# National Assessment of Adult Literacy:

# English Background Questionnaire

#### Instructions for Reading NAAL English Background Questionnaire

The NAAL background questionnaire is designed to be administered using a Computer Assisted Personal Interviewing (CAPI) system. Interviewers read the questions aloud to respondents from the screens of laptop computers, and they record respondents' answers directly on the computers. The interviewers read aloud response options that are written in lower-case letters, but do not read aloud the response options that are written in upper-case letters.

Administering the background questionnaire using a CAPI system allows for the inclusion of complex skip patterns that target questions only at respondents in a particular subgroup. However, these complex skip patterns make the background questionnaire difficult to follow on paper. Skip patterns are indicated on the paper version of the background questionnaire in two different ways.

For some items where a respondent's choice indicates that he or she should skip to a particular item, the skip pattern is indicated in parenthesis following the response item. For example, if a respondent answers "No" to question A-9, "Have you ever taken a class in the United States to learn English-as-a-second-language, sometimes called an ESL class?," the respondent skips to question A-11, since the question is about how long ago he or she took the class is not relevant for this respondent. If the respondent answers "Yes" to question A-9, the respondent continues to question A-10.

When skip patterns are based on responses to one or more earlier questions in the survey, the skip patterns are indicated in a box that appears before the item that some respondents may skip. For example, question A-4 is skipped by some respondents based on their answer to A-1. The box inserted before question A-4 describes the skip pattern.

For all questions, interviewers had the option to code responses "Don't Know" or "Refused" when appropriate.

# National Study Of America's Adults

#### **BACKGROUND QUESTIONNAIRE**

IF R IS NOT SCREENER R:
Hello, I am (NAME) from Westat. My
organization is helping the United States
Department of Education with a very
important survey about how adults use
printed materials. Recently, another
member of your household told me who lives
here. Based on this information, you were
selected at random to take part in the
survey.

IF R IS SCREENER R: You have been selected to participate in the survey.

I will ask you a short set of questions about your background, education, and work experiences. Then, I will give you a booklet containing exercises based on printed materials, such as newspapers, maps, stories, brochures, forms, and advertisements. Others who have completed these exercises found them interesting and fun. The entire survey will take approximately 90 minutes to complete, and you will be paid \$30 for your participation.

Your participation in this survey is voluntary and very important. All of your answers will be kept strictly confidential. All information will be reported for a group as a whole and your responses will not be linked to your name. You do not have to answer any questions you do not want to answer.

IF R REQUESTS MORE INFORMATION ABOUT PURPOSE OF SURVEY: Today, adults increasingly are expected to use printed information in our society, but there is very little information available on whether or not they are well prepared. This survey will provide information about the reading and writing experiences, activities, and skills of adults in the United States. Information will be used by educators, policymakers, and business leaders to design programs in order to improve the literacy skills of adults.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1850-0654 and will expire on **06/30/04**. The time required to complete these forms is estimated to average .45 hours per respondent, including the time to review instructions and complete the survey. If you have any comments concerning the accuracy of the time estimate or suggestions for improving this form, please write to: U.S Department of Education, Washington, DC 20202-4651. If you have any comments or concerns regarding the status of your individual submission of this form, write directly to: NCES, U.S. Department of Education, 1990 K Street, NW, Washington, DC 20006.

#### Section A. General and Language Background

|  | 5.A. for A-1, go to                               | A-3; otherwise continue.                     |
|--|---|--|
| How old were yo  | u when you moved                                  | to the United States?                        |
| Age  | _   |  |
| -  | have you lived in th                              | an United States?                            |
| A. 1 TO 5<br>B. 6 TO 10<br>C. 11 TO 15<br>D. 16 TO 20<br>E. 21 TO 30<br>F. 31 TO 40<br>G. 41 TO 50 | IE  |  |
| Month  |   | Year   |
|  | S.A. for A-1, go to                               | A-5; otherwise continue.                     |
| What was the hig   | ghest level of educat<br>s not fit categories, pr | tion you completed before coming to the Unit |

| (Select all that apply.)  Look up table  |
|--|
| ·  |
| If English only for both A-5 and A-6, go to A-11; otherwise continue.  |
| What language did you first learn to read and write?   |
| Look up table  |
| How old were you when you learned to speak English?  |
| A. 1-4 YEARS OLD       1         B. 5-10 YEARS OLD       2         C. 11-15 YEARS OLD       3         D. 16-20 YEARS OLD       4         E. 21 YEARS OR OLDER       5         F. DOES NOT SPEAK ENGLISH       95 |
| If English only in A-6, go to A-11; otherwise continue.  |
| Have you ever taken a class in the United States to learn English-as-a-second-language, sometimes called an ESL class?   |
| A. YES   |
| How long ago did you last take an English-as-a-second-language or ESL class in the United States? Was it   |
| A. Within the last two years,       1         B. 2 to 5 years ago,       2         C. More than 5 years ago, or       3         D. Are you taking an ESL class now?       4                                      |
| Which language do you usually speak now?   |
| Look up table  |
| What other language do you often speak now?  |
| A. Look up table  B. No other language spoken  |
| Other than English, what language do you speak best?   |
| A. None  |
|  |

#### A-14. With regard to (non-English language in A-6, A-11, A-12, and A-13), how well do you...

Would you say...

|    |                          | Very well | Well | Not well | or | Not at all |
|----|--------------------------|-----------|------|----------|----|------------|
| A. | Understand it when it is |           |      |          |    |            |
|    | spoken to you?           | 1         | 2    | 3        |    | 4          |
| В. | Speak it?                | 1         | 2    | 3        |    | 4          |
| C. | Read it?                 | 1         | 2    | 3        |    | 4          |
| D. | Write it?                | 1         | 2    | 3        |    | 4          |

#### A-15. With regard to the English language, how well do you...

Would you say...

|    |                          | Very well | Well | Not well | or | Not at all |
|----|--------------------------|-----------|------|----------|----|------------|
| A. | Understand it when it is |           |      |          |    |            |
|    | spoken to you?           | 1         | 2    | 3        |    | 4          |
| B. | Speak it?                | 1         | 2    | 3        |    | 4          |
| C. | Read it?                 | 1         | 2    | 3        |    | 4          |
| D. | Write it?                | 1         | 2    | 3        |    | 4          |

#### If English only for A-6, go to B-1; otherwise continue.

#### A-16. [HAND CARD.] How difficult is it for you to (item) in English?

Would you say you have...

Some

Moderate

Great deal

**NEVER** 

No

| HAND<br>CARD |  |
|--------------|--|
| 1            |  |

|    | _   | difficulty | difficulty | difficulty | or a | of difficulty | TRIED |
|----|---|------------|------------|------------|------|---------------|-------|
| A. | Understand people having a conversation with you? | 1          | 2          | 3          |      | 4             | 5     |
| B. | Understand television, movies, or videos?         | 1          | 2          | 3          |      | 4             | 5     |
| C. | Understand a telephone conversation?              | 1          | 2          | 3          |      | 4             | 5     |

If answered 1 to A-15C and A-15D, go to B-1. If answered 1 to A-15C, but A-15D was not answered 1, go to A-18; otherwise continue.

Great deal

**NEVER** 

#### A-17. **[HAND CARD.]** How difficult is it for you to (item) written in English?

Would you say you have...

No

HAND CARD

difficulty difficulty difficulty of difficulty **TRIED** or a A. Understand a utility bill, such as telephone or electric? ...... 1 2 3 4 5 B. Understand the dosage information on over-thecounter medicines? ..... 2 3 4 5 1 C. Look up information in dictionaries, encyclopedias, phone books, or other reference books?..... 1 2 3 5

Some

Moderate

A-18. **[HAND CARD.]** How difficult is it for you to fill out forms in English, such as at the doctor's office or at school? Would you say you have...

