

National Study of Child Care for Low-Income Families

FAMILY CHILD CARE PROVIDER INTERVIEW

Respondent Name _____

Respondent ID _____

Interviewer Name _____

Interviewer ID _____

Date of Interview ____/____/____

Introduction

Thank you for agreeing to talk with us. As you know, we are talking to you as part of a research project that we are conducting on families' use of child care. Everything that you say to me will be completely private—only the research staff will see the interview, and your name won't remain on any of the forms. We have assigned each interview an ID number, and no one except the research staff will be able to match your name with that ID.

I want to thank you again for agreeing to talk with me. If you have any questions at any time, or if you don't understand something I've said, please let me know. If you feel uncomfortable with any questions, please let me know and we'll go on to the next one. Okay? Do you have any questions now?

Section A. Care Provided

- A1. How long have you been caring for children in your home other than your own children or children who live with you?

RECORD ANSWER AS EITHER THE NUMBER OR YEARS AND MONTHS OR THE DATE WHEN PROVIDER STARTED CARING FOR CHILDREN.

- a. _____ YEARS AND _____ MONTHS
OR
b. SINCE _____ MONTH, 19 _____
DON'T KNOW 97
REFUSED 98

- A1a. Is there someone who helps you to take care of the children on a regular basis?

YES 1
NO 2 GO TO A2

- A1b. How long has this person been helping you?

_____ # YEARS _____ # MONTHS

A2. When you first began, what made you decide to provide care for children? (ACCEPT ONLY ONE RESPONSE. PROBE FOR THE MAIN REASON.)

	A2	A2A
WANT TO STAY AT HOME WITH OWN CHILDREN	1	1
RELATIVES OR FRIENDS NEED CARE SO THEY		
CAN WORK	2	2
LIKE CHILDREN	3	3
THERE IS A NEED FOR GOOD CHILD CARE FOR		
WORKING PARENTS	4	4
NEEDED THE MONEY	5	5
WANTED A BUSINESS OF MY OWN	6	6
HAD BEEN A TEACHER IN A DAY CARE CENTER	7	7
ALWAYS WANTED TO TEACH, WORK WITH		
CHILDREN	8	8
OTHER (SPECIFY)	9	9
DON'T KNOW	97	97
REFUSED	98	98

A2a. What is the main reason you continue to provide care? (ENTER IN A2A COLUMN.)

A2b. How would you describe what you are trying to do with the children you care for? What do you see as your responsibilities? (CIRCLE ALL THAT APPLY.)

HELP PREPARE THEM FOR SCHOOL	1
CREATE A HOME-LIKE ATMOSPHERE	2
BE A SUBSTITUTE PARENT FOR THEM	3
KEEP CHILDREN SAFE	4
HELP THEM TO LEARN TO GET ALONG WITH	
OTHER CHILDREN	5
HELP THEM TO LEARN TO GET ALONG WITH	
OTHER PEOPLE	6
TEACH THEM WHAT IS RIGHT	7
OTHER (SPECIFY)	8
OTHER (SPECIFY)	9
OTHER (SPECIFY)	10

A3. How many children other than your own children or children who live with you do you take care of on a regular basis each week?

PROBE: By regular basis I mean on a schedule that is similar from week to week.

_____ CHILDREN	
DON'T KNOW	97
REFUSED	98

A4. Next, I have a few questions about [the child/each of the (NUMBER FROM A3) children] you take care of on a regular basis. (Let's start with the youngest.)

	Child 1	Child 2	Child 3	Child 4	Child 5	Child 6
A5. How old is the youngest (next youngest) child you take care of regularly?	_____ yrs _____ months	_____ yrs _____ months	_____ yrs _____ months	_____ yrs _____ months	_____ yrs _____ months	_____ yrs _____ months
A6. What is child's first name?						
A7. ASK IF NOT OBVIOUS: Is that a boy or a girl?	GIRL.....1 BOY.....2	GIRL 1 BOY 2	GIRL 1 BOY 2	GIRL 1 BOY 2	GIRL 1 BOY 2	GIRL 1 BOY 2
A8. Is (NAME OF CHILD) related to you?	YES.....1 NO2	YES 1 NO 2	YES 1 NO 2	YES 1 NO 2	YES 1 NO 2	YES 1 NO 2
A9. How is child related to you?	GRANDCHILD1 NEPHEW/ NIECE2 COUSIN3 BROTHER/ SISTER4 OTHER (SPECIFY) _____.96	GRANDCHILD 1 NEPHEW/ NIECE..... 2 COUSIN 3 BROTHER/ SISTER 4 OTHER (SPECIFY) _____ 96	GRANDCHILD 1 NEPHEW/ NIECE..... 2 COUSIN 3 BROTHER/ SISTER 4 OTHER (SPECIFY) _____ 96	GRANDCHILD 1 NEPHEW/ NIECE..... 2 COUSIN 3 BROTHER/ SISTER 4 OTHER (SPECIFY) _____ 96	GRANDCHILD 1 NEPHEW/ NIECE..... 2 COUSIN 3 BROTHER/ SISTER 4 OTHER (SPECIFY) _____ 96	GRANDCHILD 1 NEPHEW/ NIECE..... 2 COUSIN..... 3 BROTHER/ SISTER 4 OTHER (SPECIFY) _____ 96
A9a. Is this child a special needs child?	YES.....1 NO2	YES 1 NO 2	YES 1 NO 2	YES 1 NO 2	YES 1 NO 2	YES 1 NO 2
A10. Do you charge for caring for this child?	YES.....1 NO2	YES 1 NO 2	YES 1 NO 2	YES 1 NO 2	YES 1 NO 2	YES 1 NO 2
A11. If yes, how much do you charge per week for this child?	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
A11a. How much of this fee does the parent pay?	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
B7a. How much does the (CC agency) pay?	\$ _____ DK.....9999	\$ _____ DK.....9999	\$ _____ DK.....9999	\$ _____ DK.....9999	\$ _____ DK.....9999	\$ _____ DK.....9999

