

# CHIS 2023 Child Korean CATI Questionnaire

Version 3.02 August 29, 2024 (Children Ages 0-11 Answered by Adult Proxy Respondent)

### **Collaborating Agencies:**

- UCLA Center for Health Policy Research
- California Department of Health Care Services
- California Department of Public Health

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## Guide to Questionnaire Formatting

The following are from the CHIS Child questionnaire, slightly modified and in no given order.

Legend (each item is identified only once)

Programming note	Defines a skip pattern or text display for the subsequent question(s).
QID	Designates location of question, i.e. 'QC23_A2': Child questionnaire, Section A,
	question #2. The question # in the QID denotes question order. This may vary
	between survey cycles.
Var ID	Unique ID of each question. This generally stays the same between survey
	cycles. This variable name correlates with the name found in the data file.
Lowercase text	On CATI, this text is read to the respondent.
Uppercase text	On CATI, this text is NOT read to the respondent.
If Needed statement	On CATI, this text is only read if interview deems it helpful for respondent.
Interviewer Note	On CATI, this serves as additional instruction for the interviewer and is not read
	at loud.
Range	On CATI, this text is not read. SR: indicates soft range- allowable entry but will
	prompt verification message. HR: indicates hard range- not an allowable entry.
Skip note	Defines skip patterns dependent on the responses of the current question.
Dynamic text	{} and () Denotes that text is automatically filled based on previous
	responses.

## 'QC23\_A5' What is {his/her} date of birth?

CA2

0	JANUARY	1
0	FEBRUARY	2
0	MARCH	
0	APRIL	4
0	MAY	5
0	JUNE	
0	JULY	7
0	AUGUST	
0	SEPTEMBER	
0	OCTOBER	
0	NOVEMBER	
0	DECEMBER	
0	REFUSED	7
0	DON'T KNOW	
	DAY [Range: 1-31]	
0	REFUSED	7
0	DON'T KNOW	8
	YEAR [Range: 2006-2011]	
<u>o</u>		7
Ō	DON'T KNOW	8

PROGRAMMING NOTE 'QC23\_A14':

IF CAGE < 5 YEARS GO TO 'QC23\_A17';

ELSE CONTINUE WITH 'QC23\_A14' AND IF CAGE = 5 YRS DISPLAY "Not including pre-school or nursery school,"

'QC23_A14' {Not including pre-school or nursery school.} Did (CHILD) attend school last week?  CA42  O YES		,
O YES       1 [GO TO 'QC23_A16']         ○ NO       2         ○ ON VACATION       3         ○ HOME SCHOOLED       4 [GO TO 'QC23_A17']         ○ REFUSED       -7         ○ DON'T KNOW       -8     (QC23_A8' How old is {he/she}?  CA3  [INTERVIEWER NOTE: FOR AGES ABOVE 4 YRS OR 48 MO, DO NOT RECORD MONTHS OR PARTIAL YRS]  YEARS  MONTHS  REFUSED       -7         ○ REFUSED       -7         ○ DON'T KNOW       -8         'QC23_A9' About how tall is (CHILD) now without shoes?         CA4       [IF NEEDED, SAY: "Your best guess is fine."]         — FEET       INCHES         — CENTIMETERS       2         ○ FEEL/INCHES       1         ○ CENTIMETERS       2         ○ REFUSED       -7		{Not including pre-school or nursery school,} Did (CHILD) attend school last week?
QC23_A8'       How old is {he/she}?         CA3       [INTERVIEWER NOTE: FOR AGES ABOVE 4 YRS OR 48 MO, DO NOT RECORD MONTHS OR PARTIAL YRS]         ————————————————————————————————————	CA42	O NO
[INTERVIEWER NOTE: FOR AGES ABOVE 4 YRS OR 48 MO, DO NOT RECORD MONTHS OR PARTIAL YRS]		O REFUSED7
[INTERVIEWER NOTE: FOR AGES ABOVE 4 YRS OR 48 MO, DO NOT RECORD MONTHS OR PARTIAL YRS]	'QC23_A8'	How old is {he/she}?
MONTHS	CA3	
O DON'T KNOW8  'QC23_A9' About how tall is (CHILD) now without shoes?  [IF NEEDED, SAY: "Your best guess is fine."] FEETINCHESCENTIMETERS  O FEEL/INCHES		
[IF NEEDED, SAY: "Your best guess is fine."]  FEET INCHES CENTIMETERS  O FEEL/INCHES		
[IF NEEDED, SAY: "Your best guess is fine."]  FEET INCHES CENTIMETERS  O FEEL/INCHES	'QC23_A9'	About how tall is (CHILD) now without shoes?
INCHES CENTIMETERS  O FEEL/INCHES	CA4	[IF NEEDED, SAY: "Your best guess is fine."]
O FEEL/INCHES		
O CENTIMETERS2 O REFUSED7		CENTIMETERS
		O CENTIMETERS2 O REFUSED7

## **Table of Contents**

SECTION A: DEMOGRAPHICS PART I, HEALTH CONDITIONS	5
Gender	5
Age	6
Height and Weight	7
Breastfeeding	8
School Attendance	9
General Health	10
Asthma	10
Other Conditions	13
SECTION B: DENTAL HEALTH	16
Delays in Care (Dental)	20
SECTION CV: COVID-19	21
SECTION D: HEALTH CARE ACCESS AND UTILIZATION	23
Usual Source of Care	23
Emergency Room Visit	23
Visits to Medical Doctor	24
Personal Doctor	24
Care Coordination	25
Developmental Screening	25
Timely Appointments	27
Communication Problems with a Doctor	28
Delays in Care	29
SECTION F: PARENTAL INVOLVEMENT	33
Park Use	33
First 5 California: 'Talk, Read, Sing Program'	34
First 5 California: Kit for New Parents	36
SECTION G: CHILD CARE AND SOCIAL COHESION	38
Child Care	38
SECTION H: DEMOGRAPHICS, PART II	41
Race/Ethnicity	41
Country of Birth (Mother)	47
Country of Birth (Father)	49
SECTION H: DEMOGRAPHICS, PART III	51
Follow-up and Close	51

NOTE: Please consult the CHIS 2021 Data Dictionaries for additional information on variables, the population universe answering a specific question, and data file content.