HAND CARD

| Α. | No difficulty,            | 1 |
|----|---------------------------|---|
|    | Some difficulty,          | 2 |
| C. | Moderate difficulty, or a | 3 |
|    | Great deal of difficulty? | 4 |
|    | NEVER TRIED               | 5 |

#### Section B. Educational Background and Experiences

B-1. **[HAND CARD.]** I'd like to ask you about your educational background and experiences. What is the highest level of public or private education you completed? [If respondent went to school outside United States, probe for equivalent.]

HAND CARD

| A. | STILL IN HIGH SCHOOL                                   | 1  | (B-9 |
|----|--|----|------|
| B. | LESS THAN HIGH SCHOOL (0-8 YEARS) (SPECIFY GRADE)      | 2  | (B-2 |
| C. | SOME HIGH SCHOOL (9-12 YEARS BUT DID NOT GRADUATE)     |    |      |
|    | (SPECIFY GRADE)  | 3  | (B-2 |
| D. | GED OR HIGH SCHOOL EQUIVALENCY                         | 4  | (B-2 |
| E. | HIGH SCHOOL GRADUATE (12 YEARS; ACCELERATED OR EARLY   |    | (B-2 |
|    | GRADUATE PROGRAM)                                      | 5  |      |
| F. | ATTENDED A VOCATIONAL, TRADE, OR BUSINESS SCHOOL AFTER |    | (B-2 |
|    | HIGH SCHOOL  | 6  |      |
| G. | COLLEGE: LESS THAN TWO YEARS                           | 7  | (B-2 |
| Н. | COLLEGE: ASSOCIATE'S DEGREE (A.A.)                     | 8  | (B-2 |
| l. | COLLEGE: TWO YEARS OR MORE, NO DEGREE                  | 9  | (B-2 |
| J. | COLLEGE GRADUATE (B.S. OR B.A.)                        | 10 | (B-2 |
| K. | POSTGRADUATE/NO DEGREE                                 | 11 | (B-2 |
| L. | POSTGRADUATE/DEGREE (M.S., M.A., PH.D., M.D., ETC.)    | 12 | (B-2 |
|    |  |    |      |

B-2. What year did you (graduate from high school/receive your GED/attend your last year of school)?

#### If answered 2, 3 or 4 for B-1, go to B-4; otherwise continue.

B-3. What type of high school diploma did you receive? Was it a regular high school diploma from a school in the United States; a regular high school diploma from a school outside the United States run by the United States government, such as a Department of Defense school; a regular high school diploma from a school outside the United States, not run by the United States government; a GED or high school equivalency degree; a certificate of completion that was different from a regular high school diploma; or something else?

| A. | REGULAR HIGH SCHOOL DIPLOMA FROM A SCHOOL IN THE    |     |
|----|---|-----|
|    | UNITED STATES                                       | 1   |
| B. | REGULAR HIGH SCHOOL DIPLOMA FROM A SCHOOL OUTSIDE   |     |
|    | THE UNITED STATES RUN BY THE UNITED STATES          |     |
|    | GOVERNMENT, SUCH AS A DEPARTMENT OF DEFENSE SCHOOL. | 2   |
| C. | REGULAR HIGH SCHOOL DIPLOMA FROM A SCHOOL OUTSIDE   |     |
|    | THE UNITED STATES, NOT RUN BY THE UNITED STATES     |     |
|    | GOVERNMENT  | 3   |
| D. | GED   | 4   |
| E. | CERTIFICATE OF COMPLETION                           | 5   |
| F. | DID NOT RECEIVE HIGH SCHOOL DIPLOMA                 | 6   |
| G. | OTHER (SPECIFY)                                     | 910 |

If answered 10, 11, or 12 for B-1, go to box before B-5; otherwise continue.

| B-4. | What was the main reason you stopped your public or private schooling when you call the answer categories, and then tell me which one best describes the reason your was it  |                                    |
|------|--|------------------------------------|
|      | A. You are currently in school, B. Financial problems, C. Did not do well in school, D. Did not like school or was bored in school, E. Expelled from school or asked to leave, F. Wanted to work, G. Wanted to go into the military, H. Personal illness, disability, or pregnancy, I. Family reasons such as the illness or death of one of your parents, J. School not available or not accessible, K. Did not feel safe in school, or L. Other? |                                    |
|      | 2 or 3 for B-1, read "attended your last year of school" for B-5; if answerd B-1 or 4 for B-3 read "received your GED" for B-5; otherwise read "gradu from high school" for B-5.   |                                    |
| B-5. | When you (graduated from high school/received your GED/attended your I state did you live in?  Look up table  If answered 1, 2, 3, 4, 5, or 6 for B-1, go to B-9; otherwise continue. If answered or 9 for B-1, read "attend your last year of college" for B-6. If answered for B-1, read "receive your undergraduate degree" for B-6. If answered 10 for B-1, read "graduate from college" for B-6.  | swered 7<br>I1 or 12<br>If or B-1, |
| B-6. | What year did you (attend your last year of college/receive your undergraduate associate's degree/graduate from college)?  Year  If answered 7 or 9 to B-1, go to B-9; otherwise continue.   | degree/receive your                |
| B-7. | Did you receive your degree from a college in the United States?  A. YES   | 1 (B-8)<br>2 (B-9)                 |
| B-8. | In what state was the college where you received your college degree located?  Look up table   |                                    |

| B-9.  | How long have you lived in (this state)? Would you say  |
|-------|---|
|       | A. Since birth  |
|       | If answered 1 for B-1, go to B-11; otherwise continue.  |
| B-10. | Are you currently enrolled in school or college, either full-time or part-time?  A. YES   |
| B-11. | Are you currently enrolled in or have you ever taken part in a program other than in regular school in order to improve your <i>basic skills</i> , that is, basic reading, writing and arithmetic skills? |
|       | A. YES  |
| B-12. | How long ago did you last take a class to improve your basic skills? Was it   |
|       | A. Within the last two years,   |
|       | If answered 2 to A-9, go to B-14; otherwise continue.   |
| B-13. | Was the basic skills class part of the English-as-a-second-language or ESL class you took, or was it a separate class?  |
|       | A. PART OF ESL CLASS  |
| B-14. | Have you received any type of information technology skill certification sponsored by a hardware or software manufacturer or an industry or professional association?                                     |
|       | A. YES  |
| B-15. | Did you have to pass a test to get the certification?   |
|       | A. YES  |

B-16. How did you prepare for the test? Was it...

|    |  | YES | NO |
|----|--|-----|----|
| A. | A class offered by a four-year college or university?                    | 1   | 2  |
| B. | A class offered by a community college?                                  | 1   | 2  |
| C. | A class offered by a technical school or private vendor?                 | 1   | 2  |
| D. | A class offered by a high school or vocational secondary school?         | 1   | 2  |
| E. | A class offered directly by a hardware or software manufacturer, such as |     |    |
|    | Microsoft, Oracle, Novell, or Cisco?                                     | 1   | 2  |
| F. | On the job training or apprenticeship?                                   | 1   | 2  |
|    | Independent study?   | 1   | 2  |
| Н. | Other? (Specify)   | 1   | 2  |

B-17. Other than information technology, have you ever received any type of job-related skill certification recognized by a licensing board or an industry or professional association?

| A. | YES | 1 | (B-18) |
|----|-----|---|--------|
| B. | NO  | 2 | (C-1)  |

B-18. Did you have to pass a test to get the certification?

| A. | YES | 1 | (B-19) |
|----|-----|---|--------|
| B. | NO  | 2 | (C-1)  |

B-19. How did you prepare for the test? Was it...

|    |  | YES | NO |
|----|--|-----|----|
| A. | A class offered by a four-year college or university?            | 1   | 2  |
| B. | A class offered by a community college?                          | 1   | 2  |
| C. | A class offered by a technical school or private vendor?         | 1   | 2  |
| D. | A class offered by a high school or vocational secondary school? | 1   | 2  |
| E. | On the job training or apprenticeship?                           | 1   | 2  |
| F. | Independent study?   | 1   | 2  |
| G. | Other? (Specify)   | 1   | 2  |

#### Section C. Political and Social Participation

C-1. **[HAND CARD.]** I'd like to find out how you usually get information about current events, public affairs, and the government. How much information about current events, public affairs and the government do you get from...

