



# Child Development Supplement CDS 2014 Production Study Guide

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Field Help Desk .....		[Redacted]
PSID Respondent Toll-Free Line.....		[Redacted]
Training Account Code.....		[Redacted]
Main Data Collection Account Code .....		[Redacted]
Main Data Collection Sprint Code .....		[Redacted]



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## **Chapter 1. Introduction to the Child Development Supplement**

### **1.1 Overview**

In the past several decades, there have been enormous demographic and economic changes—some for better and some for worse—that have altered the landscape for children and their families. Some of these changes include: increased incidence of single-parent family structure, declining social and economic conditions in many neighborhoods, improvements in parental education, smaller family sizes, and increased maternal employment. At the same time that such changes have been taking place, public policy targeting families and children, especially those at the bottom of the economic ladder, has also changed fundamentally. At the time the Child Development Supplement (CDS) was initially fielded in 1997, the U.S. had very limited nationally representative longitudinal studies of children focusing on child health and development in the preadolescent years. CDS was designed to increase our knowledge about how these and other changes are influencing child development and well-being.

To address such a gap in knowledge, the CDS set out to fulfill the objective of gathering comprehensive and nationally representative information about children and their families to study how social, economic, and other environmental factors affect children's and adolescents' development. The study addresses influences within the context of families, schools, and neighborhoods, making it one of the most comprehensive studies in the developmental field.

CDS is unique in the sense that it is a “supplement” to the Panel Study of Income Dynamics (PSID). CDS combined with its parent study, the PSID, provide opportunities to study the life course effects of circumstances and experiences in childhood and adolescence on health, economic well-being, and other life dimensions in young adulthood and beyond.

The original CDS followed a cohort of children in PSID families who were 0–12 years of age in 1997 through three waves of data collection and focused on understanding the socio-demographic, psychological, and economic aspects of childhood in an on-going nationally-representative longitudinal study of families.

In 2014, all of the children in the original cohort have reached adulthood, and a new generation of children has replaced them in PSID families. The goal is to collect information in 2014 on all children aged 0–17 years in this new generation, shifting the orientation from a cohort study to one that obtains information on the childhood experiences of all children in PSID families, who will become primary respondents in the Core PSID when they form their own economically-independent households. These new data will support studies of health, development, and well-being in childhood; the relationship between children's characteristics and contemporaneous family decision-making and behavior; and the effects of childhood factors on subsequent social, demographic, economic, and health outcomes over the entire life course for these individuals as they are followed into the future as part of PSID. The sample will consist of approximately 6,400 children aged 0-17 and 3,500 primary caregivers. The content domains in

CDS are broad, covering many topics in great detail. Later in this manual, we will briefly describe these topics as we outline each of the instruments.

This project will fill an important gap in data on children by supplementing a high quality, national sample that already contains almost 50 years of data on the families that it follows. Welcome to the CDS!

## **1.2 PSID Background**

The Panel Study of Income Dynamics (PSID) is a longitudinal survey of a representative sample of U.S. men, women, children and the families in which they reside. Data on employment, income, wealth, housing, food expenditures, transfer income, and marital and fertility behavior have been collected annually or bi-annually since 1968. From 5,000 families in 1968, the study has grown to include over 10,000 families.

Most of the information collected is about family composition and changes (marriages, divorces, births, deaths, people moving in and out), income sources and amounts, employment, pensions and wealth. We also ask about housing, education, vehicles, health, and money spent on food, healthcare, and school. Our main focus is to learn how family composition and financial factors interact with each other and how they change over time.

The PSID sample is nationally representative—analysts can use the data to draw conclusions about all families across the nation. The study is also longitudinal—we go back to the same individuals and their families each wave. What makes this data stand out from others dealing with the same subjects is that we follow individuals over very long periods of time in the context of their family settings, and we keep adding new generations of our families to the study by following those who move away from the main family we interview. These new cases are called split-offs. This is the only way it's possible to see changes over time and determine their causes. And because we interview all eligible children of study families when they become adults, researchers can examine trends across generations of the same family.

Researchers from all over the world use PSID data to investigate questions of income and expenditures, wealth, pensions, welfare, health, marriage, divorce, child-bearing, aging, child development, education, geographic mobility, housing, intergenerational effects, labor supply, occupations, poverty, retirement, unemployment, and a host of other topics.

With all this information about the study families, researchers can analyze the effect of certain factors on others. For example, how does divorce, health, or education level affect income? Does having moved several times affect a child's development? In addition, because we interview adult children of sample members when they move out and form their own households, analysts can study the ways in which the circumstances and behaviors of one generation affect the opportunities and behavior of the next.

The enormous usefulness of long-term economic and social data from a national sample of families has made the PSID one of the most widely used social science data in the world. No one else has interviewed two and three generations of the same family or done it for such a long time. Researchers know that changes in income, health and wealth are all interconnected. To understand these changes, they need a study that gathers information on all these topics, has a nationally representative sample, and gathers the information from the same families each time. The PSID is the only study *in the world* that does all three of these things.

### **1.3 PSID Suite of Projects**

From time to time we ask the PSID study families to participate in other studies. Data from ancillary studies are meant to be used along with the financial and family composition data from the Main PSID interview.

**Transition to Adulthood (TA) Study:** The traditional milestones that define adulthood, such as marriage and parenthood, no longer play out in the same way for young people today as they did for their parents. Many more are living at home, delaying marriage, spending more time in school, and starting families well into their thirties. The years right after high school, when numerous changes take place in the way young people spend their time and plan for the future, is the topic of the TA study. TA was conducted with young adults aged 18 to 25 who had participated in CDS in the past (CDS alumni).

**Couple Health and Daily Living (DUST) study:** The DUST study was a methodological and analytical study of time use among PSID Heads aged 60 and older (and their spouse/partners, if any). The goals were 1) to assess the feasibility of including time diaries for adults on a larger scale in the PSID and 2) to produce a rich and nationally-focused data archive to support innovative research on disability, time use, and well-being among people aged 60 and older.

**Childhood Experiences Study, Web/Mail (PSID-CE or Web/Mail):** The PSID Childhood Experiences Study is PSID's foray into web-based, self-administered surveys. The study's sample consisted of virtually all English-speaking PSID Heads and spouse/partners. Participants were invited to complete a web survey instrument asking questions about their childhood health and experiences. Those who had reported no Internet access at home were sent a paper version of the questionnaire. Follow-up efforts included mailed and e-mailed reminders as well as reminder calls made by Lab interviewers. PSID-CE Data collection is expected to continue through October 31, 2014. However, CDS families will only be contacted through September.

The respondent profiles include information on which of the studies family members have participated in since PSID 2013. (See Section 2 for more information on Profiles.)

### **1.4 Funding Agency**

The National Institute of Child Health and Human Development (NICHD) is part of the National Institutes of Health, the biomedical research arm of the U.S. Department of Health and Human Services. The mission of the NICHD is to ensure that every person is born healthy and wanted,

that women suffer no harmful effects from the reproductive process, and that all children have the chance to fulfill their potential for a healthy and productive life, free of disease or disability. The NICHD was created by Congress in 1962, and it supports and conducts research on topics related to the health of children, adults, families, and populations.

## **1.5 Principal Investigators**

### **Narayan Sastry, PI**

Narayan Sastry is the Principal Investigator of this project to conduct a new round of the Child Development Supplement to the Panel Study of Income Dynamics (PSID). Sastry is Research Professor in the Survey Research Center at the Institute for Social Research. He has been the Principal Investigator of the PSID Child Development Supplement and the on-going Transition into Adulthood study since 2009, and a co-principal investigator for PSID since 2008 with oversight of content on the core PSID covering fertility, family dynamics, and education. He is currently the principal investigator of multiple projects that support the collection, processing, and dissemination of these data. He also participates in management of the overall PSID project, in collaboration with other members of the PSID leadership team.

### **Kate McGonagle, CoPI**

Dr. Katherine A. McGonagle is a Co-Principal Investigator of the project. She is Associate Research Scientist in the Institute for Social Research. McGonagle has been Assistant Director of the PSID since 2000 and served as Co-Investigator on the original Child Development Supplement (CDS) and the Transition into Adulthood study. She has more than two decades of extensive and varied experience in the strategic planning and study design of large national social science surveys, the design of protocols for study supplements, and the management of senior staff.

### **Jacquelynne Eccles, Co-Investigator**

Dr. Jacquelynne Eccles is a Co-Investigator of the project. She is Distinguished Professor of Education at University of California Irvine. Eccles is one of the leading experts on child and adolescent development, having written dozens of journal articles and books on the subject. She is a member of the National Academy of Education and a fellow in both American Psychological Association and American Psychological Society. Her research interests include family and school influences on development, development in high-risk settings, adolescent development, and the transition into adulthood.

### **Robert Schoeni, Co-Investigator**

Dr. Robert Schoeni is a Co-Investigator of the project. He is a Research Professor at the Institute for Social Research and Professor of Economics and Public Policy at the University of Michigan. From 2001 to 2009, Schoeni has served as the Associate Director of the PSID and from 2009 to 2012 he served as the Co-Director of PSID. His work focuses on: the family; intergenerational transfers, including government and non-government assistance provided to youth; poverty; neighborhood effects on development; immigrant health status; living arrangements; welfare reform; workers' compensation; and displaced workers.

### **Frank Stafford, Co-Investigator**

Dr. Frank P. Stafford is Research Professor at the Institute for Social Research and Professor of Economics at the University of Michigan. Stafford served as the Director of PSID for 15 years, from 1994 to 2009. In his role as PSID Director, Stafford provided scientific oversight for all aspects of the data collection of the world's longest national panel study. Stafford led the development of time diaries from parents of children in the PSID and published seminal articles on time use in the United States.

### **Paula Fomby, Co-Investigator**

Paula Fomby is Associate Research Scientist in the Institute for Social Research. She joined ISR in 2013 as the project manager for the new round of the PSID Child Development Supplement. Previously, she directed survey data collection in the Three-City Study, a longitudinal study tracking the well-being of low-income families after welfare reform, and was an assistant professor of Sociology at University of Colorado Denver. Her research focuses on the relationship between family structure and various dimensions of child well-being, including cognitive achievement, educational attainment, behavior, and health.

## **1.6 CDS 2014 Respondents**

The respondents in the Child Development Study are families with children ages newborn to 17 who completed a 2013 PSID interview. The following is a list of the types of respondents you may find in each family. Please review carefully – it is very important to understand the definition of the respondent types. There is critical information here about Respondent Definitions and study preferences for the identity of the primary caregiver.

### **COVERSCREEN RESPONDENT**

The Coverscreen is used to verify information about the preloaded CDS children and determine who their PCG(s) is in order for the program to generate the appropriate sample lines for each respondent. The Coverscreen must be completed by a knowledgeable adult member of the household.

### **THE CHILD**

All children per Family Unit (FU) as of the PSID 2013 interview are eligible for inclusion in this study. Children who joined the FU after the PSID 2013 interview are not eligible for inclusion this wave.

### **PRIMARY CAREGIVER (PCG)**

After the Coverscreen has been completed, the Primary Caregiver will be the main respondent for this study, and will be completing the PCG interview, signing permission forms, helping you schedule interviews with the child(ren), completing an interview about the child(ren) and about the household environment, completing time diaries, and assisting with physical measurements and saliva collection. By definition, the PCG **must live with the child**.

In most cases, the **PCG** will be the **child's biological mother**. If the biological mother is not living with the child, the appropriate respondent is the first person on the following list who lives with the child:

- Stepmother, Adoptive mother, or Foster Mother
- Other female **legal** guardian (must be at least 18 years of age)
- Father (Biological, Adoptive, Step, or Foster)
- Male legal guardian of the target child
- **Final preference** is to take the interview from the person living with the child who is an adult (at least 18 years of age or older) and takes primary responsibility for caring for the child. This might be another relative such as a grandmother or aunt. This does not include someone who is paid or hired to take care of the child (i.e., not a babysitter or nanny).

Do not make assumptions about the identity of the PCG – the Coverscreen will guide you through the selection process.

### **INTERVIEWER!**

You are also a respondent in this study. You report on observations about the respondents and their interactions. These observations are recorded in the Interviewer Observations at the end of the Interviewer administered questionnaires.

## Chapter 2. SurveyTrak

### 2.1 CDS14 SurveyTrak Instructions

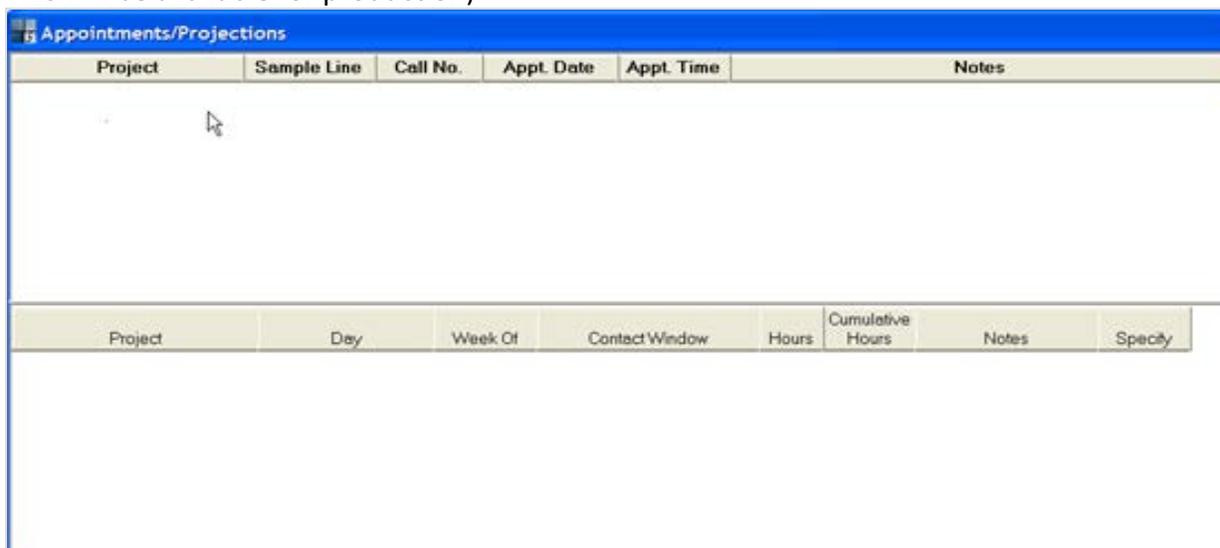
SurveyTrak is the sample management system you will use to help manage your work on the CDS. The basics of the SurveyTrak program are described in the **SurveyTrak Manual**. SurveyTrak is a very robust program and the SurveyTrak manual includes descriptions of the how to navigate in the program and information on more advanced features. This section of the CDS Project Manual describes the SurveyTrak features unique to the CDS.

#### 2.1.1 CDS Projects

There will be three CDS projects in SurveyTrak.

- **Training Directory:** This contains the training sample lines that you will use during in person training. Additional lines for individual practice have also been supplied in this project. You will be provided with a list of practice IDs that are available to use.
- **Certification Directory:** This project contains lines that will be used to conduct scripted certification interviews. Certification lines are not to be used for any other purposes.
- **Production Directory:** Contains the actual sample lines that you will be working during production interviewing. These lines will not be sent to your laptop until you have completed certification and have been approved by the Production Manager to start production interviewing. After receiving approval, you should do a Send/Receive, and the lines will be activated.

The first thing you'll notice when you enter SurveyTrak is the appointments/projection window that opens. The top portion of the window shows any appointments and any information that you may have entered into the planner. The bottom portion of the window is for you to project the hours that you will work on any project that you may currently have in SurveyTrak (note: This will be available for production).



When you enter the CDS SurveyTrak project you will see the various associated SurveyTrak tabs. The CDS project will be pre-loaded with lines for households having a CDS eligible child according to data from PSID 2013. There is one Coverscreen line loaded for each household. When you first receive your sample you will see one line per household (xxxxxxxH10000). Once you complete the Coverscreen for that line, the following lines will be created (note: the first seven digits of the sample id represent the Household ID).

- xxxxxxxH10000P1 line – for accessing the interview for the Primary Caregiver
- xxxxxxxH10000C01 line – for accessing the child interview (including the Woodcock-Johnson assessments)

If there are other CDS eligible children in the household, additional lines for those children will be created (C02, C03, etc.). If any of the CDS eligible children have moved to another household, a second Coverscreen SID (xxxxxxxH20000) will be created.

As you probably realize by now, managing the CDS sample will be a complex task. Here we will go over a few basics and the details of the SurveyTrak system that makes this possible.

### **2.1.2 SurveyTrak Tabs**

SurveyTrak is used to track your work in contacting the respondents and to access the various components within the Blaise questionnaires. You will enter a call record for each contact attempt, selecting the mode of contact, result code, entering a telephone number, address, or email address, date and time of appointment if there is one, resistance level if applicable, and a description of the contact attempt.

When you complete a specific component within the Blaise instrument, a status code will be assigned to that component and will be pulled into SurveyTrak.

When you complete all eligible components with a respondent, the final completed result code of   is automatically assigned by SurveyTrak. Once you complete all Call Wizard actions for that line, it is transferred to the finalized tab. Your work with the line is complete, but the sample line will remain in your computer under the finalized tab until all of the related lines have been completed. Once all lines in the household have been finalized they will be pulled from your laptop.

Most of the tabs and columns in SurveyTrak for the CDS project are standard. There are some unique items for the CDS.

#### **2.1.2.1 Sampleline Tab**

Top Pane - from left to right, the columns in the top pane of the Sample Line Tab are:

- RC Ind - This field indicates refusal conversion cases.
- RCLS Follow Up – This field will be marked if you have a new RCLS call that needs to be addressed.

- TRK – This field indicates if any tracking updates need to be processed.
- Sample ID - The ID number for the sample line.
- Priority – A flag used during data collection to help prioritize cases within your sample. At the start of data collection, a “LowWeb” Flag will display for families recently contacted for the Childhood Experiences Study. If possible, try give less priority to Coverscreen cases flagged “LowWeb” for the first few weeks of data collection to allow some extra time between contacts to the household from the two studies.
- Result Code - The result code of the most recent call.
- Result Date - Date of the most recently recorded result code.
- IW Status - If this field is blank, it means that the interview has not been started. Otherwise, this field will indicate whether the case is complete or suspended.
- Wizard Actions - Indicates whether or not the relevant Wizards have been completed.
- Sample Type - Indicates the type of line (CS, PCG, or Child). This is to be used when you want to sort all of a particular sample type together.
- IHC – This field indicates of whether or not a household is eligible for any ‘IHC’, in-home components (WCJ, Physical Measurements, Saliva, and/or 8 to 11-year-old interview). A “Yes” will display for household’s eligible for any in-home components.
- TL Approval – Displays last Team Leader approval for mode change requests or final result code requests made by interviewers.
- Case ID – Each SID has been assigned a unique identifier that will be used on time diaries, linkage consent forms, saliva samples, and for 12 to 17-year-old’s Interactive Voice Response interview.
- Tel Calls – Displays the number of telephone calls that have been made on the case.
- Face to Face – Displays the number of face-to-face contact attempts for the case.
- Email Calls – Displays the number of emails that have been sent for the case.
- Last Call Mode - Indicates the mode of the most recent result code.
- 6th Call No Contact - Indicates that six (6) consecutive calls were made to a household and no contact was made.
- Contact Obs Status – Indicates the status of Contact Observations (complete, incomplete, and null).
- Letter Status - Indicates the status of the most recent letter requested.
- PCG Initial Mailing – Displays either the date the PCG initial mailing was mailed by Ann Arbor or “Hold” if the interviewer marked in SurveyTrak the mailing to be held until a later date (i.e. hold PCG mailing until you speak to the PCG).
- Language- Indicates if the PSID 2013 interview was conducted in Spanish. It will be updated by CS language after completion of CS or the PCG interview.
- Rel # - Indicates which release the sample line was in.
- Tracking Update Sent - Displays the date the most recent tracking update was sent. It will be used in production only.
- Internet Tracking Flag – Indicates that the line was coded   for Internet Tracking.
- Variable IW Suspended - For interviews that have been suspended, this column indicates the variable in the Blaise interview where the case was last suspended. This column is updated every time the interview is suspended.

- Reason for Suspension – For the last suspend, this field indicates the reason the line was suspended.

Bottom Pane - The bottom pane of the Sample Line tab contains the respondent's name, address, phone number(s), email, time zone, country, case notes, whether any additional incentives were offered for cell phone, child care, or finder's fees, child's age (on child lines), Time Diary days of week, number of children in household, and the total number of Samplelines on this tab.

### 2.1.2.2 Address Tab

Another way to view respondent name and address information is through the Address Tab. By clicking on this tab, you will see respondent information displayed in a table. The bottom pane of this tab displays the status of the case in the left-hand column. The middle column indicates the number of contact attempts on that case. The assigned time diary days and the unique case id are displayed in the right-hand column.

### 2.1.2.3 Transfer tab and Transfer History Tab

The standard SurveyTrak transfer tab and transfer history tab are tabs will be used for this project. They record the transfers of sample to and from interviewers on the project.

### 2.1.2.4 Finalized Tab

The finalized tab is where all the lines assigned a final result code are moved automatically. When you complete a Coverscreen, you will see the completed CS line and lines for any ineligible CDS children in that household. Once the eligible PCG and Child lines are finalized, they will be moved to this tab. The display of information and columns on this tab is exactly the same as in the Sample Line Tab.

RC Ind	RCLS Follow Up	Sample ID	Result Code	Result Date	JW Status	Wizard Actions	Sample Type	Preferred Mode	IVR ID	Tot Calls	FTF Calls	Email Calls	Last Call Mode	6th Call No Contac
			Complete	06/26/2014			CS	TEL		0	0	0	Admin	
				06/26/2014			CHILD	TEL		0	0	0	Admin	
				06/26/2014			CHILD	TEL		0	0	0	Admin	
				06/26/2014			CHILD	TEL		0	0	0	Admin	

Name: [Redacted] Time Zone: Mountain Time  
 C/O: [Redacted] Phone1: [Redacted] Ext: [Redacted] Type: Home  
 Address1: [Redacted] Phone2: ( ) - Ext: [Redacted] Type:  
 Apt/Suite:  
 Address2:  
 City: [Redacted]  
 State: [Redacted] Zip Code: [Redacted]  
 Country:  
 Case Notes: [Redacted]

# of Sample lines: 5

### 2.1.3 View Edit Tabs

Within View/Edit you will find the following tabs where you can enter information to complete tasks or view pertinent information.

#### 2.1.3.1 Call Info

The Call Info tab in the View/Edit function displays the contact attempts entered in the call wizard for the selected sample line. The Call Info tab allows you to view the information from the Call Wizard; to change this information you must go back into the Call Wizard.

#### 2.1.3.2 Blaise Status

This tab displays the status of each Blaise component for the respondent connected to the specific sampleline, not of the entire household.

View/Edit

Suspension	ROLS Follow Up	Contact Attempt Windows	Cell Phone/finder's fee	Post Card Update	Tracking Updates	Tracking History
Time Diaries	Salva	Mail to Ann Arbor	Mailing Address	Physical Address	Contact 1	Contact 2
Call Info	<b>Blaise Status</b>	Household Status				

Sample ID: [redacted]      Sample Type: PCG

Name: [redacted]  
Age: [redacted]  
Overall IW Status: Suspend

**Block Statuses**

IW: Obs Done  
WCJ/Obs: Not Started  
Absent Parent: N/A  
Consent: Started  
Saliva: Not Started  
School: N/A  
Child Care: Not Started  
Measurements: Not Started  
Child IW Summary: Done  
Child IW Detail: [redacted] Done

#### 2.1.3.3 Household

After the Coverscreen IW is completed, this tab gives you a snapshot of the current status of every member of the household. As you work the PCG and child lines spawned from the Coverscreen interview, the Household tab will update with the current status of each of sampleline.

Sample ID	First Name	Last Name	Sample Type	Gender	Age	IW Status	Result	Date	Block Status
H1 0000			CS			Complete			CS: Done 6/26/2014
H1 0000P1			PCG	Female	38	Suspenal			
H1 0000P1C01			CHILD ELIG	Male	6		0000	//	
H1 0000P1C02			CHILD ELIG	Female	7		0000	//	
H1 0000P1C03			CHILD ELIG	Male	12		0000	//	
H1 0000P1C04			CHILD ELIG	Female	12		0000	//	
H1 0000P1C02			CHILD INELIG	Male	11				
H1 0000P1C03			CHILD INELIG	Male	13				
H1 0000P1C04			CHILD INELIG	Female	13				
H1 0000P1C05			CHILD INELIG	Female	13				

### 2.1.3.4 Mailing Address

This is where the most-up-to-date respondent name, phone numbers, mailing address, and email addresses are displayed. This tab will be updated with respondent name, phone numbers, email address, and mailing address once the interview is completed.

Title	First	Middle	Last	Suffix	
C/O:					
Address 1:					
Apt/Suite:					
Address 2:					
City:					
State:					
Zip Code:					
Country:					
Phone Number	Ext	Phone Type	Other Specify		Listed As
1		Work			
2		Cell			
3					
Email:					
Time Zone: Eastern Time					
Additional Info:					

### 2.1.3.5 Physical Address

This tab displays the respondent's physical address if it is different than the mailing address listed in the Mailing Address tab. This tab will be updated if there is a street address provided by the respondent once the interview is completed.

Suspension	RCLS Follow Up	Contact Attempt Windows				
PCG Info	Time Diaries	Saliva	Mail to Ann Arbor	Cell Phone/Finder's Fee	Tracking Updates	Tracking History
Call Info	Blaise Status	Household Status	Mailing Address	<b>Physical Address</b>	Contact 1	Contact 2

Sample ID:  \* Asterisk indicates required field.

Check if this address is different from the Mailing Address

C/O:

\* Address1:

Apt/Suite:

Address2:

\* City:

\* State:  \* Zip Code:

Country:

Additional Info:

### 2.1.3.6 Contact 1 and Contact 2

The people listed in these tabs on the Coverscreen sampleline were given to us during the PSID 2013 interview as people who would be able to help us locate the respondent/household if for any reason we had difficulty finding the household. During the PCG interview, you will ask for contact persons that may be able to assist us in locating the PCG during the next wave of CDS.

### 2.1.3.7 PCG Info

This tab is only available on PCG samplelines. After you complete the Coverscreen interview, Ann Arbor staff will send an Initial Mailing packet to the PCG. The date that the packet is mailed will display on this tab. If you discover that the PCG needs to be interviewed in Spanish, or you need to speak with the PCG before he/she receives the mailing, you can check the “Hold PCG Mailing” box on this tab so that Ann Arbor staff know not to mail the PCG packet until further notice. When the situation permits, you will need to uncheck the “Hold PCG Mailing” box so that Ann Arbor is notified to mail the packet

You may also indicate on this tab whether the PCG needs their interview conducted in English or Spanish. This is a flag for you in working the case but by indicating the preferred PCG language in this tab you will not change the language in Blaise.

Note: For PCGs whose language is marked as Spanish in this tab, the PCG’s materials that are included in the PCG initial mailing will be printed in Spanish.

Call Info	Blaise Status	Household Status	Mailing Address	Physical Address	Contact
Suspension	RCLS Follow Up	Contact Attempt Windows			
<b>PCG Info</b>	Time Diaries	Saliva	Mail to Ann Arbor	Cell Phone/Finder's Fee	Track

Sample ID:  Sample Type: PCG

Language:

Hold PCG Mailing:

Date PCG Initial Mailing sent by AA:

### 2.1.3.8 Time Diaries

This tab collects information related to the time diaries. The days of week for both the Weekend Day and the Weekday Day diaries are preloaded and will populate into the Child lines after the Coverscreen interview is completed. When you speak with the PCG, you will identify specific target dates to complete the children's time diaries. You will enter the Target Date for completion of the Weekday and Weekend diaries in this tab on each child's sampleline so that these can be recorded on the cover of the Time Diaries when the time diaries are mailed out by Ann Arbor. On this tab, you will also be able to see whether Time Diaries have been logged as received in Ann Arbor.

For IHC sample, during in-home visits, you may review and edit the time diaries with respondents. After review and editing, you will enter the date of review and edit on this tab. Time Diaries that you obtain during in-home visits must be mailed in your Weekly Mailing to Ann Arbor and recorded in the Mail to Ann Arbor tab.

An interviewer designated for follow-up effort will call respondents to review and edit time diaries over the phone, if needed.

The screenshot shows a software window titled 'View/Edit' with a top navigation bar containing tabs: Call Info, Blaise Status, Household Status, Mailing Address, Physical Address, Contact 1, Suspension, RCLS Follow Up, Contact Attempt Windows, PCG Info, Time Diaries, Saliva, Mail to Ann Arbor, Cell Phone/Finder's Fee, and Tracking Updates. The 'Saliva' tab is selected. Below the navigation bar, the following information is displayed:

- Sample ID: [Redacted]
- Sample Type: PCG
- Case ID: [Redacted]

The main form area contains the following fields:

- Date edited by Iwer: [Dropdown menu]
- Date edited by follow up TLC: [Text input]
- Weekday: Tuesday [Dropdown menu]
- Weekday target date: [Dropdown menu]
- Alternative weekday date: [Dropdown menu]
- Weekday logged AA: [Text input]
- Weekend day: Sunday [Dropdown menu]
- Weekend target date: [Dropdown menu]
- Alternative weekend date: [Dropdown menu]
- Weekend logged AA: [Text input]

### 2.1.3.9 Saliva

The Saliva Form tab is where information is entered and displayed when the saliva consent is obtained, and when a collection kit is mailed or administered. Once the sample is received in Ann Arbor, the tab will display the date the saliva sample is logged in Ann Arbor.

For IHC visits, you will administer the saliva collection with the respondents and will be responsible for updating this tab, as well as entering the date that you mailed the sample to Ann Arbor on the 'Mail to Ann Arbor' tab.

For household that are not IHC eligible, the PCG will be mailed a package of saliva collection materials and instructions so he/she can administer the saliva collection to him/herself and the children. The PCG will then mail samples to Ann Arbor.

You can also request from this tab a second saliva kit be mailed to the PCG if needed.

View/Edit						
Call Info	Blaise Status	Household Status	Mailing Address	Physical Address	Contact 1	Contact 2
Suspension	PCLS Follow Up	Contact Attempt Windows				
Time Diaries	Saliva	Mail to Ann Arbor	Cell Phone/finder's Fee	Post Card Update	Tracking Updates	Tracking History

Sample ID:	Sample Type: PCG	MR ID:
Consent signed (FTF):	<input type="text"/>	
Saliva home administered date:	<input type="text"/>	
Saliva and consent mailed from AA:	<input type="text"/>	
Saliva received in AA:	<input type="text"/>	
Consent verified:	<input type="text"/>	
Request 2nd Saliva Kit to be sent:	<input type="text"/>	
2nd Saliva Kit sent:	<input type="text"/>	

### 2.1.3.10 Payment

Interview payments will be documented and/requested in Blaise during the PCG and Child interviews. The majority of the interviews will be conducted over the phone but there are times when you will conduct the interview during an in-home visit (i.e. interview with 8 to 11 year-old). You may pay cash for that interview but ensure you document the cash payment in Blaise when prompted and obtain a signed receipt for the cash payment.