## **SECTION A: DEMOGRAPHICS PART I, HEALTH CONDITIONS**

Gender					
PROGRAMMIN SET CADATE =	CURRENT	DATE (YYYYMMDD);	T (OOO) AAL -OFNIDERS AND SKID TO		
'QC23_A5'; ELSE CONTINI			T 'QC23_A1' =GENDER6 AND SKIP TO		
'QC23_A1'	Some of the questions are based on (CHILD's) characteristics, like their age. First, I will ask you some background questions. What sex was {CHILD's name} assigned at birth, on {CHILD's name's} original birth certificate?				
CA1B			성에 기반합니다. 먼저 몇 가지 배경 질문을 출생 증명서에 어떤 성별이 지정되었습니까?		
CAIB		Female 여성			
	•	Male 남성 Don't know			
	O	모름 Prefer not to answer 대답하고 싶지 않음	9		
'QC23_A2'	What is {ch categories)		P (NOTE: CATI interviewers should read all		
CA73	{귀하/[자니	f의 이름]}의 현재 성별은 무	엇입니까?		
<u> </u>	O	Female 여성			
	0	Male 남성			
		Transgender 트랜스젠더 Non binary			
		논바이너리 I use a different term ( 다른 용어를 사용함: ()			
		다른 용어를 사용함: () Don't know 모름			
	O	Prefer not to answer 대답하고 싶지 않음	9		
'QC23_A3'	What is you	ur (CHILD)'s current gender i	dentity?		
CA76	(CHILD)의	현재 성 정체성은 어떻게 됩	· 기까?		
	0	SPECIFY: ( REFUSED DON'T KNOW	7		

### PROGRAMMING NOTE 'QC23 A4':

IF ['QC23\_A1' = 1 (MALE AT BIRTH) AND 'QC23\_A2' = 2, 3, 5, 7] OR ['QC23\_A1' = 2 (FEMALE AT BIRTH) AND 'QC23\_A2' = 1, 3, 5, 7] THEN CONTINUE WITH 'QC23\_A4'; ELSE SKIP to 'QC23\_A5'

'QC23\_A4'

Just to confirm, {you were/[child's name] was} assigned {INSERT RESPONSE FROM 'QC23\_A1'} at birth and now describes {yourself/themself} as {INSERT ALL RESPONSES FROM 'QC23\_A2'}. Is that correct?

잠시 확인하겠습니다. {귀하는/[자녀의 이름]은(는)} 출생 시 {INSERT RESPONSE FROM 'QC23\_A1'}이었으며 지금은 자신의 성 정체성이 {INSERT ALL RESPONSES FROM 'QC23\_A2'}(이)라고 말씀하셨습니다. 맞습니까?

**CA74** 

$\mathbf{O}$	YES	1
	NO	
	REFUSED	
	DON'T KNOW	

Age 'QC23 A5'

What is {his/her} date of birth?

이 아이의 생년월일은 언제입니까?

CA2

O	JANUARY	1
$\mathbf{O}$	FEBRUARY	
0	MARCH	
$\mathbf{O}$	APRIL	
$\mathbf{O}$	MAY	
$\mathbf{O}$	JUNE	
0	JULY	
$\mathbf{O}$	AUGUST	
$\mathbf{O}$	SEPTEMBER	
$\mathbf{O}$	OCTOBER	
$\mathbf{O}$	NOVEMBER	
$\mathbf{O}$	DECEMBER	
$\mathbf{O}$	REFUSED	
O	DON'T KNOW	
	DAY [Range: 1-31]	
$\overline{\mathbf{o}}$		7
$\mathbf{O}$	DON'T KNOW	
	YEAR [Range: 2006-2011]	
$\overline{\mathbf{o}}$	REFUSED	7
$\mathbf{O}$	DON'T KNOW	8

### PROGRAMMING NOTE 'QC23\_A6':

SET CHILD AGE='QC23 A5';

IF CHILD AGE > 11, CONTINUE WITH 'QC23\_A6';

ELSE GO TO 'PN\_QC23\_A8'

'QC23 A6' Just to confirm, you said that (CHILD) is older than 11 years?

확인을 위해 여쭤봅니다. (CHILD)(이)가 11살보다 더 나이가 많다고 말씀하신 것이

	맞습니까 <b>?</b>				
CA2A	O	YES		1	[GO TO 'QC23_A7' GO TO ADULT 'SECTION B']
	O	REFUSED		2 7 8	0201101121
'QC23_A7'					
C_AGEEXI	Τ				
	Thank you	for confirming. I	Now, we'd like to	ask questions abou	ıt you.
	확인해주셔	서 감사합니다.	이제 귀하에 관하	해 질문을 드리겠습니	다.
<b>'QC23_A5'</b> MC	= -7 OR -8 (I )NTH= MON )OR IF <b>'QC23</b>	REFÜSED/DON TH OF INTERV		C <b>23_A5</b> ' MONTH OI	<i>NOT ANSWERED AND</i> R YEAR NOT
'QC23_A8'	How old is	[he/she}?			
CA3	,	(는) 몇 살입니 <i>끼</i> WER NOTE: Fo		VF 4 YRS OR 48 MG	D, DO NOT RECORD
		OR PARTIAL Y		VE 4 110 010 40 III.	5, 50 NOT RECORD
		···································	YEARS MONTHS		
	<b>O</b>			7 8	
Height and We 'QC23_A9'	•	tall is (CHILD) r	now without sho	es?	
CA4	(CHILD) 은	(는) 현재 신발을	을 신지 않았을 때	신장이 대략 얼마나	됩니까?
CA4	[IF NEEDED, SAY: "Your best guess is fine."]				
	정확히 모르	시면 비슷하게	라도 말씀해 주시	]면 됩니다.	
		FEET INCHES			
		CENTIMET	ERS		
	0 0	CENTIMETER	RS	1 2 7	

