SKIPTO SERV8
3 NOT AT ALL --> SKIPTO SERV8
7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1-3, 7-9
SKIPTO SERV 8

Q: SERV7C
T:
Why not? (What kept you from finding help for those community alcohol and drug-related problems (at that time)?)

PROBE: Which one has been the biggest barrier?

PROBE FROM LIST, CHOOSE ONE

R’S BARRIERS
1 LACK OF KNOWLEDGE AGENCY’S BARRIERS
2 FEE FOR SERVICE 20 BAD LOCATION
3 LITERACY ISSUES 21 LIMITED HOURS/ HOURS CHANGE
4 LACK OF CHILD/ELDER CARE 22 STAFF PEOPLE AREN’T NICE
5 FEAR OF LAW, OF BEING IDENTIFIED 23 CULTURAL INSENSITIVITY
6 TOO MUCH HASSLE/ TOO TIME-CONSUMING 24 WAITING LIST/ CAN’T WAIT
7 TOO PERSONAL 25 CONFUSING RULES, TOO MANY RULES
8 LACK OF TRANSPORTATION/COMMUNICATION 26 SERVICE NON-EXISTENT IN COMMUNITY
9 SHAME/ EMBARRASSMENT/ PRIDE 29 OTHER AGENCY BARRIER - SPECIFY
10 NOT INTERESTED/ DON’T NEED IT
19 OTHER R BARRIER - SPECIFY

CODES 1-10, 20-26 --> SKIPTO SERV8

97 REFUSED
98 DON'T KNOW
99 NO ANSWER

I:
num 1 99 2 0 22 50
IF (ANS > 0)
  IF (ANS < 11) SKIPTO SERV8
ENDIF
IF (ANS > 10)
  IF (ANS < 19) REASK
ENDIF
IF (ANS > 19)
  IF (ANS < 27) SKIPTTO SERV8
ENDIF
IF (ANS > 26)
  IF (ANS < 29) REASK
ENDIF
IF (ANS > 29)
IF (ANS < 97) REASK
ENDIF
IF (ANS > 96) SKIPTO SERV8

Q:SERV7CA
T:
OTHER BARRIERS - SPECIFY

OPEN-ENDED

TYPE EXACT RESPONSE BELOW

I:
opn 13 5 22 60 m n

Q:SERV8
T:
Have you (or members of your household or family) ever needed or wanted help for a child who has a learning disability, is a delayed learner, or who needs school enrichment?

PROBE: This may be any child you care about (not just a relative).

    1 YES
    2 NO --> SKIPTO SERV9
    3 IF VOLUNTEERED: NEEDED BUT DID NOT TRY TO FIND --> SKIPTO SERV8C

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1-3, 7-9
IF (ANS = 2) SKIPTO SERV9
IF (ANS = 3) SKIPTO SERV8C
IF (ANS > 3) SKIPTO SERV9

Q:SERV8A
T:
Were (you/she/he) able to find help (for that child) that met (the child’s/your/your family’s) needs (at that time)?

    1 YES
    2 NO --> SKIPTO SERV8C
    3 IF VOLUNTEERED: DID NOT LOOK --> SKIPTO SERV8C

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
Key 1-3, 7-9
IF (ANS = 2) SKIPTO SERV8C
IF (ANS = 3) SKIPTO SERV8C
IF (ANS > 3) SKIPTO SERV9
Q:SERV8B
T:
Did that help meet (the child's/your/your family's) needs completely, partly, or not at all (at that time)?

1 COMPLETELY --> SKIPTO SERV9
2 PARTLY --> SKIPTO SERV9
3 NOT AT ALL --> SKIPTO SERV9

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1-3, 7-9
SKIPTO SERV9

Q:SERV8C
T:
Why not? (What kept you from finding services for that child (at that time)?)

PROBE: Which one has been the biggest barrier?

PROBE FROM LIST, CHOOSE ONE

R’S BARRIERS
1 LACK OF KNOWLEDGE AGENCY’S BARRIERS
2 FEE FOR SERVICE 20 BAD LOCATION
3 LITERACY ISSUES 21 LIMITED HOURS/HOURS CHANGE
4 LACK OF CHILD/ELDER CARE 22 STAFF PEOPLE AREN’T NICE
5 FEAR OF LAW, OF BEING IDENTIFIED 23 CULTURAL INSENSITIVITY
6 TOO MUCH HASSLE/ TOO TIME-CONSUMING 24 WAITING LIST/CAN’T WAIT
7 TOO PERSONAL 25 CONFUSING RULES, TOO MANY RULES
8 LACK OF TRANSPORTATION/COMMUNICATION 26 SERVICE NON-EXISTENT IN COMMUNITY
9 SHAME/ EMBARRASSMENT/ PRIDE 29 OTHER AGENCY BARRIER - SPECIFY
10 NOT INTERESTED/ DON’T NEED IT 19 OTHER R BARRIER - SPECIFY

CODES 1-10, 20-26 --> SKIPTO SERV9

97 REFUSED
98 DON'T KNOW
99 NO ANSWER

I:
num 1 99 2 0 21 50
IF (ANS > 0)
   IF (ANS < 11) SKIPTO SERV9
ENDIF
IF (ANS > 10)
   IF (ANS < 19) REASK
ENDIF
IF (ANS > 19)
   IF (ANS < 27) SKIPTTO SERV9
ENDIF
IF (ANS > 26)
   IF (ANS < 29) REASK
ENDIF
IF (ANS > 29)
   IF (ANS < 97) REASK
ENDIF
IF (ANS > 96) SKIPTO SERV9

Q:SERV8CA
T:
   OTHER BARRIERS - SPECIFY
   OPEN-ENDED
   TYPE EXACT RESPONSE BELOW
I:
opn 13 5 22 60 m n

Q:SERV9
T:
   Have you (or members of your household or family) ever needed or wanted help
   for a child who has a learning disability, a physical disability, or an
   emotional or mental disability?