There are some in-home components for which respondents are paid but the payment needs to be documented by you in SurveyTrak. On the Payment View/Edit tab on the PCG's sampleline, you will document if you pay the PCG:

- \$10 cash per pair of completed Time Diaries (a Weekday and Weekend) from each child,
- \$10 for saliva sample obtained.

On the Payment View/Edit tab on each child's sampleline, you will document if you pay the child:

- \$10 for saliva sample obtained.

If you obtain either of these, you may pay the respondents in cash, document in SurveyTrak and obtain a signed receipt from the respondent, and record the cash payment in this Payment tab.

Any respondents not paid cash during in-home visits will be mailed a check from Ann Arbor for these completed components once received in Ann Arbor.

### 2.1.3.11 Mail to Ann Arbor

Every week you will mail any completed documents you've obtained from respondents to Ann Arbor in a prepaid Priority Mailer along with a transmittal form. You will need to record that date that you mailed each item in this tab.



The screenshot shows a software window with a menu bar at the top containing: Call Info, Suspension, PCG Info, Blaise Status, RCLS Follow Up, Time Diaries, Household Status, Contact Attempt Windows, Salvo, Mailing Address, Mail to Ann Arbor, Physical Address, Cell Phone/Finder's Fee, Tracking Update, and Tracking History. Below the menu bar, the main area displays 'Sample ID:' followed by a redacted box and 'Sample Type: FCG'. The form contains several fields: 'Cell Phone incentive offered?' with a dropdown menu set to 'Yes'; 'Child Care reimbursement offered?' with a dropdown menu; 'Amount offered:' with a text input field; 'Method of payment:' with a dropdown menu; 'Finder's Fee(s) offered?' with a dropdown menu; 'Amount offered to Finder 1:' with a text input field; 'Finder 1 method of payment:' with a dropdown menu; 'Finder 1 name and contact information:' with a large text area; 'Amount offered to Finder 2:' with a text input field; 'Finder 2 method of payment:' with a dropdown menu; and 'Finder 2 name and contact information:' with a large text area.

### 2.1.3.14 Tracking Updates

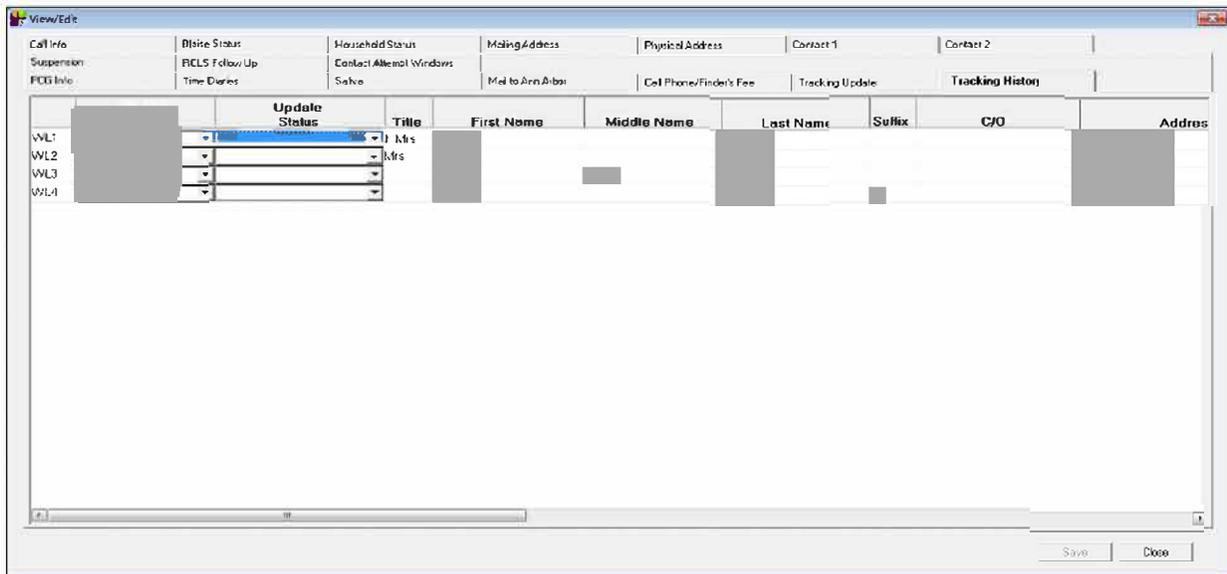
This tab displays the most recent tracking update that was sent to you for the case by the internet tracking team. You will be responsible for following up on these tracking updates and recording your follow-up in the call info tab. You may review the details of previous tracking updates sent by the tracking team for this SID (if applicable) by selecting an option from the “Tracking Update” field in this tab.

The screenshot shows the 'Tracking Updates' tab selected in the software interface. The menu bar is the same as in the previous screenshot. The main area displays 'Sample ID:' followed by a redacted box and 'Tracking Update:' with a dropdown menu set to 'R'. Below this, there is a 'Date Tracking Update Sent:' dropdown menu. A section titled 'Tracking Team worked - internet tracking exhausted:' contains an 'Informant Type:' dropdown menu. Below this is a form for informant details with columns for 'Title', 'First', 'Middle', 'Last', and 'Suffix'. The fields include: 'C/O:', 'Address1:', 'Apt/Suite:', 'Address2:', 'City:', 'State:' with a dropdown menu, 'Zip Code:', 'Country:' with a dropdown menu, 'Phone:' with a text input field, 'Ext:' with a text input field, 'Phone Type:' with a dropdown menu set to 'Home', and 'Specify Other Phone Type:'. At the bottom, there is a 'Comments:' section with a large text area.

### 2.1.3.15 Tracking History

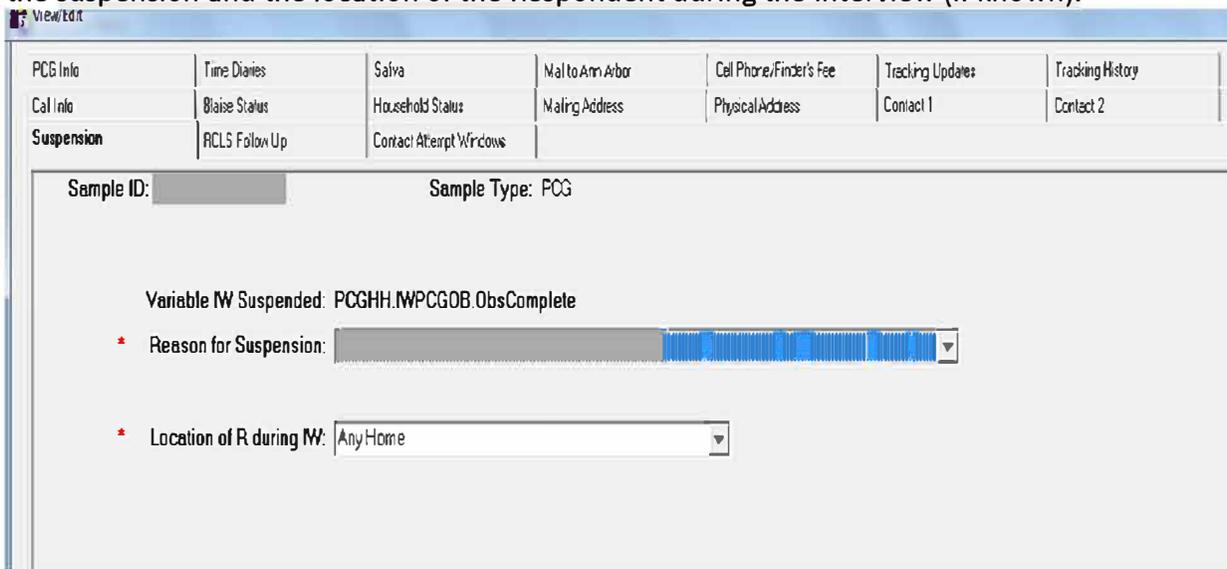
This tab will display the history of all the tracking updates sent to you by the Tracking Team with the exception of the notes. This is also where you will record the current status (Open or Closed) of each tracking update for this case based on your follow-up efforts under the “Update Status” column.

You will receive tracking protocols and training shortly after production starts.



### 2.1.3.16 Suspension tab

This tab will automatically display the Blaise variable where the interview was last suspended. In addition, following a suspension, you will be prompted to update this tab with the reason for the suspension and the location of the Respondent during the interview (if known).



### 2.1.3.17 RCLS Follow Up

This tab displays the calls that have been received by the 800 line staff in Ann Arbor. You can review these calls here and will be required to take action.

In addition, letters that are returned as undeliverable by the post office or letter/email communications from respondents will be documented in RCLS.

### 2.1.3.18 Contact Attempt Windows

This tab displays the count of contact attempts made during each of the contact windows for that case. This will help plan your initial and follow-up contact attempts. Your Team Leader will review this with you regularly.

View/Edit

Time Dialed	Saiva	Mail to Ann Abcr	Cell Phone/Finder's Fee	Post Card Update	Tracking Updates	Tracking History
Call Info	Blaise Status	Household Status	Mailing Address	Physical Address	Contact 1	Contact 2
Suspension	RCLS Follow Up	<b>Contact Attempt Windows</b>				

Sample ID: [REDACTED]

**Number of Attempts Made by Call Windows (Day and Time)**  
Please review for call windows that have not yet been attempted.

	SUN	MON	TUE	WED	THU	FRI	SAT
9:00 am - 6:00 pm :							
6:00 pm - 10:00 pm :							
10:00 pm - 9:00 am :							

### 2.1.4 Wizard Actions

#### 2.1.4.1 Call Wizard

Anytime you have attempted or made contact with a respondent or an informant for a specific sample line, the information should be recorded in a call note using the Call Wizard. Some features of the Call Wizard include collecting information on the phone type, resistance level, and recording all interviewer tracking efforts within the call info tab.

Call Wizard

Call #	Iwer	Call Date	Call Day	Call Time	Mode	Tel Mode	Result Code	Contact Window	Contact Obs Status	Contact Details	Appt Date	Appt Time	R
1			Friday	08:14 AM	Admin								
2			Friday	08:17 AM	Admin						05/23/2014	10:00 AM	
3			Friday	08:19 AM	Admin								Somewh
4		04/19/2014	Friday	01:13 PM	Tel	Home							

**\* Required Field** Call #: 4 Iwer: [REDACTED] Mode: Tel Tel Mode: Home R/Informant Time Zone: Eastern Time

Use this contact info: [REDACTED]

Date: [REDACTED] Time: 01:13 PM Result Code: [REDACTED] Contact Details: [REDACTED]

Informant Type: [REDACTED] Tracking Step: [REDACTED]

Rel to R: [REDACTED]

Tracking Update: [REDACTED] Notes: [REDACTED]

All Notes | Clear Notes | Insert | Delete | Modify | Back | Finish | Close

#### **2.1.4.2 Observations**

There are three types of observations on CDS:

- Assessment Observations,
- Interview Observations, and
- Contact Observations.

The Assessment Observations and the Interview Observations are integrated directly into the Blaise instruments (Coverscreen, PCG and Child Interview), appearing at the end of the blocks/sections to which they pertain. CDS will collect the following Interview Observations:

- **Coverscreen:** Interview Observations
- **PCG Household:** Assessment Observations and Interview Observations both at the end of the Assessments Block
- **Child Interview:** Assessment Observations and Interview Observations both at the end of the Assessments Block

As on other studies, the Contact Observations are brief and will be entered into a mini Blaise instrument that SurveyTrak presents following the entry of a qualified call record.

All types of observations on CDS request information from you, the interviewer, based upon observations you have made during your interactions with the respondent and household. Please just do your best to provide the information requested. If you find certain observations particularly difficult please be sure to share this feedback with your Team Leader.

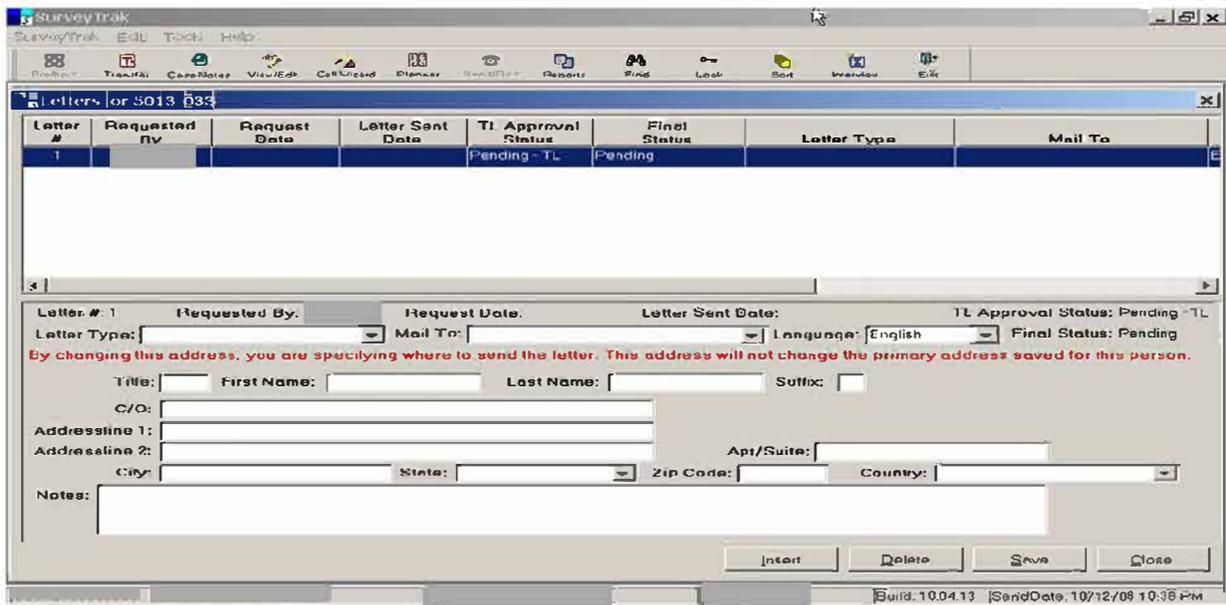
#### **2.1.5 SurveyTrak Modules**

##### **2.1.5.1 Letters Module**

Through the letters module, you will be able to request designated follow up letters as well as monitor the status of your letter request. Your Team Leader will review and approve request which will be passed on to Ann Arbor to process and mail. Examples of the follow-up letters are available in the appendices.

The Letters module is where you will be able to enter requests for letters. For CDS, the different types of letters to request range in subject from respondent concerns, payment issues, and general thank you. The manual appendices contain examples of the letters available. All persuasion letters will be processed and mailed by PSID study staff whereas hard to reach letters will be processed by the tracking team.

For all entries in the letters module, once you do a SurveyTrak Send/Receive, you will be unable to modify or delete the record. If you realize after completing a SurveyTrak Send/Receive, that you entered the record in error (i.e. entered on wrong SID, selected the incorrect letter from the Letter Type drop-down, etc.), please notify your Team Leader.



### 2.1.5.2 TL Approval Requests

In this window you'll be able to request Team Leader approval and receive the response for mode change and for final result coding.

An example of request for mode change is when a household who is not eligible for in-home components requests to complete the PCG and Child interviews in-person. You need Team Leader approval to go FTF for families that are not eligible for in-home components. Note: If you receive approval for mode change, it means that the PCG and Child interviews will be done in person but it does not mean this family is eligible for the in-home components like WCJ assessments.

### 2.1.5.3 Profile

The Respondent Profile (R Profile) in SurveyTrak stores and displays certain information about the CDS family that has been gathered from during and since PSID 2013. You must read the profile before you call a family. The R Profile contains the most up to date information that is available before production begins. The Family Listing data will match what has been preloaded in Blaise.

#### IMPORTANT NOTE!

Information in the R Profile is strictly confidential and should be viewed only by interviewers.

To view an R Profile for a particular Sample ID, select the Sample ID on the Sample Tab or Address Tab. From the SurveyTrak drop down list select "Profile." This will open a window containing detailed information about the selected line. To view all the information, use the scroll bar on the right. To exit the R Profile, click on the "X" in the upper right-hand corner of the window. The R Profile cannot be accessed in SurveyTrak at the same time as the Blaise interview.

Note: You need refer to the PSID Relationship to Head descriptions listed in the appendices of this manual.

An example R Profile follows:

2014 Child Development Supplement Respondent Profile

68ID: [REDACTED]

CDS CS Sample ID: #####H#####

Preferred Mode: Face to Face

#CDS Kids in FU: 3

CS Respondent Address Information:

[REDACTED] EXT: Phone type: Home Name listed: [REDACTED]  
[REDACTED] EXT: Phone type: Work Name listed: [REDACTED]

CDS Children in FU (Iwer – Make sure at least one child listed below is in the FU before completing the coverscreen interview):

<u>Child</u>	<u>Name</u>	<u>Age</u>	<u>DOB</u>	<u>Gender</u>	<u>IVR ID</u>
1	[REDACTED]	3	[REDACTED]	M	
2	[REDACTED]	10	[REDACTED]	M	
3	[REDACTED]	12	[REDACTED]	F	

PSID 2013 Main Family Information:

Main Family Sample ID: [REDACTED] Interview Type: ReInterview  
Contact #: [REDACTED] Main Family Interviewer: [REDACTED]  
Whether Resistance In PSID 2013: N  
Whether Tracking In PSID 2013: Y

Persuasion Letter(s) Sent: Y, # of Letters: 1, Letter Type Code-Text: [REDACTED]-More Info)

Language Used for IW: English Time Zone: EST

PSID 2013 Family Listing:

<u>Name</u>	<u>Relationship to Head (RTH)</u>	<u>Age</u>
[REDACTED]	Female Head	45
[REDACTED]	Brother	40
[REDACTED]	Son	3
[REDACTED]	Son	10
[REDACTED]	Daughter	12

**PSID 2013 Contact, Proxy and/or Finder Information:**

**Contact Person #:1**

**Relationship to PSID 2013 Main Family Respondent:** Friend

[Redacted] **Ext:** [Redacted] **Phone Type:** HOME **Name listed:** [Redacted]  
[Redacted] **Ext:** [Redacted] **Phone Type:** Cell **Name listed:** [Redacted]

**Contact Person #:2**

**Relationship to PSID 2013 Main Family Respondent:** Friend

[Redacted] **Ext:** [Redacted] **Phone type:** Work **Name listed:** [Redacted]

**PSID 2013 Call Records:**

*[All call records for the case from the most recent wave of PSID will be displayed here]*

**PSID 2013 OBSERVATIONS:**

*[All observations for the case from the most recent wave of PSID will be displayed here]*

**Special Notes from Study Staff:**

*[Notes from study staff about the case or the PSID family that need your special attention will be listed here].*

**Other 1968 ID Families**

**R Name:** [Redacted]

**R Address:**  
[Redacted]

**R Phone:**  
[Redacted] **EXT:** [Redacted] **Phone type:** Home **Name listed:** Unlisted

**R email** [Redacted]

**Family Listing:**

<u>Name</u>	<u>Relationship to Head (RTH)</u>	<u>Age</u>
[Redacted]	Male Head	68
[Redacted]	Wife	67

**If also a CDS 2014 Family:** N

**TA 2013 (if applicable):**

**R Name:**

**R Address:**

**R Phone:**

**R email:**

**TA 2013 Final Result:** [Redacted] **Result Date:** [Redacted]

**Whether Resistance in TA 2013:** [Redacted]

**Whether Tracking in TA 2013:**  
**Contact and/or Finder Information:**

**DUST 2013 (if applicable):**

**R Name:**  
**R Address:**  
**R Phone:**  
**R email:**  
**DUST 2013 Final Result:**                    **Result Date:**  
**Whether Resistance in DUST 2013:**  
**Whether Tracking in DUST 2013:**  
**Contact and/or Finder Information:**

**WEB-MAIL 2014 (if applicable):**

**R Name:** [REDACTED]  
**R Address:** [REDACTED]  
**R Phone:**  
[REDACTED]                    **EXT:**                    **Phone type:** Home                    **Name listed:** [REDACTED]  
[REDACTED]                    **EXT:**                    **Phone type:** Work                    **Name listed:** [REDACTED]  
**R email:**  
**WebMail 2013 Final Result:** [REDACTED] lw Complete                    **Result Date:** [REDACTED]  
**Whether Resistance in WebMail 2013:** N  
**Whether Tracking in WebMail 2013:** N  
**Contact and/or Finder Information:**

**Contact Person #:1**

**Relationship to PSID 2013 Main Family Respondent:** Friend  
[REDACTED]                    **Ext:** [REDACTED]                    **Phone Type:** HOME                    **Name listed:** [REDACTED]  
[REDACTED]                    **Ext:**                    **Phone Type:** Cell                    **Name listed:** [REDACTED]

**Contact Person #:2**

**Relationship to PSID 2013 Main Family Respondent:** Friend  
[REDACTED]                    **Ext:**                    **Phone type:** Work                    **Name listed:** [REDACTED]  
[REDACTED]

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## Chapter 3. Questionnaire: Coverscreen

### 3.1 Overview

The Coverscreen is used to verify information about the preloaded CDS children and identify who each child's primary caregiver (PCG) is in order for the program to generate the appropriate sample lines for each respondent

The Coverscreen is the only line preloaded for each household in the sample. Since it's used to obtain information that determines the respondents as well as the structure and flow of all the other portions of the interview, it must be completed before any of the PCG or Child lines are spawned. This is why it is extremely important that it gets completed accurately. The consequences of entering wrong information in the Coverscreen are long and costly:

- Interviewing Family Units (FU) where the CDS child is actually ineligible
- Not interviewing a FU where the CDS child is eligible
- Interviewing the wrong PCG
- Passing bad data to subsequent interviews
- Incorrect age and grade of the CDS child impacts many, many skip patterns in all of the interviews.

Before you begin the Coverscreen, you must verify that you are speaking to the PSID 2013 Respondent OR a knowledgeable adult who lives in the household, AND that at least one of the CDS eligible children lives in the household.

During the Coverscreen interview, you will:

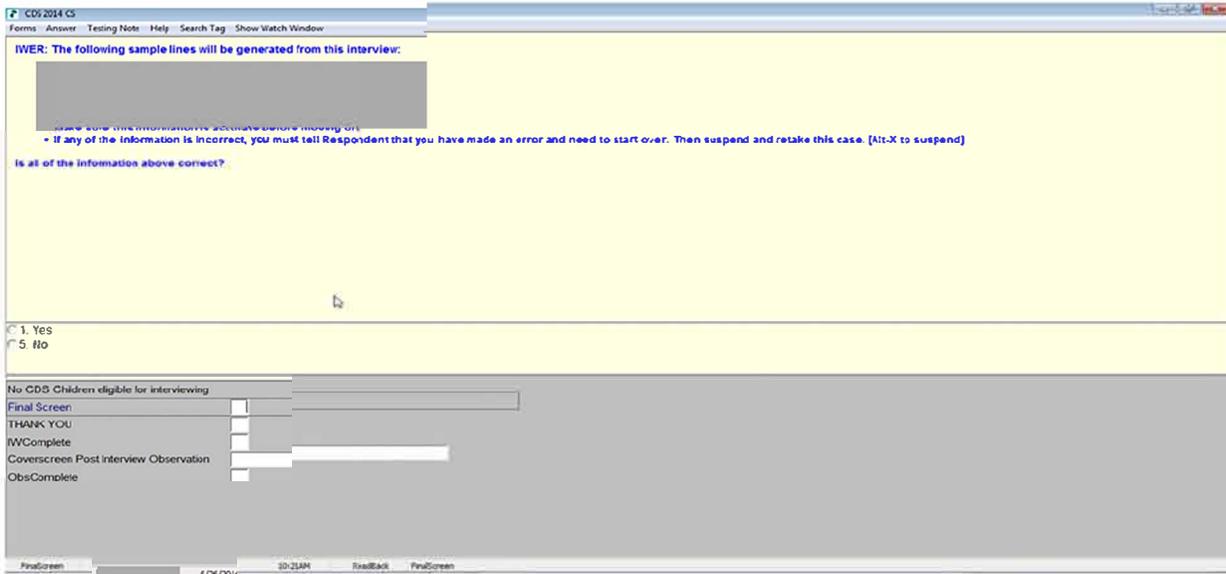
- Obtain verbal consent to participate in the Coverscreen interview;
- Verify/update the family listing;
- Identify the Coverscreen respondent;
- Ask about each of the CDS children's relationships to others in the household;
- Identify who has primary responsibility for taking care of each of the CDS children in the household;
- Ask if there are any special considerations needed for each of the children's interviews (i.e. vision, hearing, etc.);
- Verify/Update PCG's contact information; and
- Verify the samplelines that will be generated from Coverscreen

Within the instrument there are two checkpoints (confirmation screens) to assist you in preventing the wrong lines being spawned. The first is right after you confirm or update the preloaded information. You are asked to do a review and if needed back up to make changes. Once you pass this screen, you will not be able to back up to make fixes, rather **you will need to suspend the interview, schedule an appointment with the respondent for a later date to**

complete, contact help desk, and check in the line and have it reset by a data manager in Ann Arbor.



The second checkpoint is at the end of the Coverscreen where all the sample lines are listed that will be generated in SurveyTrak when you complete the interview. If you are unsure whether the information is correct, you need to suspend the interview and consult with your Team Leader. If you know that the sample lines about to be spawned are incorrect, you will need to suspend the interview, schedule an appointment with the respondent for a later date to complete, contact help desk, and check in the line and have it reset by a data manager in Ann Arbor.



At the end of the Coverscreen, if the PCG is available, you may conduct the PCG interview right then. If not, you need to make (or at least attempt to make) an appointment with the PCG for

the interview and if applicable, the in-home visit. You will receive a planner in your bulk supplies to assist you in arranging all your appointments.

After the Coverscreen interview and corresponding SurveyTrak actions have been completed:

- All PCG and Child sample lines in SurveyTrak, along with their preload, will be generated;
- Any CDS children not eligible to participate in 2014 (moved out on own, jail, health/other institution, deceased, 18+ years old) sample lines will be auto-coded final; and/or
- New Coverscreen sample lines for CDS children identified as living with someone else will be generated.

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## Chapter 4. Questionnaire: Primary Caregiver

### 4.1 Objective

The objective of the primary caregiver (PCG) Blaise interview is to:

- Obtain consent for own participation;
- Obtain consent for each child's participation;
- Gather information about:
  - the household
  - each of that PCG's CDS child(ren)
  - each child's school (age 5-17)
  - child care for children in daycare through grade 6
  - any absent parents
  - PCG's and each child's physical measurements;
- Conduct Woodcock Johnson assessment with PCG;
- Introduce and/or collect saliva samples; and
- Complete Interviewer Observations.

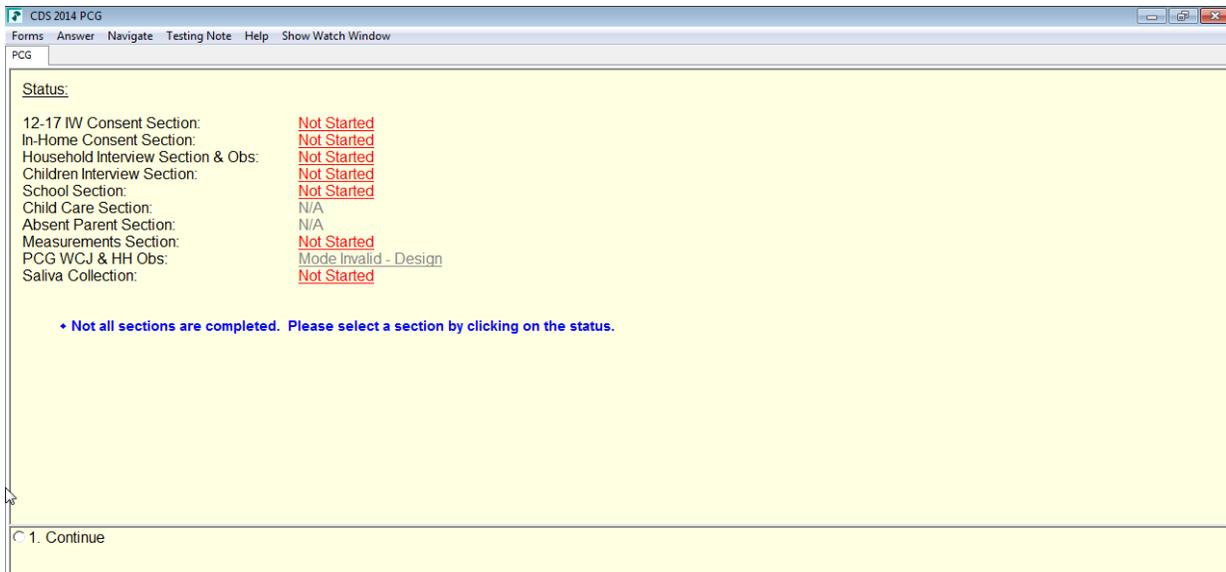
The PCG instrument begins with verification that you are speaking with the correct respondent, obtaining current grade for each CDS eligible child, and capturing whether the PCG will be using the paper copy of the respondent booklet, online version of the respondent booklet, or no respondent booklet. The remainder of the PCG Blaise instrument has been designed to accommodate telephone and in-home administration of components as well as flexibility in working with each family. This has been done by programming the instrument into 10 different sections (aka blocks):

- 12-17 year old interview consent
- In-Home Consent
- Household Interview Section & Observations
- Children Interview
- School
- Child Care
- Absent Parent
- Measurements
- PCG Woodcock Johnson Assessments and Household Observations
- Saliva Collection

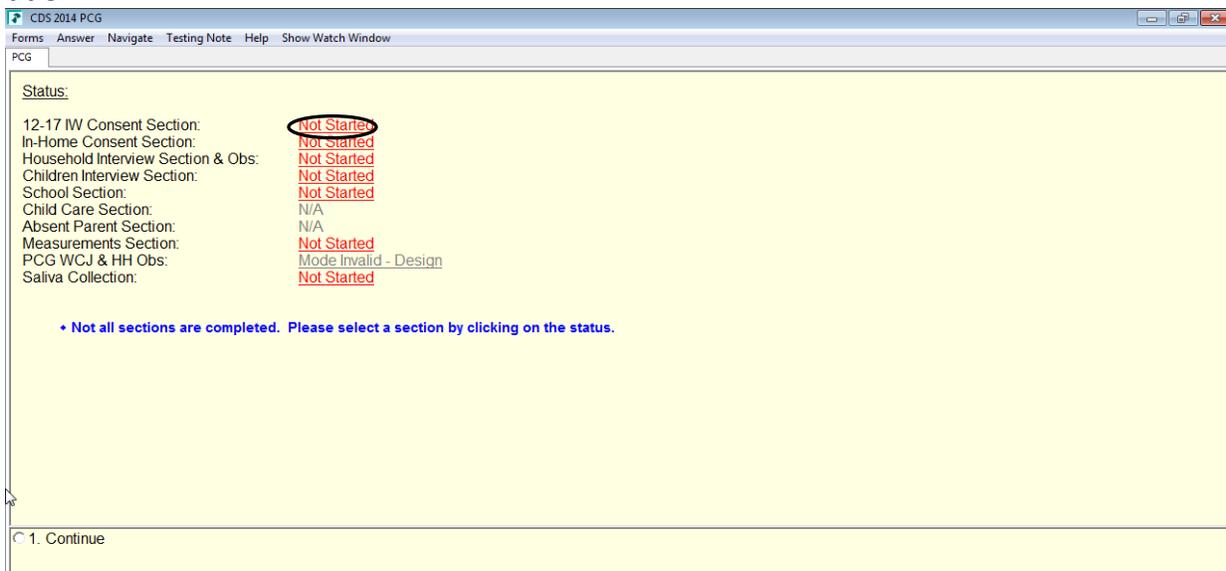
The sections are described in more detail later in this chapter but first we will provide an overview of how to maneuver within Blaise.