Would you say...

| HAND<br>CARD |  |
|--------------|--|
| 3            |  |

|    |   | A lot | Some | A little | or | None |
|----|---|-------|------|----------|----|------|
| A. | Newspapers?                             | 1     | 2    | 3        |    | 4    |
| B. | Magazines?                              | 1     | 2    | 3        |    | 4    |
| C. | Internet?                               | 1     | 2    | 3        |    | 4    |
| D. | Radio and television?                   | 1     | 2    | 3        |    | 4    |
|    | Books or brochures?                     | 1     | 2    | 3        |    | 4    |
| F. | Family members, friends, or co-workers? | 1     | 2    | 3        |    | 4    |

#### If English only for A-6, go to C-3; otherwise continue.

| C-2. | How much of the information you get about current events, public affairs, and the government is presented |
|------|---|
|      | in (non-English language in A-6, A-11, A-12, or A-13)? Would you say                                      |

| A. | All,     | 1 |
|----|----------|---|
| B. | Most,    | 2 |
| C. | Some, or | 3 |
| D. | None?    | 4 |

|      | 5                     |                        | <b>-</b>                               |                      |
|------|-----------------------|------------------------|--|----------------------|
| C-3. | During the past year. | did vou give any UNPAI | <b>D</b> time as a volunteer to a grou | ıp or organization': |
|      |                       |                        |  | 1                    |

| A. | YES | 1 | (C-4) |
|----|-----|---|-------|
| B. | NO  | 2 | (C-5) |

C-4. How often do you volunteer? Would you say...

| A. | Most days,             | 1 |
|----|------------------------|---|
| B. | A few days a week,     | 2 |
|    | About once a week, or  | 3 |
| D. | Less than once a week? | 4 |

| C-5.  | How many hours do you usually watch television, videotapes, or DVDs each da  | ay?         |                  |
|-------|--|-------------|------------------|
|       | A. NONE  | 0<br>1<br>2 |                  |
|       | D. 3 HOURS   | 3           |                  |
|       | E. 4 HOURS   | 4           |                  |
|       | F. 5 HOURS   | 5           |                  |
|       | G. 6 OR MORE HOURS   | 6           |                  |
| C-6.  | How often do you use the services of a library for any reason? Would you say |             |                  |
|       | A. Daily,  | 1           | (C-7)            |
|       | B. Weekly,   | 2           | (C-7)            |
|       | C. Monthly,  | 3           | (C-7)            |
|       | D. Once or twice a year, or  | 4           | (C-7)            |
|       | E. Never?  | 5           | (Box before C-8) |
| C-7.  | During the past month, did you borrow any materials from a library?          |             |                  |
|       | A. YES   | 1           |                  |
|       | B. NO  | 2           |                  |
|       |  |             | <del></del> 1    |
|       | If answered (born in U.S.A.) or (U.S. territory) to A-1, go to C-9; otherwis | e contin    | iue.             |
| C-8.  | Are you a citizen of the United States?                                      |             |                  |
|       | A. YES   | 1           |                  |
|       | B. NO  | 2           |                  |
|       |  | <u> </u>    |                  |
| C-9.  | Did you ever serve on active duty in the U.S. Armed Forces?                  |             |                  |
|       | A. YES   | 1           |                  |
|       | B. NO  | 2           |                  |
|       | If answered 2 to C-8, go to D-1; otherwise continue.                         |             |                  |
| C-10. | In 2000, Al Gore ran on the Democratic ticket against George W. Bush for the | Republic    | ans. Do you      |
|       | remember for sure whether or not you voted in that election?                 |             |                  |
|       | A. YES, I REMEMBER FOR SURE  | 1           | (C-11)           |
|       | B. NO, DON'T REMEMBER FOR SURE   | 2           | (C-12)           |
|       | C. YES, I VOTED  | 3           | (C-12)           |
|       | D. NO, I DIDN'T VOTE   | 4           | (C-12)           |
|       |  |             |                  |

| C-11. | Did you vote in that election?        |     |  |  |  |  |
|-------|---------------------------------------|-----|--|--|--|--|
|       | A. YES                                | 1 2 |  |  |  |  |
| C-12. | Are you currently registered to vote? |     |  |  |  |  |
|       | A. YES                                | 1 2 |  |  |  |  |

#### **Section D. Labor Force Participation**

DAYS: \_\_\_\_\_

D-1. [HAND CARD.] Now I'd like to ask you some questions about what you were doing last week. Last week were you...(Select all that apply.) A. Working a full-time job for pay or profit, that is, 35 hours or more? ......... **HAND** B. Working for pay or profit part-time, that is, 1 to 34 hours?..... 2 **CARD** C. Working two or more part-time jobs for pay, totaling 35 or more hours? ... 3 D. Unemployed, laid off, or looking for work?..... E. With a job but not at work because of temporary illness, vacation, or work stoppage?..... 5 F. With a job but on family leave (maternity or paternity leave)?..... 6 G. In school?..... H. Keeping house? I. Retired? J. Doing volunteer work? ..... 10 K. OTHER (SPECIFY) 910 If answered 1, 5 or 6 to D-1, go to D-3; otherwise continue. D-2. Have you looked for a job at any time during the past four weeks? A. YES ..... B. NO ..... If answered 4, 7, 8, 9, 10 or 910 only to D-1, go to D-5; otherwise continue. D-3. Last week, what was your total weekly wage or salary from all jobs before any deductions? Include tips and commissions. (Write in dollar amount and select appropriate code.) A. PER HOUR..... B. PER DAY..... 2 C. PER WEEK D. PER TWO-WEEK PERIOD..... 4 E. PER MONTH..... F. PER YEAR ...... 6 G. OTHER (SPECIFY) 910 If answered "\$0" for D-3, go to D-4; otherwise continue. D-3A. Was that take-home pay or gross pay? A. TAKE-HOME PAY..... B. GROSS PAY ..... D-4. How many hours or days did you work last week? HOURS:

| D-5.          | Now I'd like to ask you some questions about your work during the past 12 months. Including weeks of paid leave, such as vacation and sick leave, how many weeks did you work for pay or for profit during the past 12 months? |                               |  |  |  |  |  |
|---------------|--|-------------------------------|--|--|--|--|--|
|               | A. NONE (0) B. LESS THAN 52 WEEKS (SPECIFY NUMBER OF WEEKS): C. 52 WEEKS (FOR THE LAST 12 MONTHS)  | 1 (D-6)<br>2 (D-6)<br>3 (D-7) |  |  |  |  |  |
| D-6.          | Of the weeks you were not employed, what were you doing? Were you (Select all that apply.)   |                               |  |  |  |  |  |
|               | A. III, or disabled and unable to work,  B. Retired,   | 1<br>2<br>3<br>4<br>5<br>6    |  |  |  |  |  |
|               | If answered 1 to D-5, go to D-9; otherwise continue.   |                               |  |  |  |  |  |
| D-7.          | For the past 12 months, what was your average weekly wage or salary before Include tips and commissions. (Write in dollar amount and select appropria \$  A. PER HOUR  | ate code.)  1 2 3 4 5 6 910   |  |  |  |  |  |
| D-7A.         | Is that your average wage or salary for the entire year, or just for the weeks you  A. ENTIRE YEAR  B. JUST WEEKS WORKED   | u worked?  1 2                |  |  |  |  |  |
| D-8.          | On average, how many hours or days did you work each week during the past HOURS:   |                               |  |  |  |  |  |
| D-8A.         | Is that your average for the entire year or just for the weeks you worked?   |                               |  |  |  |  |  |
| <i>5</i> 0/1. | A. ENTIRE YEAR   | 1 2                           |  |  |  |  |  |