   PROBE: This may be any child you care about (not just a relative).

   1 YES
   2 NO --> SKIPTO SERV10
   3 IF VOLUNTEERED: NEEDED BUT DID NOT TRY TO FIND --> SKIPTO SERV9C

   7 REFUSED
   8 DON'T KNOW
   9 NO ANSWER
I:
   Key 1-3, 7-9
IF (ANS = 2) SKIPTO SERV10
IF (ANS = 3) SKIPTO SERV9C
IF (ANS > 30 SKIPTO SERV10

Q:SERV9A
T:
   Were (you/she/he) able to find help (for that child) that met (the
   child’s/your/your family’s) needs (at that time)?

   1 YES
   2 NO --> SKIPTO SERV9C
   3 IF VOLUNTEERED: DID NOT LOOK --> SKIPTO SERV9C

   7 REFUSED
   8 DON'T KNOW
   9 NO ANSWER
I:
   Key 1-3, 7-9
IF (ANS = 2) SKIPTO SERV9C
IF (ANS = 3) SKIPTO SERV9C
IF (ANS > 3) SKIPTO SERV10

Q: SERV9B
T: Did that help meet (the child’s/your/your family’s) needs completely, partly, or not at all (at that time)?

   1 COMPLETELY --> SKIPTO SERV10
   2 PARTLY --> SKIPTO SERV10
   3 NOT AT ALL --> SKIPTO SERV10

7 REFUSED
8 DON’T KNOW
9 NO ANSWER

I:
Key 1-3, 7-9
SKIPTO SERV10

Q: SERV9C
T: Why not? (What kept you from finding services for the child with disabilities (at that time)?)

PROBE: Which one has been the biggest barrier?

PROBE FROM LIST, CHOOSE ONE

R’S BARRIERS
1 LACK OF KNOWLEDGE
2 FEE FOR SERVICE
3 LITERACY ISSUES
4 LACK OF CHILD/ELDER CARE
5 FEAR OF LAW, OF BEING IDENTIFIED
6 TOO MUCH HASSLE/ TOO TIME-CONSUMING
7 TOO PERSONAL
8 LACK OF TRANSPORTATION/COMMUNICATION
9 SHAME/ EMBARRASSMENT/ PRIDE
10 NOT INTERESTED/ DON’T NEED IT
11 NOT INTERESTED/ DON’T NEED IT
19 OTHER R BARRIER - SPECIFY

AGENCY’S BARRIERS
20 BAD LOCATION
21 LIMITED HOURS/ HOURS CHANGE
22 STAFF PEOPLE AREN’T NICE
23 CULTURAL INSENSITIVITY
24 WAITING LIST/ CAN’T WAIT
25 CONFUSING RULES, TOO MANY RULES
26 SERVICE NON-EXISTENT IN COMMUNITY
29 OTHER AGENCY BARRIER - SPECIFY

CODES 1-10, 20-26 --> SKIPTO SERV10

97 REFUSED
98 DON’T KNOW
99 NO ANSWER

I:
num 1 99 2 0 22 50
IF (ANS > 0)
   IF (ANS < 11) SKIPTO SERV10
ENDIF
IF (ANS > 10)
IF (ANS < 19) REASK
ENDIF
IF (ANS > 19)
    IF (ANS < 27) SKIPTO SERV10
ENDIF
IF (ANS > 26)
    IF (ANS < 29) REASK
ENDIF
IF (ANS > 29)
    IF (ANS < 97) REASK
ENDIF
IF (ANS > 96) SKIPTO SERV10

Q:SERV9CA
T:
OTHER BARRIERS - SPECIFY

    OPEN-ENDED

    TYPE EXACT RESPONSE BELOW

I:
  opn 13 5 22 60 m n

Q:SERV10
T:
  Have you (or members of your household or family) ever needed or wanted parenting education or support?

    PROBE: For example, have you ever needed or wanted a group or program that would help you handle a problem you were having with a child?

    1 YES
    2 NO --> SKIPTO SERV11
    7 DON'T KNOW --> SKIPTO SERV11

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER

I:
  Key 1,2, 7-9
  IF (ANS > 1) SKIPTO SERV11

Q:SERV10A
T:
  Were (you/she/he) able to find parenting education or support that met (your/her/his/your family's) needs (at that time)?

    1 YES
    2 NO --> SKIPTO SERV10C
    3 IF VOLUNTEERED: DID NOT LOOK --> SKIPTO SERV10C

    7 REFUSED
    8 DON'T KNOW
    9 NO ANSWER
I:
Key 1-3, 7-9
IF (ANS = 1) SKIPTO SERV10C
IF (ANS = 2) SKIPTO SERV10C
IF (ANS > 3) SKIPTO SERV11

Q: SERV10B
T:
Did that parenting education or support meet (your/her/his/your family’s) needs completely, partly, or not at all (at that time)?