'QC23_A10'	About how much does (CHILD) weigh now without shoes?					
	(CHILD) 은(는) 현재 신발을 신지 않았을 때 체중이 대략 얼마나 됩니까?					
CA5	[IF NEEDED, SAY: "Your best guess is fine."]					
	정확히 모르시면 비슷하게라도 말씀해 주시면 됩니다.					
	POUNDS					
	KILOGRAMS					
	O POUND       1         O KILOGRAMS       2         O REFUSED       -7         O DON'T KNOW       -8					
Breastfeeding						
IF CAGE > 3 YE	IG NOTE 'QC23_A11' : EARS GO TO PROGRAMMING NOTE 'QC23_A14' ; .≤3 YEARS CONTINUE WITH 'QC23_A11'					
'QC23_A11'	Was (CHILD) ever breastfed or fed breast milk?					
	(CHILD)(을/를) 키울 때 우유가 아니라 모유, 즉 엄마 젖을 먹인 적이 있습니까?					
CA14	O YES1					
	<ul> <li>NO</li></ul>					
'QC23_A12'	How old was (CHILD) when {he/she} stopped breastfeeding altogether?					
CA15	모유를 끊었을 때 (CHILD) (이)/는 몇 살이었습니까?					
	AGE IN YEARS AGE IN MONTHS					
	O STILL BREASTFEEDING					
'QC23_A13'	How old was (CHILD) when you began giving {him/her} baby food or other solid foods?					
CA16	귀하가 (CHILD) 에게 이유식이나 고형식을 먹이기 시작한 것은 이 아이가 몇 살 때 였습니까?					
CATO	[IF NEEDED SAY: "Solid food is anything other than milk, formula, juice, water, herbs or teas."]					
	고형식이란 우유, 분유, 주스, 물, 약초 또는 차를 제외한 기타 식품을 말합니다.					
	MONTHS					

	•	NO SOLID FOOD YET93	
	$\mathbf{O}$	REFUSED7	
	O	DON'T KNOW8	
School Attenda	nce		
<b>PROGRAMMIN</b>			
IF CAGE < 5 YE	EARS GO TO	O <b>'QC23_A17'</b> ;	
<b>ELSE CONTINU</b>	JE WITH 'Q	<b>C23_A14</b> ' AND IF CAGE = 5 YRS DISPLAY "Not in	ncluding pre-school or
nursery school,	,,		
'QC23_A14'	{Not including	ng pre-school or nursery school,} Did (CHILD) atter	nd school last week?
_	•		
	{프리스쿨이	나 유아원은 제외하고} (CHILD) (이)는 지난 주에 흐	·교에 다녔습니까 <b>?</b>
CA42	, –		
	O	YES1	[GO TO 'QC23_A16']
		NO	[00:0 40200]
	Ŏ	ON VACATION	
	_	HOME SCHOOLED4	[GO TO 'QC23_A17']
		REFUSED7	[00 10 4020_A17]
	Õ	DON'T KNOW8	
	•	DOINT KINOW	
PROGRAMMIN	IC NOTE (O	C22 A451	
IF CAGE - 5 TI	NO DISPLAT	"Not including pre-school or nursery school,"	
(0000 445)	(NI = 4 i = = loosli		
'QC23_A15'		ng pre-school or nursery school,} Did (CHILD) atter	id school during the last
	school year	<i>!</i>	
	(= -1) 2 7 4	나 이사이스 레이크크 (OLIU D) (A)나 키나 됩니다	제 원크제 리더스디피
	{쓰리스물이	나 유아원은 제외하고} (CHILD) (이)는 지난 학년도	에 악교에 다녔습니까
CA43			
	$\mathbf{O}$	YES1	
		NO2	
		HOMESCHOOLED3	[GO TO 'QC23_A17']
	•	REFUSED7	
	•	DON'T KNOW8	
<b>PROGRAMMIN</b>	IG NOTE 'Q	C23_A16' :	
		$IDED$ SCHOOL LAST WEEK) OR 'QC23_A15' = '	I (ATTENDED SCHOOL
		NUE WITH <b>'QC23_A16'</b> ;	•
,		MING NOTE 'QC23_A17'	
'QC23_A16'	What is the	name of the school (CHILD) goes to or last attended	ed?
Q020_70	· · · · · · · · · · · · · · · · · · ·	riamo or the contest (critiza) good to or last attende	
	(CHILD) o)	(가)현재 다니고 있거나 마지막으로 다녔던 학교의 여	이름은 무엇입니까?
CB22	(OTTLE) II		
CBZZ	(INTEDVIE	WED NOTE: DECORD VERRATIM ASK FOR SRI	ELLING IE NECESSARVI
	[IN I EKVIE	WER NOTE: RECORD VERBATIM, ASK FOR SP	ELLING IF NECESSART
		NAME OF SO	CHOO!
		NAINE OF SC	JI IOOL
	$\sim$	PRE-SCHOOL/DAYCARE1	
	0		
	0	KINDERGARTEN	
	0		
	_	INTERMEDIATE	
	$\circ$	JUNIOR HIGH5	
	•	MIDDLE SCHOOL6	

ELSE GO TO 'QC23\_A23'

	) ) )	CHARTER OTHER (SPECI CHILD NOT IN S REFUSED DON'T KNOW	FY: SCHOOL	) 91 00 7	
General Health 'QC23_A17'	In general,	would you say (C	HILD)'s health is	excellent, very go	od, good, fair or poor?
CA6		(CHILD) (이)의 7 그런대로 괜찮습니		히 좋습니까, 상당히 않습니까 <b>?</b>	기좋습니까, 좋은
	0 0 0 0	EXCELLENT VERY GOOD GOOD FAIR POOR REFUSED DON'T KNOW			
Asthma 'QC23_A18'	Has a docto	or <u>ever</u> told you th	at (CHILD) has a	asthma?	
CA12		, , ,		을 들은 적이 있습니	<i>┧까</i> ?
	O	YES NO REFUSED DON'T KNOW		2 7	[GO TO 'QC23_A29'] [GO TO 'QC23_A29'] [GO TO 'QC23_A29']
'QC23_A19'	Does {he/sl	ne} still have asth	ma?		
CA31	(CHILD) (°	)/는 아직도 천식·	이 있습니까?		
	) ) )	YES NO REFUSED DON'T KNOW		2 7	
'QC23_A20'	During the	past 12 months, h	as {he/she} had	an episode of asth	ıma or an asthma attack?
CA32	지난 12개월	] 동안, 이 아이가	천식 증상이 있었	었던 적이 있습니까 <b>'</b>	?
	O	YES NO REFUSED DON'T KNOW		2 7	
PROGRAMMIN IF 'QC23_A19' MOS), CONTIN	= 1 (YES, S	TILL HAS ASTHI	//A) OR <b>'QC23_</b> /	<b>A20</b> ' = 1 (YES, EF	PISODE IN LAST 12

'QC23\_A21' During the <u>past 12 months</u>, has (CHILD) had to visit a hospital emergency room because of {his/her} asthma?