	Child 7	Child 8	Child 9	Child 10	Child 11	Child 12
A5. How old is the youngest (next youngest) child you take care of regularly?	_____ yrs _____ months	_____ yrs _____ months	_____ yrs _____ months	_____ yrs _____ months	_____ yrs _____ months	_____ yrs _____ months
A6. What is child's first name?						
A7. ASK IF NOT OBVIOUS: Is that a boy or a girl?	GIRL1 BOY2	GIRL1 BOY2	GIRL1 BOY2	GIRL1 BOY2	GIRL1 BOY2	GIRL 1 BOY 2
A8. Is (NAME OF CHILD) related to you?	YES1 NO2	YES1 NO2	YES1 NO2	YES1 NO2	YES1 NO2	YES 1 NO 2
A9. How is child related to you?	GRANDCHILD1 NEPHEW/ NIECE2 COUSIN3 BROTHER/ SISTER4 OTHER (SPECIFY)96	GRANDCHILD1 NEPHEW/ NIECE2 COUSIN3 BROTHER/ SISTER4 OTHER (SPECIFY)96	GRANDCHILD1 NEPHEW/ NIECE2 COUSIN3 BROTHER/ SISTER4 OTHER (SPECIFY)96	GRANDCHILD1 NEPHEW/ NIECE2 COUSIN3 BROTHER/ SISTER4 OTHER (SPECIFY)96	GRANDCHILD1 NEPHEW/ NIECE2 COUSIN3 BROTHER/ SISTER4 OTHER (SPECIFY)96	GRANDCHILD 1 NEPHEW/ NIECE 2 COUSIN 3 BROTHER/ SISTER 4 OTHER (SPECIFY) 96
A9a. Is this child a special needs child?	YES1 NO2	YES1 NO2	YES1 NO2	YES1 NO2	YES1 NO2	YES 1 NO 2
A10. Do you charge for caring for this child?	YES1 NO2	YES1 NO2	YES1 NO2	YES1 NO2	YES1 NO2	YES 1 NO 2
A11. If yes, how much do you charge per week for this child?	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
A11a. How much of this fee does the parent pay?	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
B7a. How much does the (CC agency) pay?	\$ _____ DK9999	\$ _____ DK9999	\$ _____ DK9999	\$ _____ DK9999	\$ _____ DK9999	\$ _____ DK9999

A12. I'd like to go through a typical week with you. Let's start with the children you care for, starting with (CHILD #1). Which days does he/she spend time here? When does he/she arrive? When does he/she leave? (MARK SCHEDULE FOR CHILD #1 ON CHART; GO THROUGH EACH CHILD'S SCHEDULE IN THE SAME WAY.)

Now, I'd like to find out about your own children who are around during these times. Let's start with (NAME OF PROVIDER'S FIRST CHILD). (MARK SCHEDULE FOR EACH CHILD.)

Finally, are there adult family members or friends who are here at the same time as the children? Can we talk through their schedules? (MARK SCHEDULE FOR EACH ADULT.)

CHILD CARE PROVIDER SCHEDULE

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Children in care 1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____ 7. _____ 8. _____ 9. _____ 10. _____ 11. _____ 12. _____							
Caregiver's children 1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____							
Other adults 1. _____ 2. _____ 3. _____ 4. _____ 5. _____							

A13. [Is the child you care for/How many of the (NUMBER FROM A3) children you care for are] ...

	Number	Don't Know	Refused
of Hispanic or Latino descent?	_____	97	98

A13a. [Is the child you care for/How many of the (NUMBER FROM A3) children you care for are] ...

	Number	Don't Know	Refused
a. White?	_____	97	98
b. Black/African American?	_____	97	98
c. American Indian or Alaska native?	_____	97	98
d. Asian?	_____	97	98
e. Native Hawaiian or other Pacific Islander?	_____	97	98
f. Other? (SPECIFY)	_____	97	98
_____	_____		
_____	_____		

A14. During January through March of this year, how many children did you stop caring for?

THIS INCLUDES CHILDREN THE PROVIDER REFUSES TO CARE FOR ANY LONGER AND CHILDREN THE PARENT WITHDRAWS FOR ANY REASON.

_____ CHILDREN	
DON'T KNOW	97
REFUSED	98

A15. During January through March of this year, how many new children did you start taking care of?

_____ CHILDREN	
DON'T KNOW	97
REFUSED	98

A15a. How many children can you comfortably take care of at one time?

_____ # OF CHILDREN AT ONE TIME

A16. Is there a child care resource and referral network in your community?

IF THE PROVIDER KNOWS ABOUT THESE OR BELONGS TO ONE SHE WILL NOT NEED A DEFINITION.

YES	1	
NO	2	GO TO A18
DON'T KNOW	97	GO TO A18
REFUSED	98	GO TO A18

A17. Are you listed with a resource and referral agency?