| D-9.         | Which of the following describes your work history? Have you   |
|--------------|--|
|              | A. Held a paying job within the last three years,  |
| D-10.        | Now I'd like to ask you some questions about your current full-time or part-time job or your most recent full-time or part-time job. For what kind of business or industry (do/did) you work? (For example, television and radio manufacturing, retail shoe store, state labor department, farm, etc.) (If R is working two or more jobs, probe: Tell me about the job you work the most hours or the job you consider your primary employment.) |
|              | BUSINESS OR INDUSTRY:  |
| D-11.        | What (is/was) your occupation, that is, what (is/was) your job called? (For example, electrical engineer,  |
| <i>D</i> 11. | stock clerk, typist, farmer, etc.)   |
|              | OCCUPATION:  |
| D-12.        | What (are/were) the most important activities or duties at this job? (For example, typing, keeping account books, filing, selling cars, operating a printing press, finishing concrete, etc.)  ACTIVITIES OR DUTIES:   |
| D-13.        | (Are/were) you employed by government, by a <b>PRIVATE</b> employer, or (are/were) you self-employed or working in a family business?  |
|              | A. GOVERNMENT  |
|              | If answered 1 to D-5, go to box before E-1. Otherwise, if answered 3 to D-13, continue to D-14; if answered 1, 2, or 4 to D-13, go to D-15.  |
| D-14.        | Were you self-employed for all of the past 12 months or did you have any other jobs?   |
|              | A. SELF-EMPLOYED ALL YEAR  |

#### D-15. For how many employers did you work during the past 12 months?

| Α. | ONE EMPLOYER           | 1 |
|----|------------------------|---|
| B. | TWO EMPLOYERS          | 2 |
| C. | THREE EMPLOYERS        | 3 |
|    | FOUR EMPLOYERS         | 4 |
| Ε. | FIVE OR MORE EMPLOYERS | 5 |

Less than

Less than

#### **Section E. Literacy Practices**

| If answered 1, 2, or 3 to C-1C, go to E-2; otherwise continue. |
|--|
|  |

E-1. Do you ever use a computer?

| A. | YES | 1 |
|----|-----|---|
| B. | NO  | 2 |

E-2. **[HAND CARD.]** Now I'd like to talk to you about what you read in English. How often do you read **(item)** in English?

Would you say...

| HAND<br>CARD |  |
|--------------|--|
| 5            |  |

|    |                         | ∟very | times a | Once a | once a |    |       |
|----|-------------------------|-------|---------|--------|--------|----|-------|
|    |                         | day   | week    | week   | week   | or | Never |
| Α. | Newspapers or magazines | 1     | 2       | 3      | 4      |    | 5     |
| В. | Books                   | 1     | 2       | 3      | 4      |    | 5     |
| C. | Letters and notes       | 1     | 2       | 3      | 4      |    | 5     |

A few

If English only in A-6, go to E-4A; otherwise continue.

E-3. **[HAND CARD.]** How often do you read **(item)** in **(non-English language in A-6, A-11, A-12, or A-13)**? Would you say...

HAND CARD

|    |                         | Every<br>day | times a<br>week | Once a<br>week | once a<br>week | or | Never |  |
|----|-------------------------|--------------|-----------------|----------------|----------------|----|-------|--|
| A. | Newspapers or magazines | 1            | 2               | 3              | 4              |    | 5     |  |
| B. | Books                   | 1            | 2               | 3              | 4              |    | 5     |  |
| C. | Letters and notes       | 1            | 2               | 3              | 4              |    | 5     |  |

A few

- E-4A. How often do you read the nutritional information on food labels written in English? Would you say...

D. Never?.....

Less than

E-4B. **[HAND CARD.]** How often do you look up a schedule in a movie or TV guide written in English? Would you say...

| HAND<br>CARD |  |
|--------------|--|
| 5            |  |

| A. | Every day,                | 1 |
|----|---------------------------|---|
| B. | A few times a week,       | 2 |
|    | Once a week,              | 3 |
|    | Less than once a week, or | 4 |
| E. | Never?                    | 5 |

If answered 2 or 3 to D-9, go to box before E-6; otherwise continue.

If answered 1 to E-1, display "other than email" for E-5A.

E-5. **[HAND CARD.]** Now, I'd like to ask you some questions about what you read at work. How often (do/did) you read or use information from **(Item)** as part of your (current/most recent) job?

Would you say...

HAND CARD

|    |  | Every<br>day | times a<br>week | Once a<br>week | once a<br>week | or | Never |
|----|--|--------------|-----------------|----------------|----------------|----|-------|
| Α. | Letters or memos (other than e-mail)                                 | 1            | 2               | 3              | 4              |    | 5     |
| В. | Reports, articles, magazines, or journals                            | 1            | 2               | 3              | 4              |    | 5     |
| C. | Manuals or reference books, including catalogs or parts lists        | 1            | 2               | 3              | 4              |    | 5     |
| D. | Directions or instructions for medicines, recipes, or other products | 1            | 2               | 3              | 4              |    | 5     |
| E. | Diagrams or schematics   | 1            | 2               | 3              | 4              |    | 5     |
| F. | Bills, invoices, spreadsheets, or budget tables                      | 1            | 2               | 3              | 4              |    | 5     |
| G. | Health and safety information in postings or booklets                | 1            | 2               | 3              | 4              |    | 5     |

A few

If answered 2 to E-1, go to E-7; otherwise continue.

E-6. **[HAND CARD.]** Now I'd like to ask you about how you use the computer. How often do you **(item)**? Would you say...

| HAND<br>CARD |  |
|--------------|--|
| 5            |  |

| A. | Send or receive an e-mail |
|----|---------------------------|
|    | message?                  |

- B. Write using a word processing program? .....
- C. Use a spreadsheet program or use a financial program, such as an electronic checkbook, money management, or tax program? ......
- D. Look up information on a CD-ROM?.....
- E. Find information on the Internet?
- F. Talk in chat groups or with other people who are logged onto the Internet at the same time you are?.....

| Every<br>day | A few<br>times a<br>week | Once a week | Less than once a week | or | Never |
|--------------|--------------------------|-------------|-----------------------|----|-------|
| 1            | 2                        | 3           | 4                     |    | 5     |
| 1            | 2                        | 3           | 4                     |    | 5     |
|              |                          |             |                       |    |       |
| 1            | 2                        | 3           | 4                     |    | 5     |
| 1            | 2                        | 3           | 4                     |    | 5     |
| 1            | 2                        | 3           | 4                     |    | 5     |
|              |                          |             |                       |    |       |
| 1            | 2                        | 3           | 4                     |    | 5     |

If answered 1 to E-1, display "and email" for E-7C.

E-7. **[HAND CARD.]** How much help do you get from family members or friends with...

Would you say...

# HAND CARD

- A. Filling out forms?.....
- B. Reading or explaining newspaper articles or other written information? .....
- C. Writing notes, letters (and email?).....
- D. Using basic arithmetic, that is, adding, subtracting, multiplying, or dividing, such as filling out order forms or balancing a checkbook? ......

| A lot | Some | A little | or | None |
|-------|------|----------|----|------|
| 1     | 2    | 3        |    | 4    |
|       |      |          |    |      |
| 1     | 2    | 3        |    | 4    |
| '     | _    | ŭ        |    | •    |
| 1     | 2    | 3        |    | 4    |
|       |      |          |    |      |
|       |      |          |    |      |
|       |      |          |    |      |
| 1     | 2    | 3        |    | 4    |

If answered 1 to D5, go to F1-C; otherwise continue.