0422	지난 12 개월	월 동안, (CH	ILD) (이)/가	천식 때문에	병원 응급실에	간 적이 있습니까?	
CA33	O	NOREFUSED	)		1 2 7 8	[GO TO 'QC23_A23'] [GO TO 'QC23_A23'] [GO TO 'QC23_A23']	İ
'QC23_A22'			o a hospital o s/her} doctor		oom for {his/he	er} asthma because you	
		•	·세가 있을 때 테려간 적이		기의주치의나 전	선문의를 볼 수 없었기	
CA48	[ENTER 3 (		VOLUNTEE	RS THAT HI	E/SHE DOESN	N'T HAVE A DOCTOR. [	00
	•	NO DOESN'T REFUSED	HAVE DOC	TOR	1 2 3 7 8		
'QC23_A23'	Is (CHILD) or given to			cation to con	trol {his/her} a	sthma that was prescribe	d
	(CHILD) (이 복용하고 있	,	다스리기 위	해 의사가 처	방하거나 제공	'해 준 약을 현재 매일	
CA12A			his includes r quick relie		nedicine and	inhalers. This is differe	nt
				시는 약을 둘 는 흡입제와는		괄씀해 주십시오. 하지만,	
	) ) )	NOREFUSED	 )		1 2 7 8		
PROGRAMMIN IF 'QC23_A19' MOS), GO TO ' ELSE CONTINI	= 1 (YES, S' 'QC23_A26'	TILL HAS A ;	STHMA) OF	₹ <b>'QC23_A2</b>	<b>0</b> ' = 1 (YES, E	EPISODE IN LAST 12	
'QC23_A24'	During the pof {his/her}		<u>nths</u> , has (Cl	HILD) had to	visit a hospita	l emergency room becaus	se
CA41	O	YES			1	간 적이 있습니까?	
	O	REFUSED			2 7	[GO TO 'QC23_A26'] [GO TO 'QC23_A26']	ĺ

'QC23_A25'	Did you take (CHILD) to a hospital emergency room for {his/her} asthma because you were unable to see {his/her} doctor?			
0.440	(CHILD) (이)가 천식 증세가 있을 때 귀하가 아이의 주치의나 전문의를 볼 수 없었기때문에 병원 응급실로 데려간 간 적이 있습니까?			
CA49	[ENTER 3 ONLY IF R VOLUNTEERS THAT HE/SHE DOESN'T HAVE A DOCTOR. DO NOT PROBE.]			
	YES       1         NO       2         DOESN'T HAVE DOCTOR       3         REFUSED       -7         DON'T KNOW       -8			
'QC23_A26'	During the past 12 months, how many days of day care or school did (CHILD) miss due to asthma?			
CA34	지난 12개월 동안, 천식 때문에 (CHILD) (이)가 데이 케어나 학교에 나가지못했던 게 며칠이나 됩니까?			
CA34	NUMBER OF DAYS			
	<ul> <li>CHILD NOT IN DAYCARE OR SCHOOL 993</li> <li>REFUSED7</li> <li>DON'T KNOW8</li> </ul>			
'QC23_A27'	Have (CHILD'S) doctors or other medical providers worked with you to develop a plan so that you know how to take care of {his/her} asthma?			
0405	(CHILD) (이)의 담당 의사나 다른 의료 제공자가자녀분의 천식을 관리하는 방법을 알려주기 위해 귀하와 함께 천식 관리 계획서를 작성한 적이 있습니까?			
CA35	YES       1         NO       2       [GO TO 'QC23_A29']         REFUSED       -7       [GO TO 'QC23_A29']         DON'T KNOW       -8       [GO TO 'QC23_A29']			
'QC23_A28'	Do you have a written or printed copy of this plan?			
CA50	이 천식 관리계획서 사본을 갖고 계십니까?			
37.00	[IF NEEDED, SAY: "This can be an electronic or hard copy."]			
	전자 사본, 인쇄 사본 모두 해당됩니다.			
	YES       1         NO       2         REFUSED       -7         DON'T KNOW       -8			

CA17

Other Condition 'QC23_A29'	ns Does (CHILD) currently have any physical, behavioral, or menta prevent {him/her} from doing childhood activities usual for {his/h	
CA7	(CHILD) (이)는 자기 나이에 맞는 정상 활동을 어렵게 하거나 지 또는 행동 상의 증세를 갖고 있습니까?	장을 주는 신체적, 정신적,
CAT	O YES       1         O NO       2         O REFUSED       -7         O DON'T KNOW       -8	[GO TO 'QC23_A31'] [GO TO 'QC23_A31'] [GO TO 'QC23_A31']
'QC23_A30'	What condition does (CHILD) have?	
	{CHILD}(이)는 어떤 건강상의 문제를 가지고 있습니까?	
CA10A	[CODE ALL THAT APPLY]	
	[PROBE: "Any others?"]	
	[PROBE: '다른 건강 상태도 있습니까?']	
	□ ADD/ADHD.       1         □ ASPERGER'S SYNDROME       2         □ AUTISM.       3         □ CEREBRAL PALSY.       4         □ CONGENITAL HEART DISEASE       5         □ CYSTIC FIBROSIS       6         □ DIABETES       7         □ DOWN SYNDROME       8         □ EPILEPSY       9         □ DEAFNESS OR OTHER HEARING       10         □ MENTAL RETARDATION, OTHER THAN       10         □ MENTAL RETARDATION, OTHER THAN       11         □ MUSCULAR DYSTROPHY       12         □ NEUROMUSCULAR DISORDER       13         □ ORTHOPEDIC PROBLEM (BONES OR       10         JOINTS)       14         □ SICKLE CELL ANEMIA       15         □ BLINDNESS OR OTHER VISION PROBLEM 16       16         □ OTHER (SPECIFY:       9         □ ORFUSED       -7         □ DON'T KNOW       -8	
'QC23_A31'	Does (CHILD) <u>currently</u> need or use medicine <u>prescribed</u> by a c vitamins?	doctor, other than
	은(는) 현재 비타민 외에 의사가 처방한 약을 필요로 하거나 복용	-하고 있습니까 <b>?</b>

[IF NEEDED, SAY: "This only applies to medications prescribed by a doctor. Overthe-counter medications such as cold or headache medication, or other vitamins, minerals, or supplements purchased without a prescription are not included."]