YES	1	
NO	2	
DON'T KNOW	97	
REFUSED	98	

A18. Is your home licensed as a family child care home by the State?

YES	1	
NO	2	GO TO A19

A18a. How long have you been licensed?

_____	_____
YEARS	MONTHS

A18b. How often are you required to renew your license?

YEARLY	1	
EVERY TWO YEARS	2	
NO RE-LICENSING REQUIREMENT	3	
OTHER (SPECIFY) _____	4	
DON'T KNOW	5	

A18c. Does the State licensing agency make monitoring visits to your home?

YES	1	
NO	2	GO TO A19

A18d. How frequently do licensing staff make monitoring visits?

More than once a year	1	
Once a year	2	
Once every two years	3	
On an irregular schedule.....	4	

A18e. Are you notified in advance about these visits?

YES	1
NO	2
SOMETIMES	3

A18f. When was the last visit?

_____ / _____
MONTH YEAR

A19. Are you a member of a family child care organization such as the Family Day Care Professional Association or the National Association for the Education of Young Children (NAEYC)?

YES	1
NO	2
DON'T KNOW	97
REFUSED	98

A20. Are you sponsored by a group (e.g., a church, Head Start, Catholic Charities) that organizes family day care in your area?

YES	1	
NO	2	GO TO A21
DON'T KNOW	97	GO TO A21
REFUSED	98	GO TO A21

A20a. Are you taking part in the Child and Adult Care Feeding Program?

YES	1
NO	2

A21. Do you meet on a regular basis with other family day care providers for training or as part of a support network?

YES	1	GO TO A22
YES, BUT NOT REGULARLY	2	GO TO A22
NO	3	
DON'T KNOW	97	
REFUSED	98	

A21a. Are you aware of opportunities for training or support groups?

YES	1
NO	2

A22. When a child leaves, what do you do to try to find another child to care for? (CIRCLE ALL THAT APPLY.)

PROBE: Any other steps?

TRY TO GET REFERRALS FROM FRIENDS, NEIGHBORS, OR RELATIVES	1
TRY TO GET REFERRALS FROM WELFARE OR SOCIAL SERVICE CASEWORKERS	2
NEWSPAPERS, YELLOW PAGES, OR OTHER ADVERTISEMENTS	3
TRY TO GET REFERRALS FROM COMMUNITY AGENCIES OTHER THAN WELFARE OR SOCIAL SERVICE.....	4
TALK TO FRIENDS OR OTHER FAMILIES WITH CHILDREN PARENTS OF CHILDREN IN CARE	5
BULLETIN OR MESSAGES BOARDS	6
CHECK WITH DAY CARE CENTERS OR PRESCHOOLS	7
GET REFERRALS FROM RESOURCE AND REFERRAL AGENCY	8
WORD OF MOUTH	9
WAITING LIST	10
PAMPHLETS OR FLYERS	11
NONE OR TAKE NO STEPS.....	12
OTHER (SPECIFY) _____	13
_____	99
NO OTHER STEPS.....	00
DON'T KNOW	97
REFUSED	98

A23. The last time you had an opening, how long did it take you to find another child to care for?

IF "NO TIME AT ALL" CODE AS "0 DAYS"

_____ days.....	1
_____ weeks	2
_____ months	3
STILL HAVE OPENING/COULDN'T FIND ANOTHER CHILD.....	96
DON'T KNOW	97
REFUSED	98

IF PROVIDER IS NOT CARING FOR ANY SPECIAL NEEDS CHILDREN, SKIP TO QA25.

A24. Do you have to do any special things for the special needs child(ren) you are caring for?

YES	1	
NO	2	GO TO A26

A24a. What are they?

SPECIAL MEDICATION	1
TAKE TO DOCTOR'S APPOINTMENT	2
TAKE TO THERAPY	3
OTHER (SPECIFY)	4

GO TO A26

A25. Have you ever taken care of a child with special needs or handicaps?

YES	1
NO	2

A26. What is the earliest time that parents can drop off their child(ren)?

_____ AM	1
_____ PM	2
DON'T KNOW	97
REFUSED	98

A27. How late can parents pick up their child(ren)?

_____ AM	1
_____ PM	2
DON'T KNOW	97
REFUSED	98

A27a. Do you ever make special arrangements with parents to drop off a child earlier or pick up later?

YES	1	
NO	2	GO TO A29

A27b. Do parents pay extra for this?

YES	1
NO	2

A28. Do you ever provide weekend care?

YES	1
NO	2

A29. Can you provide care for parents who work off-hours or whose hours vary week to week?

YES, OFF-HOURS	1
YES, VARIED HOURS	2
YES, BOTH	3
NO, NEITHER	4

A30. Are there any weeks during the year that you do **not** provide child care? How many weeks?

INCLUDES SCHEDULED VACATIONS AND TIMES WHEN PROVIDER REGULARLY DOES NOT PROVIDE CARE.

_____ weeks	1
OPEN ALL YEAR	00
DON'T KNOW	97
REFUSED	98

A30a. Do you provide any help to parents in getting alternative child care?

YES	1
NO	2

A31. Do you ever have to turn away a child for any reason?

YES	1
NO	2 GO TO A32

A31a. Why do you have to do this?