#### Section F. Job Training and Skills

| F-1. | During the past year, did you participate in any training or education, including courses, workshops, formal on-the-job training or apprenticeships to: |                 |        |
|------|---|-----------------|--------|
|      |   | YES             | NO     |
|      | A. [Employed within past year only.] Help you do your job better?      B. [Employed within past year only.] Help you get a promotion or                 | 1               | 2      |
|      | a new job?  C. [Not employed for entire past year only.] Help you get a job?  | 1               | 2<br>2 |
|      | o. [Not employed for entire past year only.] Their you get a job!   | '               | 2      |
|      | If answered 2 to all parts of F-1, go to box before F-7; otherwise continue   | e.              |        |
| F-2. | Did this training or education include instruction intended to:   |                 |        |
|      | A. Improve your English reading skills?   | YES 1           | NO     |
|      | A. Improve your English reading skills?     B. Improve your English writing skills?   |                 | 2 2    |
|      | C. Improve your arithmetic or mathematics skills?   | 1               | 2      |
|      | D. Improve your computer skills?  | 1               | 2      |
|      | E. Help you communicate or work better with co-workers?   | 1               | 2      |
|      | If answered 1 to D-5, go to box before F-7; otherwise continue.   |                 |        |
| F-3. | Did your employer require you to participate in this training or education?   |                 |        |
|      | A. YES  |                 |        |
|      | B. NO   | 1 2             |        |
| F-4. | Did your employer pay at least part of the cost of this training or education?  |                 |        |
|      | A. YES  | 1               |        |
|      | B. NO   | 2               |        |
| F-5. | Did your employer pay for any of your time when you participated in this training   | g or education? |        |
|      | A. YES  | 1               |        |
|      | B. NO   | 2               |        |
| F-6. | Was any of this training or education provided through a union or trade associa   | tion agreement? |        |
|      | A. YES  | 1               |        |
|      | B. NO   | 2               |        |
|      | If age 66 or older (based on A-3) and answered 9 to D-1, go to G-1; other continue.   | wise            |        |
|      | ·   |                 |        |

| F-7.   | How much do you think your reading skills limit your job opportunities—for example, to get a promotion or a (different) job you would like to have? Would you say a lot, some, a little, or not at all?  |  |
|--|--|--|
|  | A. A LOT   |  |
| F-8.   | How much do you think your writing skills limit your job opportunities—for example, to get a promotion or a (different) job you would like to have? Would you say a lot, some, a little, or not at all?  |  |
|  | A. A LOT   |  |
| F-9. How much do you think your math skills limit your job opportunities—for example, to get a pro (different) job you would like to have? Would you say a lot, some, a little, or not at all? |  |  |
|  | A. A LOT   |  |
| F-10.  | How much do you think your computer skills limit your job opportunities—for example, to get a promotion or a (different) job you would like to have? Would you say a lot, some, a little, or not at all? |  |
|  | A. A LOT       1         B. SOME       2         C. A LITTLE       3         D. NOT AT ALL       4   |  |

#### Section G. Demographic Information

Now I'm going to ask you some questions about your family.

| In what country was your mother (stepmother or female guardian) born?   |                   |  |  |
|---|-------------------|--|--|
| A. Look up table  |                   |  |  |
| What was the highest level of education your mother (stepmother or female gua (If went to school outside U.S., probe for equivalent)                  | rdian) completed? |  |  |
| A. LESS THAN HIGH SCHOOL (0-8 YEARS ) (SPECIFY GRADE) B. SOME HIGH SCHOOL (9-12 YEARS BUT DID NOT GRADUATE)   | 1                 |  |  |
| (SPECIFY GRADE)   | 2                 |  |  |
| D. HIGH SCHOOL GRADUATE (12 YEARS; ACCELERATED OR EARLY   | 3                 |  |  |
| E. ATTENDED A VOCATIONAL, TRADE, OR BUSINESS SCHOOL AFTER   | 4                 |  |  |
| HIGH SCHOOL   | 5                 |  |  |
|   | 6                 |  |  |
|   | 7 8               |  |  |
|   | 9                 |  |  |
|   | 10                |  |  |
| K. POSTGRADUATE/DEGREE (M.S., M.A., Ph.D., M.D., ETC.)  | 11                |  |  |
| In what country was your father (stepfather or male guardian) born?   |                   |  |  |
| A. Look up table  |                   |  |  |
| G-4. What was the highest level of education your father (stepfather or male guardian) comple (If went to school outside U.S., probe for equivalent.) |                   |  |  |
| A. LESS THAN HIGH SCHOOL (0-8 YEARS ) (SPECIFY GRADE) B. SOME HIGH SCHOOL (9-12 YEARS BUT DID NOT GRADUATE)   | 1                 |  |  |
|   | 2                 |  |  |
|   | 3                 |  |  |
|   | 4                 |  |  |
|   | 4                 |  |  |
| · · · · · · · · · · · · · · · · · · ·   | 5                 |  |  |
| F. COLLEGE: LESS THAN TWO YEARS   | 6                 |  |  |
| G. COLLEGE: ASSOCIATE'S DEGREE (A.A.)   | 7                 |  |  |
| H. COLLEGE: TWO YEARS OR MORE, NO DEGREE  | 8                 |  |  |
|   | 9                 |  |  |
|   | 10                |  |  |
| K. POSTGRADUATE/DEGREE (M.S., M.A., Ph.D., M.D., ETC.)  | 11                |  |  |
|   | A. Look up table  |  |  |

# Section H. Family Literacy

|                  | F   | a                 |
|------------------|---|-------------------|
|                  | If respondent is under age 18, add parentheses to H-1.  |                   |
| <del>1</del> -1. | During the past month, how many children (other than you) under 18 lived in this househo days?  | ld for 10 or more |
|                  | Number of children  |                   |
|                  | If answered "0" or "none" go to H-13; otherwise continue.   | 1                 |
|                  | if answered 0 of fione go to n-13, otherwise continue.  | <u>]</u>          |
| H-2.             | What are their ages?  |                   |
|                  |   | <b>a</b>          |
|                  | Repeat H-3 for every child under 18.  | ]                 |
| H-3.             | How are you related to the [age of child] year old?   |                   |
|                  | A. PARENT/GUARDIAN/STEP-PARENT 1 B. GRANDPARENT/STEP-GRANDPARENT/GREAT GRANDPARENT 2 C. SIBLING/STEP-SIBLING/HALF SIBLING 3 D. OTHER RELATIVE 4 E. NOT RELATED 5  |                   |
|                  | If answered 3, 4 or 5 for H-3, go to H-13, otherwise continue.  |                   |
| H-4.             | During the past year, have you participated in any parenting groups or classes?   |                   |
|                  | A. YES  |                   |
|                  | If no children under age 8, go to instructions before H-10.   | ]                 |
| ınder 8.         | like to ask you some questions with regard to your child (children/grandchild/grandchildren). [Please answer these questions only with regard to that (these) child (children/grandchild/er child (children/grandchild/grandchildren.)] |                   |
| H-5.             | Since last [insert the current day of the week], have you read to or with your child (children/grandchild/grandchildren)?   |                   |
|                  | A. YES  | (H-6)<br>(H-7)    |

| H-6.         | Since last [insert the current day of the week], on how many different days did child (children/grandchild/grandchildren)? Would you say it was   | you read to or with your  |
|--------------|---|---------------------------|
|              | A. Every day, B. 5 or 6 days, C. 3 or 4 days, or D. 1 or 2 days?  | 1<br>2<br>3<br>4          |
| H-7.         | [HAND CARD.] During the past month, about how often did you try to teach yo (children/grandchild/grandchildren) the letters of the alphabet? Would you say week, once a week, less than once a week, never, or does (do) your child (children/grandchild/grandchildren) already know the letters of the alphabet? |                           |
| HAND<br>CARD | A. EVERY DAY  B. A FEW TIMES A WEEK  C. ONCE A WEEK  D. LESS THAN ONCE A WEEK  E. NEVER   | 1<br>2<br>3<br>4<br>5     |
|              | F. CHILD (CHILD/GRANDCHILD/GRANDCHILDREN) ALREADY KNOWS THE LETTERS OF THE ALPHABET   | 6                         |
| H-8.         | [HAND CARD.] During the past month, how often did you point out words to you (children/grandchild/grandchildren) and ask him (her/them) what they say? We few times a week, once a week, less than once a week, never, or does (do) you (children/grandchild/grandchildren) already read well?                    | ould you say every day, a |
| HAND<br>CARD | A. EVERY DAY  B. A FEW TIMES A WEEK  C. ONCE A WEEK   | 1 2 3                     |
|              | D. LESS THAN ONCE A WEEK E. NEVER F. CHILD (CHILD/GRANDCHILD/GRANDCHILDREN) ALREADY READS WELL  | 6                         |
| H-9.         | <b>[HAND CARD.]</b> During the past month, about how often did you sing songs, re rhymes, or engage in other activities that included rhyming words with your chi (children/grandchild/grandchildren)? Would you say  |                           |
| HAND<br>CARD | A. Every day,  B. A few times a week,  C. Once a week,  D. Less than once a week, or  E. Never?   | 1<br>2<br>3<br>4<br>5     |
|              |   |                           |

[If no child age 5 or older, go to H-13.] Now I'd like to ask you some questions about your school-age child (children/grandchild/grandchildren).