		니사가 처방한 약만 적용됩니다. 처방전 없이 구매한 네랄 혹은 건강보조제와 같은 비처방약은 포함되지 6	
	0 0	YES       1         NO       2         REFUSED       -7         DON'T KNOW       -8	[GO TO 'QC23_A34'] [GO TO 'QC23_A34'] [GO TO 'QC23_A34']
'QC23_A32'	Is {his/her} health cond	need for prescription medicine because of any med dition?	ical, behavior, or other
CA40	자녀는 의학	<sup></sup> 구적, 행동적, 또는 기타 건강 상태로 인해 약을 처방 !	받아야 합니까?
CA18	) ) )	YES       1         NO       2         REFUSED       -7         DON'T KNOW       -8	[GO TO 'QC23_A34'] [GO TO 'QC23_A34'] [GO TO 'QC23_A34']
'QC23_A33'	Is this a co	ndition that has lasted or is expected to last for 12 m	nonths or longer?
CA19	그 상태가 1	12개월 이상 지속되었거나 지속될 것으로 예상됩니까	}?
	) ) )	YES       1         NO       2         REFUSED       -7         DON'T KNOW       -8	
'QC23_A34'	Does (CHII therapy?	LD) need or get special therapy, such as physical, o	ccupational or speech
0400	(CHILD)은( 받고 있습니	(는) 물리 치료, 작업 치료, 또는 언어 치료와 같은 특~  까?	수 요법을 받아야 하거나
CA23	<b>O</b>	YES	[GO TO 'PN_QC23_B2']
	•	REFUSED7	[GO TO 'PN_QC23_B2']
	•	DON'T KNOW8	[GO TO 'PN_QC23_B2']
'QC23_A35'	Is {his/her} condition?	need for special therapy because of any medical, b	ehavior, or other health
CA24	자녀는 의학	· 학적, 행동적, 또는 기타 건강 상태로 인해 특수 요법을	을 받아야 합니까?
CA24	자녀는 의학 <b>O</b> <b>O</b>	가적, 행동적, 또는 기타 건강 상태로 인해 특수 요법을 YES1 NO2	[GO ТО
CA24	0	YES1	

'QC23_A36'	Is this a condition that has lasted or is expected	d to last for 12 months or longer?
------------	--	------------------------------------

그 상태가 12개월 이상 지속되었거나 지속될 것으로 예상됩니까?

#### **CA25**

$\mathbf{C}$	YES	1
	NO	
$\mathbf{c}$	REFUSED	7
$\circ$	DON'T KNOW	-8

## **SECTION B: DENTAL HEALTH**

### 'DENTAL INTRO'

Now we're going to ask about (CHILD)'s dental health

	Now we're going to ask about (Official)'s defital fleatiff.	
IF CAGE > 2 Y	<b>NG NOTE 'QC23_B2' :</b> EARS, GO TO <b>'QC23_B3'</b> ; UE WITH <b>'QC23_B2'</b>	
'QC23_B2'	These questions are about (CHILD)'s dental health. Does (C	HILD) have any teeth yet?
CC1B	다음 질문들은(CHILD) (이)의 치아 건강에 관한 겁니다. (CHIL	.D) (이)는 치아가 있습니까?
CCIB	O YES	
	O REFUSED7	
	O DON'T KNOW8	[GO TO 'PN_QC23_CV1']
'QC23_B3'	About how long has it been since your child last visited a dendental hygienists and all types of dental specialists.	tist or dental clinic? Include
COSD	자녀분이 가장 최근에 치과 의사에게 진료받거나 치과 클리닉 지났습니까? 치위생사 등 치과 계통 전문가를 모두 포함해서	
CC5B	<ul> <li>HAS NEVER VISITED</li></ul>	
	O MORE THAN 2 YEARS UP TO 5 YEARS AGO4	
	O MORE THAN 5 YEARS AGO	
	NG NOTE 'QC23_B4': THEN CONTINUE WITH 'QC23_B4'; QC23_B6'	
'QC23_B4'	How many times has your child received a dental service with	nin the last 12 months?
CB38	자녀는 지난 12개월 동안 치과 서비스를 몇 번이나 받았습니?	<b>ን</b> ት?
	<ul> <li>NONE</li></ul>	
	O FIVE TIMES OR MORE	•

	<b>O</b>	REFUSED DON'T KNOW		[GO TO 'QC23_B6'] [GO TO 'QC23_B6']
	2 THEN DI	IC23_B5': SPLAY "SERVICES"; EN DISPLAY "SERVICE"		
'QC23_B5'	Where did	your child receive the dental service{s} within	the last	12 months?
CB39	자녀는 지난	t 12개월 동안 어디서 치과 서비스를 받았습니	⊣까?	
	[CODE AL	L THAT APPLY]		
	0	FREE HEALTH/DENTAL EVENT DENTIST OFFICE HOSPITAL OTHER REFUSED DON'T KNOW	2 3 4 7	
'QC23_B6'		e you received educational information about for your child in the last 12 months?	oral hea	alth or preventive dental
CB40B	자녀의 치여	· 건강 또는 예방적 치과 치료에 대한 교육 정	보를 어	디서 받았습니까?
05405	[CODE AL	L THAT APPLY]		
	0	HAVE NOT RECEIVED ANY EDUCATIONAL INFORMATION	1 2 3 4 5 6 9 10 7 8	
WITH 'QC23_B ELSE SKIP TO IF 'QC23_B3' =	= 0 (HAD N 6 <b>7'</b> ; <b>'QC23_B8'</b> : 0 (HAS NE	EVER VISTED) or ≥ 3 (VISITED MORE THAN	N A YEA	R AGO) CONTINUE
'QC23_B7'	What is the months}?	e main reason your child has {never/not} visite	ed a dent	tist {in the past 12

Version 3.02

CB23

{지난 한 해 동안} 자녀분이 한 번도 치과에 가지 않은 주된 이유는 무엇 때문이었습니까?