WOULD HAVE TOO MANY CHILDREN	1
CHILD REQUIRES SPECIAL CARE	2
OTHER (SPECIFY) _____	3
OTHER (SPECIFY) _____	4
OTHER (SPECIFY) _____	5

A32. What do you see as the special advantages of a family child care arrangement for parents?
(CIRCLE ALL RESPONSES THAT APPLY.)

COST.....	1
FLEXIBILITY OF HOURS	2
HOURS OF CARE MATCH PARENTS' SCHEDULE	3
LIKE A HOME	4
CHILD CAN BE WITH SIBLINGS	5
PROVIDER HELPS PARENT AS WELL AS CHILD.....	6
PROVIDER IS LIKE A FAMILY MEMBER	7
CHILD CAN BE WITH CHILDREN OF DIFFERENT AGES	8
MORE INDIVIDUAL ATTENTION	9
CARE IS CLOSE TO WHERE CHILD LIVES	10
SHARES PARENT'S VALUES	11
OTHER (SPECIFY).....	12
NONE.....	13

A33. What about for you? What are the advantages, the good things about being a family child care providers? (CIRCLE ALL RESPONSES THAT APPLY.)

LETS ME STAY AT HOME WITH MY OWN CHILDREN	1
I CAN HELP YOUNG PARENTS	2
I CAN TEACH CHILDREN THINGS THEY NEED TO KNOW.....	3
IT'S LIKE BEING A TEACHER, BUT YOU WORK FOR YOURSELF	4
IT GIVES YOU INDEPENDENCE	5
I DON'T HAVE TO BUY BUSINESS CLOTHES, FIGHT TRAFFIC.....	6
I FEEL LIKE A PROFESSIONAL PERSON.....	7
OTHER (SPECIFY).....	8
NONE.....	9

A34. Are there any disadvantages? What are they?

I AM NOT ALWAYS SEEN AS A PROFESSIONAL.....	1
PARENTS PICK THEIR CHILDREN UP LATE	2
PARENTS CHANGE THEIR SCHEDULES ON SHORT NOTICE	3
PARENTS DON'T PAY ME.....	4
PARENTS ARE OFTEN LATE IN PAYING ME.....	5
PARENTS TAKE CHILDREN OUT OF CARE WITHOUT GIVING ME NOTICE	6
I DON'T HAVE ENOUGH TIME FOR MY OWN CHILDREN	7
I DON'T HAVE ENOUGH PERSONAL TIME	8
THERE'S A LOT OF WEAR AND TEAR ON MY HOME .	9
OTHER (SPECIFY).....	10
I DON'T GET PAID ENOUGH	11
NONE.....	12

Section B. Child Care Fees

Next, I would like to talk about the fees you charge for child care.

CATI CHECK: DO NOT ASK IF ALL CARE IS FREE. GO TO SECTION C

B1. Do you sometimes charge different amounts depending on ...

	Yes	No	Do Not Do This	Don't Know	Refused
a. The number of children from the same family	1	2	96	97	98
b. Family income	1	2	96	97	98
c. Your relationship with a child's family; if they are family, friends, or strangers?.....	1	2	96	97	98
d. The number of hours per week that you care for a child.....	1	2	96	97	98
e. The child's age.....	1	2	96	97	98
f. Whether a child is toilet trained.....	1	2	96	97	98
g. Whether a child has a diagnosed handicap	1	2	96	97	98
h. Whether parents or an outside agency such as Welfare or an employment or training program is paying for the care	1	2	96	97	98
i. Whether you provide special services such as . . .					
i.1. Meals	1	2	96	97	98
i.2. Transportation.....	1	2	96	97	98
i.3. Diapers.....	1	2	96	97	98
i.4. Other (SPECIFY) _____	1	2	96	97	98
B2. Are there any other reasons why you charge different amounts for child care (SPECIFY)	1	2	96	97	98

- B3. Does a federal, state, or local agency such as welfare or (NAME OF LOCAL CHILD CARE SERVICES AGENCY) and employment or training program pay all or part of the fees for any of the children you care for?

THIS INCLUDES PAYMENTS MADE DIRECTLY TO THE PROVIDER AND SUBSIDIES TO PARENTS EARMARKED FOR THE PROVIDER.

YES	1	
NO	2	GO TO B9
DON'T KNOW	97	GO TO B9
REFUSED	98	GO TO B9

- B4. How many of the children you care for are paid for in this way?

_____ CHILDREN

DON'T KNOW	97
REFUSED	98

- B5. Does the agency pay you directly for slots, pay you for vouchers or certificates received from parents, or does it pay the child's parent in cash?

PAYS PROVIDER DIRECTLY FOR SLOT	1	
PAYS PROVIDER FOR VOUCHERS	2	GO TO B7
PAYS PARENT IN CASH	3	
VARIES PER CHILD	4	
DON'T KNOW	97	
REFUSED	98	

- B6. Do any parents pay you with child care vouchers?

PROBE: Vouchers are certificates that parents may receive from a social service agency and use to pay for their child's care. The provider can then turn them in for cash payment.

YES	1
NO	2
DON'T KNOW	97
REFUSED	98

- B7. Does the agency pay the full fee or a partial fee for a child's care?

FULL	1
PARTIAL	2
VARIES PER CHILD	3
DON'T KNOW	97
REFUSED	98

B7a. **REFER TO ROSTER AT A5 AND ASK.** How much does (NAME OF LOCAL CHILD CARE AGENCY) pay for each child? ENTER ON ROSTER.