1 COMPLETELY --> SKIPTO SERV11
2 PARTLY --> SKIPTO SERV11
3 NOT AT ALL --> SKIPTO SERV11

7 REFUSED
8 DON’T KNOW
9 NO ANSWER

I:
Key 1-3, 7-9
SKIPTO SERV11

Q: SERV10C
T:
Why not? (What kept you from finding parenting education or support (at that time)?)

PROBE: Which one has been the biggest barrier?

PROBE FROM LIST, CHOOSE ONE

R’S BARRIERS
1 LACK OF KNOWLEDGE
2 FEE FOR SERVICE
3 LITERACY ISSUES
4 LACK OF CHILD/ELDER CARE
5 FEAR OF LAW, OF BEING IDENTIFIED
6 TOO MUCH HASSLE/ TOO TIME-CONSUMING
7 TOO PERSONAL
8 LACK OF TRANSPORTATION/COMMUNICATION
9 SHAME/ EMBARRASSMENT/ PRIDE
10 NOT INTERESTED/ DON’T NEED IT
19 OTHER R BARRIER - SPECIFY

AGENCY’S BARRIERS
20 BAD LOCATION
21 LIMITED HOURS/ HOURS CHANGE
22 STAFF PEOPLE AREN’T NICE
23 CULTURAL INSENSITIVITY
24 WAITING LIST/ CAN’T WAIT
25 CONFUSING RULES, TOO MANY RULES
26 SERVICE NON-EXISTENT IN COMMUNITY
29 OTHER AGENCY BARRIER - SPECIFY

CODES 1-10, 20-26 --> SKIPTO SERV11

97 REFUSED
98 DON’T KNOW
99 NO ANSWER

I:
num 1 99 2 0 22 50
IF (ANS > 0)
IF (ANS < 11) SKIPTO SERV11
ENDIF
IF (ANS > 10)
   IF (ANS < 19) REASK
ENDIF
IF (ANS > 19)
   IF (ANS < 27) SKIPTTO SERV11
ENDIF
IF (ANS > 26)
   IF (ANS < 29) REASK
ENDIF
IF (ANS > 29)
   IF (ANS < 97) REASK
ENDIF
IF (ANS > 96) SKIPTO SERV11

Q:SERV10CA
T:
OTHER BARRIERS - SPECIFY

OPEN-ENDED

TYPE EXACT RESPONSE BELOW

I:
opn 13 5 22 60 m n

Q:SERV11
T:
Have you (or members of your household or family) ever needed or wanted childcare services in your community?

PROBE FOR "NEVER HAD CHILDREN": Have you ever needed to arrange childcare for a visitor, neighbor, or someone else?

PROBE FOR "CHILDREN GROWN UP AND GONE": Have you *ever* needed childcare services.

1 YES
2 NO --> SKIPTO SERV12
7 DON'T KNOW --> SKIPTO SERV12

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1,2,7-9
IF (ANS > 1) SKIPTO SERV12

Q:SERV11A
T:
Were (you/she/he) able to find childcare services that met (your/his/her/your family’s) needs (at that time)?

1 YES
2 NO --> SKIPTO SERV11C
3 IF VOLUNTEERED: DID NOT LOOK --> SKIPTO SERV11C

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1-3, 7-9
IF (ANS = 2) SKIPTO SERV11C
IF (ANS = 3) SKIPTO SERV11C
IF (ANS > 3) SKIPTO SERV12

Q: SERV11B
T:
Did those childcare services meet (your/his/her/your family’s) needs completely, partly, or not at all (at that time)?

1 COMPLETELY --> SKIPTO SERV12
2 PARTLY --> SKIPTO SERV12
3 NOT AT ALL --> SKIPTO SERV12

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1-3, 7-9
SKIPTO SERV12

Q: SERV11C
T:
Why not? (What kept (you/her/him) from finding childcare services (at that time)?)

PROBE: Which one has been the biggest barrier?

PROBE FROM LIST, CHOOSE ONE

R’S BARRIERS
1 LACK OF KNOWLEDGE
2 FEE FOR SERVICE
3 LITERACY ISSUES
4 LACK OF CHILD/ELDER CARE
5 FEAR OF LAW, OF BEING IDENTIFIED
6 TOO MUCH HASSLE/ TOO TIME-CONSUMING
7 TOO PERSONAL
8 LACK OF TRANSPORTATION/COMMUNICATION
9 SHAME/ EMBARRASSMENT/ PRIDE
10 NOT INTERESTED/ DON’T NEED IT
19 OTHER R BARRIER - SPECIFY
20 BAD LOCATION
21 LIMITED HOURS/ HOURS CHANGE
22 STAFF PEOPLE AREN’T NICE
23 CULTURAL INSENSITIVITY
24 WAITING LIST/ CAN’T WAIT
25 CONFUSING RULES, TOO MANY RULES
26 SERVICE NON-EXISTENT IN COMMUNITY
29 OTHER AGENCY BARRIER - SPECIFY

CODES 1-10, 20-26 --> SKIPTO SERV12

97 REFUSED
98 DON'T KNOW
99 NO ANSWER

I:
num 1 99 2 0 22 50
IF (ANS > 0)
    IF (ANS < 11) SKIPTO SERV12
ENDIF
IF (ANS > 10)
    IF (ANS < 19) REASK
ENDIF
IF (ANS > 19)
    IF (ANS < 27) SKIPTTO SERV12
ENDIF
IF (ANS > 26)
    IF (ANS < 29) REASK
ENDIF
IF (ANS > 29)
    IF (ANS < 97) REASK
ENDIF
IF (ANS > 96) SKIPTO SERV12

Q:SERV11CA
T:
OTHER BARRIERS - SPECIFY

OPEN-ENDED

TYPE EXACT RESPONSE BELOW

I:
opn 13 5 22 60 m n

Q:SERV12
T:
Have you (or members of your household or family) ever taken part in community recreation, culture, or art programs for children and families?