### 4.2 Maneuvering within the PCG Instrument

You will be able to access each of the PCG instrument sections from the Status Screen.



To begin or resume a section in the PCG instrument, click on the red link next to the section title.

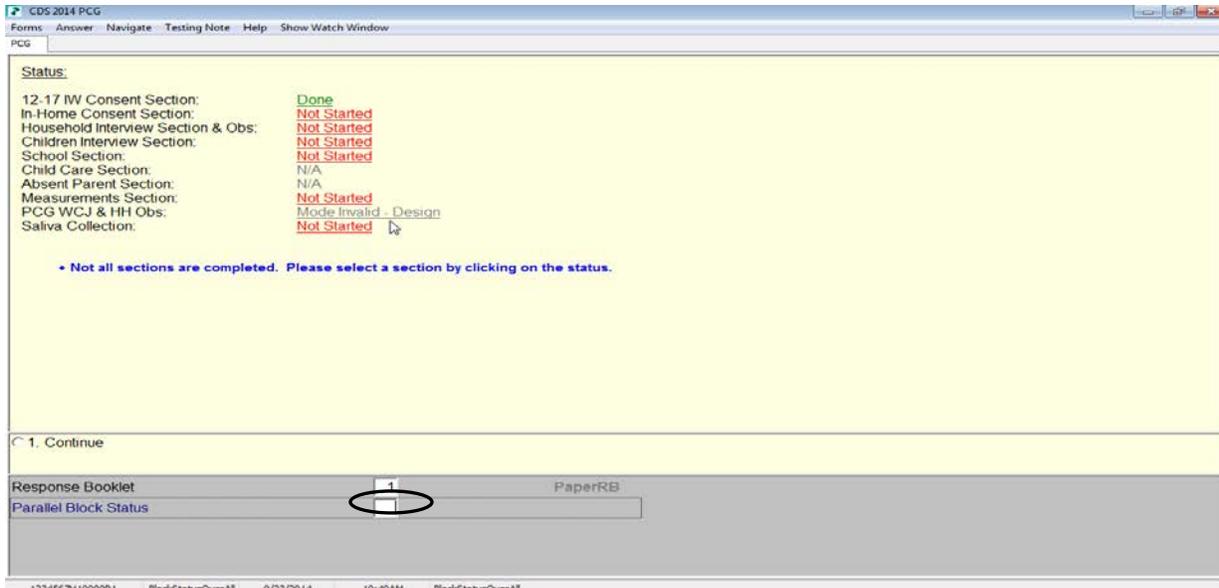


When a section has been fully completed you will automatically be returned to the Status screen. If you need to return to the Status screen at any time after entering one of the sections, click on the PCG tab in the upper left hand corner of the screen.

A section that:

- Has been fully completed will show a status of Done
- has been started but not fully completed, will show a status of Started
- is not applicable for this particular respondent will show a status of N/A
- refused by the PCG will show a status of Refused
- is not eligible by design (i.e. household is not eligible for in-home components) will display a status of Mode Invalid – Design
- is not eligible per a respondent request (i.e. a household that’s eligible for in-home components but per Rs request you received permission to only to do study by phone) will display a status of Mode Invalid – R

Blaise will not accept a value of 1 on the block status screen until all sections have a final status code. To exit Blaise prior to finalizing all blocks, you will need to suspend (Alt-X). Once all sections are final, Blaise will accept a value of 1 on this screen and SurveyTrak will auto assign a result code of ██████



## 4.3 PCG Household Section

### 4.3.1 Section A: Neighborhood Measurements

Section A asks a number of questions about the neighborhood, such as length of time lived in the neighborhood, neighborhood satisfaction, perceptions of safety, and social cohesion.

### 4.3.2 Section B: Self-Esteem

Section B asks questions about the primary caregiver's self-esteem.

### 4.3.3 Section C: Child Rearing Values and Rules

Section C asks questions about attitudes towards the father role, maternal work, and non-parental childcare.

### 4.3.4 Section D: Psychological Distress and Wellbeing

Section D asks questions about psychological distress; work schedules, and social support from a spouse/partner, other family members and friends.

### 4.3.5 Section E: Family Pets

Section E asks questions about whether there is a current family pet and the type of pet(s). We also ask questions about how often the pet(s) are played with, sought out for comfort and considered a member of the family.

### 4.3.6 Section F: Disagreement in Parenting and Joint Goals

Section F asks questions about how often the primary caregiver and their spouse/partner disagree about family issues such as how the child(ren) are raised and spending money and time with the child(ren). We also ask about how families get along and settle arguments.

#### **4.3.7 Section G: Food Security**

Section G asks questions about the family's food situation. We ask if the family worried whether food would run out before they got money to buy more, if they ever skipped meals because there wasn't enough money for food, and about eating balanced meals.

#### **4.3.8 Section H: Home Environment**

Section H asks questions about media use and household rules about the use of TVs, computers, and games. We also ask a series of questions about what the primary caregiver would do if the child(ren) brought home a report card with grades or progress lower than expected. In this section, the primary caregiver's employment and religiosity are also addressed.

### **4.4 PCG Child Section**

#### **4.4.1 Section A: Child Health**

In Section A, we ask the primary caregiver a detailed series of questions about the child's/adolescent's health, including hospitalizations, chronic conditions, asthma, and health care utilization.

#### **4.4.2 Section B: Psychological Wellbeing, Personality, Behavior**

In Section B, we ask questions about the child's/adolescent's behavior, including behavior at school and when interacting with other children and adults.

#### **4.4.3 Section C: Parenting and Family Interaction**

In Section C, we ask about family activities, such as frequency of parents engaging in activities with child/adolescent. We also ask about whether there are clear rules about a variety of topics including how late the child/adolescent can stay out on weeknight or weekends, how many hours they can work at job, and who they can spend time with.

#### **4.4.4 Section D: Absent Parent**

In Section D, we determine if there are step or adoptive parents for the child/adolescent and how often they see or communicate with this parent.

#### **4.4.5 Section E: Home Environment**

In Section H, we ask about hobbies, after-school activities, and community activities. We also ask about the amount of choice the child/adolescent has about the type of clothes he/she wears, deciding what to eat and how to decorate his/her room. Questions on media use are also asked in this section.

#### **4.4.6 Section F: Child Education**

In Section F, we ask a number of questions about the child's/adolescent's school enrollment and primary caregiver's expectations about the child's/adolescent's schooling. We are also interested the type of school (private/public), frequency of school changes, school tuition,

attendance, receipt of meals under the school lunch and breakfast programs, attendance at special class or school for gifted students, or whether was classified as needing special education.

We also ask the primary caregivers about their involvement in the child's school, including meeting or conversing with the child's/adolescent's teacher, school principal, or school counselor; attendance at a school event or the parent-teacher association meeting; and volunteer work in the classroom.

#### **4.4.7 Section G: Expenditures and Savings**

In Section G, we ask a series of questions about expenditures and savings. We ask about whether money or assets have been set aside for the child/adolescent to attend college or other future schooling.

### **4.5 School Section for Children Age 5 to 17**

In this section, we obtain the name of the school that all children age 5 to 17 currently attend.

### **4.6 Child Care Section for Children Grade 6 and Lower**

In this section, we ask questions about child care for younger children. We inquire about the type, frequency of use, and costs of all formal and informal arrangements for each child in grade 6 and lower.

### **4.7 Absent Parent Section for Children with an Absent Parent**

In this section, more questions are asked about any absent parents for all of the children. It focuses on the degree of conflict and/or agreement between the parent that the child lives with and the absent parent over issues such as where the child lives, how he/she is raised, visits, discipline, etc.

### **4.8 12 to 17 year old Consent Section**

In this section, you will obtain verbal consent from the PCG for the 12 to 17-year-olds interviews and verbal consent for 12 to 17-year-olds interviews to be recorded.

### **4.9 In-Home Consents Section**

In this section, you will obtain electronic consent, during the in-home visit, from the PCG for several components of the study including:

- Electronic consent for PCG's in-home components (WCJ, Height, Weight, and Waist Measurements)
- Electronic consent from PCG for each child's in-home components (WCJ, Height, Weight, and 8 to 11-year-old's interview).

#### **4.10 Woodcock Johnson Section**

For households who are eligible for the additional in-home components, the PCG will be asked to complete the Passage Comprehension section of the Woodcock Johnson during the in-home visit.

#### **4.11 Measurements Section**

In this section, for households that are not eligible for the in-home components, you will inform the PCG that he/she will be mailed instructions and some equipment in the initial mailing for him/her to administer:

- Height, weight, and waist measurements on him/herself
- Height and weight measurements on each CDS eligible child.

During the measurements block, you will ask the PCG to report the measurements he/she took for him/herself and each child. If the PCG did not administer the measurements, Blaise will instruct you to ask the PCG to self-report height, weight, and waist measurements from last doctor's visit.

For households that are eligible for in-home components, you will obtain electronic consent from the PCG for him/herself and each of the CDS children to participate in the measurements (in the Consent Block). Once permission is received, this section will walk you through the instructions for collecting height, weight, and waist measurements from the PCG and height and weight measurements from each child. You will document the status of collecting the measurements in this section.

#### **4.12 Saliva Section**

In this section, for households that are not eligible for the in-home components, you will inform the PCG that we will be mailing a saliva collection package to them.

For households that are eligible for in-home components, you will obtain electronic consent from the PCG for him/herself and each of the CDS children to provide a sample. Once permission is received, this section will walk you through the instructions for collecting saliva from the respondents (PCG and each child). You will document the status of collecting the saliva in this section. Note: If you are not able to collect saliva from the PCG and/or children during the time of the home visit, you may leave the supplies (including instructions and pre-paid mailing envelope) with the PCG to administer and mail to Ann Arbor. You will not make a return visit to the home only to pick up saliva samples.

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## Chapter 5. Questionnaire: Child

### 5.1 Objective

The objective of the Child Blaise interview is to:

- Obtain child's assent to participate;
- Gather information from children ages 8-17 about:
  - Race/Ethnicity
  - Education
  - Health
  - Social relationships
  - Personality and behavior
  - Employment
  - Computers and electronic media use
  - Financial behavior
  - Dating behaviors, drug use, sexual experiences, and pregnancy (self-administered by phone);
- Conduct Woodcock Johnson assessment with children ages 3 to 17; and
- Obtain interviewer observations on assessments and the household.

The Child instrument begins with verification that you are speaking with the correct respondent, obtaining current grade for that respondent, and capturing whether the respondent will be using the paper copy of the respondent booklet, online version of the respondent booklet, or no respondent booklet. The remainder of the Child Blaise instrument has been programmed using the same design as the PCG instrument but rather with two sections (aka blocks):

- Child Interview
- PCG Woodcock Johnson Assessments and Observations

**Special Instruction:** If you have a situation where a child refuses to participate at the time the voluntary assent statement is read in Blaise but then changes at a later time (i.e. after having suspended Blaise), you may resume the Blaise interview but will need to back up the ChildVol statement in Blaise and re-read it to the child (changing the value from 5 to 1).

Following is a more detailed description of the child questionnaire sections.

### 5.2 Child Section

#### 5.2.1 Section A: Race and Ethnicity

This short section is only asked of children ages 12 to 17. The two questions in this section are asked in order to obtain the child's self-reported racial or ethnic group.

### **5.2.2 Section B: Education**

Section B focuses on the child's education. Questions are asked about their abilities in math and English. For children 12 to 17, we ask questions about their future plans and follow-up questions about college preparation.

### **5.2.3 Section C: Health**

In Section C, we ask about the child's health, including: self-rated health, self-perceived body weight and things that the respondents do to maintain, reduce, or increase weight; nutritional intake, exercise, and sleep. We also ask about limitations in activities due to health or emotional problem in the past month. For children 10 to 11, we also ask a series of questions about puberty.

### **5.2.4 Section D: Social Relationships**

In Section D, we have a series of questions that address peer interactions, family relationships, and closeness to parents, siblings, and other adults. This section also asks questions about characters of the child's friends, such as their participation in community groups and street gangs.

### **5.2.5 Section E: Personality and Behavior**

Section E contains questions that are used to measure the child's self-worth and self-esteem.

### **5.2.6 Section F: Employment**

In Section F, we ask questions about employment. We are interested in learning, in detail, about children's and adolescents' work-for-pay. We first ask about current full or part-time employment. Then we ask the same series of questions about summer employment. We would like to know about any work for which the respondent gets paid, but not about things the respondent does to receive an allowance from his/her family.

During this section we will follow a modified occupation and industry probing protocol which will be covered in detail after training.

### **5.2.7 Section G: Computers and Electronic Media Use**

In Section G, questions are asked about the child's possession and use of electronic devices such as smartphones, tablets and computers including, specific ways computers and other electronic devices (such as tablets or smartphones) are used for school work.

### **5.2.8 Section H: Financial Behavior**

In Section H, we ask about allowances and any savings that the child may have, whether they have to do work, like yard work or cleaning the house, to earn your allowance and whether they are saving some of this money for future schooling, like college.

### **5.2.9 Section J (IVR for children 12 to 17)**

In Section J, we ask children 12 to 17 questions about dating behaviors and a detailed series about tobacco, alcohol, and drug use, as well as sexual experiences and pregnancy. This section will be administered by phone so we will be using a technology called Interactive Voice Response (IVR) to administer. At the end of the interviewer administered questions you will:

- Inform the respondent that the second part of the interview will be a self-interview;
- Provide the respondent the following toll-free number [REDACTED] and his/her unique Case ID;
- Inform the respondent that he/she will need to enter the Case ID into the system when prompted;
- Inform the respondent that the questions will begin after he/she verifies the [REDACTED] case id entered and that he/she will need to listen to each question in full and then enter the answer to each question using his/her phone's keypad;
- Inform the respondent that if he/she doesn't finish the telephone self-interview, another interviewer will be calling back to follow-up with him/her;
- Address any questions the respondent may have; and
- Let the respondent know it would be great if he/she could call in to do the interview right away (but he/she can do it later if necessary).

### **5.3 Woodcock Johnson Section**

For households eligible for the in-home components, children ages 3 to 17 will be asked to complete the Letter-Word and Applied Problems sections. Children ages 6 to 17 will also be asked to complete the Passage Comprehension section of the Woodcock Johnson during the in-home visit.

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## Chapter 6. Informed Consent

### 6.1 Introduction to Informed Consents

Informed consent is the term given to the communication process that allows individuals to make an informed choice about participation in a research study. This process is reflected in an informed consent statement or document that contains specific, required information about the research study. The informed consent serves as the formal authorization by an individual of their agreement to participate in the proposed research.

The human subjects in projects must participate willingly, having been adequately informed about the research. All participants must understand what they are agreeing to and the risks and benefits of their participation.

Because we are working with children in this study, it is mandatory that we receive consent from their primary caregivers for their participation. In addition to permission from the PCGs, children must give permission, or assent, for their own interviews.

During this wave of CDS, method of permission will vary:

- Coverscreen SID:
  - Verbal consent for the Coverscreen interview
- PCG SID:
  - Verbal consent for own interview;
  - Written consent for own participation in the in-home components;
  - Verbal consent for 12 to 17-year-old child(ren) to be interviewed;
  - Written consent for 0 to 17-year-old child(ren) to participate in the in-home components; and
  - Verbal assent by child to participate in physical measurements and saliva collection.
- Child SID
  - Verbal assent for own interview (ages 8 to 17);
  - Verbal assent for own WCJ assessments (ages 3 to 17).

You will only be able to do the Child interview and/or in-home components after the PCG has given the applicable verbal or written permissions. We have made every effort to simplify the consent process. However, it is your responsibility to be sure each respondent understands to what he/she is consenting.

The following pages present a detailed summary of each type of permission.

## **6.2 Coverscreen Consent**

You must obtain verbal permission from the respondent in order to conduct the Coverscreen interview. The consent to participate as well as consent to be recorded will be programmed at the beginning of the Blaise instrument.

## **6.3 PCG Consents**

### ***6.3.1 Verbal Consents for Self***

You must obtain verbal permission from the PCG in order to conduct the interview (aka interviewer administered questions). Ideally, regardless of the assigned preferred mode, we would like the PCG to complete the interview portion of the study by phone. As with the Coverscreen, the verbal consents are programmed in the Blaise instrument, however, it's important that you remember that you may not even speak to minors about their potential participation until consent from their PCG is received and documented.

### ***6.3.2 Written Consent for Self***

For households eligible for the in-home components, the PCG will be invited to participate in the Woodcock Johnson assessment, height/weight/waist measurements, and saliva collection during your in-person visit. You will need to obtain signed electronic consents which will be accessible in Blaise in the In-Home Consent block (for Woodcock Johnson, Height, Weight, and Waist) and the Saliva block (for Saliva Collection).

Give the PCG time to read the consent form and verify that the PCG understands the terms in the document and answer any questions before signing the electronic consent. Leave a hard copy of the consent form with the PCG for his/her records. This copy may be signed or blank, depending on the PCG's preference.

For households that are not eligible for in-home components, the PCG will also be invited to participate in the height/weight/waist measurements and saliva collection, but these will be self-administered by the PCG. The initial mailing to the PCG will include materials for the PCG to conduct and record their own height, weight, and waist measurements. During the telephone interview, you will ask the PCG to report the measurements so that you can enter them into Blaise.

After the interviewer administered questions, or at minimum the questions in the PCG Household block, have been completed with the PCG, you will use the text in the Blaise Saliva block to inform the PCG that we will be mailing a package containing materials to collect saliva samples from him/herself as well as each of the eligible CDS children. The package will be mailed from Ann Arbor and include a paper consent form that the PCG will sign and mail back to Ann Arbor with the samples.

### **6.3.3 Verbal Consents for 12 to 17-year-old**

As previously mentioned, because we are working with children in this study, it is mandatory that we receive consent from the PCG before children can be invited to participate. Regardless of the household's eligibility for in-home components, we would ideally like 12 to 17-year-olds to complete the interview portion of the study by phone. To do this, we first need verbal permission from the PCG, the text for which you will find in the 12-17 IW Consent block of the PCG interview.

### **6.3.4 Written Consents for Children In-home Components**

For households eligible for the in-home components, the children will be invited to participate in the Woodcock Johnson assessment, height and weight measurements, and saliva collection during your in-person visit. In addition, 8 to 11-year-olds will be invited to participate in a brief interview. You will need to obtain a signed electronic consent from the PCG which will be accessible in Blaise in the In-Home Consent block (for Woodcock Johnson, Height, Weight, and Waist, and 8 to 11-year-old interview) and the Saliva block (for Saliva Collection). Before any of these can be conducted with the child(ren), the PCG must sign the appropriate electronic consent forms. Give the PCG time to read the consent form and verify that the PCG understands the terms in the document and answer any questions before signing the electronic consent. Leave a hard copy of the consent form with the PCG for his/her records. This copy may be signed or blank, depending on the PCG's preference.

For households that are not eligible for in-home components, the In-Home Consent block will have a status of NA (not applicable).

## **6.4 Child Assents**

### **6.4.1 Verbal Assents for Self**

Once the verbal and/or written consents from the PCG have been obtained for the child, the applicable sections of Blaise will be accessible on the child's sample line. You must obtain verbal assent from the child in order to interview him/her and/or conduct any of the in-home components. This assent is presented in Blaise.

## **6.5 If Permission is Denied**

Even if we cannot obtain PCG consent for the child(ren) and, therefore, cannot interview them, we will still be able to include the household in the study so you should still attempt to conduct the PCG interview. Information from the child, however, is a fundamental part of this study, so it is important to attempt to address the PCG's concerns about their child(ren)'s participation. Stress to the PCG the importance of the study and remain positive in your introduction.

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## **Chapter 7. Woodcock Johnson Assessments**

### **7.1 Introduction to Woodcock Johnsons Assessments**

The Woodcock Johnson (WCJ) Test of Achievement is a well-known, established educational assessment tool. You will administer three subtests during CDS. These tests are brief, and are interesting and enjoyable for respondents. They are:

- Letter-Word Identification
- Passage Comprehension
- Applied Problems

You will administer the assessments, and enter a correct or incorrect score into Blaise for each item asked. Based on your entries, the computer program will automatically determine what items should be given at what time. You, as an examiner, will be required to move back and forth in the numerical sequence of the items as part of this process. This allows you to focus on the respondent, ensuring you are administering the correct item and entering the correct code for the respondent's answer.

### **7.2 Measurement Tools**

The items you will need to administer the measures are:

- WCJ easel
- Your laptop to record responses
- A blank piece of paper for the respondent to write on during the Applied Problems subtest of the WCJ
- Pencils for the respondent.

### **7.3 The Importance of a Quiet Environment**

It is important with standardized assessments to administer the test in a quiet environment with no other adults or children present to disrupt the respondent's concentration. The ideal set-up is to sit diagonally from the respondent so that both of you can view the easel and, if possible, have the respondent sit with his/her back to a wall. If others must be in the test area, please request that they remain quiet and provide no coaching.

When setting the appointment with the PCG, make sure to tell them that you will administer a few standardized assessments with him/her and with the children during the in-home visit. Be clear about the need to have a space in the home that is private. Research has shown that scores on these assessments are negatively affected by outside interference of noise or people in the testing environment. Let the PCG know that any interference could negatively affect the accuracy of the assessment.

### **7.4 Easel Test**

The WCJ Test is an 'easel' test, or a test with a response book that sits in front of the respondent. Easel tests are administered in the following order:

- You will ask the respondent a question or give direction.
- The respondent will review the options on the page.
- The respondent points to an object or says something.
- You record their response as correct or incorrect.

**NOTE: Instructions in the WCJ easel that should be read to the Respondent are in blue.**

## **7.5 Stay in Control**

As with regular interviewing, it is important to control the setting of the assessment. For the WCJ, place the easel at an angle so that you and the respondent can both see the stimuli (pictures) simultaneously. You will need to see the choice that the respondent has made without much movement or effort.

Do not let the respondent flip the page forward on the easel test. Stay upbeat and positive throughout the testing time. Respondents will respond to the atmosphere that you create.

Try to keep the respondents 'on task' by repeatedly referring to and touching the easel test. Use their name from time to time while giving direction to help personalize the instructions. Use positive and encouraging statements such as "You're doing fine" or "Thank you."

## **7.6 Avoid Statements that Refer to the Respondent's Progress**

Always avoid statements that refer to the respondent's progress on the test. Do not use statements like "You got that right," "No, that is not right," and "Are you sure that is the right answer?" Also, be very careful not to give any facial expression or movement of the head that may indicate that the respondent has answered an item right or wrong. The respondents will look at you to check their progress, especially if they are unsure about their answer. Avoid any expression that would give them feedback on their progress. If they directly ask about their progress, provide a neutral statement that encourages them to remain engaged such as, "You're doing fine."

## **7.7 Be Aware of the Respondent's Mood**

Be aware of the mood of the respondent during testing. Sometimes respondents will just start pointing to pictures without thinking. This usually happens if a respondent is tired, bored, or frustrated.

Try to gauge whether they are tired, frustrated, or just bored. If this happens, try to encourage them that the assessment will be over soon. Use a varied tone of voice and encouraging statements for their efforts. If you still sense they are responding randomly, try to encourage them to "think about this before you respond", or ask if they "need a break?" If they indicate they would like a break or you feel it is needed, take a short break (5 minutes) between the sub-tests and let the respondent get up and move around the testing area, use the bathroom, or get a drink of water. Do not break during one of the sub-tests, only between them. Do not let them leave the testing area. They may not come back.

## **7.8 Administer Test Exactly as Written**

Each test must be administered exactly as described in training and in this manual. Any deviation from these procedures will invalidate the results.

Standardized test administration should be approached with the understanding that the instructions and wording of the test should not vary in any way. Words cannot be added, left out, or substituted. The goal of a standardized test is to measure how well individuals respond to questions when given identical instructions. An examiner in New York should be asking the exact same questions as an examiner in San Francisco. When administered in this manner, the respondents in both of these cities will have been given the identical test and their scores will be based only on their ability, and not the testing situation.

The most common mistakes made in using standardized tests, by both experienced and inexperienced interviewers, is to accidentally point to the correct answer on the test or to change the wording of the instructions.

## **7.9 Special Circumstances**

There are some exceptions to the restrictions detailed above. Three general groups that sometimes require small changes in the assessment procedures are preschoolers, English as a second language (ESL), and individuals with disabilities.

### ***7.9.1 Special Circumstances: ESL (ENGLISH AS A SECOND LANGUAGE)***

If any respondent is having difficulty understanding you, repeat the instructions. Do not paraphrase or change the wording of the instructions in an effort to help them comprehend the directions. If you believe they do not understand English well enough to complete the assessment, please discontinue the testing. Contact your team leader with any ESL issues; they will advise you on what to do. Do not allow a family member to translate for you.

### ***7.9.2 Special Circumstances: Individuals with Disabilities***

Always check to see if a respondent should be wearing a hearing aid, glasses, or other device that helps them to see, hear, or respond to questions. Most of the measures require pointing. If a respondent is unable to point, it is acceptable for them to describe their answer to the interviewer. If a respondent is unable to speak, they can point. Be sure to make notes about any hearing, visual, cognitive or physical impairment that may affect the testing situation.

## **7.10 Introduction to WCJ**

Standardized tests are designed to be administered using strict guidelines for examiner behavior. One common element of standardized testing is determining starting and stopping points that allow you to obtain as much information as you can without administering too many items that are either too easy or too difficult for the respondent, which can lead to fatigue, boredom, or frustration.

The term “basal” is used to refer to when the respondent obtains six or more consecutive items correctly. Starting points have been calculated to allow the majority of respondents to be able to pass the items below it. The term “ceiling” is used when the respondent answers six or more items incorrectly and a complete page of items has been given. Because the Blaise program automatically calculates the basal and ceiling using the codes entered, you do not need to determine this. You will never stop in the middle of a testing page.

The WCJ assessment is designed so that the questions administered are appropriate to the respondent so it is crucial that responses are coded and data entered accurately.

Approximately one in three respondents will need to go in reverse order on the WCJ, so be attentive to the route the program gives you about what item to administer.

For the CDS project, we have clear guidelines on turning the pages. When you are moving to the next page, either backward or forward, you will need to pick up the pages by the main tab for that section, find the next page, and then turn the page over for the respondent to see. This needs to be done every time you turn the page. Following this guideline, for those times that you will go backwards, in reverse order, the direction will not be noticed by the respondent.

Also, instructions that should be read to the respondent are printed in blue on the WCJ easel. Please be aware of this because it is the opposite of the Blaise program.

### **7.10.1 Starting Points**

You want to start testing at the appropriate item number for the respondent’s grade level. Blaise will provide you the page number and item number on which to start. To administer the test, the interviewer turns to the page where the starting item is located.

For Passage Comprehension, you will administer a sample item before beginning the assessment. Make sure you setup the testing area so that you can view and point on their side of the easel, while you follow the instructions on your side of the easel and enter in the scored responses.

### **7.10.2 Scoring**

When a respondent gets an item correct, enter a ‘1’ for the item in Blaise. If the respondent gets an answer wrong, enter a ‘5.’ You need to stay consistent with your hand movements when entering the answers as the respondent will be watching you for non-verbal feedback. Be very careful to enter correctly when the answer give is ‘1’ or ‘5’.

### **7.10.3 Use of Judgment in Scoring Responses**

Occasionally, a subject’s response does not fall clearly into the correct or incorrect category or it is difficult to decide if the item should be scored as correct or incorrect on the basis of the key.

In this case, record the actual response as a note in Blaise by hitting F2 to bring up the comment box. Then score it using your best judgment.

#### **7.10.4 Scoring Multiple Responses**

If a respondent gives more than one answer to an item, score the last answer given as correct or incorrect. Do not base the score on the earlier response. Follow this procedure even if a respondent changes a response given much earlier in the testing session. The new response, whether correct or incorrect, is used as a final basis for scoring that item. For example, when responding to Item #25 in the Passage Comprehension subtest, a girl initially responded that her answer was “jar”. Several items later, she informed the examiner that she was thinking about her earlier answer “about the whale one” and knew it should be “hamburger”. The examiner should go back in the program to Item #25 and correctly credit the response with a ‘1’. You will only be able to go back to change an answer when you are within a subtest. Once you end that subtest, you will not be able to go back, so let the respondent know that you will make a note of their answer.

If a subject provides both a correct and incorrect response to an item, query the response by saying something such as, “Which is it?” For example, if a subject replied that the answer to Item #41 in Applied Problems was “10 or 8 miles”, the examiner should say, “Tell me one answer”.

#### **7.10.5 Additional Codes in Recording Responses**

In addition to using 1’s and 5’s to score, the following can be used when recording a subject’s responses:

- Don’t know (control-D): Use this if the subject responds “I don’t know.”
- No response or refused (control-R): Use this if the subject does not respond, or says “I don’t want to answer this.”

#### **7.10.6 Timing**

None of the assessments have strict time limits for items; rather, there are guidelines for the amount of time given for each item to keep the respondent from being too frustrated, bored, or fatigued. Use of basal and ceiling rules focuses the assessment at the subject’s level of ability and minimizes testing time.

Please allow the respondent a reasonable amount of time to answer, and then move on even though he or she might get the answer if given more time to think. Allow more time for a specific item if the respondent requests it. As a guide, each assessment test should take 5-10 minutes to administer. You can also prompt the respondent, by saying “Do you have an answer?” If they ask for more time, give them a reasonable amount. If not, you can say “Now, try this one” and move onto the next item.

During Applied Problems subtests, allow approximately double the typical respondent's time to compute an answer, and then have (him/her) move on to the next problem. If the respondent is still working on the answer using the paper and pencil, let them continue.

Remember breaks can be taken between subtests if needed.

### ***7.10.7 Details on the Letter-Word Identification Test***

#### **Respondent**

For respondents ages 3 to 17.

#### **What counts as correct?**

Exact pronunciation of the word shown. However, the purpose of this assessment is identification of the word. Since we are interviewing across the nation, we do need to make adjustments for dialect differences in pronunciations. More information on that will be covered in training.

#### **Starting points**

Starting points are determined by grade level. See chart on page 11 of the WJ-R.

#### **Administration Rules**

1. Test by complete pages.
2. You should know the EXACT pronunciation of each word.
3. Allow 5 seconds for word pronunciation. Guide the respondent to the next word by pointing to the next word and saying, "Try this one."
4. Do not penalize a respondent for mispronunciations due to articulation errors, accents, or speech patterns.
5. If you do not hear a response, have the respondent finish the page. Then, have the respondent reread all of the items on that page, but only score the item you couldn't hear.
6. Do not tell the respondents any letters or words during the test.
7. If the respondent pronounces the word slowly (syllable by syllable) and correctly, give the respondent a correct score.

### ***7.10.8 Details on the Passage Comprehension Test***

#### **Respondent**

For respondent ages 6 through 17 and PCGs.

#### **What counts as correct?**

Listed one word responses.

#### **Starting points**

Begin with Sample A for all (WCJ Easel page 61). Then use the chart on page 61 to determine the starting point by grade. Make sure you find the starting point before you administer the sample item. You should move from the sample item to the first test item, without having to pause to find the starting point.