- B8. Do you ask parents of subsidized children to pay the whole of the difference between what you charge and what the agency pays you?

YES	1
NO	2

GO TO B10

B9. Would you accept children whose fees are paid by a public agency?

YES	1
NO	2
DON'T KNOW	97
REFUSED	98

B10. How many of the children you care for have parents who receive public assistance, such as welfare, Food Stamps, or WIC.

_____ CHILDREN

DON'T KNOW	97
REFUSED	98

IF PROVIDER DOES NOT CARE FOR SUBSIDIZED CHILDREN, GO TO SECTION C.

B11. Are there problems for you, associated with subsidies or caring for subsidized children?

YES	1	
NO	2	GO TO SECTION C

B12. What kinds of problems?

HAVE TO WAIT FOR PAYMENTS.....	1
AMOUNT OF SUBSIDY IS INADEQUATE.....	2
PARENTS OFTEN CAN'T OR WON'T PAY THE COPAYMENT AMOUNT.....	3
PARENTS LEAVE WITHOUT NOTICE	4
OTHER (SPECIFY)	5
.....	6

B13. What happens when a parent loses the subsidy?

I LET THE CHILD STAY FOR A WHILE	1
I MAKE A PAYMENT ARRANGEMENT WITH PARENT	2
I ASK THE PARENT TO FIND ANOTHER ARRANGEMENT	3
OTHER (SPECIFY)	4

Section C. Health and Safety

Now I'd like to ask you some questions about health and safety.

C1. Do you allow parents to leave children who ...

	Yes	No	Don't Know	Refused
a. Have a feverish appearance	1	2	97	98
b. Have severe coughs	1	2	97	98
c. Have unusual spots or rashes	1	2	97	98

C2. Are sick children separated from other children?

IN A SEPARATE ROOM, NOT ACROSS THE ROOM.

YES	1
NO	2
SOMETIMES OR DEPENDS	3
CARES FOR ONLY ONE CHILD	96
DON'T KNOW	97
REFUSED	98

C3. At a parent's or physician's request, do you administer ...

	Yes	No	Some-times	Don't Know	Refused
a. Over-the-counter medications such as aspirin or cough syrup	1	2	3	97	98
b. Prescription medications	1	2	3	97	98

C4. In case of emergency, do you have the phone number of (each/the) child's doctor?

YES, ALL	1
SOME, NOT ALL	2
NO	3
DON'T KNOW	97
REFUSED	98

C5. Do you have a medical release for (each/the) child in case of emergencies?

THIS IS A PERMISSION FORM ALLOWING THE PROVIDER TO TAKE A CHILD TO A DOCTOR OR HOSPITAL FOR TREATMENT IN AN EMERGENCY IF THE PARENT CAN'T BE REACHED.

YES, ALL.....	1
SOME, NOT ALL.....	2
NO	3
DON'T KNOW	97
REFUSED	98

C6. Do you have a plan to follow if (one of) the child(ren) in your care needs emergency medical care?

A PLAN FOR HOW THE PROVIDER WILL ARRANGE CARE FOR OTHER CHILDREN AND FOR TRANSPORTATION TO THE DOCTOR OR HOSPITAL.

YES	1
NO	3
DON'T KNOW	97
REFUSED	98

C7. Do you have a list of persons to whom (each/the) child may be released?

YES, ALL.....	1
SOME, NOT ALL.....	2
NO	3
DON'T KNOW	97
REFUSED	98

C8. What arrangements do you make for providing child care when you are sick? (CODE ONLY ONE RESPONSE.)

PROBE FOR MOST FREQUENT ARRANGEMENT IF PROVIDER HAS MADE MORE THAN ONE ARRANGEMENT.

TELL PARENTS THEY CANNOT BRING CHILD.....	1
MAKE ALTERNATIVE ARRANGEMENTS FOR CHILDREN.....	2
CARE FOR CHILDREN ANYWAY	3
NEVER GET SICK.....	97
OTHER (SPECIFY)	
.....	5
DON'T KNOW	97
REFUSED	98

C9. Do you have a plan in case of fire?

YES 1
NO 2

(INTERVIEWER: RECORD THESE ANSWERS ON ENVIRONMENTAL CHECKLIST ALSO.)

C10. Is there a gun in the house?

YES 1 GO TO C10A
NO 2

C10a. Where is it kept?

LOCKED PLACE, INACCESSIBLE TO CHILDREN 1
NOT IN LOCKED PLACE, ACCESSIBLE TO
CHILDREN 2

C11. Do you have a first-aid kit?

YES 1 GO TO C11A
NO 2

C11a. What is in it and where is it kept? (OBSERVE IF POSSIBLE AND RECORD.)

READILY ACCESSIBLE TO CAREGIVER BUT OUT OF
REACH OF CHILDREN AND ADEQUATELY
STOCKED (DISPOSABLE NONPOROUS GLOVES,
SEALED PACKAGES OF ALCOHOL WIPES OR
ANTISEPTIC, SCISSORS, TWEEZERS, THER-
MOMETER, BANDAGES, GAUZE, SYRUP OF
IPECAC, COLD PACK, TELEPHONE NUMBER
OF POISON CONTROL CENTER) 1
NOT READILY ACCESSIBLE TO CAREGIVER OR
WITHIN REACH OF CHILDREN OR NOT
ADEQUATELY STOCKED 2

Section D. Work and Other Stresses

I'd like to ask you some questions about the kinds of stress you may experience, as a result of caring for children.