H-10. **[HAND CARD.]** During a typical school month, how often do you talk to your school-age child (children/grandchild/grandchildren) about things they have studied in school? Would you say...

| HAND<br>CARD |  |
|--------------|--|
| 5            |  |

| A. | Every day,                | 1 |
|----|---------------------------|---|
|    | A few times a week,       | 2 |
|    | Once a week,              | 3 |
|    | Less than once a week, or | 4 |
|    | Never?                    | 5 |

H-11. **[HAND CARD.]** During a typical school month, how often do you help or work with your school-age child (children/grandchild/grandchildren) on homework? Would you say...

HAND CARD

|    | • • • • • • • • • • • • • • • • • • • |   |
|----|---------------------------------------|---|
| Α. | Every day,                            | 1 |
| B. | A few times a week,                   | 2 |
|    | Once a week,                          | 3 |
|    | Less than once a week, or             | 4 |
|    | Never?                                | 5 |

H-12. During the past year, have you (item)

| A. | Volunteered to help out at your child's (one of your children's/    |
|----|---|
|    | grandchildren/grandchild) school(s), including in the classroom, on |
|    | a field trip, or at a school event such as a party or school fair?  |
| B. | Gone to a PTA or other type of parent meeting at your child's       |

| 1 | 2 |
|---|---|
| 1 | 2 |
| 1 | 2 |

FALSE 2

2

2

**TRUE** 

- B. Gone to a PTA or other type of parent meeting at your child's (one of your children's/grandchildren/grandchild) school(s)? ......
- C. Spoken individually with your child's (one of your children's/ grandchildren/grandchild) teacher(s) to see how he or she was doing in school?
- D. Sent food, or other items to share in your child's (one of your children's/grandchildren/grandchild) classroom(s)?.....

| H-13. | Now I'm going to read you a series of statements. | Please tell me if each of the following statements is true |
|-------|---|--|
|       | or false.   |  |

| A. | There are 25 or more books in your home right now  | 1 |   |
|----|--|---|---|
| B. | There is a variety of magazines and other reading materials in your home   | 1 | : |
| C. | [Read only if there are children over age 2 in the household].  The child (children/grandchild/grandchildren) living in your home often see you reading. | 1 | ; |
| D. | [Read only if there are children over age 2 in the household.] The child (children/grandchild/grandchildren) living in your                              | 4 |   |
|    | home have their own books  | 1 |   |

| H-14. | How many computers do you have in your household that can be used for word processing, that is, writing letters or other documents? |
|-------|---|
|       | Computers   |
| H-15. | How many computers do you have in your household that can access the Internet or World Wide Web?                                    |
|       | Computers   |

#### Section I. Household Income and Welfare Participation

I would like to ask you some questions about your household.

I-1. **[HAND CARD.]** First, which letter on this card describes your current marital status?

HAND CARD

| ANI | • |
|-----|---|
| 6   |   |

| A. | NEVER MARRIED                    | 1 |
|----|----------------------------------|---|
| B. | MARRIED, LIVING WITH SPOUSE      | 2 |
| C. | MARRIED, SPOUSE LIVING ELSEWHERE | 3 |
| D. | LIVING AS MARRIED                | 4 |
| E. | SEPARATED OR DIVORCED            | 5 |
| F. | WIDOWED                          | 6 |
|    |                                  |   |

I-2. Including yourself, how many people in your household are employed or work for pay or wages?

| A. | NONE          | 0 |
|----|---------------|---|
| B. | ONE           | 1 |
| C. | TWO           | 2 |
| D. | THREE OR MORE | 3 |

I-3. Did you or anyone in your household receive any of the following during the past 12 months? [Do not read the words in parentheses. They are there for clarification if the respondents ask. For each question to which a respondent answers "Yes," ask, "Is that you, someone else, or both you and someone else in your household?"]

|    |  | Yes,<br>me | Yes,<br>someone<br>else | Yes,<br>someone<br>else<br>and me | No |
|----|--|------------|-------------------------|-----------------------------------|----|
| A. | Social Security or Railroad Retirement payments  | 1          | 2                       | 3                                 | 4  |
| B. | Supplemental Security Income (SSI)   | 1          | 2                       | 3                                 | 4  |
| C. | Other retirement, survivor, or disability payments (other than Social Security or Railroad Retirement)                               | 1          | 2                       | 3                                 | 4  |
| D. | Food stamps  | 1          | 2                       | 3                                 | 4  |
| E. | WIC supplemental nutrition benefits (Women, infants, and children supplemental nutrition benefits)                                   | 1          | 2                       | 3                                 | 4  |
| F. | Rent subsidy, such as Section 8 or public housing  | 1          | 2                       | 3                                 | 4  |
| G. | Temporary Assistance for Needy Families (TANF), public assistance, or public welfare payments from the state or local welfare office | 1          | 2                       | 3                                 | 4  |
| H. | Interest from savings or other bank accounts (other than dividends)  | 1          | 2                       | 3                                 | 4  |
| l. | Dividend income from stocks or mutual funds or income from rental property, royalty, estates, or trusts                              | 1          | 2                       | 3                                 | 4  |

If answered 1 or 3 to I-3G, go to I-4. If answered 1 or 3 to I-3B, go to I-8B; otherwise, go to I-8.