### **Administration Rules**

1. Test by complete pages.
2. Do not penalize a respondent for mispronunciations due to articulation errors, accents, or speech patterns.
3. Allow reasonable time (approximately 30 seconds) after the passage is read for response, then point to the next item, saying "Try this one."
4. The respondent should read the passages silently. If the subject persists in reading aloud even after you have asked him/her to read silently, do not insist on silent reading.
5. Responses that differ in verb tense or number are accepted as correct unless otherwise specified.
6. Unless noted, only one-word responses are acceptable. If a respondent gives a two-word response or longer, ask for a one-word response.

### **7.10.9 Details on the Applied Problems Test**

#### **Respondent**

For respondents ages 3 through 17.

#### **What counts as correct?**

Providing the correct answer(s). Note that there are three items where the respondent will have to give you two answers in order for a correct score. These are test items 19, 23, and 29.

#### **Starting points**

Listed in Blaise and on WCJ easel page 133.

### **Administration Rules**

1. Test by complete pages.
2. Provide paper and pencil, and say "You can use this paper and pencil if you need them."
3. Read all items to the subject.
4. Repeat if requested to by the respondent.
5. Do not rephrase any questions or repeat only certain parts of any questions. If the respondent has a question, you can only repeat the entire question.
6. Give the respondent a reasonable amount of time to answer. Prompt by saying "Do you have an answer for me?" If they ask for more time or are using the paper and pencil to work on the problem, give them additional time.

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## Chapter 8. Physical Assessments and Saliva

### 8.1 Physical Measures

Whether or not the household is In-Home Component eligible, we will be collecting measures of height and weight from the PCG and CDS children and a waist measurement from the PCG. The measurements will be converted into standardized scores so that we can compare the information from the CDS sample with other national child, adolescent and adult health studies that set benchmarks for body mass index for the United States. This wave we have also added collection of saliva which will be stored for future analysis.

Below you will find the instructions for the collecting the physical measures and saliva samples for both in-home component sample and self-administered sample.

Sample Eligible for In-Home Components	Sample Not Eligible for In-Home Components (Self-Administered)
<p><b>8.1.1 Height/Weight Introduction</b></p>	<p>Using the tools provided in your materials, you will measure the respondent’s height and weight and the PCG’s waist. It is important to obtain accurate measurements, so please take the time to review procedures and practice on children and adolescents if at all possible.</p>
<p><b>8.1.2 Measurement Tools</b></p>	<p>The PCG will be sent instructions, a rafter’s square, soft tape measure, steel tape measure, and post-it notes as well as an instruction sheet and form on which to record the measurements. Respondents will be asked to use their own scale for weight measurement.</p>
<p><b>8.1.3 General Procedures</b></p>	<p>The instructions to the PCG will incorporate the general procedures listed for in-home measurements.</p>
<ul style="list-style-type: none"> <li>• Be sure that electronic consent forms are signed for the PCG and child(ren).</li> </ul>	<ul style="list-style-type: none"> <li>• There is no consent form for the self-administered measurements.</li> </ul>

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- When measuring respondents' height, weight and waist, do not physically touch the respondents (e.g., do not help the respondents onto the scale or take off their shoes). Be certain, however that respondents safely step on/off the scale.
  - Instruct the respondent to take off his/her shoes, and step onto the scale, stand still, etc. A family member may assist you if necessary.
  - Enter the information in the Blaise instrument.
  - If the respondent refuses to be measured or there are physical limitations, such as respondent is in a wheelchair, ask the PCG to give you the height and weight and the date it was last measured at their last doctor visit. Follow the Blaise program closely as it will guide you to the appropriate Blaise fields.
  - If you aren't able to take the physical measurements or the information from the last doctor visit, ask for his/her best estimate. You will be instructed to enter this information in the appropriate Blaise fields.
- You will be instructed to ask the PCG for the height, weight, and waist measurements we've requested.
  - If the PCG has not received the measurement tools at the time of the IW, you should suspend the measurement block and make an appointment to call back after he/she has taken the measures.
  - If necessary, you may ask the PCG to give you the height and weight and the date it was last measured at the last doctor visit. Follow the Blaise program closely as it will guide you to the appropriate Blaise fields.
    - If the PCG is unable to give the information from the last doctor visit, ask for his/her best estimate. You will be instructed to enter this information in the appropriate Blaise fields.
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**8.1.4 *Measuring Respondent's Height***

There are several specific steps to measuring the respondent's height:

1. Ask the respondent to take off his/her shoes and to stand against a wall or door.
2. Ask permission to place a Post-it note on the wall right at the top of the respondent's head.
3. Position your rafter's square against the wall directly over the respondent's head.
4. Make a mark on the Post-it note at the respondent's height. If the respondent is taller than you and you cannot reach the Post-it note, you may ask the respondent to mark the note themselves.
5. Ask the respondent to move away from the wall.
6. Secure the tape measure and measure from the floor to the mark on the Post-it.
7. Record (his/her) height to the nearest centimeter on the Post-it and then in the Blaise instrument, or initially record on the measurement form, and then enter in the proper Blaise fields.
8. Be sure to remove the Post-it from the wall.

If necessary, you may also have the primary caregiver measure child(ren) for you and give you the number.

Written measurement instructions will be sent to the PCG along with the measurement equipment.

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**8.1.5 *Measuring Respondent's Weight***

There are several specific steps to measuring the respondent's weight:

1. In addition to having the respondent remove shoes, ask him/her to empty

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pockets of any heavy items.

2. Clean the scale using an alcohol wipe.

3. Activate the scale and set the scale to zero.

4. Once the scale shows 0.0 have the respondent step on the scale.

5. Have the respondent stand in the center of the scale. The respondent may need to stand on the center of the scale for 5-10 seconds to assess an accurate weight.

6. Record (his/her) weight in the Blaise instrument, or initially record on the measurement form, and then enter in the proper Blaise fields.

7. Wipe the scale with alcohol again and put it away.

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### **8.1.6 PCG Reported Height and Weight**

If you are unable to actually measure and weigh the respondent ask the primary caregiver for the height and weight taken at the last doctor visit. Record the measurements and the approximate length of time since that doctor visit in the appropriate Blaise fields.

If the PCG does not remember exact measurements, record “best estimate”. You will be instructed to enter this information in the appropriate Blaise fields.

Only record information in A3 and A4 if the PCG was unable to actually report the measurements requested for any respondent in the household.

Ask the primary caregiver for the respondent’s height and weight at the last doctor visit. Record the information in Blaise. Record the approximate length of time since that doctor visit in the appropriate Blaise fields.

If the PCG does not remember exact measurements, record “best estimate”. You will be instructed to enter this information in the appropriate Blaise fields.

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### **8.1.7 Measuring**

There are several specific steps to measuring the respondent’s waist:

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*PCG's Waist*

1. Instruct the respondent to remove any bulky clothing.
2. Hand the flexible measuring tape to the respondent.
3. The respondent should be in the standing position.
4. Ask the respondent to hold one end of the tape measure at his/her navel.
5. Tell the respondent to wrap the tape measure all the way around his/her waist, bringing the tape measure back to your navel with the centimeter side facing out.
6. If the respondent is not able to wrap the tape measure around his or her waist, you may assist.  
  
To do this, ask the respondent to hold the end of the measuring tape while you walk around him or her with the other end. You will then hand that end of the measuring tape to the respondent and continue with the measurement. Do not reach around the respondent to place the tape in the proper position, and avoid touching the respondent.
7. Check that the tape is horizontal all the way around the respondent and that the centimeter side is on the outside.
8. Ask the respondent to take a normal breath and exhale holding their breath at the end of the exhale.
9. The waist circumference is measured at the point where the length of tape measure around the waist meets the end held at the

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navel.

10. Read the measurement on the tape measure after the respondent exhales and record the measurement to the NEAREST CENTIMETER DECIMAL POINT.
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## 8.2 Saliva Collection

In order to give you some flexibility to decide when to introduce the saliva collection to the respondent, the Saliva Consent form and Blaise instructions for administration are contained in a separate Saliva block within the PCG IW.

NOTE: When you administer the Saliva in a home visit, you will pay \$10 in cash to each respondent who has provided a sample. You must obtain a signed receipt for cash payments and document the cash payment in the SurveyTrak View/Edit Payments tab.

	Sample Eligible for In-Home Components	Sample Not Eligible for In-Home Components (Self-Administered)
<b>8.2.1</b> <i>Saliva Collection Introduction</i>	<p>When you are in the respondents' home and have determined that the PCG would likely be receptive, you can select the Blaise PCG Saliva block. This can be administered before or after the Woodcock Johnson.</p> <p>It is important to obtain a viable sample, so please take the time to review procedures and practice on children and adolescents if at all possible prior to starting production.</p> <p>You will use the Fujitsu tablet to obtain the PCG's signed consent on the Saliva consent form. The consent is for the PCG and all children ages 5 to 17.</p>	<p>When you have determined that the PCG would likely be receptive, you can select the Blaise PCG Saliva block. Blaise will guide you through the introduction and instructions for the PCG.</p> <p>Be sure you are speaking with the PCG when you introduce the saliva collection. It is crucial to select 'Telephone' as the actual mode. You will not be asking for consent for participation at this time, just advising that information will be mailed.</p> <p>If the PCG volunteers that he/she refuses the mailing, you will enter that in the appropriate field in the Blaise Saliva block.</p>
<b>8.2.2</b> <i>Equipment</i>	<p>You will receive saliva information sheets, saliva collection kits with bio-marker bags, gloves, and a prepaid padded envelope for mailing the sample(s) back to Ann Arbor. Up to six (6) samples can be shipped in one bag. You will also have saliva sample collection detailed instructions to leave with the PCG if you are not able to collect all of the samples during your visit to the household.</p>	<p>Upon completion of the Saliva block, Ann Arbor will mail the PCG a paper version of the Saliva Consent form, a saliva information sheet, detailed instructions on saliva sample collection, an individually marked saliva collection kit for each eligible member of the household, and a prepaid envelope for mailing the sample(s) back to Ann Arbor. Up to six (6) samples can be sent in one</p>

**8.2.3** *Saliva  
Consent  
and  
Collection  
steps*

There are specific procedures to follow when collecting saliva samples:

- Follow the Blaise script and instructions in the PCG Saliva Block. Be sure you have selected actual mode FTF.
  - You will ask the PCG to read the Saliva Collection Information Sheet or read it to the PCG if he/she prefers. Answer any of the PCG's questions.
  - You will rotate the cover of the Fujitsu tablet to obtain signatures on the Saliva consent form for the PCG and children ages 5 and older.
  - Be sure to have the PCG read the consent form and answer any questions they might have.
  - Ask the PCG to sign the form indicating that he/she has read the information and agrees to participate. The PCG may give consent individually for self and each child.
  - When the consent is signed, Blaise will direct you through the following steps.
  - Put on your gloves. Show the PCG a saliva collection kit and the instruction sheet. Write the Case ID and the PCGs first name on a label and attach the label to the saliva collection tube being careful not to cover the "Fill Line".
  - Ask the PCG to spit into the funnel until he/she has filled the
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tube up to the fill line with liquid  
– not bubbles.

- When the tube is full, instruct the respondent to close the cover of the funnel and read through the following instructions in Blaise or from your Saliva collection card while the PCG completes them.
- Ask the PCG to hold the tube upright with one hand. Close the cover of the funnel with the other hand by firmly pushing the lid until you hear a loud click. The liquid in the lid will spill down into the tube to mix with the saliva. Make sure the lid is closed tightly. Hold the tube upright and unscrew the funnel from the tube. Use the small cap to close the tube tightly. Shake the capped tube for 5 seconds. Discard or recycle the funnel.
- Then take the tube from the respondent or ask them to place the tube into the small, nylon bio-bag. Be sure that the labels are affixed and legible. Place the tube into a padded, preaddressed envelope. (The envelope can hold up to 6 saliva tubes.)
- After the PCG saliva sample is collected, you will ask them to help their child(ren) collect their saliva.
- A child assent statement and instructions geared to the child's age will be displayed in Blaise. You will need to get the child assent before the saliva is collected. You will have a Child Assent card with these

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statements to refer to should you need them during the child(ren)'s saliva collection.

- Be sure that each child fills the tube to the fill line (don't count the bubbles!), that the cover is tightly screwed in place, and that the labels are correct and affixed to the collection tube.
- Place each tube in a nylon bio-bag. Ask the child to hand it to you or to place it in the bag.
- Document the results of the consents and the collection in Blaise – whether the respondent consented or refused, gave an adequate sample or was unable to fill to line.
- *NOTE:* if the respondent is unable to fill to the tube to the 'Fill Line", still send the sample to Ann Arbor. Your Blaise entry of unable to fill will help determine the disposition of the sample.

## Chapter 9. Time Diaries

### 9.1 Overview

The purpose of the time diary is to obtain the best possible information about children's and adolescent's time use. Time Diaries are an important and innovative survey tool for gathering such information, and have been receiving a significant amount of attention in the research circles that focus on children and adolescents.

### 9.2 Time Diary Respondents

The Primary Caregiver (PCG) will be asked to complete or to assist all CDS children to complete two Time Diaries for each child. Respondents find the time diary interesting to do, but reconstructing a 24-hour period is sometimes difficult. For younger children, the PCG will work with the child to get the most accurate diary data. The PCG can help anchor the times by recalling what time the child got up, ate lunch, etc.

Adolescents, on the other hand, may be better at detailing their daily activities themselves. Parents may not be aware of all of the details we ask for each activity recorded in the time diary of a teenager's life (for example, the name of the specific TV show that the adolescent watched, or whom the adolescent was with).

### 9.3 Diary Day Assignments and Target Dates

There are diary assignments for two days of the week: one weekday and one weekend day. All children in the CDS household will have the same diary days. You will also decide with the PCG the best Target Dates for completing the diaries. *It is essential for the purpose of the data collected that all family members complete the diaries on the same day.* The diary weekday and weekend day will be preloaded in SurveyTrak and Blaise for all samplelines in the household. You will enter the Target Dates in the SurveyTrak View Edit Time Diary tab on the PCG's sampleline which will auto-fill these same dates onto each child's sample line.

### 9.4 Mail Ahead Approach

Since it is difficult to remember activities in detail for very long, it is essential that we collect the diary information as close to the diary day as possible. Using a 'mail ahead' diary will help provide accurate information about the family members' activities on the selected days.

For all sample, the Time Diaries will be prepared for the household and mailed from Ann Arbor in the Initial PCG mailing.

- Each child's first name and Case ID will be recorded on the front cover. The Case ID will be displayed in the sample grid in SurveyTrak on each SID.
- The diary Day of the Week will be circled on the front cover.
- The Target Date to Complete that you have entered in SurveyTrak will be recorded on the front cover as well.

During your contact with the PCG, you will request that each child completes the time diaries about the two pre-selected days on his/her own or that the PCG assist children as needed. Make sure you explain the diaries clearly to the PCG after the completion of the Coverscreen interview or during your first contact with the PCG. During that contact:

- Suggest a targeted date for each diary (i.e. the upcoming weekday and weekend day if convenient) and ask the PCG to instruct the children to complete their time diaries on the same target dates.
- Be sure to enter the target dates in the SurveyTrak in the View-Edit Time Diaries tab on the PCG SID line as this will inform the follow-up interviewer when follow-up calls should begin.
- Instruct the PCG to ensure the questions about administration on the front cover are answered.
- If the household is eligible for in-home components, it is best to schedule your home appointment soon after the target date for the second diary. You can let the PCG know that you will review and pick up the children's diaries when you come to the home.
- If the household is not eligible for in-home components, inform the PCG that he/she should mail all completed time diaries back, along with completed school and birth record linkage forms, in the pre-addressed, pre-paid envelope(s) that were included in the initial mailing package.
- Let the PCG know that another interviewer will call him/her the day after the second time diary target date to confirm they have been completed and mailed back and/or to see if the PCG has any questions.

## 9.5 Instructions and Examples

In the PCG initial mailing, you will include one copy of the time diary instruction and example booklet for each household. The booklet includes detailed instructions and two examples illustrating how the time diary should be completed. To help PCG and older children complete the diaries, the example diaries portray different age groups. Please instruct the PCG to read the instructions carefully before filling out the diaries, and to ensure that all older children who will be completing the diary on their own read it as well. Note: The first pages of the time diary repeat the basics instructions for the respondents for completing the time diary.

## 9.6 Reviewing and Probing

**For Telephone sample**, there will be designated follow up interviewers who will contact the respondents for review and/or editing.

**For households' eligible for the in-home components**, you will pay the PCG \$10 for each child for which a pair (Weekday/Weekend) was completed and delivered to you during the visit. You must obtain a signed receipt for the cash payment and document it in the SurveyTrak Payment View/Edit tab. While in the home, you will still need to review the diary with them before you leave. This is a necessary and mandatory step that serves to greatly improve the overall quality of data in the diary. It is preferred that you complete this step in the home. However, this

might not be possible and we expect that there may be a need for phone follow up by one of the CDS follow-up interviewers.

Two things to keep in mind for when reviewing time diaries:

- Every minute of a 24-hour time period must be accounted for; and
- There is never too much detail – the researchers code these data in very fine level detail, so the more information you and the respondent provide, the more accurate the data coding.

A key objective of the time diary method is to account for every minute in a given time frame for the entire family. The time diary for CDS encompasses a 24-hour period, beginning at midnight and ending at midnight. The respondent must have activities and details about such activities recorded for every minute in the entire 24-hour period of the selected time diary day.

Look over the sample time diaries that are included in the Time Diary Examples booklet to get an idea of the amount of detail we would like. If, in cases where you interview two siblings, you find a discrepancy between the diaries, do not revise either one in an attempt to make them identical.

During an in-home visit, you will need to review each time diary to determine if more detail or clarification is needed. During your review of the time diary, if something isn't clear to you then it will likely not be clear to the coders who will work with the diaries after they are received in Ann Arbor. To clarify and obtain the information, you will need to probe more extensively than what you would normally do in an interview in order to gather more information to edit the time diaries. You do not need to record your probes.

Probe for detail! Respondents may say at first that they/their child 'just sat around all day.' After probing, however, you will learn that they probably did other things as well, such as washed and dressed, ate meals, went to school, talked with friends or family, watched TV or did other things. Be especially attentive to activities that respondents report taking more than 4 hours (except sleep or going to school or work). For example, if the respondents report that their child was 'playing' for 4 hours, probe to find out more about what types of things the child did. Did he or she watch any TV? Go outside to play? Eat a snack or meal?

Record activities in the respondents' own words and probe for detail, so we know, for example, whether they were reading a book or magazine and the name of the book or magazine (do not record just "reading"), or was playing a board game or a game of soccer (do not record just "playing a game" – get the name of the game). If there are gaps or overlapping times, probe to get corrected information. If some of the columns are blank, be sure they get them filled in where appropriate. Check also for legible handwriting and make sure that the respondent's answers meet the objectives of the questionnaire. Make sure every minute is described. The end time of one activity should be the beginning time of the next activity. The time you spend carefully reviewing and editing the diary greatly expands the analytic value of the instrument. Time use data are one of the most important trends in research on children and adolescents!

In addition to the activity itself, we need to know where the activity took place and whether other people were involved in the activity. See the probing instructions for details on different types of locations and key points to keep in mind when reviewing. We need as accurate information as possible about who is interacting with the child and who else is in the same place but not directly interacting with the child. The next section provides more details about recording and probing activities.

We are also trying to get a better understanding of secondary activities. The question ‘Was the child doing anything else at the same time?’ is extremely useful in picking up activities that might not normally be reported. If it was left blank, you need to probe for any secondary activities. It is not uncommon to record 2 or 3 secondary activities going on at the same time as the main activity (i.e. doing homework while listening to music, talking to siblings, and eating a snack).

Things to look for when reviewing a time diary with the respondent:

- The activities are verbs.
- The activities are what the child/adolescent was doing.
- Times are correct and add up (read each activity with the beginning and end time out loud as you review the diary to be sure it is correct).
- Probe any long periods of time (any activity lasting over four hours except going to school or sleeping).
- Probe ‘playing’ to find out what the child/adolescent was playing (specific name).
- Probe ‘reading’ to find out what the child/adolescent was reading (book, magazine) and whether the child/adolescent was reading or being read to.
- Probe if the name of the TV shows, videos, computer games, or books are not filled in.
- Probe if secondary activity is not filled in.
- Check for legible handwriting.
- Check for travel times between locations and probe to include these if needed.
- Make sure that “with whom the child/adolescent is doing the activity” and “who else is in the same location” columns are completed.
- Check if normal daily activities are missing – personal care, eating, etc.

Probing is not necessary if the PCG or child is sleeping, doing personal care activities, or is at school or at work.

## 9.7 Editing

Editing takes place when you have finished reviewing the time diary with the respondent. As soon as possible after the household visit, review the time diary materials from the household. Take adequate time to review the time diaries and make sure that the recorded information will make sense to the coder. If you realize that you have missed something or there is a conflict, **CALL THE RESPONDENT BACK IMMEDIATELY**. It is better to call back immediately, while the interview is still fresh in the respondent's mind.

Use the Review and Editing Checklist (see Appendix J) and review the completed time diary as follows:

- Make sure the correct day, date, and respondent's first name are on the front of the cover.
- Make sure all entries are legible.
- All remarks are indicated in parentheses and recorded where they occurred.
- All ambiguities or inconsistencies in the respondent's answers are marked with a marginal note.
- Complete the **Field I Wer** box on the inside cover of the questionnaire that contains mode of interview, date of interview, length of administration/review, and length of edit.
- Administration/Review length is the time you spent with the respondent reviewing or administering the diary.
- Length of edit is the time you spend on your own cleaning up and checking the time diary after you have left the respondent's home.
- Note on the inside of the cover any unusual situations or problems that coders should know about.
- Double check to be sure the entire 24-hour period is accounted for without gaps or overlaps.
- Ensure the Case ID is written accurately on each diary.

## 9.8 Mailing Time Diaries to Ann Arbor

Mail the time diaries (2 per respondent) to Ann Arbor in your weekly mailing using the USPS Priority mailer provided in your bulk supplies. The date sent should be recorded in SurveyTrak on the Time Diary View/Edit tab on each child sample line for which you have obtained and mailed completed time diaries.

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## Chapter 10. Interviewing Children

### 10.1 Preparing space for the Child Interview

You may not be able to control the environment for the child interview or offer an appropriate alternative, but it's wise to be aware of the potential effect and do what you can to minimize the impact on data collection. The ideal space would be well-lit, have minimal distractions, and a flat surface for your materials.

Have your materials arranged so that the interview flows smoothly and efficiently. You risk jeopardizing the rapport you've built with the youth by making them wait while you try to locate what is needed. A good place for materials that aren't in use would be your tote-bag, which could be placed on the floor or on a chair next to you.

At times, a parent or other adult may want to observe the session, or the child may want a parent nearby. The parent may sit in the child's view so the child does not worry that the parent has left. The parent should be seated to one side of the child so that it is not too easy for the child to interact with the parent during the assessment administration. For all scenarios, inform the adult observer that he or she should not participate in the session in any way. The observer should not assist the child or make any comments that would distract from the task at hand or lead the child to select a particular response.

If you are alone in a private room with the youth, be sure that the door remains open. ***Never complete a child interview if there is no parent or adult somewhere present in the home.***

### 10.2 Establishing Rapport and Gaining the Cooperation of Children

It is important for the children to have a positive experience during the interview. First of all, they are volunteers giving their time to assist us in this study. Second, their enjoyment will not only make your job easier but will enhance the accuracy of data collection. The rapport you establish with youth will make them want to do well for you and more willing to work through all the tasks with you. Establishing a motivating environment depends considerably on you.

To begin, dress comfortably, but don't try to dress "down with the kids". Comfortable dress is also important as you may be sitting on the floor or in tight, constricted spots.

Very young children may be uncomfortable with unfamiliar adults, and separation from their caregiver may be difficult. Assure the child that "Mom" will be nearby and she'll be there when you finish. The caregiver will help with the physical measurements and can stay with the child during the interview and assessments if necessary.

Create a relaxed atmosphere with an informal chat at the beginning of the interview. Introduce yourself using your first name. Say that it is very nice to meet him or her. You may mention that you like the name, or that you have a child or friend with the same name.

A few minutes of light and friendly conversation will help to put both you and the child in a relaxed frame of mind. Comment on positive things about the youth, such as he or she is wearing a nice outfit. You might also want to find something that you have in common. For example, if you are both wearing blue, you could comment that blue is one of your favorite colors. Ask the child what kinds of things they like to do (to play with). If they mention a favorite toy, you could ask to see it.

While there is no bag of “rapport tricks,” using your judgment and following the guidelines below will help you develop rapport.

- Smile frequently and genuinely, and establish eye contact with the child to show appreciation for their participation. Show acceptance of the child and his or her family.
- Be aware of your facial expressions. Make sure they convey the same positive and upbeat message that you are verbally communicating. **Many young people respond more to your non-verbal communication than to what you are actually saying.**
- Use the youth’s name, with a smile, when you talk to him or her.

You should **never** do any of the following:

- Never talk down to the youth or use a condescending tone.
- Never scold a youth who is not cooperating or in any way make the youth feel bad.
- Never touch, hug, or physically control a youth. Remember you are an outsider and a stranger to the youth. Touching some children will make them feel very uneasy. However, if a child initiates touch (e.g., wants to hold your hand), it is permissible to hold his or her hand (or pat their back in response to a spontaneous hug).
- Never give a lengthy explanation of the interview or assessments or apologize for administering them. Most children would not find a long explanation interesting; and apologizing will make the child think these are not at all fun.
- Never ask the youth about how he or she is doing in school or about his or her family, or neighborhood. If the child is not doing well in school, or has a family or neighborhood problem, these questions could be sensitive. Also, questions about sports can sometimes be sensitive if the youth has a disability (many of which may not be obvious). If the youth brings up something in one of these areas, you should listen but not ask probing questions. You may respond to what the youth is saying, by restating it.

Even if you follow all of these guidelines, things may not always go as you wish. If the youth is tense and does not take to you, do not rush it! Relax and spend more time talking with the youth. Make descriptive or complimentary comments (e.g., “I really like the colors in your shirt” “Your home is so brightly decorated.”) or engage the child in casual conversation (e.g., ask the youth to tell you what he or she was doing before you came, ask about what he or she likes to do, or if he or she watches TV and, if so, what are his or her favorite TV shows). By engaging the youth in a conversation about something he or she enjoys or about which he or she can comment, you are relieving some of the youth’s initial apprehension.

### **10.3 Working with the Youngest Children (3-4 year olds)**

Very young children typically need more frequent breaks than older children. Short breaks are especially helpful if the child has a short attention span, excessive curiosity or high activity level – all which are common in young children. You need to provide breaks that are enjoyable but not so enjoyable that the child doesn't want to return to the interview. Break activities should be quiet and structured. Besides getting a drink, using the washroom, rolling a ball between you and the young child is something they would enjoy.

Adjusting the pace to meet the needs of the child is very important with young children. Many young children will respond best to a brisk pace with frequent verbal praise; yet you'll find others who prefer a quieter, slower pace with limited verbalization.

### **10.4 General Tips for working with Children**

The following are some general tips and guidelines on how to interact with children as well as for conducting the interviews and assessments.

**Show respect and be aware that children think differently than adults.** The most important thing to keep in mind when interacting with all of our respondents is to show respect for them. These children are volunteers who are helping the study by participating. We want the experience to be as pleasant as possible for them. One of the worse things you can do when the child is talking is to act annoyed or to talk down to them.

**Keep in mind that some children might be wary of you at first.** You may have to give some children time to warm up to you. Older children will be used to talking to adults whom they do not know but the younger children are likely to be wary of you at first. If a child seems to be holding back, it is important to slow down, provide less stimulation, and present things more gradually.

**Be aware of your nonverbal communication.** It is very important to be aware of the non-verbal communication that you are sending. Smiling and looking at the child will indicate your acceptance and appreciation for his or her cooperation. Using the child's name is a good way to keep contact and indicate that you are interested in him or her and what he or she has to say. Maintaining positive contact (by smiling and looking at him or her, saying his or her name) will help keep the child working on the assessment and help prevent behavior problems. Please be aware, though, that children in some cultures are not as comfortable with eye contact as others. If you sense that this is the case, try to keep the child engaged with your voice and look at the youth to get his or her answers but do not overwhelm the youth with direct eye contact. If the lack of eye contact is just a matter of shyness, the child will give you cues by looking at you later in the assessment when he or she feels more comfortable.

**Be aware of the child's body language.** Be very attentive to the child's body language. Some children cannot always verbalize what they are feeling or express their needs. A child may even be too shy to tell you, the interviewer, that he or she needs to use the washroom. Keep in mind

that a squirming child may actually need to go to the bathroom, rather than for a walk to use up some energy. Attend closely to the nonverbal cues children express.

- Signs of stress include yawning, increased wiggling (this may indicate a need for a break and some stretching), and physically moving away from you (this may mean the child feels threatened and may need more physical space and more smiling from you).
- It is also good to offer neutral praise in this situation, such as, “You are helping me by answering all these questions.” “I like the way you are listening and paying attention,” “You are really listening,” “You’re doing a lot of thinking.”
- Your vocal tone and smiling countenance will also be a sort of neutral praise for the child. Putting their head down may be typical behavior for some children. It may also indicate that they are bored and that you need to engage them more (by saying their name, increasing the pace of the assessment) or it may be time for a stretch break.
- You will have to use your own judgment about what a child’s body language means. When you are not sure, try different strategies based on your own experiences to bring the child back on track.

**Deal with behavior issues in a firm but positive way.** The majority of children whom you interview will enjoy the time that you spend with them and will not present behavior management problems. However, if behavior problems do occur, the best way to handle them is to try to prevent small problems from becoming larger. One effective way to manage is to ignore a child’s inappropriate behavior—if it does not interfere with data collection and is safe-- (e.g., making loud noises while answering questions) and reinforce positive behavior (e.g., answering the questions). Reinforce the child’s good behavior by using words, or smiling, or nodding.

- Sometimes children may show behavior problems because they do not know what is going to happen and they feel anxious. It is very important that you explain what they are going to do so that a behavior problem for this reason does not occur.
- Not all departures from what may seem “proper” for an interview or assessment should be seen as problems. Some children will be more comfortable and perform better if they are standing and leaning on the table or if they are moving around. As long as it is safe and the child is continuing to attend to and participate, that is acceptable.

**Make eye contact.** Children may become restless or bored, so you should maintain eye contact. Doing so will draw the child in and keep him or her on track.

- You should look at the youth after you ask every question. It is tempting to look at the computer screen so that you can see the instructions for how to code the answer or what to probe, but you may lose the youth’s attention if you look at your computer after asking a question. You shouldn’t stare at the youth but just make enough eye contact so that there is an interaction between you and the youth.
- Generally, once the interview is in progress don’t ask a child if he or she would like to go on to the next section. Given the option, some youth would rather be watching TV or playing, so a likely response would be “No, I don’t want to.”

**Keep what the child tells you confidential.** We want to stress the importance of confidentiality in your interactions with all respondents. It is important that you do not overreact to what a child may say and do not pass on information from the child to the parent or other adult. It is also important not to tell anyone else how the child did or how the child behaved. If the parent asks, you may say, “I enjoyed working with your son or daughter”, or “Your child worked very hard today”.