		NO REASON TO GO/NO PROBLEMS       1         NOT OLD ENOUGH       2         TOO EXPENSIVE/NO INSURANCE       3         FEAR, DISLIKES GOING       4         DO NOT HAVE/KNOW A DENTIST       5         TRANSPORTATION PROBLEMS       6         NO DENTIST AVAILABLE/NO APPOINTMENT         AVAILABLE       7         DIDN'T KNOW WHERE TO GO       8         HOURS NOT CONVENIENT       9         SPEAK A DIFFERENT LANGUAGE       10         OTHER (SPECIFY:       91         REFUSED       -7         DON'T KNOW       -8
PROGRAMMIN F 'QC23_B3'= ELSE CONTIN	0, goto 'QC2	<b>3_B9</b> ';
QC23_B8'	Is there a pa	articular dentist or place you usually go to for (CHILD)'s dental care?
CC16B	(CHILD)의 🤊	치과 치료를 위해 주로 찾아가는 특정한 치과 의사나 치과 병원이 있습니까?
	<b>O</b>	YES
QC23_B9'	During the p	past 12 months, was there any time your child needed dental care, but you ford it?
CC17	지난 <b>12</b> 개월 적이 있었습	동안, (CHILD)에게 치과 치료가 필요했는데 돈이 없어서 치료를 받지 못한 니까?
CC17	O	YES
QC23_B10'	Do you now care?	have any type of insurance that pays for part or all of your child's dental
	귀하는 현재 종류라도 있	(CHILD)(이)의 치과 진료비의 전부 또는 일부를 부담하는 의료보험이 아무 으십니까?
CC7A		D: Include dental insurance, prepaid dental plans such as HMOs, or t plans such as Medi-Cal or Covered California]
	치과 보험, F 포함시키십기	HMO 같은 선불 치과 플랜, Medi-Cal 또는 Healthy Families 같은 정부 플랜을 시오.
	O	YES

	O	DON'T KNOW		8	[GO TO 'QC23_B14']
'QC23_B11'		any or all of the premit cost of any co-pays or			
CB35	가족분이 지	▶보험 플랜의 보험료 또 │불해야 하는 코페이(또 말아 주십시오.			
CB39	O	YES NOREFUSED DON'T KNOW		2 7	
'QC23_B12'	some portion	ne else, such as an emp on of the premium or co co-pays or deductibles	st for this dental insu	ırance pla	
CD26	비용을 일부		습니까? 귀하나 가족	족분이 지	보험 플랜의 보험료 또는 불해야 하는 코페이(또는 십시오.
CB36	O	YES NO REFUSED DON'T KNOW		2 7	[GO TO 'QC23_B14'] [GO TO 'QC23_B14'] [GO TO 'QC23_B14']
'QC23_B13'	For that de	ntal insurance plan, who	o else pays part of th	e cost?	
CB37		누가 치과 보험 플랜 비- L THAT APPLY]	용의 일정 부분을 내	주고 있나.	요?
		RESPONDENT'S CUI EMPLOYER OR UNIC SPOUSE'S CURREN' EMPLOYER OR UNIC SOMEONE ELSE MEDICARE MEDI-CAL (MEDICAII INDIAN HEALTH SER COVERED CALIFORI OTHER GOVERNMEI REFUSED DON'T KNOW	ONT OR FORMER ON  D) OR DENTI-CAL RVICE	23456910 RAM.87	
'QC23_B14'	Do you use	any free community or	public dental progra	ms for {C	CHILD}'s dental care?
CC7B	{CHILD}의 이용하십니	치과 치료를 위해 무료 : 까?	지역사회 또는 공공 🧦	치과 보건	프로그램을
	O	YES NO REFUSED		2	

Version 3.02

	O DON'T KNOW8	
Delays in Care	(Dental)	
IF ('QC23_A14 'QC23_B15';	NG NOTE 'QC23_B15': I' =1 OR 4) OR ('QC23_A15' =1 OR3) [CHILD ATTENDS SCHO PN_QC23_CV1'	OL] CONTINUE WITH
'QC23_B15'	During the past 12 months, did {he/she} miss any time from sch problem? Do not count time missed for cleaning or a check-up.	ool because of a dental
CC10D	지난 12개월 동안, (CHILD)가 치과 문제로 학교 수업을 빠진 적으또는 치과 검진으로 빠진 수업 시간은 포함시키지 마십시오	이 있습니까? 스케일링
CC18B	O YES	[GO TO 'PN_QC23_CV1']
	O DOESN'T ATTEND SCHOOL2	[GO TO 'PN_QC23_CV1']
	O REFUSED7	[GO TO 'PN_QC23_CV1']
	O DON'T KNOW8	[GO TO 'PN_QC23_CV1']
'QC23_B16'	How many days of school did (he/she) miss because of dental p	oroblems?
	{CHILD NAME /AGE/SEX}(이)가 치아에 문제가 생겨 학교에 기됩니까?	-지 못했던 날은 며칠이나
CC19	DAYS [0-200]	
	<ul> <li>LESS THAN ONE DAY</li></ul>	

## **SECTION CV: COVID-19**

	NG NOTE 'QC23_CV1': ER THAN 6 MONTHS, CONTINUE WITH 'QC23_CV1'; 'QC23_D1'
'QC23_CV1'	Has (CHILD) completed the primary vaccine series for COVID-19? Completed primary vaccine series means one of the following: Receiving two shots of the Pfizer or Moderna vaccine.
CCV1A	(자녀)가 코로나19에 대한 기본 백신 접종을 모두 완료했습니까? 기본 백신 접종 완료란 다음과 같은 경우입니다: 화이자 또는 모더나 백신 2회 접종.  〇 YES1
	O NO
IF 'QC23_CV1	NG NOTE 'QC23_CV2': '=1, CONTINUE WITH 'QC23_CV2'; D PROGRAMMING NOTE 'QC23_CV3'
'QC23_CV2'	Has (CHILD) received an additional dose or booster after the primary vaccine series?
CCV1B	(자녀)은(는) 기본 백신 접종 후에 추가 접종 또는 부스터 접종을 받았습니까?
	YES       1         NO       2         REFUSED       -7         DON'T KNOW       -8
	NG NOTE 'QC23_CV3': '=2, CONTINUE WITH 'QC23_CV3'; QC23_D1'
'QC23_CV3'	What are the reasons why (CHILD) has not completed the primary vaccine series for COVID-19?
	코로나19에 대한 기본 백신 접종을 (자녀가) 완료하지 않은 이유는 무엇입니까?
CCV2	[CODE ALL THAT APPLY]
	☐ I AM WORRIED ABOUT SIDE EFFECTS1☐ I THINK THE VACCINE WAS DEVELOPED TOO QUICKLY2
	☐ I DON'T KNOW ENOUGH ABOUT THE  VACCINE TO MAKE THE DECISION FOR MY  CHILD TO GET IT
	☐ I THINK A VACCINE FOR COVID-19 IS UNNECESSARY4
	☐ I DON'T BELIEVE IN VACCINES IN
	GENERAL5  I PLAN TO HAVE MY CHILD GET FULLY  VACCINATED  6