| In t                                | he past 12 months, was there a time when you did not receive welfare paym   | nents?           |                |
|-------------------------------------|---|------------------|----------------|
| A.<br>B.                            | YES   | 1 2              | (I-5)<br>(I-6) |
| In t                                | he past 12 months, how long were you off welfare?   |                  |                |
|                                     | WEEKS   |                  |                |
|                                     | MONTHS  |                  |                |
|                                     |   |                  |                |
|                                     | · · · · · · · · · · · · · · · · · · ·   | 1                |                |
|                                     |   |                  |                |
| D.                                  | 2 to 3 years, or  | 4                |                |
| E.                                  | More than 3 years?  | 5                |                |
|                                     |   | you get a j      | ob and get off |
| A.                                  | YES   | 1                |                |
| B.                                  | NO  | 2                |                |
| to                                  | I-3E, go to 1-8C. If answered 4 to I-3G, go to I-8D.  |                  |                |
| Ha                                  | ve you ever received  |                  |                |
|                                     |   | YES              | NO             |
| A.                                  | Supplemental Security Income (SSI)?   | 1                | 2              |
| A.<br>B.                            | Supplemental Security Income (SSI)?   | 1                | 2<br>2         |
| A.<br>B.<br>C.                      | Supplemental Security Income (SSI)?  Food stamps?  WIC supplemental nutrition benefits?   | 1                | 2              |
| A.<br>B.                            | Supplemental Security Income (SSI)?   | 1                | 2<br>2         |
| A.<br>B.<br>C.                      | Supplemental Security Income (SSI)?  Food stamps?  WIC supplemental nutrition benefits?   | 1                | 2<br>2         |
| A.<br>B.<br>C.<br>D.                | Supplemental Security Income (SSI)?   | 1 1 1            | 2<br>2<br>2    |
| A.<br>B.<br>C.<br>D.                | Supplemental Security Income (SSI)?   | 1 1 1            | 2<br>2<br>2    |
| A.<br>B.<br>C.<br>D.                | Supplemental Security Income (SSI)?   | 1 1 1            | 2<br>2<br>2    |
| A. B. C. D.                         | Supplemental Security Income (SSI)?   | 1 1 1            | 2<br>2<br>2    |
| A. B. C. D. How A. B.               | Supplemental Security Income (SSI)?   | 1<br>1<br>1      | 2<br>2<br>2    |
| A. B. C. D.                         | Supplemental Security Income (SSI)?   | 1 1 1            | 2<br>2<br>2    |
| A. B. C. D. How A. B. C.            | Supplemental Security Income (SSI)?  Food stamps?  WIC supplemental nutrition benefits?  Temporary Assistance to Needy Families (TANF), Aid to Families with Dependent Children (AFDC), public assistance or public welfare payments?  answered 2 to I-8D go to J-1; otherwise continue.  w long has it been since you last received welfare payments?  More than 1 year but less than 2 years, 2 to 3 years, or  | 1<br>1<br>1      | 2<br>2<br>2    |
| A. B. C. How A. B. C. Abo           | Supplemental Security Income (SSI)?  Food stamps?  WIC supplemental nutrition benefits?  Temporary Assistance to Needy Families (TANF), Aid to Families with Dependent Children (AFDC), public assistance or public welfare payments?  answered 2 to I-8D go to J-1; otherwise continue.  W long has it been since you last received welfare payments?  More than 1 year but less than 2 years,  2 to 3 years, or | 1<br>1<br>1<br>1 | 2<br>2<br>2    |
| A. B. C. D. How A. B. C. Abo. A. B. | Supplemental Security Income (SSI)?  Food stamps?  WIC supplemental nutrition benefits?  Temporary Assistance to Needy Families (TANF), Aid to Families with Dependent Children (AFDC), public assistance or public welfare payments?  answered 2 to I-8D go to J-1; otherwise continue.  W long has it been since you last received welfare payments?  More than 1 year but less than 2 years, 2 to 3 years, or  | 1<br>1<br>1<br>1 | 2<br>2<br>2    |
| A. B. C. How A. B. C. Abo           | Supplemental Security Income (SSI)?  Food stamps?  WIC supplemental nutrition benefits?  Temporary Assistance to Needy Families (TANF), Aid to Families with Dependent Children (AFDC), public assistance or public welfare payments?  answered 2 to I-8D go to J-1; otherwise continue.  W long has it been since you last received welfare payments?  More than 1 year but less than 2 years,  2 to 3 years, or | 1<br>1<br>1<br>1 | 2<br>2<br>2    |
|                                     | A. B. Abo A. B. C. D. E. Dur wel A. B. C. Directory   | A. YES B. NO     | A. YES         |

| l-11. | Why did | you stop | getting | welfare p | payments? | Was it because | you |
|-------|---------|----------|---------|-----------|-----------|----------------|-----|
|       |         |          |         |           |           |                |     |

|    |  | YES | NO |
|----|--|-----|----|
| A. | Reached the time limit set by welfare?                     | 1   | 2  |
| B. | Were discontinued for non-compliance?                      | 1   | 2  |
| C. | Got a job?   | 1   | 2  |
| D. | Got a raise and earned too much money?                     | 1   | 2  |
| E. | Got married?   | 1   | 2  |
| F. | Got child support?   | 1   | 2  |
| G. | Received too much income from a source other than a job or |     |    |
|    | child support?   | 1   | 2  |
| Н. | Moved?   | 1   | 2  |

If answered 2 for I-11A through I-11H, go to I-12; otherwise, go to J-1.

| I-12.    | Mas there some other recent   | vou atonned receiving welfere? |  |
|----------|-------------------------------|--------------------------------|--|
| I- I Z . | was there some other reason v | you stopped receiving welfare? |  |

#### Section J. Health Questions

| J-1. | In general, how would you rate your overall health? Would you say it is   |          |
|------|---|----------|
|      | A. Excellent,       1         B. Very Good,       2         C. Good,       3         D. Fair, or       4         E. Poor?       5                       |          |
| J-2. | Do you have any difficulty seeing the words and letters in ordinary newspaper print even when wear glasses or contact lenses, if you usually wear them? | ing      |
|      | A. YES  |          |
| J-3. | Do you have any difficulty hearing what is said in a normal conversation with another person even w using a hearing aid, if you usually wear one?       | hen      |
|      | A. YES  |          |
| J-4. | Have you ever been diagnosed or identified as having a learning disability?   |          |
|      | A. YES  |          |
| J-5. | Do you have any other health problem, impairment, or disability now that keeps you from participating in work, school, housework, or other activities?  | ıg fully |
|      | A. YES  |          |
| J-6. | Do you have any kind of medical insurance or are you enrolled in any kind of program that helps to pyour health care?                                   | oay for  |
|      | A. YES  |          |

#### If answered 1 for B-10, display "school" in J-7A.

#### J-7. Is your program...

|    |   | YES | NO |
|----|---|-----|----|
| A. | Health insurance through your work (school) or a family member's work?  | 1   | 2  |
| B. | Medicare (Medicare is the health insurance for people 65 or older or people with disabilities)?   | 1   | 2  |
| C. | Health insurance you or someone else in your family purchased directly from an insurance company or other organization that is not related to past or current employment? | 1   | 2  |
| D. | Health insurance provided as part of military service?  | 1   | 2  |
| E. | Medicaid or [if applicable, fill in state name]?  | 1   | 2  |
| F. | Other? (Specify)  | 1   | 2  |

State names for Medicaid:

Alaska Medical Assistance Program

Arizona AHCCCS, Acute Care Program or Long Term Care System (ALTCS)

California Medi-Cal

Connecticut Access (CONNECT CARD)

D.C. Medical Assistance

Florida MediPass

Georgia Better Health Care Program or Medical Assistance
Hawaii Med-QUEST, Maluhia or Medical Assistance
Idaho Healthy Connections or Medical Assistance

Illinois MediPlan

Indiana Hoosier Healthwise Iowa MediPAS (Medical Assistance)

Kansas PrimeCare, Community Care Kansas (CCK) or HealthConnect

Kentucky Patient Access and Care System (KenPAC) or Medical Assistance

Louisiana CommunityCARE Program

Maine PrimeCare

Maryland Maryland Access to Care (MAC) or Medical Assistance

Massachusetts MassHealth

Minnesota Prepaid Medical Assistance Program (PMAP) or Health Care Programs

Mississippi HealthMACS
Missouri MC Plus
Montana Passport to Health

Nebraska Primary Care Plus (+) or Health Connection

Nevada MAPnet

New Jersey New Jersey Care 2000 New Mexico Primary Care Network

New York MAX

North Carolina Carolina Access

North Dakota North Dakota Access to Care (No DAC)
Ohio Accessing Better Care (ABC) Program

Oklahoma SoonerCare

Oregon Oregon Health Plan (OHP), Kaiser-S/HMO or Medical Assistance

Pennsylvania HealthPASS, Family Care Network (FCN), Lancaster Community Health Plan, Blue Card or Green

Card or ACCESS

Rhode Island Rite Care or Medical Assistance

South Carolina Health Access Plan (SCHAP)

South Dakota Primary Care Provider Program

Tennessee TennCare

Texas LoneSTAR (State of Texas Access Reform)

Vermont Dr. Dynosaur, Vermont Health Access Program (VHAP) or AIM

Virginia Medallion, Options or Medical Assistance

Washington Health Access Spokane, Kaiser-S/HMO or Healthy Options West Virginia West Virginia Physician Assured Access System (PAAS)

Wisconsin Medical Assistance Program

| J-8. | [Ask only of people with children other than the respondent under age 18 living in the home.] Do the |
|------|--|
|      | children living in this household have any type of medical insurance or health care coverage?        |

| A. | YES | 1 |
|----|-----|---|
| B. | NO  | 2 |

J-9. **[HAND CARD.]** Now I'd like to find out how you usually get information about health issues, such as diet, exercise, disease prevention, or a specific disease or health condition. How much information about health issues do you get from...

Would you say...