PROBE: For example, sports programs (like Kidsports), plays, or choirs (either after school or part of school).

1 YES
2 NO --> SKIPTO SERV12C
7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1,2, 7-9
IF (ANS = 2) SKIPTO SERV12C
IF (ANS > 2) SKIPTO SERV13

Q:SERV12B
T:
Did those (recreation, culture, or art) programs meet (your/his/her/your
family’s) needs completely, partly, or not at all (at that time)?

1 COMPLETELY --> SKIPTO SERV13
2 PARTLY --> SKIPTO SERV13
3 NOT AT ALL --> SKIPTO SERV13

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1-3, 7-9
SKIPTO SERV13

Q:SERV12C
T:
Why not? (Why haven’t you (or members of your household or family) taken part in community recreation, culture, or art programs?)

PROBE: Which one has been the biggest reason?

PROBE FROM LIST, CHOOSE ONE

R’S BARRIERS
1 LACK OF KNOWLEDGE                     AGENCY’S BARRIERS
2 FEE FOR SERVICE                        20 BAD LOCATION
3 LITERACY ISSUES                        21 LIMITED HOURS/ HOURS CHANGE
4 LACK OF CHILD/ELDER CARE               22 STAFF PEOPLE AREN’T NICE
5 FEAR OF LAW, OF BEING IDENTIFIED       23 CULTURAL INSENSIVITY
6 TOO MUCH HASSLE/ TOO TIME-CONSUMING    24 WAITING LIST/ CAN’T WAIT
7 TOO PERSONAL                           25 CONFUSING RULES, TOO MANY RULES
8 LACK OF TRANSPORTATION/COMMUNICATION   26 SERVICE NON-EXISTENT IN COMMUNITY
9 SHAME/ EMBARRASSMENT/ PRIDE            29 OTHER AGENCY BARRIER - SPECIFY
10 NOT INTERESTED/ DON’T NEED IT
19 OTHER R BARRIER - SPECIFY

CODES 1-10, 20-26 --> SKIPTO SERV13

97 REFUSED
98 DON'T KNOW
99 NO ANSWER

I:
num 1 99 2 0 22 50
IF (ANS > 0)
    IF (ANS < 11) SKIPTO SERV13
ENDIF
IF (ANS > 10)
    IF (ANS < 19) REASK
ENDIF
IF (ANS > 19)
    IF (ANS < 27) SKIPTTO SERV13
ENDIF
IF (ANS > 26)
    IF (ANS < 29) REASK
Q:SERV12CA
T:
OTHER BARRIERS - SPECIFY

OPEN-ENDED

TYPE EXACT RESPONSE BELOW

I:
opn 13 5 22 60 m n

Q:SERV13
T:
Have you (or members of your household or family) ever needed or wanted a special adult who would volunteer to mentor a child or teenager, to be a positive role model, to help with homework, to tutor, and do things like that?

PROBE: This may be any child you care about (not just your own child or relative).

PROBE: such as a Big Brother/Big Sister program, Committed Partners for Youth, or an after-school homework club.

1 YES
2 NO --> SKIPTO SERV14

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1,2, 7-9
IF (ANS > 1) SKIPTO SERV14

Q:SERV13A
T:
Were (you/she/he) able to find a special adult or mentor that met (the child’s/your/your family’s) needs (at that time)?

1 YES
2 NO --> SKIPTO SERV13C
3 IF VOLUNTEERED: DID NOT LOOK --> SKIPTO SERV13C

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1-3, 7-9
IF (ANS = 2) SKIPTO SERV13C
IF (ANS = 3) SKIPTO SERV13C
IF (ANS > 3) SKIPTO SERV14

Q:SERV13B
T:
Did that a special adult meet (the child’s/your/your family’s) needs completely, partly, or not at all (at that time)?

   1 COMPLETELY --> SKIPTO SERV14
   2 PARTLY --> SKIPTO SERV14
   3 NOT AT ALL --> SKIPTO SERV14

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1-3, 7-9
SKIPTO SERV14

Q:SERV13C
T:
Why not? (What kept you from finding a special adult or mentor (at that time)?)

PROBE: Which one has been the biggest barrier?

PROBE FROM LIST, CHOOSE ONE

R'S BARRIERS
1 LACK OF KNOWLEDGE       AGENCY'S BARRIERS
2 FEE FOR SERVICE          20 BAD LOCATION
3 LITERACY ISSUES          21 LIMITED HOURS/ HOURS CHANGE
4 LACK OF CHILD/ELDER CARE 22 STAFF PEOPLE AREN'T NICE
5 FEAR OF LAW, OF BEING IDENTIFIED 23 CULTURAL INSENSITIVITY
6 TOO MUCH HASSLE/TOO TIME-CONSUMING 24 WAITING LIST/ CAN'T WAIT
7 TOO PERSONAL              25 CONFUSING RULES, TOO MANY RULES
8 LACK OF TRANSPORTATION/COMMUNICATION 26 SERVICE NON-EXISTENT IN COMMUNITY
9 SHAME/ EMBARRASSMENT/ PRIDE 29 OTHER AGENCY BARRIER - SPECIFY
10 NOT INTERESTED/ DON'T NEED IT
19 OTHER R BARRIER - SPECIFY