	SOMETHING ELSE, (SPECIFY:) 91
0	REFUSED7
$\mathbf{O}$	DON'T KNOW8

### SECTION D: HEALTH CARE ACCESS AND UTILIZATION

ı	Isual	Source	٥f	Care
·	วอนสเ	SOUTH	w	Cale

'QC23\_D1' The next questions are about where (CHILD) goes for health care.

지금부터는 (CHILD)(이)의 의료기관 방문에 관해 질문을 드리겠습니다.

Is there a place you <u>usually</u> take {him/her} to when {he/she} is sick or you need advice about {his/her} health?

자녀분이 아프거나 건강에 관한 조언이 필요할 때 보통 귀하가 아이를 데리고 가는 곳이 있습니까?

CD1

O	YES1	
	NO2	[GO TO
		PN_QC23_D3']
$\mathbf{O}$	DOCTOR/(HIS/HER) DOCTOR3	
$\mathbf{O}$	KAISER4	
$\mathbf{O}$	MORE THAN ONE PLACE5	
$\mathbf{O}$	REFUSED7	
O	DON'T KNOW8	

### PROGRAMMING NOTE 'QC23\_D2':

IF 'QC23\_D1' = 1, 5, -7, OR -8, DISPLAY "What kind of place do you take {him/her} to most often —a medical":

ELSE IF 'QC23\_D1' = 3 DISPLAY "Is {his/her} doctor in a private";

ELSE IF 'QC23\_D1' = 4, FILL 'QC23\_D2' = 1 AND GO TO 'PN\_QC23\_D3'

'QC23\_D2' {What kind of place do you take {him/her} to most often—a medical/ls {his/her} doctor a private} doctor's office, a clinic or hospital clinic, an emergency room, or some other place?

{자녀분을 가장 자주 데려가시는 곳은 개인 닥터 오피스, 클리닉, 종합병원, 응급실, 또는 기타 다른 곳 중 어디입니까? / 자녀분의 주치의는 개인 닥터 오피스, 클리닉, 종합병원, 응급실, 기타 다른 곳 중 어디에 소속되어 있습니까?}

CD3

$\mathbf{c}$	DOCTOR'S OFFICE/KAISER/OTHER HMO1
$\mathbf{c}$	CLINIC/HEALTH CENTER/HOSPITAL CLINIC 2
	EMERGENCY ROOM3
$\mathbf{c}$	SOME OTHER PLACE(SPECIFY:) 91
$\mathbf{c}$	NO ONE PLACE94
$\mathbf{c}$	REFUSED7
$\mathbf{c}$	DON'T KNOW8

### **Emergency Room Visit**

### PROGRAMMING NOTE 'QC23\_D3':

IF 'QC23\_A21' = 1 (YES WENT TO ER PAST 12 MONTHS FOR ASTHMA) OR IF 'QC23\_A24' = 1 (YES WENT TO ER PAST 12 MONTHS FOR ASTHMA), MARK YES ON 'QC23\_D3' AND GO TO 'QC23\_D4';

ELSE CONTINUE WITH 'QC23 D3'

'QC23\_D3' During the past 12 months, did (CHILD) visit a hospital emergency room?

지난 12 개월 동안, (CHILD) (이)가 병원 응급실에 간 적이 있습니까?

CD12	O YES
Visits to Medic 'QC23_D4'	al Doctor  During the past 12 months, how many times has (CHILD) seen any kind of medical doctor?
CD6	지난 12 개월 동안, (CHILD) (이)가 종류와 상관없이 의사의 진료를 받은 것은 몇 번입니까?
	TIMES [HR:0-365]
	O REFUSED7 O DON'T KNOW8
IF 'QC23_D4'	NG NOTE 'QC23_D5' : > 0, GO TO PROGRAMMING NOTE 'QC23_D6' ; 3_D4' = 0, -7, OR -8, CONTINUE WITH 'QC23_D5'
'QC23_D5'	About how long has it been since {he/she} last saw a medical doctor?
CD7	마지막으로 자녀분이 의사를 만난 것은 대략 얼마 전입니까?
<u> </u>	O ONE YEAR AGO OR LESS1
	O MORE THAN 1 YEAR UP TO 2 YEARS AGO2
	<ul><li>MORE THAN 2 YEARS UP TO 3 YEARS AGO3</li><li>MORE THAN 3 YEARS AGO4</li></ul>
	O NEVER
	O REFUSED7
	O DON'T KNOW8
'QC23_D6'	In the last 6 months, how often was it easy to get the care, tests or treatment [your child] needed?
	지난 6개월 동안 [귀하의 자녀]에게 필요한 진료, 검사 또는 치료를 손쉽게 받았던 적은어느 정도였습니까?
CD77	
	O NEVER1
	O SOMETIMES2 O USUALLY
	O ALWAYS4
	O NOT APPLICABLE5
	O REFUSED7
	O DON'T KNOW8
Personal Docto	or
PROGRAMMI	NG NOTE 'QC23_D7' :
IF 'QC23_D1'	= 1 OR 3 OR 4 OR 5 (HAS A USUAL SOURCE OF CARE), CONTINUE WITH 'QC23_D7';

'QC23\_D7' Does (he/she) have a personal doctor or medical provider who is {his/her} main provider?