- The only exception to the confidentiality rule is if the youth tells you about abuse or about something that the youth plans to do that would put him or her or others in danger. If the youth tells you that he or she has been abused physically, sexually, or emotionally, or that he or she plans to hurt him or herself, you **must** report using the Clinical Contact Protocol (CCP) found on the interviewer website.

## 10.5 Dealing with Specific Child Behaviors

Now we’ll discuss some specific behaviors that you might observe in children, such as shy, restless, overactive, distracted, or highly verbal behaviors. Many children might act a bit shy, or restless or active. A small number of children will show these behaviors in a more extreme way, such as extremely shy children who will not talk to you. These behaviors should not necessarily cause a problem for the child interview. Just trust your natural instincts and try various techniques to engage the child in order to collect accurate data. Always be sensitive to the child’s needs to make the interview an enjoyable experience.

**The shy child:** Shy children may exhibit these behaviors – child won’t look at you; child is silent; constantly shrugs shoulders; moves away from you; child is withdrawn. Slow things down with shy children. Be careful not to invade the child’s space. Spend more time building rapport. Smile and make conversation. Assure the child that many children are doing these activities with you – they’re not the only one. If there is more than one child to interview in the household, interview the less shy child first. Ask the parent to stay nearby.

**The tired, frustrated child:** Children who are tired and/or frustrated may exhibit these behaviors – look restless, yawns a lot, sigh, cry, and state they don’t want to continue while in the middle of an activity. These children may truly be tired or ill and need to continue the interview at a different time. Taking a break from the interview will hopefully rejuvenate the child, and then encourage the child to continue.

**The bored child:** Children who fidget, squirm and put head down may be bored. Pick up the pace, say the child name more frequently and give neutral praise. If this doesn’t work, offer the child a break.

**The overactive child:** Children with overactive tendencies may give responses before you can ask a question or give instructions. They may squirm or fling their arms and legs about. Over activity is only a problem if it interferes with the interview. Use the child’s name frequently and ask him or her to listen – then praise as soon as good listening starts. Take short breaks as needed.

**The squirmy child:** Squirming can mean a variety of things – the child may need a break, may need to use the toilet, or may be thirsty and want a drink. Children that are bored often squirm. Also children feeling stressed may squirm. Use your best judgment and try various approaches. A break could consist of “Shake out the wiggles”. If a break doesn’t work, pick up the pace of the interview.

**The distracted child:** Children who often look around or reach for a toy or something nearby may be distracted. Suggest a break and continue after the break. Don’t reprimand the child – look for a way to keep the child engaged, possibly quicken the pace.

**The highly verbal child:** Tell the child that you need to finish with the questions and then you can talk more. If the child insists upon telling you something, let them talk, acknowledge that you heard and move on. Don’t ask questions about what they say as that could further the conversation.

Most children will be very cooperative and complete the interview without being tired or frustrated. In fact, most children won’t even need a break. Offer breaks if it seems the child needs one, but if the child doesn’t want to take one that’s fine. It’s hard for children to sit still and their attention span is much shorter than yours, so active children are the norm!

## 10.6 Answering Youth’s Questions about the WCJ Assessments

Although it is not possible for you to answer many of the questions children may have about the interview, never ignore a question. Below are some answers you can give to commonly asked questions:

- **Was that answer right?** You should not tell the child if he or she has answered a question correctly (unless it is a practice item). If the child asks you, say:
  - “We just want to see what you think.”
  - “I’m sorry, but I can’t tell you that.”
- **What’s the answer?** If the screen does not direct you to tell the child the correct answer, you should say, “I’m sorry, but I can’t tell you that. We just want to see what you think.” Do not offer to tell the child the correct answer at the end of the assessment.
- **What does “\_\_\_\_\_” mean?** Sometimes a child will ask you for the definition of a word(s) in the question. If the screen does not direct you to give the child a definition, you should say, “I’m sorry, I can’t tell you that. We just want to see what you think”. The repetition of the same sentence will make clear the boundaries and decrease the child’s requests for information

## Chapter 11. Administering the Overall Process

### 11.1 CDS Interviewing Protocols

#### 11.1.1 Sequence of the Instruments

Although there is a recommended order in which the various portions of each household's data collection should be completed, you and the family have a great deal of flexibility to determine the most convenient way to complete all of the tasks. As the Interviewer, you should consider the unique characteristics of each family when planning contacts, appointments, and administration of each component.

There are two definitive rules that must be followed when setting the order for the interview:

- At least one of the CDS children must be located before beginning the Coverscreen. You should only begin the Coverscreen with a knowledgeable, adult member of a household in which at least one preloaded CDS child is known to reside. The Coverscreen **must** be completed first, usually over the phone; and
- Primary caregiver (PCG) consent must be obtained, as defined in the Informed Consent section of the study manual, before any portion of the study can be discussed or conducted with a CDS child.

**Other than these two, rules, the order in which tasks are completed is largely up to you and the family. Below is a description of the suggested order of data collection tasks for each preferred mode.**

Regardless of whether or not the household is eligible for in-home components, the Coverscreen interview will primarily be completed by phone, as noted above, with the PSID 2013 respondent or a knowledgeable adult member of the household.

After the Coverscreen is completed, speak with the PCG to inform him/her that a package containing materials for his/her own interview as well as their children's interviews will be shipped.

If the PCG is available at that time, you may offer to administer the PCG's interview portion of the study. Otherwise, you should schedule an appointment.

**For households that are eligible for in-home components (IHC), we are providing the following guidelines for order in administering all the components of the study:**

- By Phone
  - Conduct the PCG interview (includes Verbal Consent, Household block, Child block, Child Care block, School block, and Absent Parent block) and obtain PCG's verbal consent for 12 to 17-year-old(s) interviews (in the 12-17 IW Consent Block).

- Schedule an appointment for a FTF visit to conduct the in-home components with the PCG and the eligible CDS children.
  - Remind the PCG to fill out the time diaries, birth record forms, and school record forms and to mail them to Ann Arbor in the pre-addressed, pre-paid mailing envelope.
  - Schedule an appointment with the 12 to 17-year-old(s) to conduct their interviews by phone.
  - Conduct the 12 to 17-year-old(s) interview and at give them instructions on how to call into the interactive voice system (IVR) in order to complete the self-administered portion of their interview.
- During In-Person Visit
    - Obtain PCG written consent (in the In-Home Consent block) for IHC components (WCJ, Height, Weight, and Waist Measurement).
    - Obtain PCG written consent (in the In-Home Consent block) for each child’s in-home components:
      - WCJ ages 3 to 17
      - Weight and Height ages 3 to 17
      - Interview ages 8 to 11
    - Administer and document the Height, Weight, and Waist measurements with the PCG and children (in the PCG’s Measurements block)
    - Conduct interview with 8 to 11 year olds on their sample lines (in the Interview block)
    - Conduct Woodcock Johnson (WCJ) assessments with PCG and each child ages 3 to 17 (in the Assessment block on each SID)
    - Obtain PCG saliva consent (in Saliva block) for PCG and each CDS child ages 5 to 17
    - Conduct the saliva collection and document result (in the PCG’s Saliva Block)
    - Review and edit time diaries, collect completed birth record linkage forms for PCG and each eligible CDS child, collect completed school record linkage forms for each CDS child between ages 8 and 17.
    - (Typically, from your home office) Complete observations on all SIDs (PCG and children ages 0 to 17) at the end of the Assessments block

**For households not eligible for IHC (in-home components),** we are providing the following guidelines for order in administering all the components of the study:

- By Phone
  - Conduct the PCG interview (includes Verbal Consent, Household block, Child block, Child Care block, School block, Measurements block, and Absent Parent block) and obtain PCG’s verbal consent for 12 to 17-year-old(s) interviews (in the 12-17 Iw Consent block.)
  - Inform the PCG that a package containing saliva collection materials will be mailed to the household (reading text in the Saliva block).

- Remind the PCG to fill out the time diaries, birth record forms, and school record forms and to mail them to Ann Arbor in the pre-addressed, pre-paid mailing envelope.
- Schedule an appointment with the 12 to 17-year-old(s) to conduct their interviews by phone.
- Conduct the 12 to 17-year-old(s) interview and at give them instructions on how to call into the interactive voice (IVR) system in order to complete the self-administered portion of their interview.
- Complete the interviewer observations at the end of the PCG Household block once off the phone.

While all parts of each case are important, the most crucial are the Coverscreen, the PCG interview, and Child interviews. Therefore, you should place a priority on completing these interviews in Blaise. Even if the time diaries are not completed, the information from the PCG and Child interviews will still be useful to Study Staff.

Please use these guidelines in determining with the CDS family the most convenient way to complete all portions of each case. However, **mode changes must be pre-approved**, via a request made in SurveyTrak.

Because there are several instruments to be administered in each household, we expect that each household may take about 13 hours to complete all components (including Coverscreen). It is likely that for some households you will need more than one household visit to complete the in-home components. If you have any questions about how best to complete a case with a specific CDS family, consult your Team Leader to discuss the situation and possible solutions.

### ***11.1.2 Spanish Language for Coverscreen and Primary Caregiver Interviews***

A small percent of the Coverscreen interviews and PCG interviews may need to be conducted in Spanish. On the Coverscreen line's Sample Tab in SurveyTrak is a Language field that will populate with Spanish if the PSID 2013 interview was conducted in Spanish. These cases will be assigned to a bilingual interviewer to accommodate the Coverscreen being conducted in English or Spanish per the respondent's preference.

At the end of the Coverscreen interview, there will be an interviewer observation for you to indicate the actual language the Coverscreen was completed in. At that time, if you are not speaking with the selected PCG, you may inquire whether the PCG language preference – English or Spanish. In the SurveyTrak PCG Info View/Edit tab on the PCG's sampleline, you may indicate the preferred language for the PCG. Again, at the end of the PCG Household section of the interview, you will be asked to identify which language the PCG interview was conducted in.

The child interviews will only be available in English.

### ***11.1.3 Incentives***

#### **PCG Incentives**

The primary caregiver will receive \$60 for participating in the interview portion of the study. He/she will also receive an additional \$10 for each child for whom we receive a completed weekday/weekend time diary pair. PCGs will be paid \$10 for providing a saliva sample.

### **Child Incentives**

Each child ages 12 to 17 will receive \$20 and each child age 8 to 11 will receive \$10 for participating in the interview portion of the study. In addition, each child ages 5 to 17 will receive \$10 for providing a saliva sample.

Incentives will be paid by check or money order for most respondents and will be processed by study staff during data collection. For check payments to children, you must verify with the PCG that a check made out in the child's name can be cashed. If there is any concern that a check made out in the child's name cannot be cashed, there is an option in the Blaise RPay section of the child interview that allows you to have the incentive paid to someone else (i.e. to the PCG).

During in-home visits, cash payments may be made for the interview incentive, saliva sample, and time diary incentive conducted/obtained during that particular visit. For the interview cash payments, you will document the cash payment in Blaise. For saliva and time diary cash payments, you will document the cash payment in SurveyTrak on the Payment View/Edit tab.

You must obtain a signed payment receipt for all cash payments.

### **Cell Phone Reimbursement**

If the PCG uses a cell phone for the interview, you may offer an additional \$10 as a compensation for the cell phone time. This payment should only be offered if the respondent indicates that the expense of cell phone minutes would prevent him/her from completing the interview. If the offer is made prior to conducting the interview, record the offer in the Cell Phone/Finder Fee View/Edit tab in SurveyTrak. At the end of the Blaise interview, you will be asked a) if the Respondent used a cell phone to complete the interview, b) whether a cell phone payment was offered by you or another interviewer, and c) to enter the cell payment request under Special Handling so that the incentive will be processed and mailed to the Respondent.

### **Child Care Reimbursement**

If the PCG indicates it may be difficult to dedicate the time for him/her to participate in the study due to child care issues, you may offer up to an additional \$40 as compensation to cover child care. This payment should only be offered if the PCG indicates that child care would prevent him/her from completing the interview. If the offer is made prior to conducting the interview, record the offer in the Cell Phone/Finder Fee View/Edit tab in SurveyTrak. At the end of the Blaise interview, you will need to enter the child care payment request under Special Handling so that the incentive will be processed and mailed to the respondent. Note that when the Child Care Reimbursement is used, it is the PCG's responsibility to secure child care; We are

simply reimbursing the expense. All child care reimbursements will be processed by study staff and paid by check or money order.

## **11.2 Putting It All Together**

### **11.2.1 Before the Study Begins**

The home study and study specific training will help you learn the basic procedures for this study. Be sure you have thoroughly reviewed this manual and other study materials and understand the concepts and procedures required of the project.

In addition, you should review your General Interviewer Training Concepts manual before coming to in-class training. During training you will be expected to display knowledge of these concepts. If you are unsure about any procedures or concepts, be sure to review them or confirm them with your Team Leader **before** you begin interviewing. You will be evaluated on your implementation of these concepts during the data collection period.

Because the production is not long (26 weeks), it is crucial and expected that you begin your assignment as soon after training as possible. A quick start to production interviewing will help solidify the concepts and procedures you learned during training.

### **11.2.2 Receive and Review Materials from Ann Arbor**

You will receive your Interviewer materials and enough supplies for each of your cases in a separate package sent from Ann Arbor. A bulk materials list is included in the appendices of this manual.

When you receive the materials, review them thoroughly to make sure you have everything on the enclosed packing list. If items are missing, you can send an e-mail request to the Field Interviewer Supplies email group at [REDACTED]. Please see study guide section on Field Notes for more details about requesting supplies.

### **11.2.3 Coverscreen Precontact letters**

Precontact letters will be mailed out to your Coverscreen sample from Ann Arbor. These letters will include a study information sheet. Examples of the precontact letter and information sheet are in your appendices. Production is scheduled to begin October 27, 2014. You may start calling your sample as soon as you hear from [REDACTED] that Production has officially started.

### **11.2.4 Contacting the Household**

During your first call to the household:

- Identify yourself and the study before you get into the Coverscreen.
- Determine that at least one of the CDS children resides in the household (as listed in the CDS Children in FU section of the R Profile).

- Complete the Coverscreen carefully with the PSID 2013 respondent or a knowledgeable adult member of the household.
- Describe the household interview sessions including the PCG interview, child interviews, and for the IHC=Yes sample, the in-home components.
- For FTF visits, let the PCG know the expected length of the visit. This time will vary based on the number of children and ages of the children but we suggest telling the PCG that the visit will require 3 to 4 hours.
- For FTF appointments, ensure that the PCG and all CDS eligible children will be available at that time.
- Balance what must be done during the household visit with those parts that may be completed over the telephone. When scheduling an appointment for a household, try to set an appointment to interview the PCG and 12 to 17 year-old interviews over the telephone (if not already complete).
- Explain child time diaries to the PCG. It is very important that you fully explain the time diary over the phone to the PCG and assign targeted dates corresponding to the pre-assigned weekday and weekend day. It will save time and effort if the time diaries are correctly completed for the selected days.
- Verify the address and indicate that they will receive a packet in the mail; addressed to the PCG. The packet will include materials for both the PCG and children such as study information, respondent booklets, time diary materials, birth record linkage consent forms, school record linkage consent forms, and a preaddressed, postage-paid envelope. For households not eligible for in-home components, the mailing will have supplies for the PCG to administer the height, weight, and waist measurements.

### ***11.2.5 Prepare for FTF visit***

The initial mailing will be sent from Ann Arbor as soon as you complete the Coverscreen interview. Each packet for households eligible for **in-home components (IHC)** will contain:

- 1 Cover Letter
- 1 Study Information sheet
- 1 PCG Respondent Booklet
- 1 Child Respondent Booklet per CDS child in the household
- 1 Time Diary Instruction and Example booklet
- 2 Child time diaries (one weekday and one weekend day) per CDS child in the household
- 1 National Hotline Numbers sheet
- 1 birth record linkage form for the PCG and each CDS child in the household
- 1 school record linkage form for each CDS child ages 8 to 17 in the household
- 1 pre-addressed, postage paid envelope

Before your in-home visit, prepare your materials. Your bag should have the following items:

- Extra materials from the PCG initial mailing as described above
- Laptop computer
- Female puberty show cards
- Male puberty show cards

- WCJ easel
- Soft Tape measure
- Hard Tape measure
- Rafter Square to measure height
- Weight scale
- Saliva collection kits
- 2-3 #2 pencils
- 2-3 pens
- Blank paper
- Post it notes
- Extra advance letters
- Alcohol wipes
- Gloves
- Green colored pencil (for editing time diaries)
- Letter to Authorities

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## Chapter 12. Field Notes

### 12.1 Prepare for Interviewing

#### **12.1.1 The CDS Team**

The CDS Team is made up of a large number of people working together in different roles to make the study a success. We have designed your training to make sure that you are knowledgeable, confident, and well prepared as an interviewer to collect high quality data. We are committed to supporting you in this task during the field period and are always available to provide help.

Your responsibilities include active participation in training, meeting the Interviewer production expectations, and asking for support when you need it from your Team Leader, Production Coordinator, Production Manager, or Project Manager.

#### **12.1.1 Certification Requirements**

During training and prior to the start of production interviewing, all interviewers are required to pass a series of four certifications. This provides confirmation that you have learned the necessary skills for interviewing and conducting the in-home components. Below is a summary of the certification plan; complete details will be provided in the Certification Booklet you will receive at training.

##### **Certification on Coverscreen and Introduction to the CDS**

Interviewers will certify on administration of the Coverscreen, which will also include introducing the study to respondents. Certifications will be scripted in a one-on-one session with a trainer/certifier and the session will take no longer than a half hour. Interviewers will be given feedback and during HOPS will be provided with opportunities for more practice and re-certification, if necessary.

##### **Certification on Primary Caregiver Instrument and Child Instrument**

Interviewers will certify on the telephone version of the PCG interview and a child interview in a round robin setting. Interviewers will be given verbal feedback during the practice sessions, and a certification score sheet will be completed during certification. If an interviewer is unable to keep up during the certification, they may be asked to leave the table and to sign up for recertification. During HOPS everyone will be provided with opportunities for additional practice and one-on-one certification, if necessary.

##### **Certification on Woodcock-Johnson Assessments**

Interviewers will certify on proper administration of the Woodcock-Johnson assessments in a one-on-one session with a certifier. Interviewers will be required to set up their computer and easel before beginning the certification. A respondent and a certifier will be at each station.

During HOPS everyone will be provided with opportunities for additional practice and one-on-one certification, if necessary.

### **Certification on Physical Measures and Saliva Collection**

Interviewers will be certified on proper administration of the consenting for and administration of physical measures and saliva collection. Interviewers will practice in pairs will receive feedback to help them during the certification. Individual certifications will be done in pairs with a certifier. During HOPS everyone will be provided with opportunities for additional practice and one-on-one certification, if necessary.

**IMPORTANT:** Interviewers must successfully complete all four certifications during training in order to work on CDS production.

#### ***12.1.2 Receiving and Reviewing Your Assignments***

Production is scheduled to begin October 27, 2014. You may start calling your sample as soon as you hear from [REDACTED] that Production has officially started.

Your sample is scheduled to be made viewable to you in the production project on Friday, October 24, 2014. You will have a brief time to get organized, review your sample, and practice prior to starting data collection.

#### ***12.1.3 Planning and Scheduling***

Your work plan should be based on meeting the required production goals. Knowing in advance how you will attack your assignment will maximize your efficiency and minimize cost. Organize your sample so that you can work in large blocks of time, whether that is on the phone or traveling. Map out the most efficient way of traveling to your household visits.

#### ***12.1.4 Letter to Authorities***

In your materials we are providing you with a letter that you can deliver to the local police, the Better Business Bureau, the Chamber of Commerce, etc. explaining our presence in the area. In most cases because the CDS sample is so dispersed, you will need to have this to provide only when you are asked. Suggest to the local authority that they file the letter under “University of Michigan” and not “ISR”. Too often ISR is confused with IRS. You should keep a couple of letters in your bag at all times. If additional information is requested, please notify your Team Leader.

#### ***12.1.5 Cell Phone Challenges***

During the recent waves of PSID we found the challenge of ever-increasing use of cell phones to be one of the toughest for the interviewers. In effect, everyone now has Caller ID and people do not generally want to pay for incoming numbers they don’t recognize. It is important that you identify cell lines early in the study and strategize with your team the best ways to make contact with these respondents.

### **12.1.6 Safety in the Field**

Your safety in the field should always be a top priority. Be aware of your surroundings and use good judgment about your safety at all times. If you become concerned in any situation, leave it at once. Please refer to your General Interviewer Training manual for tips on safety in the field.

### **12.1.7 Supplies**

Before training ends, your bulk supplies (listed below) will be shipped so that you will receive them on Friday, October 24, 2014.

- Bulk supply materials list
- Precontact letter
- Interview information sheet
- PCG response booklet
- Child response booklet
- PCG initial mailing cover letter
- PCG birth record linkage consent form
- Child birth record linkage consent form
- Child school record linkage consent form
- Time diary instruction and example booklet
- Weekday time diaries
- Weekend time diaries
- National hotline numbers
- Saliva consent form
- Paper copy of PCG in-home component consent form
- Paper copy of PCG consent for child in-home components consent form
- Saliva collection information sheet
- Saliva OGR 500 kits, bio-bags, and desiccant strips
- Contact instructions for OGR-500 saliva collection
- Plastic bags to use to throw out any garbage from saliva and measurements
- Respondent First Name and Case ID labels
- Planner
- Pad of Paper
- Preaddressed/Pre-stamped padded envelopes for mailing saliva samples to Ann Arbor
- Preaddress/Pre-stamped Priority Mailers to be used for the weekly mailings to Ann Arbor
- Preaddressed/Pre-stamped Business Reply Envelopes (BRE) for PCG to send completed child time diaries and linkage consent forms to Ann Arbor
- Tenrox expense forms
- Tenrox business envelopes
- Letter to authorities
- Paper material transmittal form
- Sorry I missed you cards
- Accordion folders

You can order additional supplies by emailing the Field Interviewer Supplies email group at [REDACTED]. You must have approval from your Team Leader before placing an order for additional supplies.

Supply requests must include all of the following information:

- [REDACTED] project number;
- Your name and [REDACTED] interviewer ID number;
- Quantity of each item needed ("some" does not qualify as quantity, include a number); and
- Brief description of the item needed.

Order supplies before you are completely out of an item. Every effort will be made to mail out your supplies within two (2) business days of your request. However, please allow 7-10 days for delivery.

## **12.2 Contacting Respondents**

The success of this study depends on locating and interviewing every respondent. High response rates, along with quality data, are necessary to maintain the integrity of the study and researchers' ability to apply the findings to the general population. Each respondent is extremely important and is representative of thousands of others who live in the United States.

### **12.2.1 Non-Response**

People are becoming more reluctant to participate in surveys. Losing the representative nature of the survey due to high non-response is something that is taken very seriously—the validity of the study will be challenged if we experience a high percentage of non-response.

We must identify the reasons that respondents and/or families are reluctant to participate, but it is difficult to tease out the issues that play a part in non-response. The more detailed information we can gather about the circumstances of our uncooperative respondents, the better we can make adjustments that will lead to greater success in future waves.

While non-response is a critical issue for all studies, it is even more so with a panel study. Meaningful results are only possible when we are able to observe the same people and same families over a long period of time. If we fail to retain a very high percentage of our families, we jeopardize our ability to observe real change, and become unable to provide the information CDS was designed and funded to address.

After being interviewed multiple times, respondents and families may question our need to interview them again even for an ancillary study. It is essential that we listen to and tackle every concern expressed by respondents. We need to fully explain why we conduct panel studies and the importance of their continued participation; although their situation may not have changed, the circumstances of other people's lives have. Only by combining their answers with others' can we establish a broad picture of how the country as a whole is changing. When

possible, we will make every effort to have the same interviewer on PSID 2013 and CDS 2014, but it may be helpful for you to point out that the CDS interview is different from their regular PSID interview because it incorporates interviews of children as well as an adult in the family.

### 12.2.2 Preferred Call Slots

When contacting respondents, the objective is to make each contact as efficient as possible and minimize your time on the phone or on the road during unproductive times. Using data from Call Notes, we have ranked the following time slots according to likelihood of finding someone at home:

Preferred Contact Times			
1	Most likely at home	Sunday – Thursday	6 pm – 9 pm
2	↓	Friday – Saturday	6 pm – 9pm
3	↓	Saturday – Sunday	9am–6pm
4	Least likely at home	Monday – Friday	9am–6pm

We have also identified the best and worst time slots for attempting contact:

Best and Worst Contact Times		
Best	Monday	7 pm–9 pm
Worst	Friday	9 am–12 pm

## 12.3 Refusal Conversion

### 12.3.1 General Suggestions

As for every study, on CDS refusal aversion is crucial. A refusal that is avoided is even better than a refusal conversion. We know that the key to refusal aversion is the ability of the professional interviewer to address respondent concerns. Here are some tips:

**Get the informant/respondent’s attention** - The crucial objective when making an initial contact is to obtain the informant’s/respondent’s attention. Clearly identify yourself and the University of Michigan. Clearly and briefly state the purpose of the call.

**Establish a dialogue** - If you can get the informant/respondent involved in a dialogue, you are far more likely to gain his cooperation. This does not mean asking “How are you today?” That phrase is the single biggest mistake that telemarketers make. Again, introduce yourself and the study briefly without giving more information than the respondent needs. If he needs more

information, he will ask. If you can get the respondent to ask a question, you are halfway in the door, so to speak.

**Build your knowledge of the study** - There are several sources of knowledge about CDS available to you (PSID website, in this study guide, etc.). If you are familiar with this material, it will build your self-confidence in speaking with Respondents.

**Anticipate** - Anticipate common comments, questions and concerns, and write out explanations in your own words. Some suggested introductory sentences for common resistance comments are included in the next section comments like “I’m too busy, the interview is too long,” etc.

Some specific questions you should be prepared for are:

- What is this information used for, anyway?
- I don’t see that this benefits me.
- Who’s paying for this study?
- Why are you bothering the other members of my family?
- Why do you need to interview me?

**Build your knowledge of the respondent** - This cannot be emphasized too much. Before you call the respondent, you should thoroughly review the R Profile in SurveyTrak and those of other family members in the study (with the same 68ID). Review the call notes and summaries in the Profile carefully, particularly if you are not the first to call this household.

**Use active listening** - Listen closely to what the respondent is saying, rephrase what has been said, and reflect it back to the respondent. Listen, too, to what is not being said, and be prepared to address it.

**Focus on every respondent as an individual** - They face all the challenges of mankind: they are in debt, have lost a parent, have an abusive spouse, are seriously ill, are working two jobs, or more happily, they are getting married, or have had a baby. All of those stresses in their lives are real to them, and legitimate, so be prepared to work with them. It may help to remind them that these are the very things that we are trying to capture because of their impact on the well-being of their families.

**Maintain professionalism, but be pleasant** - Be confident, courteous, and sympathetic. Put a sincere smile in your voice, and maintain a pleasant conversational tone. Be assertive, but not aggressive. Never argue with a respondent.

**Timing is everything** - Don’t push the respondent to the point that s/he is feeling harassed. When you sense that a respondent is feeling pressured, back off! Let a few days, or even weeks, go by, before you contact the respondent again, especially if they mentioned something—a wedding, harvest season, illness—that is genuinely taking his or her attention right now. However, once the point is reached that a persuasion letter is sent follow up promptly, lest the sense of urgency be lost.

**Leave the door open** - When you reach a respondent who is having some doubts, don't unload all of your ammunition at once. Respond to what seems to be the issue, but don't overwhelm the respondent with reasons or explanations—better to hold something back so you have a reason to call him/her again.

**Always end on a positive note** - Leave every contact with a respondent with something positive, even if it is nothing more than your suggestion that she give it some more thought or the idea that you will talk with her again later. Even if the refusal is final, be pleasant and sincere in thanking the respondent for the contribution his/her family has made over the years; after all, we may one day be back, or need to contact him/her about some other member of her/his family.

**Acknowledge the respondent's concerns** - When you are calling to persuade a reluctant respondent, it is very helpful to reflect back to him what he has told us on previous calls. "I know that you told us that you are very busy. I was hoping that your schedule might have freed up a bit." Be as specific as possible. "You mentioned that you were busy getting ready for your daughter's wedding. I was hoping that now would be a better time for you." "I know that you told us you aren't interested in doing this study anymore, but I wanted to share with you some of the ways that the research is used..." (Be prepared with some examples and briefly give them). In other words, we heard what the respondent said before—it's not that we're bothering him because we weren't listening, it's because his participation is so important. Make him feel that it's important for him or to society; he doesn't care that it is important to us.

### ***12.3.2 Some Useful Opening Sentences***

- I'm calling to find out if there has been any misunderstanding.
- We called you before and I think we may have caught you at a bad time.
- I know we have called you before. I wouldn't be calling you again, but I wanted you to know how important you are to our research. (Give an example or two.)
- I do apologize for having to contact your household again, but I really need your help.
- (If a respondent has been evasive) I'm sorry to call you at supper time (so early, on a Sunday), but we've had a hard time reaching you.

### ***12.3.3 Respondent Concerns and Suggested Answers***

Sometimes a respondent's reluctance may reflect a bad experience with a previous contact and you may need to ferret that out. Following are some of the concerns that may be expressed, or implied, and some possible answers:

#### **I'm tired of so many different interviewers calling.**

- I'm sorry that has happened to you. Sometimes that happens when we're very busy, but I'll make every effort to be sure I'm the only interviewer calling you this year. What is the best time for you to complete the interview?

#### **I don't like doing this on a computer.**

- Let me assure you that our computer system is entirely internal. Our systems are firewalled, so there is no risk of anyone outside our research staff ever seeing your answers.

**I'm too busy, or I don't have time.**

- I can imagine that this is really a busy time for farmers—when is planting season over? I could call you then.
- Oh, we'd be glad to call after the wedding—what would be a better time for you?
- I'd be glad to call on a weekend, or early in the morning.

**I'm not feeling well. Or, I'm caring for a sick individual.**

- I'm sorry that you're not feeling well. We want to do the interview at a convenient time for you. When do you think would be a good time to call?
- I'm sorry you're not feeling well. How about if we postpone this for a few days, and I'll give you a call then? Thanks for talking with me now, and I hope you're feeling better soon.
- I'm sorry that your (husband) is ill—I can imagine how hard that is for both of you. I don't want to inconvenience you, but the time and money families devote to health care are very important issues in our study, and we really would like to be able to ask you about that. We could do the interview in small pieces if that would be easier for you and your family, or we could try to find a more convenient time later—which would work better for you?

**The Respondent is hard of hearing.**

- IS THIS BETTER IF I SPEAK LOUDER? CAN YOU HEAR ME NOW? (Louder is sometimes worse. Also, try using the handset instead of the headset)
- Would it be better if I spoke more slowly, or could you hear a (man's) voice better? (People are sometimes hearing impaired only in a certain range of sounds.)
- Try calling back in the morning—some people may hear more clearly early in the day.

**The Respondent hangs up on you.**

- If there is uncertainty about how the disconnection occurred, re-dial and reply, "I'm sorry our call was cut off. We sometimes have trouble with our phone lines," and pick up the interview from the disconnection point.
- If you are certain that the other party disconnected the call, and you were already into the interview, write comments and suggestions in the call notes, attempt a refusal conversion on another call.

**You always get an answering machine.**

- Don't leave a message the first couple of times.
- On about the third call, state who you are, and that you are calling from the University of Michigan. (Again remembering confidentiality—you can't be certain who is listening to your messages.)