HAND CARD

| A. | Newspapers  |
|----|---|
| B. | Magazines   |
| C. | Internet  |
| D. | Radio and television  |
| E. | Books or brochures  |
| F. | Family members, friends, or co-workers  |
| G. | Talking to health care professionals, such as doctors, nurses, therapists, or psychologists |

| A lot | Some | A little | or | None |
|-------|------|----------|----|------|
| 1     | 2    | 3        |    | 4    |
| 1     | 2    | 3        |    | 4    |
| 1     | 2    | 3        |    | 4    |
| 1     | 2    | 3        |    | 4    |
| 1     | 2    | 3        |    | 4    |
| 1     | 2    | 3        |    | 4    |
| 1     | 2    | 3        |    | 4    |

J-10. I would like to ask you about some topics related to maintaining health. In the past year, have you...

| A. | Gotten a flu shot?  |
|----|---|
| B. | [If female age 40 or older] Had a mammogram?                      |
| C. | [If female between 18 and 65] Had a pap smear?                    |
| D. | [If age 50 or older] Been screened for colon cancer?              |
| E. | Had your vision checked?  |
| F. | [If male] Been screened for prostate cancer?                      |
| G. | [If age 50 or older] Been screened for osteoporosis?              |
| H. | [If age 65 or older] Had the pneumonia shot or pneumonia vaccine? |
| l. | Visited a dentist?  |

| YES | NO  |
|-----|-----|
| 1   | 2   |
| 1   | 2   |
| 1   | 2   |
| 1   | 2 2 |
| 1   | 2   |
| 1   | 2   |
| 1   | 2   |
| 1   | 2 2 |
| 1   | 2   |

#### **Section K. Additional Demographics**

K-1. **[HAND CARD.]** Which number on this card corresponds to your approximate total *personal* income for the past 12 months? Please include all your personal income, including income from your job, investments, Social Security or retirement, and welfare.

HAND CARD

| A. | LESS THAN \$5,000    | 1  |
|----|----------------------|----|
| B. | \$5,000 to \$ 7,499  | 2  |
| C. | \$7,500 to \$9,999   | 3  |
| D. | \$10,000 to \$12,499 | 4  |
| E. | \$12,500 to \$14,999 | 5  |
| F. | \$15,000 to \$19,999 | 6  |
| G. | \$20,000 to \$29,999 | 7  |
| H. | \$30,000 to \$39,999 | 8  |
| I. | \$40,000 to \$49,999 | 9  |
| J. | \$50,000 to \$59,999 | 10 |
| K. | \$60,000 to \$74,999 | 11 |
| L. | \$75,000 to \$99,999 | 12 |
| M. | \$100,000 OR MORE    | 13 |
| N. | NO PERSONAL INCOME   | 95 |

K-2. **[HAND CARD.]** Which letter on this card corresponds to your approximate *total household* income for the past 12 months? Please include all income for people living in your household, including income from jobs, investments, Social Security or retirement, and welfare. (If undergraduate college student living away from family home, please provide household income for your permanent residence.)

HAND CARD

| A. | LESS THAN \$5,000      | 1  |
|----|------------------------|----|
| B. | \$5,000 to \$ 7,499    | 2  |
| C. | \$7,500 to \$9,999     | 3  |
| D. | \$10,000 to \$12,499   | 4  |
| E. | \$12,500 to \$14,999   | 5  |
| F. | \$15,000 to \$19,999   | 6  |
| G. | \$20,000 to \$29,999   | 7  |
| H. | \$30,000 to \$39,999   | 8  |
| I. | \$40,000 to \$49,999   | 9  |
| J. | \$50,000 to \$59,999   | 10 |
| K. | \$60,000 to \$74,999   | 11 |
| L. | \$75,000 to \$99,999   | 12 |
| M. | \$100,000 to \$149,999 | 13 |
| N. | \$150,000 or more      | 14 |
| Ο. | NO HOUSEHOLD INCOME    | 95 |

Note: Follow-up probes were asked of respondents who refused to answer K-1 and/or K-2. These probes were designed to get a broad range for the respondent's income.

| K-3. | Λ ωαα   | Hispanic |     | ~1:~~^ |
|------|---------|----------|-----|--------|
| N 1  | Are von | Hispanic | OFI | aumo 7 |
|      |         |          |     |        |

| A. | YES | 1 | (K-4) |
|----|-----|---|-------|
| B. | NO  | 2 | (K-5) |

K-4. **[HAND CARD.]** Which of the groups on this card describes your Hispanic or Latino origin? Choose one or more.

HAND CARD

9

| Α. | MEXICAN, MEXICAN AMERICAN, OR CHICANO | 1 |
|----|---------------------------------------|---|
| В. | PUERTO RICAN OR PUERTO RICAN AMERICAN | 2 |
| C. | CUBAN OR CUBAN AMERICAN               | 3 |
| D. | CENTRAL OR SOUTH AMERICAN             | 4 |
| E. | OTHER HISPANIC OR LATINO BACKGROUND   | 5 |

K-5. **[HAND CARD.]** Which of the groups on this card best describes you? Choose one or more.

HAND CARD

| Α. | WHITE                                     | 1 |
|----|---|---|
| B. | BLACK OR AFRICAN AMERICAN                 | 2 |
| C. | ASIAN                                     | 3 |
| D. | AMERICAN INDIAN OR ALASKA NATIVE          | 4 |
| F  | NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER | 5 |

Interviewer: Code language in which interview was conducted. 1 = English; 2 = Spanish.

No difficulty

Some difficulty

Moderate difficulty

Great deal of difficulty

Still in high school Less than high school (0-8 years) Some high school (9-12 years but did not graduate) GED or high school equivalency High school graduate (12 years; accelerated or early graduate program) Attended a vocational, trade, or business school after high school College: less than two years College: Associate's degree (A.A.) College: two years or more, no degree College graduate (B.S. or B.A.) Postgraduate/No degree Postgraduate/degree (M.S., M.A., Ph.D., M.D., etc.)

A lot

Some

A little

None

| Working a full-time job for pay or profit, that is, 35 hours or more?                |
|--|
| Working for pay or profit part-time, that is, 1 to 34 hours?                         |
| Working two or more part-time jobs for pay, totaling 35 or more hours?               |
| Unemployed, laid off, or looking for work?   |
| With a job but not at work because of temporary illness, vacation, or work stoppage? |
| With a job but on family leave (maternity or paternity leave)?                       |
| In school?   |
| Keeping house?   |
| Retired?   |
| Doing volunteer work?  |
|  |

| Every day             |
|-----------------------|
| A few times a week    |
| Once a week           |
| _ess than once a week |
| Never                 |

- A. Never married
- B. Married, living with spouse
- C. Married, spouse living elsewhere
- D. Living as married
- E. Separated or divorced
- F. Widowed

- A. Less than \$5,000
- B. \$5,000 to \$7,499
- C. \$7,500 to \$9,999
- D. \$10,000 to \$12,499
- E. \$12,500 to \$14,999
- F. \$15,000 to \$19,999
- G. \$20,000 to \$29,999
- H. \$30,000 to \$39,999
- I. \$40,000 to \$49,999
- J. \$50,000 to \$59,999
- K. \$60,000 to \$74,999
- L. \$75,000 to \$99,000
- M. \$100,000 or more

- A. Less than \$5,000
- B. \$5,000 to \$7,499
- C. \$7,500 to \$9,999
- D. \$10,000 to \$12,499
- E. \$12,500 to \$14,999
- F. \$15,000 to \$19,999
- G. \$20,000 to \$29,999
- H. \$30,000 to \$39,999
- I. \$40,000 to \$49,999
- J. \$50,000 to \$59,999
- K. \$60,000 to \$74,999
- L. \$75,000 to \$99,000
- M. \$100,000 to \$149,999
- N. \$150,000 or more

Mexican, Mexican American, or Chicano

Puerto Rican or Puerto Rican American

Cuban or Cuban American

Central or South American

Other Hispanic or Latino background

White

Black or African American

Asian

American Indian or Alaska Native

Native Hawaiian or other Pacific Islander