- D1. How often during the past three months have you felt used up at the end of the day? Would you say very often, often, sometimes, rarely, or never?

Very often.....	1
Often.....	2
Sometimes	3
Rarely	4
Never	5
Don't know.....	97
Refused.....	98

- D2. How often during the past three months have you felt tired when you got up in the morning and had to face another day?

PROBE IF NECESSARY: Would you say very often, often, sometimes, rarely, or never?

Very often.....	1
Often.....	2
Sometimes	3
Rarely	4
Never	5
Don't know.....	97
Refused.....	98

- D3. How often during the past three months have you felt burned out or stressed by your work?

PROBE IF NECESSARY: Would you say very often, often, sometimes, rarely, or never?

Very often.....	1
Often.....	2
Sometimes	3
Rarely	4
Never	5
Don't know.....	97
Refused.....	98

D4. During the past three months, how often have you felt nervous and stressed?

PROBE IF NECESSARY: Would you say very often, often, sometimes, rarely, or never?

Very often.....	1
Often.....	2
Sometimes	3
Rarely	4
Never	5
Don't know.....	97
Refused.....	98

D5. During the past three months, how often have you not had enough time for yourself? Would you say very often, often, sometimes, rarely, or never?

Very often.....	1
Often.....	2
Sometimes	3
Rarely	4
Never	5
Don't know.....	97
Refused.....	98

D6. During the past three months, how often have you **not** had enough time for your family or other important people in your life? Would you say very often, often, sometimes, rarely, or never?

Very often.....	1
Often.....	2
Sometimes	3
Rarely	4
Never	5
Don't know.....	97
Refused.....	98

D7. In the past three months, how often have you **not** had the energy to do things with your family or other important people in your life? Would you say very often, often, sometimes, rarely, or never?

Very often.....	1
Often.....	2
Sometimes	3
Rarely	4
Never	5
Don't know.....	97
Refused.....	98

D8. In the past three months, how often have you **not** been able to get everything done at home each day?

PROBE IF NECESSARY: Would you say very often, often, sometimes, rarely, or never?

Very often.....	1
Often.....	2
Sometimes	3
Rarely	4
Never	5
Don't know.....	97
Refused.....	98

D9. In the past three months, how often have you **not** been in as good a mood as you would like to be?

PROBE IF NECESSARY: Would you say very often, often, sometimes, rarely, or never?

Very often.....	1
Often.....	2
Sometimes	3
Rarely	4
Never	5
Don't know.....	97
Refused.....	98

D10. We would like to know which areas of life are creating difficulty, worry, or stress for people. In the previous three months, to what extent have any of the following areas of life been a source of stress to you?

Your health: Would you say it has been ...

No stress at all	1
Hardly any stress	2
Some stress	3
A lot of stress.....	4

The health of family members: Would you say it has been ...

No stress at all	1
Hardly any stress	2
Some stress	3
A lot of stress.....	4

Caring for children: Would you say it has been ...

No stress at all	1
Hardly any stress	2
Some stress	3
A lot of stress.....	4

Care of elderly or adult family members with a disability: Would you say it has been ...

No stress at all	1
Hardly any stress	2
Some stress	3
A lot of stress.....	4

Personal or family finances: Would you say it has been ...

No stress at all	1
Hardly any stress	2
Some stress	3
A lot of stress.....	4

Family relationships, including extended family: Would you say it has been ...

No stress at all	1
Hardly any stress	2
Some stress	3
A lot of stress.....	4

D11. While caring for children in your home, you may have experienced conflicts between responsibilities to your family and responsibilities for the children you care for. Have you had any of the following experiences?

Yes	No	Not Applicable	Don't Know	Refused
-----	----	-------------------	---------------	---------

a.	Your own children resented your attention to the other children.....	1	2	96	97	98
b.	You had to clean house or run errands while caring for the other children	1	2	96	97	98
c.	Other members of your household resented disruption of household activities by your child care activities	1	2	96	97	98
d.	Have you had problems with parents who leave their children with you, even though they have symptoms of illness that are not permitted	1	2	96	97	98
e.	Have you had problems with parents who are repeatedly late in picking up their children.....	1	2	96	97	98
f.	Were there any other conflicts between your family and child care demands (SPECIFY)	1	2	96	97	98

Section E. Relationship with Focus Child's Parent

Next I have a few questions about your relationship with (FOCUS CHILD'S PARENT) over the last three months.

E1. Are you related to (FOCUS CHILD'S PARENT)?

YES	1	
NO	2	GO TO E2

E1a. How are you related? (FOCUS CHILD'S PARENT) is caregiver's . . .

PARENT	1	GO TO E3
SISTER	2	GO TO E3
AUNT	3	GO TO E3
COUSIN	4	GO TO E3
OTHER	5	GO TO E3

E2. Were you friendly with (FOCUS CHILD'S PARENT) before you began providing care for (FOCUS CHILD)?

YES	1
NO	2

E3. Have you gotten together socially with (PARENT) in the last three months?

YES	1
NO	2

E4. Has (PARENT) been critical of you as a caregiver or as a person in the last three months?

YES	1
NO	2

E5. Have you shared your personal feelings or concerns with (PARENT) in the last three months?

YES	1
NO	2

E6. Have you had a disagreement or dispute with (PARENT) in the last three months ...