- Don't leave a message on every call—it's annoying.
- Give it a couple of weeks, and if at that point you haven't reached anyone, you may begin to suspect one of two things:
  - The residents of the household may be gone for an extended period of time—vacation, wintering out, illness. It might be a good idea to try reaching the contacts to find out if the Respondent is still at the number we have, or if we should try them at another number. After you have introduced yourself, use language such as, "We've been trying to contact them for a couple of weeks. Do you know how we might contact them?" Asking if the respondents are away from home might alarm the contact person.
  - The household may be screening their calls, and are not interested in speaking with us. You can try leaving the 800# a couple of times, asking them to call us to arrange a good time for an interview.
- If that doesn't work, you can try "tricking" the answering machine. Sometimes if you call back immediately after you have been getting a busy signal, the household will answer, thinking it is the same party calling them back. Sometimes people screen their calls only at certain times, like dinner time, or during a favorite TV show. Calling at a different time, like early morning, might work.
- If that doesn't work, possibly another member of the panel study will work with you in encouraging them to answer our calls or call the 800#. Mention of the incentives might help, or you might offer a finder's fee.
- If there is nobody else with whom you can work, you may discuss with your Team Leader if it's a good time to send a Hard to Reach letter or email. **Do not send a letter yourself**—it will lessen the impact of any letter study staff may write, and may contribute to making the respondent feel harassed. All letters to respondents must be approved by the IRB.

#### **12.3.4 To Sum it Up**

When you contact a respondent and he/she expresses reluctance to be interviewed, keep the following in mind:

- Actively listen for reasons why he/she does not want to participate. Check with your Team Leader or Production Coordinator when you are unsure about who is eligible to act as respondent.
- Try to respond to the respondent's concerns.
- Always end your conversation graciously—but if you have not received a clear or definite refusal, keep the door open: "I'll give you some time to think it over and give you another call in a couple of weeks."
- If your initial persuasion fails, assign the case *resistance* result code and discuss requesting a persuasion letter with your Team Leader. Do not wait until resistance hardens into a firm refusal. Request a letter when you have done what you can without hardening the refusal and feel it may help you in your persuasion attempt.

- Although persuasion letters can be a useful tool in the refusal conversion process, personal contact and discussion with the respondents, giving them immediate response to their concerns, is always the first thing to try.

We will be practicing some techniques for addressing respondents concerns during and after training.

### ***12.3.5 Accepting Refusals***

While getting the highest number of interviews possible increases the study's research value, each respondent's decision to participate remains voluntary. In addition, since CDS is part of the PSID suite of projects, it is even more important than usual to maintain good will with respondents and their families and contact people. Not to mention that each case has its own individual considerations! All this can make determining the point at which your refusal conversion efforts aren't going to work a delicate task. Your Team Leader will be able to help you, and all decisions about when to request a persuasion letter or code out a case as a final refusal should be discussed with him/her.

### ***12.3.6 Call notes***

Call notes about a contact or attempted contact with a respondent are another invaluable interviewing tool. As the Interviewer it is your responsibility to provide complete, relevant and useful information in the call notes for each of your cases.

Many people depend on the call notes to gain an understanding of the interaction between the respondent and the Interviewer. Call notes are also analyzed to provide insight into successful or unsuccessful data collection efforts. They identify calling patterns that are most successful both by region and by types of respondents. Areas of non-response can be addressed by modifications in presentations of questionnaire content and materials.

When you review the call notes displayed in the R Profiles think about what you wish had been recorded—what would have helped you better understand your respondent. Then include that level of detail for the next interviewer in your call notes.

At training, you will receive a reference card with what information to include in your call notes. You may also find this information in the appendices of this manual.

## **12.4 Production Issues**

### ***12.4.1 Staffing Structure***

The field staff structure for CDS is designed to promote an atmosphere of team spirit, diversity, and productivity with the focus on a national team effort. This environment will allow flexibility in managing the sample and providing the needed support to the Interviewers and to the project demands. To accomplish this, the field staff will be divided into work groups each headed by a Team Leader and including approximately 10 Interviewers.

The Team Leaders will work with Production Coordinators to manage production during the field period. In the Ann Arbor office, there are a variety of people providing overall management and support of CDS, and working closely with the field staff. Here is the Ann Arbor management team:

- [REDACTED], Production Manager (remote)
- [REDACTED], SRO Project Lead
- [REDACTED], PSID Survey Director
- [REDACTED], Project Manager
- [REDACTED], Project Assistant

This organizational structure requires cooperation and interdependence. A major benefit of the field staff working closely with the Ann Arbor staff is that we all gain the ability to understand, communicate and implement the necessary project activities to better meet the goals and challenges of the study.

All interviewers are required to attend a team conference call once a week. More information on team calls will be provided at training.

#### ***12.4.2 Interviewer Commitment Statement***

Each interviewer will be asked to sign a Commitment Statement prior to coming to training, outlining standards for interviewer training and job performance while working on the CDS-2014. A copy of the signed Commitment Statement will also be provided for you for your files.

#### ***12.4.3 Production Goals***

All members of the interviewing team are expected to begin their production work as quickly after training as possible. Getting an early start on your assignment is essential in assessing the challenges that will be encountered during this data collection and in allowing enough time to establish any interventions that may be necessary.

There are overall national goals that have been established for CDS, broken down by weeks during the production period. We will review those after training, during one of your team calls. In addition, your Production Coordinator and Team Leader will provide you with the work team goals that will be necessary to meet the national goals. When these goals are developed, we have certain expectations of the progress that will be needed by the interviewing team and the commitment we have received from each interviewer working on the study. For that reason, it is crucial to the success of the study that you meet your hourly every week throughout the field period. Meeting that weekly commitment is a consideration for your considered employment on the project.

The following production goals have been set for the CDS 2014 assuming as sample size of 3502 Coversreen samplelines from which 3,256 PCG samplelines and 6,400 child samplelines will be generated.

**Response Rates:**

- Coverscreen Interviews: 93%
- PCG Blaise Interviews: 95%
- Child Blaise Interviews: 92%
- Linkage Consents: 92%
- Saliva Collection: 85%
- Child Time Diaries: 85%

**Hours per Interview:**

Because the overall Hours per Interview (HPI) will change significantly during the interviewing period, HPI goals will be communicated throughout production, based on study phase. Individual Interviewer HPIs will be evaluated in relation to the actual overall HPI observed at the time of evaluation, as well as to the general parameters provided in the signed Commitment Statement.

**12.4.4 Reviewing and Reporting Progress**

Your Team Leader is always available as a resource. Throughout the course of the study, you will have weekly pre-arranged contacts with your Team Leader. To make the most efficient use of your time on this call, be sure to have all of your materials and questions prepared prior to the call. These sessions are designed to provide you with the support you need. This includes reviewing your individual completion rates, answering questions, discussing strategies for properly working your sample, and celebrating your accomplishments!

You will need to keep track of your cases in SurveyTrak and report your progress to your Team Leader. In addition, it is extremely important that you send and receive in SurveyTrak once per day in order to transmit your data and other information to Ann Arbor and your Team Leader and to receive any information that the Ann Arbor office or your Team Leader will send to you.

**12.4.5 Communicating with Data Collection Services(DCS) Staff**

The Team Leader, Production Coordinator, and Production Manager are your immediate supervisors and should be your first contacts if you need help. However, other staff members in Ann Arbor are available by phone or email to assist and support you throughout production. Although we are always available to help, you should contact DCS staff in particular if the Team Leader, Production Coordinator, or Production Manager has instructed you to do so or if you have an emergency arise in the field and your Team Leader, Production Coordinator, or Production Manager are unavailable.

A DCS staff contact list will be provided to you at Registration.

**12.4.6 Quality Control**

There are a number of ways in which we monitor the quality of our data collection efforts. Our definition of quality embodies many aspects ranging from the interviewing team, the questionnaire and support materials, performance of the questionnaire application,

management of the sample, and the data that is collected. We all share responsibility for the quality of all aspects of the data collection process. Below are some of the specific responsibilities that each of us shares in this process.

We will review and evaluate a random selection of PCG, and Child interviews that are recorded in the DRI system (digital recording). Each interviewer will be evaluated throughout the course of production. Particular attention is paid to maintaining GIT standards in probing, feedback, and question reading.

In accordance with ISR standard quality control procedures, a percentage of interviews from each interviewer will be verified. Verification will involve calling the PCG back to confirm the interview and will be conducted by a centralized verification team in Ann Arbor. You should advise respondents that someone from the University might be calling them to confirm their interview.

#### **12.4.7 Respondent Receipts**

Cash payments for face-to-face interviews are often an effective tool for getting the interview, saliva samples, and completed child time dairies on the spot. **If you pay out-of-pocket to your respondent, you must get a signed paper receipt in order to be reimbursed through Tenrox.**

You may request a Travel Advance through your Team Leader to cover these expenses. The receipts will be used to reconcile the Travel Advance.

#### **12.4.8 Incident Reporting**

Though all of the University staff make every effort to give you the tools to protect yourself while you are working out in the field, the fact is that things may still happen. While working for the University, if you incur any injury to yourself or to your vehicle, or there is any damage to University equipment, it must be reported within 24 hours. You should report the incident to your Production Manager [REDACTED], who will fill out an Incident Report for Ann Arbor. You will be asked to give as much detail as possible about what happened at the time and any subsequent actions. If you are in any doubt about what constitutes an incident, it is best to contact [REDACTED] to discuss.

### **12.5 Laptop Instructions**

The following close out procedures are in addition to anything your Team Leader or Production Manager requires of you. When an interviewer terminates or has finished work on a project and will not be assigned to another project in less than one (1) month, it is the responsibility of the Production Manager or Team Leader to make arrangements for the return of equipment.

- The Production Manager or Team Leader will contact you to coordinate the shipping of the computer. Final sample reconciliation must be done at this time.
- The Production Manager or Team Leader will inform the Help Desk staff that you will be returning the computer and a Help Desk call will be opened.

- Ship the computer to Ann Arbor following the provided shipping instructions. It is your responsibility to provide the Production Manager or Team Leader with a valid UPS tracking number.
- The Production Manager or Team Leader will inform the Help Desk staff of the valid UPS tracking number and that the computer has been shipped.
- Upon receipt of the laptop in Ann Arbor, Data Collection Services (DCS) staff will conduct final check of sample and close out interviewer from all applicable projects.

### **12.5.1 Laptop Shipping Instructions**

Interviewers: Please follow the instructions below when shipping a laptop for repair or return.

#### **Prepare the Shipping Package**

- Use a suitable cardboard box for shipping. The box should be:
  - Sturdy (please use packaging tape to reinforce all seams)
  - Large enough to accommodate the laptop and at least 2 inches of packaging material
  - Free of any used labels (if re-using your box)

Important:

For final returns (not repairs), you must include the laptop, carrying case/bag, and all accessories in the shipping package. Put the laptop in its bag and secure all computer peripherals and related items in the bag's pockets.

Do not send any other items (project supplies, etc.) with your laptop shipment.

- Place the laptop in the box so that it is surrounded by no less than 2 inches of packaging material (crumpled paper, bubble wrap, and/or packing peanuts).
- Ensure the laptop cannot move around loosely in the box, apart from the packaging material.
- Tape the box flaps closed, and tape the box seams if you have not already done so.
- Weigh the package (you will need to enter the weight on the shipping document).

#### **Complete the Shipping Document**

- Determine which shipping document to use, as indicated below:

For laptop repairs, please use UPS Next Day Air® (red label)  
 -OR-  
 For laptop returns, please use UPS 2nd Day Air® (blue label)

- Use a pre-printed UPS shipping document. These have been provided to you for the project which you are working.

**Note:** If you do not have a pre-printed UPS shipping document, you may request one from the Interviewer Supplies team (if shipment is not time sensitive), or go to a *UPS Customer Center* or *The UPS Store* in person for assistance.

- Review and complete your shipping document, making sure it includes the following information:

*(Also see the completed example, below the table)*

Item	Detail
Shipper's UPS Account No:	[REDACTED]
Reference Number:	Enter the [REDACTED] short code for the project. (The Team Leader or Production Manager can provide this code to you.) <b>⚠ Important: ONLY the [REDACTED] number is to be used in this field. Do not enter any other numbers/information here.</b>
Shipment From:	Enter your name, phone number, address and company (University of Michigan – ISR) in this area
Deliver To:	[REDACTED]
Weight:	Enter the weight of the package
Declared Value:	Enter the insured value of [REDACTED]
Method of Payment:	Select [REDACTED]
Signature:	Sign and date the document

- Remove the backing from the document and then place the adhesive label firmly on the top of your package. (The label should be facing upward when the package lays flat).
- Detach the 'SHIPPER's COPY' of the document and keep it for your records. (Leave the 'UPS COPY' intact, on top of the label.)

### UPS Shipping Document Example (2<sup>nd</sup> Day Air)

### Schedule the Pickup

- Call [REDACTED] to arrange your pickup date, time, and location. You will be prompted to indicate your request using an interactive voice system. Choose your options as follows:
- From the Main menu:
  - Select “Send a package” and then select “Schedule a pickup.”
  - Provide your phone number, when prompted.
  - When asked if you already have a tracking number, answer “Yes,” when prompted.
  - Provide the Tracking Number from the shipping document. The automated agent will verify the shipper’s address [REDACTED] and ask you if this is where you want your item picked up.
  - Answer “No.”
  - Provide your zip code, city, state, and street address, when prompted.
  - Note: The automated agent will verify your pickup location and provide the pickup charge to be billed to the account.
  - When asked if you want to continue, answer “Yes.”
  - Follow the voice prompts to schedule your pick up date and time. Be sure to choose a time when you will be home and available to hand off the package.
  - If you have any problems with UPS or with filling out the shipping document, please call the Help Desk, [REDACTED].

Reminder: After you schedule a pickup, provide your Production Manager and Team Leader with the UPS Tracking Number.

Important: If home pickup service is not available in your area, you will need to take your package to a UPS drop-off location. To find one nearby, call [REDACTED], select “Send a package,” and then select “Locations.” Follow the voice prompts and choose

“Full service locations.” (Preferred pickup locations are a *UPS Customer Center* or *The UPS Store*. Never ship a laptop from a *UPS Drop Box*.) The full service location(s) in your area will be listed.

## **12.6 Enjoy**

We welcome you to CDS 2014 and hope you enjoy your time on this project. This is a complex and interesting study and we are looking forward to continuing to do our best work on this project.

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## Appendix A. PSID Family Unit Definitions

The following information is a short review of the PSID rules concerning Housing Units (HU) and Family Units (FU). Please review and contact your Team Leader if you have any questions.

**Family vs. Household** The PSID distinguishes between the *housing unit* (a particular physical dwelling) and the *family unit*, which is the people who live in the housing unit and qualify as a family by PSID criteria. We abbreviate these two technical terms as the *HU*, and the *FU*.

**Housing Unit** The *Housing Unit*, or *HU*, is a residential dwelling designed for one group of people living as a family. Each HU usually has a lock on its door to keep out people who don't belong to the group. The HU may be a single-family house, half of a duplex, an apartment in a large building, a trailer, or a room in a nursing home. Each wave, the family listing that you will do at the beginning of the interview will list everyone who is living there in the HU. But in some cases, not all of the people will qualify as part of the FU. To belong to the FU, a person has to satisfy more criteria than just living there.

**Family Unit** The PSID defines the *Family Unit*, or *FU*, as a group of people **living together as a family**. At first sight, that might not look much different from the real-world definition. But it is. Let's look at the three parts:

**Living together.** First, everyone included in this family/FU must occupy the same HU. Children who are living elsewhere (college, their own apartment) may be real-world family, but they are not FU members.

**As a family—related.** Second, FU members must be related. This can be in one of the real-world family ways, such as blood, marriage, or adoption. But PSID also counts live-in romantic partners (boyfriends, girlfriends, same sex partners) as FU members. Someone who is not related in one of these ways is not eligible to be in the FU.

**As a family—economically.** Finally, FU members are economically interdependent. Sometimes relatives may be living in the HU, but not really financially integrated into the family—usually because they are only there temporarily. So even though they satisfy the first 2 criteria, they are not included in the FU.

FU members occupy the same HU. But there may be some people living in the HU who do not qualify for FU membership. Anyone who is living in the household but who does not meet the other two criteria for FU membership is considered an HU member, rather than an FU member.

## Appendix B. Coverscreen Precontact Letter

Dear <First Name> <Last Name>,

The University of Michigan's Institute for Social Research is requesting your family's participation in the Panel Study of Income Dynamics—Child Development Supplement. The purpose of this study is to understand how families, schools, and neighborhoods affect children's and adolescents' growth and development. It is being sponsored by the National Institute of Child Health and Human Development. The study will collect information on children and adolescents who are between the ages of birth and 17 years and a parent or caregiver. It will be conducted primarily by telephone, but some information may be collected during a home visit by a field interviewer. An interviewer will be contacting you in the near future to set up an interviewing appointment.

We know that our families lead busy lives, and so we're grateful for your participation. We are offering the caregiver \$60 as a token of our appreciation for his/her time, interest, and effort for participating in the interview, and we would like to give \$20 to each older child (aged 12 to 17 years) who participates in an interview for his/her own contribution. We will speak to parents or caregivers about younger children. If your family is selected for a home visit, we will also interview children between 8 and 11 years old in person. These children will receive \$10 in appreciation for their contribution. The time you spend talking to us is an investment in a research study that is very widely used. We'd like to take this opportunity to emphasize that participating is completely voluntary. You or your children may find some of the questions to be of a sensitive nature. If you or they do not wish to answer a question, you can refuse, and your interviewer will move on to the next question. You can also end the interview at any time, without any questions or consequences whatsoever.

The answers that you give will be kept confidential. All identifying information (such as names and addresses) is removed from the data before they are released to researchers. We never give or sell our list of study members to anyone. Because your privacy is so important, we have done something extra to protect it. We have a Certificate of Confidentiality from the National Institutes of Health. Having this means that a court, even under a court order or subpoena, cannot force us to give out information that could identify you or your child.

The enclosed information sheet describes the study and your rights as a participant in greater detail. If you have any questions or concerns, please call us at our toll-free number: [REDACTED]. We hope you will help us with this important research project and look forward to speaking with you soon.

Sincerely,



Narayan Sastry, Ph.D.  
Associate Director, Panel Study of Income Dynamics  
and Director, Child Development Supplement  
University of Michigan

## Appendix C. Interview Information Sheet

### A3. Interview information sheet

#### 1. What is this study about?

Your family is invited to participate in a study called “The Panel Study of Income Dynamics – Child Development Supplement.” The purpose of this study is to understand how families, schools, and neighborhoods affect children's and adolescents' growth and development. The study will collect information on children and adolescents who are between the ages of birth and 17 years and a parent or caregiver.

The University of Michigan Survey Research Center is conducting this study. The director of the study is Dr. Narayan Sastry, who may be reached through the study's toll-free telephone number [REDACTED]. The study is being sponsored by the National Institute of Child Health and Human Development.

#### 2. What is my family being asked to do?

- An interviewer from the University of Michigan will ask the primary caregiver(s) of all eligible children in the family to complete a survey. The survey will be completed by telephone at a time that the caregiver chooses and takes about 75 minutes to complete, on average, although the length of your interview may be longer or shorter depending on the number of your children who are eligible. The survey includes questions about children's home, school, and neighborhood and about children's health, development, and relationships. The interview is usually completed in one sitting, but we can complete the interview over multiple sittings if that is more convenient.
- An interviewer will conduct a 30-minute telephone interview with each eligible adolescent aged 12-17 years. The interviewer will ask questions about family, school, and neighborhood experiences. During part of the interview, a voice recording will ask questions about puberty, sexual experiences, smoking, alcohol, and drugs and adolescents will enter their responses on the telephone keypad. Some people may find some of these questions sensitive.
- We will ask all eligible children to complete a time diary that describes their activities on one weekday and one weekend day. Caregivers may help younger children to complete the diaries or complete the diaries for them.
- We will ask primary caregiver(s) for permission to link information from their own and children's birth records and from children's school records.
- Caregivers and children 5 years and older will be asked to provide samples of their saliva.

Some families will be asked to participate in a supplemental home visit by an interviewer. During the home visit, the interviewer will collect the following information:

- Height and weight for the primary caregiver and all eligible children age 2 years or older and waist circumference for the primary caregiver. (Primary caregivers will be asked to weigh and measure themselves and their children if they are not visited.)
- Assessments of math and vocabulary skills for all eligible children age 3 years or older and also an assessment of reading skills for all eligible children age 6 years or older.
- An assessment of the primary caregiver's reading skills.

- A brief interview with children aged 8 to 11 years. Children will be asked about school, their friendships, and their computer use.

### **3. Does my family have to participate?**

Your family's participation is voluntary. Your children and the primary caregiver may skip any questions they do not wish to answer or choose not to participate in any study component. Even after agreeing to participate, your children and the primary caregiver may stop the interview at any time. If your children or the primary caregiver decide not to participate, there are no penalties and they will not lose any benefits to which they would otherwise be entitled.

### **4. Are there any risks?**

Caregivers and children who agree to be in the study will experience no more risk than in daily life.

Some questions about sensitive topics like sexual behavior and drug use might make teenage respondents uncomfortable, but they can skip any questions they don't want to answer. There may be negative consequences, such as embarrassment, if someone were to discover teenagers' responses to these sensitive questions. However, the chance is extremely low of someone discovering your teenager's responses because of the many ways that we protect his or her responses and identity.

The interview also includes questions that may be sensitive about other adults in the family, like a primary caregiver's spouse or a child's second caregiver. Again, the many ways that we protect your responses and identity mean that the risk of someone knowing your own answers to these questions is extremely low. We have provided a list of resources you or another household member may contact for support if the interview topics are upsetting.

### **5. What are the benefits?**

There are no direct benefits to the caregivers or children who participate in this study. However, the information that participants provide will help researchers learn more about the factors that affect children's health and development.

### **6. Is everything confidential?**

Caregivers' and children's privacy and confidentiality are of the highest concern to us. Interviewers have signed a confidentiality pledge to protect participants' privacy. Answers that caregivers and children give us are combined with answers from thousands of other interviews. **No individual can be recognized from their answers and we never release any personal information about the people we interview.**

We follow very strict data security procedures. We use passwords and other protections to prevent unauthorized entry into computers that hold study data. All study personnel must agree to follow special rules for handling private information to protect respondents' identities. Your answers will be assigned a study number and are stored separately from your name and address. We only use data linked with the study number. **We will share only de-identified information with other researchers.** The de-identified information you provide will be retained indefinitely.

Because your privacy is so important, we have done something extra to protect it. We have a Certificate of Confidentiality from the National Institutes of Health. Having this means that a court, even under a court order or subpoena, cannot force us to give out information that could identify you or your child.

Our privacy policy, including the Certificate, has one exception. If any of the information you give us makes us concerned about harm to you or others, or about child abuse, we may tell the appropriate people or agencies about it.

Finally, the agency that funds this research might decide to audit us. In that case, they may see the information you give us. They are also bound to protect your privacy by not revealing any information that would identify you.

You should understand that a Certificate of Confidentiality does not prevent you from voluntarily releasing information about yourself or the fact that you have been involved in this study. If an insurer, employer, or other person obtains your written consent to receive research information, the Panel Study of Income Dynamics may not use the Certificate to withhold that information.

### **7. Will I be paid for participating?**

For participating in the interview primary caregivers will receive \$60 and each child between 12 and 17 years old will receive \$20. Each child between 8 and 11 years old who completes an interview as part of the supplemental in-home study will receive \$10 for participating. Caregivers will receive an additional \$10 for each completed pair of child time diaries we receive in Ann Arbor. Caregivers will receive \$10 and each eligible child will receive \$10 for contributing a saliva sample. Payments are made by check after the interview has ended.

### **8. Who can answer my questions about this study?**

The interviewer will answer any questions you have when you are contacted for the interview. Be sure that your questions about the study have been answered and that you understand what you are being asked to do. If you have any questions or concerns later, please call us at our toll-free number: [REDACTED].

If you have questions about your rights as a research participant, or wish to obtain information, ask questions, or discuss any concerns about this study with someone other than the researcher(s), please contact the University of Michigan Health Sciences and Behavioral Sciences Institutional Review Board, [REDACTED]

[REDACTED] Please refer to the Panel Study of Income Dynamics – Child Development Supplement.

## **Appendix D. National Hotline Numbers**

### **National Domestic Violence Hotline**

[REDACTED]

English and Spanish (other languages available)

Open 7 days/week, 24 hours/day

TTY Service for the Deaf: [REDACTED]

Open 7 days/week, 24 hours/day

Website: [REDACTED]

### **Substance Abuse and Mental Health Services Administration National Hotline**

[REDACTED]

English and Spanish

Open 7 days/week, 24 hours/day

TTY Service for the Deaf: [REDACTED]

Website: [REDACTED]

### **National Suicide Prevention Hotline**

[REDACTED]

Spanish: [REDACTED]

Open 7 days/week, 24 hours/day

Website: [REDACTED]

### **Childhelp USA – Prevention and Treatment of Child Abuse**

[REDACTED]

English and Spanish (other languages available)

Open 7 days/week, 24 hours/day

Website: [REDACTED]

### **National Campaign to Prevent Teen and Unplanned Pregnancy**

[REDACTED]

Website: [REDACTED]

\*This list should not be considered a complete list of all community service agencies nor an endorsement of them.

## Appendix E. Linkage Consent Forms

### B6. Primary caregiver’s written consent to request the release of own birth record information

The purpose of the Panel Study of Income Dynamics – Child Development Supplement is to understand how families, schools, and neighborhoods affect children’s and adolescents’ growth and development. One related goal is the measurement of family health and well-being. Information from your birth record, such as birth weight, will help us better understand your children’s birth weight and their growth and development. We are asking you to authorize the state office of vital records\* to release your health-related birth record information to researchers at the **University of Michigan Institute for Social Research**.

\*or New York City, if birth occurred there

\_\_\_\_\_  
FIRST, MIDDLE, LAST NAME AT BIRTH

\_\_\_\_\_  
DATE OF BIRTH (MONTH, DAY, AND YEAR)

\_\_\_\_\_  
PLACE OF BIRTH (CITY AND STATE)

\_\_\_\_\_  
MOTHER’S MAIDEN NAME

\_\_\_\_\_  
MOTHER’S DATE OF BIRTH

All information will be kept strictly confidential. Names and other identifying information will not be released without your permission. Your birth record information will be used for research purposes only.

I PERMIT the Panel Study of Income Dynamics – Child Development Supplement to obtain my birth record information.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
PRINTED NAME DATE

Questions related to the collection of birth record information can be answered by PSID staff at [redacted]. If you have questions about your rights as a research participant, or wish to obtain information, ask questions, or discuss any concerns about this study with someone other than the researcher(s), please contact the University of Michigan Health Sciences and Behavioral Sciences Institutional Review Board, [redacted]. Please refer to the Panel Study of Income Dynamics – Child Development Supplement.

**B7. Primary caregiver’s written consent to request the release of child’s birth record information**

The purpose of the Panel Study of Income Dynamics – Child Development Supplement is to understand how families, schools, and neighborhoods affect children’s and adolescents’ growth and development. One related goal is the measurement of children’s health and well-being. Information from your child’s birth record, including birth weight, will help us better understand children’s growth and development from birth to their current age. We are asking you to authorize the state office of vital records\* to release the health-related birth record information of the child named below to researchers at the **University of Michigan Institute for Social Research**.

\*or New York City, if birth occurred there

\_\_\_\_\_  
FIRST, MIDDLE, LAST NAME OF CHILD AT BIRTH

\_\_\_\_\_  
CHILD’S DATE OF BIRTH (MONTH, DAY AND YEAR)

\_\_\_\_\_  
PLACE OF BIRTH (CITY AND STATE)

\_\_\_\_\_  
MOTHER’S MAIDEN NAME

\_\_\_\_\_  
MOTHER’S DATE OF BIRTH

All information will be kept strictly confidential. Names and other identifying information will not be released without your permission. Your child’s birth record information will be used for research purposes only.

I PERMIT the Panel Study of Income Dynamics – Child Development Supplement to obtain my child’s birth record information.

\_\_\_\_\_  
SIGNATURE OF PARENT/GUARDIAN

\_\_\_\_\_  
PRINT NAME OF PARENT/GUARDIAN DATE

\_\_\_\_\_  
RELATIONSHIP TO CHILD (mother, father, or guardian)

Questions related to the collection of birth record information can be answered by PSID staff at [redacted]. If you have questions about your rights as a research participant, or wish to obtain information, ask questions, or discuss any concerns about this study with someone other than the researcher(s), please contact the University of Michigan Health Sciences and Behavioral Sciences Institutional Review Board, [redacted]. Please refer to the Panel Study of Income Dynamics – Child Development Supplement.

**B8. Primary caregiver’s written consent to request the release of school record information**

The purpose of the Panel Study of Income Dynamics – Child Development Supplement is to understand how families, schools, and neighborhoods affect children’s and adolescents’ growth and development. One related goal is the measurement of children’s achievement in school. Information from your child’s school transcript, including courses taken and grades received, grade point average, and rank in class, as well as standardized state test scores, will support research to better understand children’s school performance and development. We are asking you to authorize your child’s current or most recent school(s), school district, or state education office to release an official copy of your child’s transcript and standardized state test scores to the Panel Study of Income Dynamics – Child Development Supplement at the University of Michigan Institute for Social Research.

All information will be kept strictly confidential. Names and other identifying information will be stored securely and will not be publicly released. Your child’s transcript information and standardized state test scores will be used by researchers who agree to use the information for research purposes only.

**I AUTHORIZE** the school (or school district or state education office) listed below to release my child’s transcript(s) to the Panel Study of Income Dynamics – Child Development Supplement at the Institute for Social Research, University of Michigan for research purposes.

**To the school:** Please release a copy of my child’s transcript to the Panel Study of Income Dynamics – Child Development Supplement at the Institute for Social Research, University of Michigan.

**I AUTHORIZE** the school (or school district or state education office) listed below to release my child’s standardized state test scores to the Panel Study of Income Dynamics – Child Development Supplement at the Institute for Social Research, University of Michigan for research purposes.

**To the school:** Please release a copy of my child’s standardized state test scores to the Panel Study of Income Dynamics – Child Development Supplement at the Institute for Social Research, University of Michigan.

CHILD’S NAME (FIRST, MIDDLE, AND LAST) (WHEN ENROLLED AT THIS SCHOOL) \_\_\_\_\_

NAME OF SCHOOL \_\_\_\_\_

SCHOOL DISTRICT \_\_\_\_\_ STATE \_\_\_\_\_

SIGNATURE OF PARENT/GUARDIAN \_\_\_\_\_

PRINT NAME OF PARENT/GUARDIAN \_\_\_\_\_ DATE \_\_\_\_\_

RELATIONSHIP TO CHILD (mother, father, or guardian) \_\_\_\_\_

Questions related to the collection of school transcript and state test score information can be answered by PSID staff at \_\_\_\_\_ If you have questions about your rights as a research participant, or wish to obtain information, ask questions, or discuss any concerns about this study with someone other than the researcher(s), please contact the University of Michigan Health Sciences and Behavioral Sciences Institutional Review Board, \_\_\_\_\_

\_\_\_\_\_ Please refer to the Panel Study of Income Dynamics – Child Development Supplement.