CODES 1-10, 20-26 --> SKIPTO SERV14

97 REFUSED
98 DON'T KNOW
99 NO ANSWER

I:
num 1 99 2 0 22 50
IF (ANS > 0)
   IF (ANS < 11) SKIPTO SERV14
ENDIF
IF (ANS > 10)
   IF (ANS < 19) REASK

ENDIF
IF (ANS > 19)
   IF (ANS < 27) SKIPTO SERV14
ENDIF
IF (ANS > 26)
   IF (ANS < 29) REASK
ENDIF
IF (ANS > 29)
   IF (ANS < 97) REASK
ENDIF
IF (ANS > 96) SKIPTO SERV14

Q:SERV13CA
T:
   OTHER BARRIERS - SPECIFY

       OPEN-ENDED

       TYPE EXACT RESPONSE BELOW

I:
opn 13 5 22 60 m n

Q:SERV14
T:
   Have you (or members of your household or family) ever needed or wanted an alternative to the public school system for a child?

   PROBE: This may be any child you care about (not just your own child or relative).

       1 YES
       2 NO --> SKIPTO SERVGEN
       3 IF VOLUNTEERED: DID NOT LOOK --> SKIPTO SERV14C

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1-3, 7-9
IF (ANS = 2) SKIPTO SERVGEN
IF (ANS = 3) SKIPTO SERV14C
IF (ANS > 3) SKIPTO SERVGEN

Q:SERV14A
T:
   Were (you/she/he) able to find an alternative school or educational program that met (the child’s/your/your family’s) needs (at that time)?

       1 YES
       2 NO --> SKIPTO SERV14C
       3 IF VOLUNTEERED: DID NOT LOOK --> SKIPTO SERV14C

7 REFUSED
8 DON'T KNOW
9  NO ANSWER

I:
Key 1-3, 7-9
IF (ANS = 2) SKIPTO SERV14C
IF (ANS = 3) SKIPTO SERVGEN
IF (ANS > 3) SKIPTO SERVGEN

Q:SERV14B
T:
Did that alternative school or educational program meet (the child’s/your/your family’s) needs completely, partly, or not at all (at that time)?

1 COMPLETELY --&gt; SKIPTO SERVGEN
2 PARTLY --&gt; SKIPTO SERVGEN
3 NOT AT ALL --&gt; SKIPTO SERVGEN

7  REFUSED
8  DON'T KNOW
9  NO ANSWER

I:
Key 1-3, 7-9
SKIPTO SERVGEN

Q:SERV14C
T:
Why not? (What kept you from finding an alternative school or educational program (at that time)?)

PROBE: Which one has been the biggest barrier?

PROBE FROM LIST, CHOOSE ONE

R’S BARRIERS
1 LACK OF KNOWLEDGE                     AGENCY’S BARRIERS
2 FEE FOR SERVICE                        20 BAD LOCATION
3 LITERACY ISSUES                        21 LIMITED HOURS/ HOURS CHANGE
4 LACK OF CHILD/ELDER CARE               22 STAFF PEOPLE AREN’T NICE
5 FEAR OF LAW, OF BEING IDENTIFIED       23 CULTURAL INSENSITIVITY
6 TOO MUCH HASSLE/ TOO TIME-CONSUMING    24 WAITING LIST/ CAN’T WAIT
7 TOO PERSONAL                           25 CONFUSING RULES, TOO MANY RULES
8 LACK OF TRANSPORTATION/COMMUNICATION   26 SERVICE NON-EXISTENT IN COMMUNITY
9 SHAME/ EMBARRASSMENT/ PRIDE            29 OTHER AGENCY BARRIER - SPECIFY
10 NOT INTERESTED/ DON’T NEED IT
19 OTHER R BARRIER - SPECIFY

CODES 1-10, 20-26 --&gt; SKIPTO SERVGEN

97  REFUSED
98  DON'T KNOW
99  NO ANSWER

I:
num 1 99 2 0 22 50
IF (ANS > 0)
   IF (ANS < 11) SKIPTO SERVGEN
ENDIF
IF (ANS > 10)
   IF (ANS < 19) REASK
ENDIF
IF (ANS > 19)
   IF (ANS < 27) SKIPTTO SERVGEN
ENDIF
IF (ANS > 26)
   IF (ANS < 29) REASK
ENDIF
IF (ANS > 29)
   IF (ANS < 97) REASK
ENDIF
IF (ANS > 96) SKIPTO SERVGEN
Q:SERV14CA
T:
   OTHER BARRIERS - SPECIFY
       OPEN-ENDED
       TYPE EXACT RESPONSE BELOW
I:
opn 13 5 22 60 m n
Q:SERVGEN
T:
   We are over halfway done with the survey now, and I would like to thank you
   sincerely for your time and attention to these questions. Overall, do you think
   that the services available to children and families in your community are
   excellent, good, fair or poor?

   1 EXCELLENT
   2 GOOD
   3 FAIR
   4 POOR

   7 REFUSED
   8 DON'T KNOW
   9 NO ANSWER
I:
   Key 1-4, 7-9
Q:STRONG
T:
   What do you think is your community’s one greatest strength for children and
   families?

       OPEN-ENDED
       TYPE EXACT RESPONSE BELOW
If there were one thing you could change or improve for children and families in your community, what would it be?

OPEN-ENDED

TYPE EXACT RESPONSE BELOW

Have you taken part in any form of organized sports activities in your community in the past year?