E6a. about child rearing?

YES	1
NO	2

E6b. about money?

YES 1
 NO 2

E6c. about coming late to pick up (CHILD)?

YES 1
 NO 2

E7. Have you talked with (PARENT) about (CHILD) and how (she/he) is doing in the last three months?

YES 1
 NO 2

E8. Do you consider (PARENT) a personal friend?

YES 1
 NO 2

E9. I am going to read some statements to you. For each one I'd like you to tell me if you strongly disagree, disagree, are neutral, agree, or strongly agree.

		Strongly Disagree	Dis- agree	Neutral	Agree	Strongly Agree
a.	I trust the parent will tell me important things	1	2	3	4	5
b.	The parent and I talk about problems right away	1	2	3	4	5
c.	I truly value the parent's opinions	1	2	3	4	5
d.	When the parent and I have a problem, we don't discuss it	1	2	3	4	5
e.	The parent is someone I can rely on	1	2	3	4	5
f.	The parent and I seldom take time to discuss care	1	2	3	4	5
g.	I have great respect for the parent	1	2	3	4	5
h.	The parent has knowledge and skills	1	2	3	4	5
i.	The parent views me as a babysitter, not an educator	1	2	3	4	5
j.	I work closely with the parent	1	2	3	4	5
		Strongly Disagree	Dis- agree	Neutral	Agree	Strongly Agree
k.	The parent and I almost always agree about	1	2	3	4	5

care

l.	The parent is not really my friend	1	2	3	4	5
m.	I am sometimes concerned about confidentiality	1	2	3	4	5
n.	Communication between the parent and me is open	1	2	3	4	5
o.	The parent and I value our relationship	1	2	3	4	5
p.	I consider the parent a true friend	1	2	3	4	5
q.	The parent is not knowledgeable	1	2	3	4	5
r.	The parent genuinely cares for his/her child	1	2	3	4	5
s.	The parent and I have different values	1	2	3	4	5
t.	I am interested in the parent's personal life	1	2	3	4	5
u.	The child truly enjoys being with the parent	1	2	3	4	5
v.	I trust the parent to give good care	1	2	3	4	5
w.	I don't always respect the parent's opinions	1	2	3	4	5
x.	When I need help, the parent will help	1	2	3	4	5
y.	The parent gives me valuable suggestions	1	2	3	4	5
z.	The parent doesn't seem interested in me	1	2	3	4	5
aa.	I usually agree with the parent's discipline	1	2	3	4	5
bb.	I like and enjoy being with the parent	1	2	3	4	5
cc.	I don't feel the child is as well off with the parent as with me	1	2	3	4	5
dd.	I admire the way the parent works with the child	1	2	3	4	5
ee.	If the parent had a problem, I would help	1	2	3	4	5
ff.	The parent is an excellent parent all around	1	2	3	4	5
gg.	I view the parent as an employer, not a friend	1	2	3	4	5
hh.	The parent is a caring person	1	2	3	4	5
ii.	The parent's overall childrearing approach matches mine	1	2	3	4	5

Section F. Caregiver Characteristics and Experience

Now, some questions about you.

F1. What is the highest level of school you completed?

IF THE PROVIDER ATTENDED SCHOOL OUTSIDE OF THE UNITED STATES, PROBE FOR THE EQUIVALENT OF THE US SYSTEM.

LESS THAN HIGH SCHOOL.....	1	
GED	2	
HIGH SCHOOL DIPLOMA	3	GO TO F3
LESS THAN 2 YEARS OF COLLEGE	4	GO TO F3
TWO-YEAR ASSOCIATES' DEGREE	5	GO TO F3
TWO OR MORE YEARS OF COLLEGE BUT NO COLLEGE DEGREE	6	GO TO F3
VOCATIONAL OR TECHNICAL SCHOOL AFTER HIGH SCHOOL	7	GO TO F3
COLLEGE DEGREE	8	GO TO F3
POST-GRADUATE OR PROFESSIONAL DEGREE	9	GO TO F3
DON'T KNOW	97	GO TO F3
REFUSED	98	GO TO F3

F2. **INTERVIEWER: ENTER HIGHEST GRADE COMPLETED OR ASK:**

What is the highest grade of regular school you completed?

GRADE	_____	_____
DON'T KNOW	97	
REFUSED	98	

F3. Have you had any special child care or early education training?

PROBE: Not counting any experience you have in caring for your own children.

INCLUDE FORMAL SCHOOL (COLLEGE, HIGH SCHOOL), EXTENSION SCHOOL (NIGHT SCHOOL AND SPECIAL TRAINING PROGRAMS).

CHILD DEVELOPMENT ASSOCIATE (CDA) TRAINING	1
TEACHER TRAINING	2
NURSE'S TRAINING OR HEALTH COURSES.....	3
TRAINING BY REFERRAL OR GOVERNMENT	
AGENCY	4
CHILD CARE COURSES OR WORKSHOPS	5
CHILD DEVELOPMENT OR PSYCHOLOGY	
COURSES IN SCHOOL.....	6
OTHER TRAINING FOCUSED ON EDUCATION	
(SUCH AS ELEMENTARY EDUCATION)	7
OTHER TRAINING FOCUSED ON SOCIAL SERVICES	
(SUCH AS SOCIAL WORK).....	8
OTHER (SPECIFY)	

_____	9
DON'T KNOW	97
REFUSED	98

F4. Are you of Hispanic or Latino descent?