## Appendix F. PCG's Consent for Own In-home Components

### PRIMARY CAREGIVER'S CONSENT FOR OWN READING ASSESSMENT AND BODY MEASUREMENT

The Panel Study of Income Dynamics – Child Development Supplement collects information on families' health and well-being in a variety of ways. To help us with this goal, we are asking you to complete a short reading assessment and to allow the interviewer visiting your home to measure your height, weight, and waist circumference.

Your participation is voluntary and all information you provide will remain confidential. The information you provide today will have the same level of protection and security as any other data collected as part of this study.

If you have any questions or concerns, please refer to the information sheet that was mailed to you earlier or speak with your interviewer. If you have any questions or concerns later, please call us at our toll-free number: [REDACTED].

Check the boxes below to indicate your consent to participate in each study component.

<input type="checkbox"/>	Reading assessment
<input type="checkbox"/>	Height, weight, and waist measurements

---

Primary Caregiver's Name (Printed)

---

Primary Caregiver's Signature

Date

## Appendix G. PCG’s Consent for Child’s In-home Components

### **B12. Caregiver consent for participation by children 2-17 years old (in-home visits only)**

The purpose of the Panel Study of Income Dynamics – Child Development Supplement is to understand how families, schools, and neighborhoods affect children’s and adolescents’ growth and development. As part of this study, we are conducting telephone interviews. We are also visiting selected families in their homes to collect some additional information. During this visit, an interviewer will collect information from children in the family in the following ways:

- A 10-to-15 minute survey interview with each child who is between 8 and 11 years old
- Height and weight measurements using a scale and measuring tape for all children 2 years or older
- Skill assessments for all children who are age 3 years or older.

Each part of the study is completely voluntary and confidential. Even after you give your informed consent, your child(ren) may decide not to participate or to stop at any time. We will provide children who are 8 to 11 years old and who participate in the 10 to 15 minute interview with \$10 as a token of our appreciation for his/her participation.

If you have any questions or concerns, please refer to the information sheet that was mailed to you earlier or speak with your interviewer. If you have any questions or concerns later, please call us at our toll-free number: [REDACTED].

Check the boxes below to indicate your permission for your child’s participation in each study component.

	Survey interview (children 8-11 years)
	Height and weight measurements (children 2-17 years)
	Skill assessments (math and vocabulary for children 3-17 years; reading for children 6-17 years)

The interviewer has a written description of the study that he or she will read to children who are 5 to 17 years old. Children aged 14 years or older may read it on their own. It is not necessary to read the page to children younger than 5 years. Write your child’s name below to indicate that he or she will participate in the study.

---

Child’s First and Last Name (Printed)

---

Primary Caregiver’s Name (Printed)

---

Primary Caregiver’s Signature

---

Date

## Appendix H. PCG's Written Consent for Saliva Collection

### B9. Primary caregiver's written consent for saliva collection

By checking the appropriate boxes and signing below, I agree that I have read (or an interviewer has read to me) the information sheet about the saliva collection procedure and about the rights of study participants.

I agree to participate in saliva collection.

I agree to allow the child(ren) named below to participate in saliva collection.

Print name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Child's name: \_\_\_\_\_ Date: \_\_\_\_\_

## Appendix I. Saliva Collection Information Sheet

### A5. Saliva collection information sheet

#### 1. What is this study about?

The purpose of the Panel Study of Income Dynamics – Child Development Supplement is to understand how families, schools, and neighborhoods affect children’s and adolescents’ growth and development. As part of your family’s participation, you are being asked to provide saliva samples for yourself and your children. Your saliva samples contain genes, which are made up of DNA and which serve as the ‘instruction book’ for the cells that make up our bodies. The saliva samples that families provide and information from your surveys will allow researchers to better understand the connections between genetics and health, development, and well-being. The collection of saliva samples is sponsored by the National Institute on Child Health and Human Development and conducted by the University of Michigan. The study Director is Dr. Narayan Sastry of the University of Michigan’s Survey Research Center.

#### 2. What is my family being asked to do?

You and your eligible children who are 5 years or older are being asked to provide a saliva sample by spitting into a small container. We ask that you seal, package, and mail the containers in the padded envelope that has been provided if the saliva collection is not happening as part of an in-home visit by an interviewer. It will take about three (3) minutes for each person to complete. We provide a set of clear printed instructions to help with saliva collection.

The saliva samples will be submitted to a laboratory for genetic (DNA) analysis. No names or personally identifying information will be provided to the laboratory. Summary information about your samples may also be stored in a national database such as dbGaP, which is maintained by the National Institutes of Health and contains similar information collected from studies around the country. No names or other identifiers are included anywhere in this database. Qualified researchers must agree to requirements and restrictions designed to protect your privacy and confidentiality in order to access any data resulting from genetic analysis.

#### 3. Do I have to participate?

Your participation is voluntary. If you or your children decide not to participate, there are no penalties and you will not lose any benefits to which you would otherwise be entitled.

#### 4. Are there any risks?

There are no known risks associated with completing this portion of the study. However there are several perceived risks to providing a genetic sample for repository. These perceived risks are described below, as well as our efforts to minimize any potential risk.

#### 5. What are the benefits?

There are no direct benefits to you or your children who participate in this study. However, the saliva that you and your children provide will help researchers learn more about the factors that affect children’s health and development.

#### 6. Is everything confidential?

Your family's confidentiality is of the highest concern to us. Saliva samples will be stored at the University of Michigan without names or other identifying information. Saliva samples will be sent to an external laboratory for analysis, but will be identified only by a unique number with no link to your identity or personal information. Measures based on your samples that are provided to any national database will include no identifying or personal information. We will not disclose results of the analysis to you or any other party.

In addition to everything we will do to protect your family's confidentiality, the CDS Certificate of Confidentiality provides additional protection of your identity.

Another concern some people have about genetic research is that it might lead to discrimination in employment or health insurance against some groups who are found to have a higher average risk of certain health conditions. **The PSID study will never release or share your genetic information in any way that links it to your identity.** In addition, there is a new federal law called the Genetic Information Nondiscrimination Act (GINA). In general, this law makes it illegal for health insurance companies, group health plans, and most employers to discriminate against you based on your genetic information. However, it does not protect you against discrimination by companies that sell life insurance, disability insurance, or long-term care insurance.

#### **7. Will I be paid for participating?**

You will receive \$10 in appreciation for your participation. Each eligible child who submits a saliva sample will also receive \$10. There is no penalty if you or your children choose not to complete this component.

#### **8. What if I change my mind?**

You may submit a written request to the study director to have your saliva sample or your children's samples withdrawn from the study at any time. You will be notified when the sample has been removed and destroyed. Any statistical information about your sample that has been included in the Panel Study of Income Dynamics or that has been deposited in an external data repository such as dbGaP prior to your request for removal cannot be withdrawn. However, no new information will be created.

#### **9. Who can answer my questions about this study?**

If you have questions or concerns about this procedure or this research, please call our toll-free number: [REDACTED].

If you have questions about your rights as a research participant, or wish to obtain information, ask questions, or discuss any concerns about this study with someone other than the researchers, please contact the University of Michigan Health Sciences and Behavioral Sciences Institutional Review Board, [REDACTED]. Please refer to the Panel Study of Income Dynamics – Child Development Supplement.

## Appendix J. Time Diary Review and Edit Checklist

### *CDS-14 TIME DIARY REVIEWING EDITING CHECKLIST*

Each CDS respondent will get 2 Time Diaries. When editing these please refer to the following. See details in Study Guide Chapter #03a: Time Diaries.

#### Reviewing the Time Diary with the Respondent

- The activities are verbs.
- The activities are what the child/adolescent was doing.
- Times are correct and add up (read each activity with the beginning and end time out loud as you review the diary to be sure it is correct).
- Probe any long periods of time (any activity lasting over 4 hours except going to school or sleeping).
- Probe 'playing' to find out what the child/adolescent was playing (specific name).
- Probe 'reading' to find out what the child/adolescent was reading (book, magazine) and whether the child/adolescent was reading or being read to.
- Probe if the name of the TV shows, videos, computer games, or books are not filled in.
- Probe if secondary activity is not filled in.
- Check for legible handwriting.
- Check for travel times between locations and probe to include these if needed.
- Make sure that "with whom the child/adolescent is doing the activity" and "who else is in the same location" columns are completed.
- Check if normal daily activities are missing – personal care, eating, etc.

#### Editing the Time Diary for Submission

- Make sure the correct day, date, and respondent's name and IVR ID are on the front of the face sheet.
- Make sure all entries are legible.
- Complete the Interviewer box on the inside cover of the questionnaire (mode, edit length, etc.), and in the SurveyTrak View/Edit Time Diaries tab.
- Record administration on the inside cover of the questionnaire.
- Note on the inside of the cover any unusual situations or problems that coders should know about.
- Double check to be sure the entire 24-hour period is accounted for without gaps or overlaps.

## Appendix K. Result Codes

### Interim Result Codes

Result Code	Description
	Not Worked
	Answering Machine, No Message Left
	Answering Machine, Message Left
	Privacy Manager, No Message Left
	Privacy Manager, Message Left
	Pager, 2 beeps, Text Messenger
	Fax, Modem
	TTY
	Number Not in Service/Email Bounced
	Ring No Answer/No one home/Email Sent
	Phone Busy
	Locked Building/Gated Community
	Cont, General Callback, Inf (R Known)
	Cont, General Callback, R
	Cont, Best Time Known, Inf (R Known)
	Cont, Best Time Known, R
	Cont, Appt Made, Inf (R Known)
	Cont, Appt Made, R
	Cont Initial Resistance, Inf (R Known)
	Cont Initial Resistance, R
	Appointment Broken by Inf
	Appointment Broken by R

■	Appointment Broken by Iwer
■	Tracking by Iwer, Contact Made
■	Tracking by Iwer, No Contact Made
■	Tracking by Track Team
■	Hold, Technical Problem
■	Hold, Procedural Problem

## Final Result Codes

Result Code	Description
	Blaise Components Complete
	Blaise Components Partially Complete
	Child 0-11 TEL No Blaise by Design
	Final Refusal, R
	Final Refusal, Inf
	Final Refusal, Never Reached For Conversation
	Final Refusal, Do Not Attempt RC
	NI, Tracking Exhausted, R Known
	NI, Incomplete Blaise Components (Not Approved Partial)
	NI, Permanent Condition
	NI, Language Problem, R Known
	NI, Other Reason
	NI: Never Answered, Final NC, R Known
	Remote Sample
	No Eligible Child in HHL (Coverscreen only)
	Moved Out On Own
	Incarcerated Respondent
	Deceased Respondent
	Age Ineligible
	NS: Health Institutional
	NS: Other Institutional
	NS: Other Reason
	NS: Not Followable

## Appendix L. Contact Observations

CO\_1. Did the informant/respondent make any comments related to the following topics?

- ENTER all that apply

1. Time or burden	2. Lack of interest	3. Confidentiality	4. Personal or sensitive questions
5. Purpose of the study	6. Government	7. "Why me"	8. Surveys are voluntary
9. Incentive insufficient	96. No statement given	97. Other-specify (CO_1SP. Please specify. String 100)	

CO\_2. Did the informant/respondent ask you any questions about the project? For example, "What's all this about?", "Who is paying for this?", and "How long with the interview take?"

1. Yes    5. No    → GO TO RFO RULE



CO\_3. What types of questions did the informant/respondent/proxy ask?

- ENTER all that apply

1. What's the purpose of the survey? / What's this all about?	2. Who is paying for this? / Who is the sponsor?
3. Why/How was respondent chosen?	4. How long will the interview take?
5. Who's going to see R's answers?	6. Can respondent get a copy of the results?
7. How much is the incentive?	8. No questions
97. Other-specify (CO_3SPEC. What other topics were asked about? String 100)	

RFO\_1. What was the general reason for resistance to participate in an interview?

- ENTER all that apply

1. Timing issues (eg, too busy, bad time)
2. Government concerns (eg, waste of taxpayer's money)
3. Confidentiality/trust (eg, too many personal questions)
4. Personal beliefs (eg, waste of time, never do surveys, not interested)
5. Health/age (eg, too Sick, too Old)
6. Interview length
7. Other-specify (RFO\_1SPEC. In a few words, what other reason was given as to why they could not participate? String 100)

1. Timing issues (eg, too busy, bad time)	2. Government concerns (eg, waste of taxpayer's money)
3. Confidentiality/trust (eg, too many personal	
4. Personal beliefs (eg, waste of time, never do surveys, not interested)	
5. Health/age (eg, too sick, too old)	6. Interview length
7. Other-specify (RFO_1SPEC. In a few words, what other reason was given as to why they could not participate?)	

## Appendix M. Coverscreen Interviewer Observations

### CS\_OBS. Coverscreen Post Interview Observation

Please provide a few words about information collected in the Coverscreen section of the interview that would help the project staff understand any potentially confusing or unusual family situations or relationships (such as primary caregivers who are not the child's parents).

Open end *DK/RF not allowed*

### CS\_LANG. IWER CHECKPOINT: SPANISH OR FOREIGN LANGUAGE USED

- Was SPANISH, or any OTHER FOREIGN language, used anywhere in this interview?

1. Yes, Spanish or Foreign Language Used    5. No

### CS\_IO1. Interview Observation

Indicate language(s) used to conduct this interview

- ENTER all that apply

1. English	2. Spanish	7. Other than English or Spanish -specify (IO1A. Please specify (String 100))
------------	------------	---

GO TO CS\_OBS



### CS\_IO2. Interview Observation

Who did the translating?

1. Bilingual interviewer (Spanish or other)	2. Translator / study aide	3. Other FU member
4. Friend / non-relative not in FU	5. Blaise translation	7. Other -specify (IO2A. Please specify (String 100))

## Appendix N. PCG Interviewer Observations

### Household Block

PCG\_LANG. IWER CHECKPOINT: SPANISH OR FOREIGN LANGUAGE USED

· Was SPANISH, or any OTHER FOREIGN language, used anywhere in this interview?

1. Yes, Spanish or Foreign Language Used	5. No
--	-------

PCGIO1. Interview Observation

Indicate language(s) used to conduct this interview

· ENTER all that apply

1. English	2. Spanish	7. Other than English or Spanish -specify (IO1A. Please specify (String 100))
------------	------------	---

GO TO PCGOB1



PCGIO2. Post Interview Observation

Who did the translating?

1. Bilingual interviewer (Spanish or other)	2. Translator / study aide	3. Other FU member
4. Friend / non-relative not in FU	5. Blaise translation	7. Other -specify (IO2A. Please specify (String 100))

PCGOB1. Post Interview Observation

Based on your interview with the primary caregiver during this visit, please rate (her/him) on a scale from 1 to 5 for each item below.

Primary caregiver's speech was distinct, clear, and audible to interviewer?

1. Never	2	3. Sometimes	4	5. Often
----------	---	--------------	---	----------

PCGOB2. Post Interview Observation

Primary caregiver appeared to readily understand the interviewer's questions?

1. Never	2	3. Sometimes	4	5. Often
----------	---	--------------	---	----------

PCGOB3. Post Interview Observation

Primary caregiver expressed ideas freely and easily and used statements of appropriate length?

1. Never	2	3. Sometimes	4	5. Often
----------	---	--------------	---	----------

PCGOB4. Post Interview Observation

Primary caregiver initiated interchanges with the interviewer, asked questions, and made spontaneous comments?

1. Never	2	3. Sometimes	4	5. Often
----------	---	--------------	---	----------

PCGOB5. Post Interview Observation

Primary caregiver used complex sentence structure and long words in (his/her) speech?

1. Never	2	3. Sometimes	4	5. Often
----------	---	--------------	---	----------

**Assessments Block – Woodcock Johnson Assessment Observations**

**ASOB1. Assessment Observation**

These next few questions are the Assessment Observations and should be completed immediately after the completed assessments.

Was anyone else present in the room at any time during the administration of the assessments?

1. Yes  5. No → GO TO ASOB2



**ASOB1A. Assessment Observation**

How much did the presence of this person distract the child or interfere with the assessments?

1. A great deal  2. Somewhat  3. Not at all

**ASOB2. Assessment Observation**

Were all the appropriate Woodcock-Johnson assessments completed?

1. Yes →GO TO ASOB4  5. No



**ASOB3. Assessment Observation**

What were the reasons for not completing them?

- ENTER all that apply

<input type="checkbox"/> 1. Parent/PCG terminated/refused	<input type="checkbox"/> 2. Child would not respond
<input type="checkbox"/> 3. Major interruption caused termination	<input type="checkbox"/> 4. Child could not understand task
<input type="checkbox"/> 5. Child had language problem	<input type="checkbox"/> 6. Child’s emotional condition
<input type="checkbox"/> 7. Child’s physical condition	<input type="checkbox"/> 8. Child tired
<input type="checkbox"/> 97. Other-specify (ASOB3SPEC. Specify. String 100)	

**ASOB4. Assessment Observation**

Please provide a few words about the information collected in the assessments that would help the project staff understand and ambiguous, confusing, or conflicting information.

**ASOB5. Assessment Observation**

Briefly provide a description of the interview situation that would help the project staff understand the assessment data. Include information about the interview setting, distractions during the interview, the respondent’s level of cooperation, etc.

**Assessments Block - Post Interview Household Observations**

**PCGOB6. Post-Interview Observation**

Did you observe the inside of the home?

1. Yes  5. No → GO TO PCGOB16



**PCGOB7. Post-Interview Observation**

Interior of the home is dark or perceptually monotonous?

1. Not at all	2	3. Somewhat	4	5. Very
---------------	---	-------------	---	---------

PCGOB8. Post-Interview Observation

All visible rooms in the (house/apartment) are cluttered?

1. Not at all	2	3. Somewhat	4	5. Very
---------------	---	-------------	---	---------

PCGOB9. Post-Interview Observation

All visible rooms in the (house/apartment) are clean?

1. Not at all	2	3. Somewhat	4	5. Very
---------------	---	-------------	---	---------

PCGOB10. Post-Interview Observation

The child(ren)'s play environment is safe (no potentially dangerous health or structural hazards within a child's range). (EXAMPLES: Falling plaster, peeling paint, rodents, glass, poisons and cleaning materials, flames & heat, frayed electrical wires.)?

1. Yes	5. No
--------	-------

PCGOB11. Post-Interview Observation

House or apartment has at least 100 square feet of living space per person?

1. Yes	5. No
--------	-------

PCGOB12. Post-Interview Observation

In terms of available floor space, the rooms were not overcrowded with furniture?

1. Not at all	2	3. Somewhat	4	5. Very
---------------	---	-------------	---	---------

PCGOB13. Post-Interview Observation

House or apartment is not overly noisy – from noise in the house (e.g., television, shouts of children, radio)?

1. Not at all	2	3. Somewhat	4	5. Very
---------------	---	-------------	---	---------

PCGOB14. Post-Interview Observation

House or apartment is not overly noisy – from noise outside the house (e.g., train, cars, people, music)?

1. Not at all	2	3. Somewhat	4	5. Very
---------------	---	-------------	---	---------

PCGOB15. Post-Interview Observation

There are no obvious signs of recent alcohol or non-prescription drug consumption in the home (e.g., drug paraphernalia, beer cans, liquor bottles)?

1. None	2. Almost none	3. Yes, but not a lot	4. Yes, quite a bit	5. Yes, just about everywhere
---------	----------------	-----------------------	---------------------	-------------------------------

PCGOB16. Post-Interview Observation

How would you rate the general condition of most of the housing units or other buildings in the face-block?

1. Well kept, good repair	2. Fair condition	3. Poor condition (peeling paint, broken windows)
4. Badly deteriorated	5. Not observed	

PCGOB17. Post-Interview Observation

How would you rate the condition of the street in the face-block?

1. Very good – recent resurfacing, smooth	2. Moderate – evidence kept in good repair
3. Fair - minor repairs needed, but not rough surface	4. Poor – potholes and other evidence of neglect
5. Not observed	

PCGOB18. Post-Interview Observation

Is there garbage, litter, or broken glass (except beer/liquor bottles) in the street or on the sidewalk (including around the dwelling unit and neighboring houses)?

1. None, or almost none	2. Yes, but not a lot	3. Yes, quite a bit
4. Yes, just about everywhere	5. Not observed	

PCGOB19. Post-Interview Observation

Are there drug-related paraphernalia, condoms, beer, or liquor containers or packaging, cigarette butts, or discarded cigarette packages in the street or on the sidewalk?

1. None, or almost none	2. Yes, but not a lot	3. Yes, quite a bit
4. Yes, just about everywhere	5. Not observed	

## Appendix O. Child Interviewer Observations

### Assessments Block – Woodcock Johnson Assessment Observations

ASOB1. These next few questions are the Assessment Observations and should be completed immediately after the completed assessments.

Was anyone else present in the room at any time during the administration of the assessments?

1. Yes  5. No → GO TO ASOB2



ASOB1A. How much did the presence of this person distract the child or interfere with the assessments?

1. A great deal  2. Somewhat  3. Not at all

ASOB2. Were all the appropriate Woodcock-Johnson assessments completed?

1. Yes →GO TO ASOB4  5. No



ASOB3. What were the reasons for not completing them?

- ENTER all that apply

1. Parent/PCG terminated/refused	2. Child would not respond
3. Major interruption caused termination	4. Child could not understand task
5. Child had language problem	6. Child's emotional condition
7. Child's physical condition	8. Child tired
97. Other-specify (CH_AO3SPEC Specify. String 100)	

ASOB4. Please provide a few words about the information collected in the assessments that would help the project staff understand and ambiguous, confusing, or conflicting information.

OPENEND

ASOB5. Briefly provide a description of the interview situation that would help the project staff understand the assessment data. Include information about the interview setting, distractions during the interview, the respondent's level of cooperation, etc.

OPEN END

**Assessments Block - Post Interview Household Observations**

CHOB4. Did you observe [FName] and primary caregiver together at any time?

1. Yes	5. No	→ GO TO WCJobs_End
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↓

CHOB5. Primary caregiver spontaneously spoke or conversed with [FName] (excluding scolding or suspicious comments)?

1. Never	2. Once	3. 2 or 3 Times	4. 4 or more times
----------	---------	-----------------	--------------------

CHOB6. Primary caregiver responded verbally to [FName]'s speech, questions or requests?

1. Never	2. Once	3. 2 or 3 Times	4. 4 or more times
----------	---------	-----------------	--------------------

CHOB7. Primary caregiver caressed, kissed, or hugged [FName]?

1. Never	2. Once	3. 2 or 3 Times	4. 4 or more times
----------	---------	-----------------	--------------------

CHOB8. Primary caregiver slapped or spanked [FName]?

1. Never	2. Once	3. 2 or 3 Times	4. 4 or more times
----------	---------	-----------------	--------------------

CHOB9. Primary caregiver physically restricted or shook/grabbed [FName]?

1. Never	2. Once	3. 2 or 3 Times	4. 4 or more times
----------	---------	-----------------	--------------------

CHOB10. Primary caregiver provided toys or interesting activities for [FName]?

1. Never	2. Once	3. 2 or 3 Times	4. 4 or more times
----------	---------	-----------------	--------------------

CHOB11. Primary caregiver's voice conveyed positive feeling about [FName]?

1. Never	2. Once	3. 2 or 3 Times	4. 4 or more times
----------	---------	-----------------	--------------------

CHOB12. How often did primary caregiver spontaneously praise [FName] for [his/her] behavior, helpfulness, looks or other positive qualities?

1. Never	2. Once	3. 2 or 3 Times	4. 4 or more times
----------	---------	-----------------	--------------------

CHOB13. When interacting with [FName], how often was the primary caregiver warm and affectionate?

1. Never	2. Once	3. 2 or 3 Times	4. 4 or more times
----------	---------	-----------------	--------------------

CHOB14. Primary caregiver introduced interviewer to [FName] by name?

1. Yes	5. No	6. Not observed
--------	-------	-----------------

CHOB15. Primary caregiver helped [FName] demonstrate some achievement during visit or mentioned a particular skill, strength, or achievement?

1. Never	2. Once	3. 2 or 3 Times	4. 4 or more times
----------	---------	-----------------	--------------------

CHOB16. Primary caregiver encouraged [FName] to contribute to the conversation during visit?

1. Never	2. Once	3. 2 or 3 Times	4. 4 or more times
----------	---------	-----------------	--------------------

CHOB17. Primary caregiver showed some positive emotional responses to praise of [FName] by visitor?

1. Never	2. Once	3. 2 or 3 Times	4. 4 or more times
----------	---------	-----------------	--------------------

CHOB18. Primary caregiver used some term of endearment or some diminutive for [FName]'s name when talking about or to him/her during visit?

1. Never	2. Once	3. 2 or 3 Times	4. 4 or more times
----------	---------	-----------------	--------------------

CHOB19. Primary caregiver scolded, derogated, or criticized [FName]?

1. Never	2. Once	3. 2 or 3 Times	4. 4 or more times
----------	---------	-----------------	--------------------

CHOB20. Primary caregiver shouted at [FName] during visit?

1. Never	2. Once	3. 2 or 3 Times	4. 4 or more times
----------	---------	-----------------	--------------------

CHOB21. Primary caregiver expressed overt annoyance with or hostility toward [FName], complained, described him/her as 'bad', said he won't mind, etc?

1. Never	2. Once	3. 2 or 3 Times	4. 4 or more times
----------	---------	-----------------	--------------------

CHOB22. Primary caregiver was...?

1. Extremely hostile, cold, & harsh to Child	2	3	4	5. Extremely warm, loving, & affectionate to Child
--	---	---	---	--

CHOB23. Primary caregiver...?

1. Showed no pride or pleasure in Child	2	3	4	5. Took a great deal of pride or pleasure in Child
---	---	---	---	--

CHOB24. Primary caregiver...?

1. Always showed warmth in tone when talking with Child	2	3	4	5. Never showed warmth in tone when talking with Child
---	---	---	---	--

## Appendix P. Interim Call Notes

### Interim Call Record

- Date, Day of week, time and time zone of Iwer and HH.
- Is this HH pre-selected as eligible for in-home components (IHC=Yes).
- Who did you speak with, first and last name. If PCG is identified, name and relationship to CDS child/children in HH. Include age, gender and marital status if known. Does this HH have at least one PSID 2013 child living in the HH. Do not use R or informant for this study; give first and last name and relationship to PCG or CDS child/children.
- Current address and any other phone number's given for HH, always include first and last name of everyone you speak with, including best time to be reached. Include any work schedule or children's schedules given.
- Include any information found in profile, such as refusals received in other studies PSID, TA, DUST, Web-Mail who refused, first and last name, and why.
- Any vacation homes or other residences.
- Any finder fees, cell phone fees or child care fees offered.
- Cooperation level of HH. If PCG (include first and last name) was identified list any concerns expressed and what was said by both interviewer and PCG.
- If FTF describe HH observations, (i.e. home with car in drive-what kind, apt or trailer court name, talking with neighbors etc.)
- If contacted by phone what was outgoing message, any identifying information? If you left a message what was said.
- If interview was suspended, was it child iw (first and last name), PCG (first and last name) etc. and what section and question was it suspended in.
- Be very specific with whom you speak with, always use first and last names of everyone you talk with and what their relationship is to either PCG or CDS child/children living in HH. Indicate if the person is also part of the CDS study. If PCG is identified always use PCG/first and last name. List any information that would help locate this HH in the future.
- If CP's were contacted, include from which study they were CP's (PSID, TA, DUST-from profile), include first and last name and phone number called and relationship to PCG and or CDS child/children in HH. Indicate if CP is also in the CDS study. Include what was said by both Iwer and CP.
- If a CDS child has moved to another HH and you know the new SID number from spawned line, make sure to record from whom the info was received (PCG, CDS child or another member of HH and include , first and last name and relationship), new address and phone number and from which SID it was received.