1 YES
2 NO
7 REFUSED
8 DON'T KNOW
9 NO ANSWER

Do you belong to any other clubs or organizations in your community?

1 YES
2 NO
7 REFUSED
8 DON'T KNOW
9 NO ANSWER

Do you regularly take part in any church, synagogue, or religious organization?

1 YES
2 NO
7 REFUSED
8 DON'T KNOW
9 NO ANSWER
Have you ever worked with others in your community to try to solve a community problem?

1 YES
2 NO

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

Think about children walking around your community at night. Overall, do you think they are very safe, somewhat safe, or not safe (walking around your community at night)?

PROBE: Even if you never let them walk round at night, how safe do you think they would be if they were to?

1 VERY SAFE
2 SOMEWHAT SAFE
3 NOT VERY SAFE
4 NOT AT ALL SAFE
5 IF VOLUNTEERED: IT DEPENDS

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

How safe are children walking around your community during the day?

PROBE: (Would you say) very safe, somewhat safe, not very safe, or not at all safe?

1 VERY SAFE
2 SOMEWHAT SAFE
3 NOT VERY SAFE
4 NOT AT ALL SAFE
5 IF VOLUNTEERED: IT DEPENDS

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1-5, 7-9

Q:SAFE3
T:
In your personal experience in the past 12 months, would you say that safety in your community is getting better, staying about the same, or getting worse?


PROBE IF R HAS BEEN THERE LESS THAN 12 MONTHS: Since you lived there.

1 BETTER
2 ABOUT THE SAME
3 WORSE

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1-3, 7-9

Q:SCHDIST
T:
I need to end the survey with a few questions about you. First, what school district do you live in?

01 BETHEL #52
02 BLACHLY TRIANGLE LAKE #90 (HORTON)
03 COTTAGE GROVE/SOUTH LANE/LORANE/DORENA
04 CRESWELL
05 CROW APPLEGATE #66
06 DRAIN/NORTH DOUGLAS
07 EUGENE #4J
08 FERN RIDGE #28J (NOTI, VENETA, ELMIRA)
09 FLORENCE/SIUSLAW # 97J
10 HARRISBURG #46, HARRISBURG HIGH #U5J
11 JUNCTION CITY #69J
12 LANE EDUC SERVICE DISTRICT
14 LOWELL #71
15 MAPLETON #32
16 MARCOLA #79J
17 MCKENZIE #68 (BLUE RIVER, FINN ROCK, LEABURG)
18 MONROE
20 OAKRIDGE-WESTFIR
21 PLEASANT HILL #1
22 REEDSPORT GARDINER #105
23 SPRINGFIELD #19
24 OTHER

97 REFUSED
98 DON'T KNOW
99 NO ANSWER
I:
num 1 99 2 0 20 10
IF (ANS > 24)
   IF (ANS < 97) REASK
ENDIF

Q: LANE
T:
Have you lived in Lane County for more than one year?

   1 YES
   2 NO

   7 REFUSED
   8 DON'T KNOW
   9 NO ANSWER

I:
Key 1,2, 7-9

Q: AGE
T:
In what year were you born?

   RECORD YEAR________

   9997 REFUSED
   9998 DON'T KNOW
   9999 NO ANSWER

I:
num 1 9999 4 0 24 10
IF (ANS < 1885) reask
IF (ANS < 9997) reask
ENDIF

Q: SEX
T:
(This may sound silly, but) Are you male or female?

   1 MALE
   2 FEMALE

   7 REFUSED
   8 DON'T KNOW
   9 NO ANSWER

I:
Key 1,2, 7-9

Q: RACE
T:
What is your race?

   PROBE FROM LIST: Are you...
1 WHITE/CAUCASIAN
2 BLACK/AFRICAN AMERICAN
3 ASIAN/PACIFIC ISLANDER
4 AMERICAN INDIAN
5 ALASKA NATIVE (ESKIMO, ALEUT, INUIT)
6 HISPANIC, LATINO, CHICANO, LATIN AMERICAN, MEXICAN
7 (IF VOLUNTEERED) MIXED RACE

97 REFUSED
98 DON'T KNOW
99 NO ANSWER

I:
num 1 99 2 0 20 10
If (ANS > 7)
    If (ANS < 97) reask
EndIf

Q:EDUC
T:
What is the highest level of education you have completed?

PROBE FROM LIST

1 0-8 YEARS, NO GED
1 8-12 YEARS, NO HIGH SCHOOL DIPLOMA OR GED
2 HIGH SCHOOL DIPLOMA OR GED
3 SOME COLLEGE, NO DEGREE
4 ASSOCIATE’S DEGREE
5 BACHELORS DEGREE
6 MASTERS DEGREE
7 DOCTORATE OR PROFESSIONAL DEGREE

97 REFUSED
98 DON'T KNOW
99 NO ANSWER

I:
num 1 99 2 0 20 10
If (ANS > 7)
    If (ANS < 97) reask
EndIf

Q:EMPLOY1
T:
Are you currently working for pay, either full time or part time?

IF NO, PROBE: Are you retired, looking for work, keeping house, taking classes, disabled, or something else?

1 EMPLOYED, OR SICK/ON VACATION FROM REGULAR JOB
2 RETIRED
3 LOOKING FOR WORK / UNEMPLOYED
4 KEEPING HOUSE
5 STUDENT TAKING CLASSES, GOING TO SCHOOL, ON BREAK FROM SCHOOL
6 DISABLED /UNABLE TO WORK
7 VOLUNTEER WORK ONLY
8 OTHER, DOING NOTHING, HANGING OUT AND NOT LOOKING FOR WORK

97 REFUSED
98 DON'T KNOW
99 NO ANSWER

I:
num 1 99 2 0 20 10
If (ANS > 8)
  If (ANS < 97) reask
EndIf

Q:MARSTAT
T:
What is your marital status?