YES, HISPANIC OR LATINO.....	1
NO, NOT HISPANIC OR LATINO	2
DON'T KNOW	97
REFUSED	98

F5. What is/are your race(s)? (DO NOT READ LIST. CIRCLE ALL THAT ARE MENTIONED.)

WHITE.....	1
BLACK/AFRICAN AMERICAN	2
AMERICAN INDIAN OR ALASKA NATIVE.....	3
ASIAN.....	4
NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER ..	5
OTHER (SPECIFY) _____	6
DON'T KNOW	97
REFUSED	98

F6. What is your marital status?

MARRIED/LIVING WITH PARTNER	1
DIVORCED	2
SEPARATED	3
WIDOWED	4
NEVER MARRIED	5
DON'T KNOW	97
REFUSED	98

F7. How old are you?

_____ YEARS OLD

DON'T KNOW	97
REFUSED	98

F8. Approximately what was the total income of your family last year before taxes? Please include your own income and that of all members of your immediate family who are living with you and any other sources of income you may have.

\$ _____ PER YEAR ➔ GO TO F10

DON'T KNOW	97	GO TO F9
REFUSED	98	GO TO F9

F9. Can you tell me the range? Please stop me when I reach your income category. Was it ...

\$0 to \$6,000.....	1
\$6,001 to \$12,000.....	2
\$12,001 to \$18,000.....	3
\$18,001 to \$24,000.....	4
\$24,001 to \$30,000.....	5
OVER \$30,000	6
DON'T KNOW	97
REFUSED	98

F10. Could you tell me approximately how much of your family income was received from child care last year?

PROBE: By last year, we mean 1998.

INCLUDE ALL INCOME EARNED BY CHILD CARE PROVIDERS IN THE HOUSEHOLD.

IF RESPONDENT DOESN'T KNOW, PROBE: Your best estimate would be fine.

\$ ____ ____ ____ , ____ ____ ____ PER YEAR

OR

____ ____ ____ PERCENT

NONE, DIDN'T PROVIDE CARE LAST YEAR	96
DON'T KNOW	97
REFUSED	98

- G1. Now we'd like to ask you some questions about [FOCUS CHILD]. We're interested in the ways he/she is learning to play with other children and to express his/her feelings. I'm going to read a list of descriptions to you, and I want you to tell me whether your child is like the description rarely or never, sometimes, often, or almost always. There are no right or wrong answers. Every child is different, and we are interested in knowing about how children develop and learn about being with other people.

Emotion Regulation Checklist (Shields & Cicchetti, 1995; adapted by Abt Associates Inc., 1999)				
	Rarely/ Never 1	Sometimes 2	Often 3	Almost Always 4
1. Is a cheerful child.	1	2	3	4
2. Has wild mood swings (changes unexpectedly from a good to a bad mood).	1	2	3	4
3. Responds positively when adults approach him/her in a friendly or neutral way.	1	2	3	4
4. Moves easily from one activity to another; doesn't become angry, anxious, upset or overly-excited when changing activities.	1	2	3	4
5. Gets over it quickly when he/she is upset or unhappy (doesn't pout, remain sullen, anxious or sad after upsetting events)	1	2	3	4
6. Is easily frustrated.	1	2	3	4
7. Responds positively when another child approaches him/her in a friendly or neutral way.	1	2	3	4
8. Is likely to have angry outburst or easily throws tantrums.	1	2	3	4
9. Is able to wait for what he/she wants.	1	2	3	4
10. Seeing others unhappy gives him/her pleasure (e.g., laughs when someone gets hurt or punished, enjoys teasing others)	1	2	3	4
11. Can keep his/her excitement under control (e.g., doesn't get "carried away" in high energy play situations or overly excited when it is not appropriate).	1	2	3	4
12. Is whiny or clingy with adults.	1	2	3	4
13. Is likely to have outbursts of energy and exuberance (or excitement) that are disruptive.	1	2	3	4
14. Responds angrily when an adult sets limits.	1	2	3	4
15. Is able to say when he/she is feeling sad, angry or mad,	1	2	3	4

Emotion Regulation Checklist (Shields & Cicchetti, 1995; adapted by Abt Associates Inc., 1999)				
	Rarely/ Never 1	Sometimes 2	Often 3	Almost Always 4
fearful or afraid.				
16. Seems sad or without energy.	1	2	3	4
17. When [CHILD] tries to play with others, he/she is overly exuberant (overly-excited).	1	2	3	4
18. Seems unemotional (e.g., child's expression is vacant or inexpressive; child seems emotionally absent).	1	2	3	4
19. When another child attempts in a friendly or neutral way to get [CHILD] to play or join in, he/she responds negatively (e.g., may speak in angry tone of voice or respond fearfully).	1	2	3	4
20. Is impulsive; does things without thinking.	1	2	3	4
21. Shares in feelings of others; shows concern when others are upset or unhappy.	1	2	3	4
22. Displays excitement or enthusiasm that upsets or intrudes on others	1	2	3	4
23. When another child acts aggressively toward [CHILD] or intrudes on [CHILD], he/she reacts appropriately (e.g., expresses anger, fear, frustration, distress but does not return aggression).	1	2	3	4
24. When [CHILD] tries to get others to play, he/she shows negative emotions (anger, fear, frustration, distress).	1	2	3	4