## Appendix Q. Final Call Notes

### Final Call Record

- Date, day of week, time and time zone of iwer and HH.
- Who was identified as PCG, first and last name? CDS child/children identified as living currently in HH including relationships to others in HH. Do not use R or informant for study; always include first and last names of everyone and their relationship to PCG or CDS child in HH.
- If Cover Screen final CR, who completed the CS, first and last name and relationship to PCG and CDS child/children. Who was identified as being the PCG, first and last name and include anything being mailed out by iwer, day and dates selected for time diaries and any appt date's and time's set up for iws, including if they are TEL or FTF iws. Include if verbal consent was given for any child/children, who are they, first and last name. Did you record all necessary info into view edit?
- Include what iws were completed, if physical measurements and saliva were completed. Were both Weekday and Weekend time diaries completed and were they edited? Status of birth and school records. Did you collect any of these items which will be mailed in to AA by iwer (what is date they were/will be mailed) or is PCG mailing them in. Any refusals given by PCG or child/children for any parts of CDS iw, and who refused, first and last name.
- If this HH was not pre-selected as eligible for in-home components (IHC=Yes), did you discuss with PCG completing physical measurements and were you able to collect and enter this info into Blaise? Did you discuss with PCG mailing that included the birth and school records and child time diaries. Did you let PCG know that a saliva kit will be mailed to them for all children ages 5-17 and the payments they will each receive? Record any comments or concerns noted for any of the above.
- Were CDS children between ages of 12-17 given the IVR telephone number and their case id to call in, any refusals or concerns by child or PCG or any other member of the HH, give first and last name and relationship to PCG or CDS child.
- Payments given in cash and to whom, payments which will be by check.
- Any finder fee, cell phone fee or child care fees paid.
- Any new phone numbers given for HH members including children cell phones and best time to reach them.
- Does this HH plan to move in the future, if so include any information which will help us locate them.
- Any new contact person information taken or updated, and which study are they a part of (if known) PSID, DUST, TA, anything special we should know.
- If any information was received locating this CDS child/children including SID number of another CDS family

## Appendix R. PSID Relationship to Head (RTH) Descriptions

CODE LABEL	CODE DEFINITION
Male Head	Head of the Family Unit
Female Head	
Wife	A woman who is legally married to HEAD, according to the Respondent
"Wife"	A woman not married to HEAD, but they have been living together as a couple for at least twelve months. NOTE: There is no equivalent "Husband."
Boyfriend	A romantic partner <u>of the opposite sex</u> who lives with the HEAD. These terms are used for the first year that they live together. The next wave, if the couple is still together and still unmarried, a GIRLFRIEND will become a "WIFE" and a BOYFRIEND will become HEAD.
Girlfriend	
Son	Natural or adopted child of HEAD. Stepchildren are <u>not</u> included here.
Daughter	
Stepson	Child of the WIFE but not the HEAD. Children of the "WIFE," or BOYFRIEND/GIRLFRIEND -are <u>not</u> included here.
Stepdaughter	
Son of "Wife"	Child of the "WIFE" but <u>not</u> the HEAD. Children of BOYFRIEND/GIRLFRIEND are <u>not</u> included here. See SON OF BOYFRIEND/GIRLFRIEND or DAU OF BOYFRIEND/GIRLFRIEND.
Daughter of "Wife"	
Son-in-Law	This person is married to a child or step-child of the HEAD.
Daughter-in-Law	
Foster son	<u>Foster</u> child of the HEAD.
Foster daughter	
Brother	Sibling of the HEAD. It also includes half- and step-siblings
Sister	
Brother-in-law	Spouse of HEAD's sibling or the sibling of the WIFE. Siblings of "WIFE" or BOYFRIEND/GIRLFRIEND are <u>not</u> included here.
Sister-in-law	
Brother of Co-Habitor	Siblings of the "WIFE", or BOYFRIEND/GIRLFRIEND
Sister of Co-Habitor	
Father/Stepfather	Parents or stepparents of the HEAD
Mother/Stepmother	
Father-in-law	Parents of the WIFE. Parents of the "WIFE" or BOYFRIEND/GIRLFRIEND are <u>not</u> included here
Mother-in-law	
Father of Co-Habitor	Parents of a "WIFE," or BOYFRIEND/GIRLFRIEND
Mother of Co-Habitor	

CODE LABEL	CODE DEFINITION
Grandson	Grandchildren of HEAD or WIFE. "WIFE's" or BOYFRIEND's/GIRLFRIEND's grandchildren are <u>not</u> included—they are called RELATIVE OF CO-HABITOR.
Granddaughter	
Great-Grandson	Great-grandchildren of HEAD or WIFE. Great-grandchildren of "WIFE," or BOYFRIEND/GIRLFRIEND or are <u>not</u> included—they are called RELATIVE OF CO-HABITOR.
Great-Granddaughter	
Grandfather	Grandparent or step-grandparent of the HEAD.
Grandmother	
Grandfather of Wife	Grandparent or step-grandparent of the WIFE
Grandmother of Wife	
Great-Grandfather	Great grandparent or step-great-grandparent of the HEAD
Great-Grandmother	
Great-Grandfather of Wife	Great-grandparent or step-great-grandparent of the WIFE
Great-Grandmother of Wife	
Nephew of Head	Nephew or niece of HEAD; that is, the child of one of HEAD's siblings
Niece of Head	
Nephew of Wife	Nephew or niece of WIFE. These are children of one of the WIFE's siblings
Niece of Wife	
Uncle of Head	Brothers or sisters of the HEAD's parents
Aunt of Head	
Uncle of Wife	Brothers or sisters of the WIFE's parents
Aunt of Wife	
Cousin of Head – Male	Child of HEAD's AUNT or UNCLE (note gender-specific codes)
Cousin of Head – Female	
Cousin of Wife – Male	Child of the WIFE's AUNT or UNCLE (note gender-specific codes)
Cousin of Wife - Female	
Son of Boyfriend/Girlfriend	Child of the BOYFRIEND/GIRLFRIEND, but <u>not</u> of the HEAD. Children of "WIFE" are <u>not</u> included here—they are coded SON OF "WIFE" or DAU OF "WIFE"
Daughter of Boyfriend/Girlfriend	
Husband of Head	The male half of a married couple, who is present in the FU but either unable or unwilling to have information about him included in interview. <u>Do not assign this RTH without prior permission from study staff.</u>
Relative of Head – Male	Any relative of the HEAD who doesn't fit the above categories (e.g., HEAD's great

CODE LABEL	CODE DEFINITION
<b>Relative of Head – Female</b>	aunt). (Note the gender specific codes)
<b>Relative of Wife – Male</b>	Any relative of the WIFE who don't fit the above categories (e.g., HEAD's or WIFE's great aunt). (Note the gender specific codes)
<b>Relative of Wife - Female</b>	
<b>Relative of Co-Habitor – Male</b>	Any relative of the "WIFE", GIRLFRIEND or BOYFRIEND who doesn't fit the other categories above. (Note the gender specific codes)
<b>Relative of Co-Habitor - Female</b>	
<b>Friend/Nonrelative – Male</b>	These are miscellaneous friends, roommates, etc., who are not related to the family. Those who are in a permanent living arrangement and are economically interdependent should be included as FU members, those who are living there temporarily or just splitting expenses as roommates must be coded as HU members. Same-sex partners should be included in this category and must be coded as FU members.
<b>Friend/Nonrelative – Female</b>	

## Appendix S. Follow-up Emails

### Appointment Reminder Email (To be sent by Interviewer)

**Subject:** Message from the University of Michigan

Thank you for agreeing to participate in a study conducted by the University of Michigan. Your cooperation is the most important part of this study.

I am writing to remind you of our appointment to conduct the interview with:

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_ [AM/PM, Time Zone]

If you have any questions about the study, please call our toll-free number: [REDACTED] I look forward to speaking with you!

Sincerely,

[Name Here]

[Title Here]

Survey Research Center

Institute for Social Research

University of Michigan



**Initial Contact Email (To be sent by Interviewer with Team Leader approval)**

**Subject:** Message from the University of Michigan

We recently sent you a letter regarding your participation in a study conducted by the University of Michigan. Your cooperation is the most important part of this study.

I am writing to ask for your help in finding a good time to set up an interview appointment.

If you can suggest a good time for me to reach you, a better phone number for me to call, or if you have any questions about the study, please call our toll-free number: [REDACTED]. I look forward to speaking with you.

Thank you for your help and cooperation!

Sincerely,

[Name Here]

[Title Here]

Survey Research Center

Institute for Social Research

University of Michigan

[REDACTED]

**Missed Appointment Email (To be sent by Interviewer)**

**Subject:** Message from the University of Michigan

Thank you for agreeing to participate in a study conducted by the University of Michigan. I'm sorry that I was unable to reach you today at [time] when I [called/visited].

Your participation is still very important. I hope that we can find another time to conduct the interview.

Please call our toll-free number: [REDACTED]. I look forward to speaking with you!

Sincerely,

[Name Here]

[Title Here]

Survey Research Center

Institute for Social Research

University of Michigan

[REDACTED]

**Hard to Reach R Email (To be sent by Team Leader or Tracker)**

**Subject:** Message from the University of Michigan

We recently sent you a letter regarding your participation in a study conducted by the University of Michigan. Your cooperation is the most important part of this study.

I have tried to contact you on several occasions, but have been unable to reach you.

I am writing to ask for your help in finding a good time to set up an interview appointment.

If you can suggest a good time for me to reach you, a better phone number for me to call, or if you have any questions about the study, please call our toll-free number: [REDACTED]. I look forward to speaking with you.

Thank you for your help and cooperation!

Sincerely,

[Name Here]

[Title Here]

Survey Research Center

Institute for Social Research

University of Michigan

[REDACTED]

**Hard to Reach CP Email (To be sent by Team Leader or Tracker)**

**Subject:** Message from the University of Michigan

A few weeks ago I sent [R Name] a letter regarding [his/her] participation in a study conducted by the University of Michigan.

I am writing to ask for your help in reaching [him/her] to set up an appointment.

Please call our toll-free number [REDACTED] or contact [R Name] and let [him/her] know we are trying to reach [him/her].

Thank you for your help and cooperation!

## Appendix T. Follow-up Letters

### Cell Phone Reimbursement Letter (To be sent by Study Staff)

\*Date

\*First Name \*Last Name

\*Addr1

\*Addr2

\*City, \*State \*Zip

Dear \*First Name \*Last Name,

Thank you for your recent participation in the Panel Study of Income Dynamics – Child Development Supplement. Enclosed please find \$10 to help cover the cost of using your cell phone minutes. We thank you again for your participation in this important study.

Sincerely,



Narayan Sastry, Ph.D.  
Associate Director, Panel Study of Income Dynamics  
and Director, Child Development Supplement  
University of Michigan

**Confidentiality Letter (To be sent by Study Staff)**

\*Date

\*First Name \*Last Name

\*Addr1

\*Addr2

\*City, \*State \*Zip

Dear \*First Name \*Last Name:

Thank you for speaking with our interviewer about doing the Panel Study of Income Dynamics - Child Development Supplement. I understand that you are concerned about the confidentiality of the interviews.

**The Panel Study of Income Dynamics – Child Development Supplement is strictly confidential.** We realize that we ask questions that some families may find personal. I'd like to assure you that your participation is voluntary, and you can skip any questions you don't want to answer, for any reason. All identifying information (such as names and addresses) is removed from the data before it is released to researchers. We never give or sell our list of study members to anyone. In addition, every employee of the Institute for Social Research signs the enclosed Pledge of Confidentiality each year. As you can see, we take the confidentiality of the information you and others provide to our research very seriously.

We are offering the caregiver \$60 as a token of our appreciation for his/her time, interest, and effort for participating in the interview, and we would like to give \$20 to each older child (aged 12 to 17 years) who participates in an interview for his/her own contribution. We will speak to parents or caregivers about younger children. If your family is selected for a home visit, we will also interview children between 8 and 11 years old in person. These children will receive \$10 in appreciation for their contribution. If you have any further questions, please feel free to call our toll-free number: [REDACTED].

Sincerely,



Narayan Sastry, Ph.D.  
Associate Director, Panel Study of Income Dynamics  
and Director, Child Development Supplement University  
of Michigan

Current Wave 1w Payment Problem Letter (To be sent by Study Staff)

\*Date

\*First Name \*Last Name

\*Addr1

\*Addr2

\*City, \*State \*Zip

Dear \*First Name\*Last Name:

Thank you for speaking with our Panel Study of Income Dynamics – Child Development Supplement interviewer. I understand that you did not receive your check for participation in our study. We are very grateful for your participation in the study and do not want any of our study members to go without this token of our appreciation for their time and effort.

1 → We have checked our records, however, and find that your check was mailed to you on or about \*DATE1. This check, #xxxxxx in the amount \*\$INCENTIVE AMOUNT, was cashed on \*DATE2.

2 → Enclosed please find your check in the amount of \*\$INCENTIVE AMOUNT. We apologize for any inconvenience this delay has caused.

3 → We have checked our records and find that your original check was cancelled on \*DATE1, so we have re-issued you another \*\$INCENTIVE AMOUNT check which is enclosed.

4 → We have checked our records and find that your original check is outstanding, so we have re-issued you another \*\$INCENTIVE AMOUNT check which is enclosed.

5 → We have checked our records and find that your original check was cancelled on \*DATE1. We have re-issued you another \*\$INCENTIVE AMOUNT check and mailed it to you on or about \*DATE2. Hopefully you will have received your check by the time this letter arrives.

6 → We have checked our records and find that your original check is outstanding. We have re-issued you another \*\$INCENTIVE AMOUNT check and mailed it to you on or about \*DATE1. Hopefully you will have received your check by the time this letter arrives.

If you have any further questions, please feel free to give us a call at our toll-free number: [REDACTED].

Sincerely,



Narayan Sastry, Ph.D.  
Associate Director, Panel Study of Income Dynamics  
and Director, Child Development Supplement University  
of Michigan

**General Thank You Letter (To be sent by Study Staff)**

\*Date

Dear \*First Name \*Last Name,

Thank you for your recent participation in the Panel Study of Income Dynamics – Child Development Supplement. Enclosed please find \*\$[Amount] as a token of appreciation for your participation. We are grateful for your participation in this important study.

Sincerely,

A handwritten signature in black ink, appearing to read 'N Sastry', written in a cursive style.

Narayan Sastry, Ph.D.  
Associate Director, Panel Study of Income Dynamics  
and Director, Child Development Supplement University  
of Michigan

**Get Well Soon Letter (To be sent by Study Staff)**

\*Date

\*First Name \*Last Name

\*Addr1

\*Addr2

\*City, \*State \*Zip

Dear \*First Name \*Last Name:

Thank you for speaking with our Panel Study of Income Dynamics – Child Development Supplement interviewer. Your interviewer has let me know that this is not a good time for your family to participate for health reasons. This is just a brief note to wish you well and a speedy recovery.

We will be interviewing through the spring, so I hope you won't mind if your interviewer contacts you again before the study ends, to see if you and your family are able to participate at that time. If you do feel up to it, your interviewer will do everything he or she can to make it easier for you and your family.

Our best wishes and we look forward to talking with you soon.

If you have any further questions, please feel free to give us a call at our toll-free number: [REDACTED]

Sincerely,



Narayan Sastry, Ph.D.  
Associate Director, Panel Study of Income Dynamics  
and Director, Child Development Supplement  
University of Michigan

**Interview is Too Long Letter (To be sent by Study Staff)**

\*Date

\*First Name \*Last Name

\*Addr1

\*Addr2

\*City, \*State \*Zip

Dear \*First Name \*Last Name:

Thank you for speaking with our Panel Study of Income Dynamics – Child Development Supplement interviewer. I understand that you and your family are not interested in participating because you feel the interviews are too long.

We do realize that the interviews take time and effort. And we are aware that most people these days lead very busy lives. Because of that, your interviewer will do whatever possible to make completing the interview easy and convenient for you and your children. For example, we can do the interview in parts if that would help, or you can simply call our toll-free number when you have a few moments to do the interview, and we will try to connect you with your interviewer right away.

We are offering the caregiver \$60 as a token of our appreciation for his/her time, interest, and effort for participating in the interview, and we would like to give \$20 to each older child (aged 12 to 17 years) who participates in an interview for his/her own contribution. We will speak to parents or caregivers about younger children. If your family is selected for a home visit, we will also interview children between 8 and 11 years old in person. These children will receive \$10 in appreciation for their contribution.

Your interviewer will call again to see if you and your family are willing to schedule an interview. If you have any questions or would like to arrange an interview, you may also call us at our toll-free number: [REDACTED]. We hope to talk with you soon.

Sincerely,



Narayan Sastry, Ph.D.  
Associate Director, Panel Study of Income Dynamics  
and Director, Child Development Supplement  
University of Michigan

**More Info Letter (To be sent by Study Staff)**

\*Date

\*First Name \*Last Name

\*Addr1

\*Addr2

\*City, \*State \*Zip

Dear \*First Name \*Last Name:

Thank you for speaking with our Panel Study of Income Dynamics – Child Development Supplement interviewer. I understand that you would like more information about the study.

The purpose of this study is to understand how families, schools, and neighborhoods affect children's and adolescents' growth and development. The study will collect information on children and adolescents who are between the ages of birth and 17 years and a parent or caregiver. It will be conducted primarily by telephone, but some information may be collected during a home visit by a field interviewer. This project depends on information on the real lives of real people, so it would not be possible without the generosity of our study members.

The study is strictly confidential. All identifying information (such as names and addresses) is removed from the data before it is released to researchers. We *never* give or sell our list of study members to anyone.

We are offering the caregiver \$60 as a token of our appreciation for his/her time, interest, and effort for participating in the interview, and we would like to give \$20 to each older child (aged 12 to 17 years) who participates in an interview for his/her own contribution. We will speak to parents or caregivers about younger children. If your family is selected for a home visit, we will also interview children between 8 and 11 years old in person. These children will receive \$10 in appreciation for their contribution.

I am enclosing a copy of our latest [REDACTED], which will give you more information about us. If you have any other questions, please call our toll-free number: [REDACTED]. We hope you will help us out with this important project and look forward to speaking with you soon.

Sincerely,



Narayan Sastry, Ph.D.  
Associate Director, Panel Study of Income Dynamics  
and Director, Child Development Supplement University of  
Michigan

Not Interested Letter (To be sent by Study Staff)

\*Date

\*First Name \*Last Name

\*Addr1

\*Addr2

\*City, \*State \*Zip

Dear \*First Name \*Last Name:

Thank you for speaking with our Panel Study of Income Dynamics – Child Development Supplement interviewer. I understand that you and your family are not interested in participating. We of course respect your decision not to participate, but I wanted to let you know why you and your family are so important to the study.

The purpose of this study is to understand how families, schools, and neighborhoods affect children's and adolescents' growth and development. The study will collect information on children and adolescents who are between the ages of birth and 17 years and a parent or caregiver. It will be conducted primarily by telephone, but some information may be collected during a home visit by a field interviewer. This project depends on information on the real lives of real people, so it would not be possible without the generosity of our study members.

The study is strictly confidential. All identifying information (such as names and addresses) is removed from the data before it is released to researchers. We never give or sell our list of study members to anyone.

We are offering the caregiver \$60 as a token of our appreciation for his/her time, interest, and effort for participating in the interview, and we would like to give \$20 to each older child (aged 12 to 17 years) who participates in an interview for his/her own contribution. We will speak to parents or caregivers about younger children. If your family is selected for a home visit, we will also interview children between 8 and 11 years old in person. These children will receive \$10 in appreciation for their contribution.

I hope you don't mind if our interviewer contacts you one more time to see if you might be willing to schedule an interview. If you have any questions or would like to arrange an interview, you may also call us at our toll-free number: [REDACTED]. We hope to talk with you soon.

Sincerely,



Narayan Sastry, Ph.D.  
Associate Director, Panel Study of Income Dynamics  
and Director, Child Development Supplement  
University of Michigan

**Refusal Letter (To be sent by Study Staff)**

\*Date

\*First Name \*Last Name

\*Addr1

\*Addr2

\*City, \*State \*Zip

Dear \*First Name \*Last Name:

I am sorry to hear that \*you and your family do not wish to participate in the Panel Study of Income Dynamics – Child Development Supplement. The study is completely voluntary, and we of course respect your decision, but I wanted to write to see if there’s anything we can do to encourage you and your family to participate.

The information you provide to us is particularly valuable. This research depends on understanding what happens in the real lives of real people, and is not possible without the generosity of each of our study members. Your participation makes an enormous contribution to research of national importance.

The study is strictly confidential. All identifying information (such as names and addresses) is removed from the data before it is released to researchers.

I hope you don’t mind if our interviewer contacts you one more time to see if you might be willing to schedule an interview. We understand that everyone is very busy these days and we will do everything possible to make completing the interview convenient for you.

If you have any other questions, please feel free to call us at our toll-free number: [REDACTED]. We hope that you and your family will decide to continue to participate, and we thank you for your contribution to the study.

Sincerely,



Narayan Sastry, Ph.D.  
Associate Director, Panel Study of Income Dynamics  
and Director, Child Development Supplement  
University of Michigan

**Sympathy Letter (To be sent by Study Staff)**

\*Date

\*First Name \*Last Name

\*Addr1

\*Addr2

\*City, \*State \*Zip

Dear \*First Name \*Last Name:

I was very sorry to learn that your \*Relative, \*R First Name \*R Last Name, has passed away, and wish to extend my sympathy.

On behalf of the Panel Study of Income Dynamics – Child Development Supplement, our sincerest condolences to you and your family.

Sincerely,



Narayan Sastry, Ph.D.  
Associate Director, Panel Study of Income Dynamics  
and Director, Child Development Supplement University of  
Michigan

**Too Busy Letter (To be sent by Study Staff)**

\*Date

\*First Name \*Last Name

\*Addr1

\*Addr2

\*City, \*State \*Zip

Dear \*First Name \*Last Name:

Thank you for speaking with our Panel Study of Income Dynamics – Child Development Supplement interviewer. I understand that you feel that you and your family are too busy to participate this year.

We are very aware that some of our study members are very busy with family and work, and that these activities take priority over talking to us. In order for our data to represent all American families, it's important that people with exceptionally busy lives also be included in our research. We can make the interview process very convenient for you and your family. We can do the interviews in short segments and will schedule it at any time that that's convenient, including in the early morning or late at night. Or you can simply call our toll-free number when you have a few moments to do the interview, and we will try to connect you with your interviewer right away.

We wouldn't ask for your help if this research weren't so important. This project depends on information on the real lives of real people, so it would not be possible without the generosity of our study members.

We are offering the caregiver \$60 as a token of our appreciation for his/her time, interest, and effort for participating in the interview, and we would like to give \$20 to each older child (aged 12 to 17 years) who participates in an interview for his/her own contribution. We will speak to parents or caregivers about younger children. If your family is selected for a home visit, we will also interview children between 8 and 11 years old in person. These children will receive \$10 in appreciation for their contribution.

Your interviewer will try calling again to see if you are willing to schedule an interview. If you have any questions or would like to arrange an interview, you may also call us at our toll-free number: [REDACTED]. We hope to talk with you soon.

Sincerely,



Narayan Sastry, Ph.D.  
Associate Director, Panel Study of Income Dynamics  
and Director, Child Development Supplement  
University of Michigan

**Waste of Time Letter (To be sent by Study Staff)**

\*Date

\*First Name \*Last Name

\*Addr1

\*Addr2

\*City, \*State \*Zip

Dear \*First Name \*Last Name:

Thank you for speaking with our Panel Study of Income Dynamics – Child Development Supplement interviewer. I understand that \*you and/or your child(ren) are not interested in doing the interview.

Let me assure you that we wouldn't ask for your help if this research weren't so important. The purpose of this study is to understand how families, schools, and neighborhoods affect children's and adolescents' growth and development. The study will collect information on children and adolescents who are between the ages of birth and 17 years and a parent or caregiver. It will be conducted primarily by telephone, but some information may be collected during a home visit by a field interviewer. This project depends on information on the real lives of real people, so it would not be possible without the generosity of our study members.

Each study member is part of a group scientifically chosen to represent the nation as a whole, so each of our study families represents thousands of others in the U.S. This means you can never be replaced. Without your help, the study data will be less accurate and reliable.

We are offering the caregiver \$60 as a token of our appreciation for his/her time, interest, and effort for participating in the interview, and we would like to give \$20 to each older child (aged 12 to 17 years) who participates in an interview for his/her own contribution. We will speak to parents or caregivers about younger children. If your family is selected for a home visit, we will also interview children between 8 and 11 years old in person. These children will receive \$10 in appreciation for their contribution.

Your interviewer will call again to see if you are willing to schedule an interview. If you have any questions or would like to arrange an interview, you may also call us at our toll-free number: [REDACTED]. We hope to talk with you soon.

Sincerely,



Narayan Sastry, Ph.D.  
Associate Director, Panel Study of Income Dynamics  
and Director, Child Development Supplement  
University of Michigan

**Hard to Reach CP Letter (To be sent by Team Leader or Tracker)**

\*Date

\*CP First Name \*CP Last Name

\*CP Addr1

\*CP Add2

\*CP City, \*CP State \*CP Zip

Dear \*CP First \*CP Last:

The University of Michigan has an important need to contact \*R Title \*R First Name \*R Last Name in connection with a study being conducted for the National Institute of Child Health and Human Development.

When we spoke to your \*CP Relationship to R a few years ago \*he/she gave us your name as the person most likely to always know how to reach \*him/her.

We have not been able to reach your \*CP Relationship to R and we are asking for your help. Please call our office at our toll-free number, [REDACTED].

If you have any hesitancy about giving information to us, perhaps you can contact \*R Title \*R Last Name and let \*him/her know we are trying to reach him/her. \*He/She expects to hear from us and may prefer to call our office \*himself/herself.

Thank you for your help.

Sincerely,

---

Field Interviewer

Survey Research Center

The University of Michigan

**Hard to Reach Informant Letter (To be sent by Team Leader or Tracker)**

\*Date

\*Inf First Name \*Inf Last Name

\*Inf Addr1

\*Inf Addr2

\*Inf City, \*Inf State \*Inf Zip

Dear \*Inf First \*Inf Last:

The University of Michigan has an important need to contact \*R Title \*R First Name \*R Last Name in connection with a study being conducted for the National Institute of Child Health and Human Development.

We have not been able to reach \*R Title \*R Last Name and we are asking for your help. Please call our office at our toll-free number, [REDACTED].

If you have any hesitancy about giving information to us, perhaps you can contact \*R Title \*R Last Name and let \*him/her know we are trying to reach \*him/her. \*He/She expects to hear from us and may prefer to call our office \*himself/herself.

Thank you for your help.

Sincerely,

---

Field Interviewer

Survey Research Center

The University of Michigan

**Hard to Reach R Letter (To be sent by Team Leader or Tracker)**

\*Date

\*First Name \*Last Name

\*Addr1

\*Addr2

\*City, \*State \*Zip

Dear \*First Name \*Last Name:

We recently sent you a letter regarding your participation in the Panel Study of Income Dynamics - Child Development Supplement conducted by the University of Michigan. Your cooperation is the most important part of this study.

We have tried to contact you on several occasions, but have been unable to reach you. We are writing to ask for your help in finding a good time to set up an interview appointment.

If you can suggest a good time for one of our interviewers to reach you, a better phone number to call, or if you have any questions about the study, please call our toll-free number: [REDACTED]. We hope you will help us out with this important project and look forward to speaking with you soon.

Thank you for your help and cooperation!

Sincerely,



Narayan Sastry, Ph.D.

Associate Director, Panel Study of Income Dynamics

and Director, Child Development Supplement

University of Michigan

## **Appendix U. PCG Physical Measurement Instruction Sheet**

### **RECORDING SHEET FOR HEIGHT, WEIGHT, AND WAIST CIRCUMFERENCE**

During your interview, the interviewer will ask for the height and weight of you and your children aged 2 years and older. The interviewer will also ask for your waist circumference. Please use this form to record each person's information before your interview. There is no need to keep this sheet after your interview.

#### Weight

Please weigh yourself and your children on a standard scale. (A bathroom scale or a scale at the gym or a doctor's office will work well.) Place the scale on a hard, flat surface. Remove shoes and any heavy coat or sweater, and empty pockets before stepping on the scale. Please note whether you are measuring weight in pounds or kilograms, and record weight to the nearest half-pound or quarter-kilogram. If you do not have access to a scale, please write the weight from any recent weighing, such as a visit to the doctor's office.

#### Height

Please use the enclosed steel tape measure, Post-It notes, triangle rafter square, and pencil to measure your height and your children's height if they are aged 2 years or older and can stand on their own. Use the following steps to measure each person's height:

1. Find a section of blank, flat wall without rugs or carpeting.
2. Remove shoes and hats.
3. The person should stand with his/her back against the wall.
4. Place a Post-It note on the wall by the top of the person's head.
5. Make sure the person is standing straight and his or her back is against the wall.
6. Place the triangle rafter square directly against the wall on top of his or her head.
7. Using the bottom of the rafter square, mark the height on the Post-It note with a pencil, and ask the person to step away.
8. Use the steel measuring tape to find the person's height to the nearest centimeter or tenth of an inch.
9. Write the person's height on their line on this sheet.
10. Ask a family member or friend for help to measure your own height.



**PLEASE RECORD MEASUREMENTS ON THE OTHER SIDE**

Providing this information is voluntary, and all information you provide will remain confidential. There is no penalty if you choose not to provide this information.

Name	Height	Height measures in centimeters or inches? (circle one)	Weight	Weight measured in pounds or kilograms? (circle one)	Where weight was measured (home, doctor's office, etc.)	Date when measurements were taken (month/day/year)
		Centimeters/ Inches		Pounds/ kilograms		-- / -- / ----
		Centimeters/ Inches		Pounds/ kilograms		-- / -- / ----
		Centimeters/ Inches		Pounds/ kilograms		-- / -- / ----
		Centimeters/ Inches		Pounds/ kilograms		-- / -- / ----
		Centimeters/ Inches		Pounds/ kilograms		-- / -- / ----
		Centimeters/ Inches		Pounds/ kilograms		-- / -- / ----
		Centimeters/ Inches		Pounds/ kilograms		-- / -- / ----
		Centimeters/ Inches		Pounds/ kilograms		-- / -- / ----
		Centimeters/ Inches		Pounds/ kilograms		-- / -- / ----
		Centimeters/ Inches		Pounds/ kilograms		-- / -- / ----

Primary caregiver's waist circumference

To measure your waist circumference, please complete the following steps:

1. Remove any bulky garments.
2. Hold one end of the soft tape measure at your navel.
3. Wrap the soft tape measure all the way around your waist, bringing the tape measure back to your navel.
4. Your waist circumference is measured at the point where the length of tape measure around your waist meets the end held at your navel.
5. Record your waist circumference (measured in centimeters or to the nearest tenth of an inch) below.

Waist circumference: \_\_\_\_\_ measured in centimeters or inches? (circle one): CENTIMETERS / INCHES

## Appendix V: PCG Initial Mailing Letters

**For sample who are not eligible for in-home components (To be sent by Ann Arbor)**

\*Date

Dear \*First Name \*Last Name:

Thank you for agreeing to participate in the Panel Study of Income Dynamics – Child Development Supplement conducted by the University of Michigan. Your cooperation is the most important part of this study. More information is available in the enclosed Interview Information Sheet.

Prior to your telephone interview, we would like you to administer some measurements for yourself and each of your children per the instruction on the Physical Measures Form. Some of the materials you will need to administer the measurements are enclosed:

- Triangle Rafter Square
- Measuring Tape
- Post-it Notes
- Pencil
- Recording Sheet for Height, Weight, and Waist Circumference

\*Note: You may keep the items listed above.

Enclosed are materials you and/or your children will need during your telephone interviews:

- Respondent Booklet for Primary Caregiver Interview
- Completed Recording Sheet for Height, Weight, and Waist Circumference
- Respondent Booklet for Child/Adolescent Interview

In addition, we are asking that you complete the following and return to Ann Arbor in the enclosed pre-addressed postage paid envelope:

- Green Weekday Time Diary for each child: A targeted date to complete the weekday time diary is noted on the front cover of each time diary
- Yellow Weekend Time Diary for each child: A targeted date to complete the weekend time diary is noted on the front cover of each time diary
- Primary caregiver's written consent to request the release of own birth record information (white paper)
- Primary caregiver's written consent to request the release of child's birth record information (white paper)
- Primary caregiver's written consent to request the release of school record information (white paper)

\*Note: An example time diary example and instruction booklet has been enclosed to assist in completing the time diaries.

We have also supplied you with a list of a few available resources in the document titled "National Hotline Numbers."

In appreciation for your participation in our study, we will send you, the primary caregiver, a check for \$60 when your telephone interview is complete and an additional \$10 for each completed pair of child time diaries we receive in Ann Arbor. Children ages 12-17 will receive a payment of \$20 upon completion of their telephone interview. If you have any questions or concerns, please call us at our toll-free number: [REDACTED]. We look forward to speaking to you soon.

Sincerely,



Narayan Sastry, Ph.D.  
Associate Director, Panel Study of Income Dynamics  
and Director, Child Development Supplement University  
of Michigan

**For sample who are eligible for in-home components (To be sent by Ann Arbor)**

\*Date

Dear \*First Name \*Last Name:

Thank you for agreeing to participate in the Panel Study of Income Dynamics – Child Development Supplement conducted by the University of Michigan. Your cooperation is the most important part of this study. More information is available in the enclosed Interview Information Sheet.

Enclosed are materials you and/or your children will need during your telephone interviews:

- Respondent Booklet for Primary Caregiver Interview
- Respondent Booklet for Child/Adolescent Interview

In addition, we are asking that you complete the following and return to Ann Arbor in the enclosed pre-addressed postage paid envelope or hand-deliver to your interviewer during your in-home visit:

- Green Weekday Time Diary for each child: A targeted date to complete the weekday time diary is noted on the front cover of each time diary.
- Yellow Weekend Time Diary for each child: A targeted date to complete the weekend time diary is noted on the front cover of each time diary.
- Primary caregiver's written consent to request the release of own birth record information (white paper)
- Primary caregiver's written consent to request the release of child's birth record information (white paper)
- Primary caregiver's written consent to request the release of school record information (white paper)

\*Note: An example time diary example and instruction booklet has been enclosed to assist in completing the time diaries.

We have also supplied you with a list of a few available resources in the document titled "National Hotline Numbers."

In appreciation for your participation in our study, we will send you, the primary caregiver, a check for \$60 when your telephone interview is complete and an additional \$10 for each completed pair of child time diaries we receive in Ann Arbor. Children ages 12-17 will receive a payment of \$20 upon completion of their telephone interview and children ages 8-11 will receive \$10 upon completion of an in-person interview. If you have any questions or concerns, please call us at our toll-free number: [REDACTED] We look forward to speaking to you soon.

Sincerely,



Narayan Sastry, Ph.D.  
Associate Director, Panel Study of Income Dynamics  
and Director, Child Development Supplement University  
of Michigan