PROBE: Are you currently married, never married, divorced, separated, widowed, or cohabiting unmarried?

PROBE IF R SAYS "SINGLE": Are you never married, divorced, separated, or widowed?

  1 MARRIED
  2 NEVER MARRIED
  3 DIVORCED
  4 SEPARATED
  5 WIDOWED
  6 COHABITING

  7 REFUSED
  8 DON'T KNOW
  9 NO ANSWER

I:
Key 1-9

Q:PARENT
T:
Are you a parent or stepparent?

  1 YES
  2 NO

  7 REFUSED
  8 DON'T KNOW
  9 NO ANSWER

I:
Key 1,2, 7-9

Q:HHKIDS
T:
Are there any children ages 18 or younger living in your home (now)?
NOTE: INCLUDE ANY CHILD LIVING THERE (STEPCHILD, FOSTER CHILD, GRANDCHILD, FRIEND’S CHILD), AND CHILDREN OF NON-CUSTODIAL PARENTS IF THEY VISIT FREQUENTLY.

1 YES
2 NO --> SKIPTO INCOME1

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1,2, 7-9
IF (ANS > 1) SKIPTO INCOME1
Q:HHKIDS1
T:
Do you have any children ages 0-2 living in your home (now)?

NOTE: INCLUDE ANY CHILD LIVING THERE (STEPCHILD, FOSTER CHILD, GRANDCHILD, FRIEND’S CHILD), AND CHILDREN OF NON-CUSTODIAL PARENTS IF THEY VISIT FREQUENTLY.

1 YES
2 NO

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1,2, 7-9
Q:HHKIDS2
T:
(What about/Do you have any) children ages 3-5 (living in your home) (now)?

NOTE: INCLUDE ANY CHILD LIVING THERE (STEPCHILD, FOSTER CHILD, GRANDCHILD, FRIEND’S CHILD), AND CHILDREN OF NON-CUSTODIAL PARENTS IF THEY VISIT FREQUENTLY.

1 YES
2 NO

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1,2, 7-9
Q:HHKIDS3
T:
(What about/Do you have any) children ages 6-8 (living in your home) (now)?

NOTE: INCLUDE ANY CHILD LIVING THERE (STEPCHILD, FOSTER CHILD, GRANDCHILD, FRIEND’S CHILD), AND CHILDREN OF NON-CUSTODIAL PARENTS IF THEY VISIT
FREQUENTLY.

1 YES
2 NO

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1,2, 7-9

Q: HHKIDS4
T: (What about/Do you have any) children ages 9-12 (living in your home) (now)?

NOTE: INCLUDE ANY CHILD LIVING THERE (STEPCHILD, FOSTER CHILD, GRANDCHILD, FRIEND’S CHILD), AND CHILDREN OF NON-CUSTODIAL PARENTS IF THEY VISIT FREQUENTLY.

1 YES
2 NO

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1,2, 7-9

Q: HHKIDS5
T: (What about/Do you have any) children ages 13-15 (living in your home) (now)?

NOTE: INCLUDE ANY CHILD LIVING THERE (STEPCHILD, FOSTER CHILD, GRANDCHILD, FRIEND’S CHILD), AND CHILDREN OF NON-CUSTODIAL PARENTS IF THEY VISIT FREQUENTLY.

1 YES
2 NO

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1,2, 7-9

Q: HHKIDS6
T: (What about/Do you have any) children ages 16-18 (living in your home) (now)?

NOTE: INCLUDE ANY CHILD LIVING THERE (STEPCHILD, FOSTER CHILD, GRANDCHILD, FRIEND’S CHILD), AND CHILDREN OF NON-CUSTODIAL PARENTS IF THEY VISIT FREQUENTLY.
Q: CHHELP1
T: Most everyone has problems with their children at one time or another. The next few questions are about how you deal with those problems. How often do you work through the problems yourself --- never, sometimes, or often?

1 NEVER  
2 SOMETIMES  
3 OFTEN  

7 REFUSED  
8 DON'T KNOW  
9 NO ANSWER  

I: 
Key 1-3, 7-9  

Q: CHHELP2
T: How often do you turn to other adults in your household, such as your spouse or partner (when you are having problems with your child)?

PROBE: Never, sometimes, or often?

1 NEVER  
2 SOMETIMES  
3 OFTEN  
4 IF VOLUNTEERED: NO OTHER ADULTS IN HOUSEHOLD  

7 REFUSED  
8 DON'T KNOW  
9 NO ANSWER  

I: 
Key 1-4, 7-9  

Q: CHHELP3
T: (How often do you turn to/What about) neighbors, friends and family members outside your household?

PROBE: Never, sometimes, or often?

1 NEVER  
2 SOMETIMES  
3 OFTEN
7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1-3, 7-9

Q: CHHELP4
T: Have you ever turned to people in a religious organization (for help with your child)?
   1 YES
   2 NO

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1,2, 7-9

Q: CHHELP7
T: (Have you ever turned to/What about) school teachers or school counselors?
   1 YES
   2 NO

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1,2, 7-9

Q: CHHELP8
T: (Have you ever turned to/What about) private professionals?
   PROBE: Like a pediatrician, psychologist or counselor.
   1 YES
   2 NO

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1,2, 7-9

Q: CHHELP9
T: (Have you ever turned to/What about) social service agencies?
PROBE: State or local government or nonprofit social service agencies.

1 YES
2 NO

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1,2, 7-9

Q: INCOME1
T:
Is your total annual household income, from all sources, before taxes, over or under $35,000?

PROBE: Include money from jobs (wages, salary, tips, bonuses), interest, dividends, child support, alimony, welfare, social security, disability and retirement payments, net income from a business, farm or rent, or any other money income received by members of your family. Do not include lump-sum payments, such as money from an inheritance or sale of a home.

1 OVER $35,000 --> SKIPTO INCOME4
2 UNDER $35,000

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1,2, 7-9

C: 1 "UNDER $15,000"
C: 2 "$15,000 - $25,000"
C: 3 "$25,000 - $35,000"
C: 4 "$35,000 - $50,000"
C: 5 "$50,000 - $75,000"
C: 6 "OVER $75,000"
IF (ANS = 7) INCOME = 7
IF (ANS = 8) INCOME = 8
IF (ANS = 8) INCOME = 9
IF (ANS = 1) SKIPTO INCOME4
IF (ANS > 2) SKIPTO ENDING1

Q: INCOME2
T:
Is it over or under $25,000?

PROBE: Is your total annual household income, from all sources, before taxes, over or under $25,000?

1 OVER $25,000 --> SKIPTO ENDING1
2 UNDER $25,000
7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1,2, 7-9
C: 1 "UNDER $15,000"
C: 2 "$15,000 - $25,000"
C: 3 "$25,000 - $35,000"
C: 4 "$35,000 - $50,000"
C: 5 "$50,000 - $75,000"
C: 6 "OVER $75,000"
IF (ANS = 1) INCOME = 1
IF (ANS = 2) INCOME = 2
IF (ANS = 7) INCOME = 7
IF (ANS = 8) INCOME = 8
IF (ANS = 8) INCOME = 9
IF (ANS <> 2) SKIPTO ENDING1

Q: INCOME3
T:
Is it over or under $15,000?

  1 OVER $15,000 ---> SKIPTO ENDING1
  2 UNDER $15,000 ---> SKIPTO ENDING1

  7 REFUSED
  8 DON'T KNOW
  9 NO ANSWER

I:
Key 1,2, 7-9
C: 1 "UNDER $15,000"
C: 2 "$15,000 - $25,000"
C: 3 "$25,000 - $35,000"
C: 4 "$35,000 - $50,000"
C: 5 "$50,000 - $75,000"
C: 6 "OVER $75,000"
IF (ANS = 1) INCOME = 3
IF (ANS = 7) INCOME = 7
IF (ANS = 8) INCOME = 8
IF (ANS = 8) INCOME = 9
IF (ANS <> 2) SKIPTO ENDING1

Q: INCOME4
T:
Is it over or under $50,000?

  1 OVER $50,000
  2 UNDER $50,000 ---> SKIPTO ENDING1

  7 REFUSED
  8 DON'T KNOW
  9 NO ANSWER

I:
Key 1,2, 7-9
C: 1 "UNDER $15,000"
C: 2 "$15,000 - $25,000"
C: 3 "$25,000 - $35,000"
C: 4 "$35,000 - $50,000"
C: 5 "$50,000 - $75,000"
C: 6 "OVER $75,000"
IF (ANS = 2) INCOME = 4
IF (ANS = 7) INCOME = 7
IF (ANS = 8) INCOME = 8
IF (ANS = 8) INCOME = 9
IF (ANS <> 1) SKIPTO ENDING1

Q: INCOME5
T:
Is it over or under $75,000

1 OVER $75,000
2 UNDER $75,000

7 REFUSED
8 DON'T KNOW
9 NO ANSWER

I:
Key 1,2, 7-9
C: 1 "UNDER $15,000"
C: 2 "$15,000 - $25,000"
C: 3 "$25,000 - $35,000"
C: 4 "$35,000 - $50,000"
C: 5 "$50,000 - $75,000"
C: 6 "OVER $75,000"
IF (ANS = 1) INCOME = 6
IF (ANS = 2) INCOME = 5
IF (ANS = 7) INCOME = 7
IF (ANS = 8) INCOME = 8
IF (ANS = 9) INCOME = 9

Q: ENDING1
T:
Is there anything you would like to add, in your own words, about child and family services in your community?

OPEN-ENDED

TYPE EXACT RESPONSE BELOW

I:
opn 13 5 22 60 m n

Q: INTCOMM
T:
On behalf of the Lane Commission on Children and Families, I thank you sincerely for your time and opinions on these questions. Have a nice (day/evening). Good-bye.
INTERVIEWERS: PLEASE ADD ANY COMMENTS PERTINENT TO THE STUDY GOALS.

PRESS "ENTER" WHEN DONE  ***  DO NOT HIT CTRL/END  ***

I:
  opn 13 5 22 60 m n

Q:INTID
T:
  INTERVIEWER: NICE JOB! PLEASE ENTER YOUR ID NUMBER BELOW.
I:
  num 1 999 3 0 20 10
  CPL
  DISPOS = 26
  ENDQUEST

Q:NOQAL
T:
  I'm sorry to have bothered you. I can only interview adults age 18 and over.
  Good-bye.

    PRESS 1 TO DISQUALIFY

I:
  KEY 1
  DISPOS = 22