ELSE SKIP TO PROGRAMMING NOTE PN 'QC2021 D8'

Version 3.02

OD22	이 자녀분의 담당 의료 제공자 역할을 하는 개인 의사나 의료 제공자가 있습니까?
CD33	[IF NEEDED, SAY: "This can be a general doctor, a specialist doctor, a physician assistant, a nurse, or other health provider."]
	여기에는 일반의, 전문의, 의사 보조원, 간호사, 또는 기타 의료제공자가 포함될 수 있습니다.
	YES       1         NO       2         REFUSED       -7         DON'T KNOW       -8
Care Coordinat	
IF 'QC23_D1' = DOCTOR) AND 'QC23_A29'=	NG NOTE 'QC23_D8': = 1, 3, 4, OR 5 (HAS USUAL SOURCE OF CARE) AND 'QC23_D7' = 1 (HAS PERSONAL D [ 'QC23_A19' =1 (HAS ASTHMA) OR 'QC23_A20' = 1 (HAD ASTHMA ATTACK) OR I (HAS OTHER CONDITION), CONTINUE WITH 'QC23_D8'; D PROGRAMMING NOTE 'PN_QC23_D9'
'QC23_D8'	Is there anyone at (CHILD's) doctor's office or clinic who helps coordinate {his/her} care with other doctors or services such as tests or treatments?
	(이)가 다니는 닥터 오피스나 클리닉에는 다른 의사로부터 진료, 또는 검사나 치료와 같은 의료서비스를 받을 수 있도록 도와주는 사람이 있습니까?
CD36	YES       1         NO       2         REFUSED       -7         DON'T KNOW       -8
Developmental	
IF CAGE < 1, S	NG NOTE 'QC23_D9' : SKIP to 'PN_QC23_D17' E≥ 1, CONTINUE WITH 'QC23_D9'
'QC23_D9'	Many professionals such as health providers, teachers and counselors do developmental screening tests. Tests check how a child is growing, learning and behaving compared with children of the same age.
	의사나 교사, 카운셀러 등 많은 전문가들은 발달 단계 검사를 하고 있습니다. 발달 단계 검사란 아이가 성장, 학습, 행동적인 면에 있어서 또래의 다른 아이들과 비교해서 어떻게 성장하고 있는지를 평가하는 것입니다.
	Did (CHILD)'s doctor, other health providers, teachers or school counselors ever do an assessment or tests of (CHILD)'s development?
CF40	(CHILD) (이)의 담당 의사나 다른 의료 제공자, 또는 교사나 학교의 카운셀러가 (CHILD) (이)의 발달에 대한 평가나 검사를 적이 있습니까?
<u> </u>	O YES

	O DON'T KNOW8
'QC23_D10'	Did {his/her} doctor, other health providers, teachers or school counselors ever have (CHILD) rollover, pick up small objects, stack blocks, throw a ball, or recognize different colors?
CF41	(CHILD) (이)의 담당 의사나 다른 의료제공자, 또는 교사나 학교의 카운셀러가 (CHILD) (이)에게 구르거나, 작은 물건을 집거나, 블록을 쌓거나, 공을 던지거나, 색깔을 구별해보라고 시킨 적이 있습니까?
CF41	YES       1         NO       2         REFUSED       -7         DON'T KNOW       -8
'QC23_D11'	Did they ever have you fill out a checklist about concerns you have about {his/her} learning, development, or behavior?
CF42	그러한 전문가들이 귀하에게 이 아이의 학습, 발달 또는 행동과 관련된 문제점에 대해 체크리스트를 작성하게 한 적이 있습니까?
CF42	O YES       1         O NO       2         O REFUSED       -7         O DON'T KNOW       -8
'QC23_D12'	Did they ever have you fill out a checklist of activities that (CHILD) can do, such as certain physical tasks, whether {her/she} can draw certain objects, or ways {he/she} can communicate with you?
	그러한 전문가들이 귀하에게 (CHILD) (이)가 할 수 있는 활동, 즉 이 아이가 특정한 물건을 그리는 것 같은 신체적인 작업, 또는 아이가 귀하와 의사소통을 하는 방법에 대한 체크리스트를 작성하게 한 적이 있습니까?
CF43	YES       1         NO       2         REFUSED       -7         DON'T KNOW       -8
'QC23_D13'	Did they ever ask if you have concerns about {his/her} learning, development, or behavior?
OF44	그러한 전문가들이 자녀분의 학습, 발달 또는 행동과 관련된 문제점에 대해 물어본 적이 있습니까?
CF44	YES       1         NO       2         REFUSED       -7         DON'T KNOW       -8
PROGRAMMII	NG NOTE 'QC23 D14' :

IF 'QC23\_A30' =1 (ADD/ADHD) OR 2 (ASPERGER'S) OR 3 (AUTISM) OR 8 (DOWN'S SYNDROME) OR 11 (NON-DOWN'S MENTAL RETADATION) GO TO 'QC23\_D15'; ELSE CONTINUE WITH 'QC23\_D14'

'QC23_D14'	Did a doctor or other professional ever note a concern about (CHILD) that should monitored carefully?	
OF45	의사나 다른 전문가가 (CHILD) (이) 에 대해 좀더 유심히 지켜봐야 할 문제가 있다. 우려를 표시한 적이 있습니까?	고
CF45	YES       1         NO       2         REFUSED       -7         DON'T KNOW       -8	
'QC23_D15'	Did they ever refer {him/her} to a specialist regarding his development?	
CE4C	의사나 다른 전문가가 자녀분의 성장 발달과 관련하여 전문의를 만나보라고 추천하적이 있습니까?	대 준
CF46	YES       1         NO       2         REFUSED       -7         DON'T KNOW       -8	
'QC23_D16'	Did they ever refer {him/her} for speech, language or hearing testing?	
	의사나 다른 전문가가 자녀분의 말하기, 언어 발달, 또는 청력 테스트와 관련하여 전문의를 만나보라고 추천해 준 적이 있습니까?	
CF47	O YES       1         O NO       2         O REFUSED       -7         O DON'T KNOW       -8	
Timely Appoint 'QC23_D17'	nents In the past 12 months, did you try to get an appointment to see (CHILD)'s doctor of medical provider within two days because (CHILD) was sick or injured?	or
CD55	지난 12개월 동안, (CHILD) (이)가 아프거나 다쳐서 담당의사 또는 의료 제공자와 이내에 진료 예약을 잡으려고 시도했던 적이 있으셨습니까?	이틀
СБЗЗ	[IF NEEDED, SAY: "Do not include emergencies."]	
	응급 상황은 포함시키지 마십시오.	
	O YES	יי
	O REFUSED7 [GO TO	_
	'PN_QC23_D19 O DON'T KNOW	_
'QC23_D18'	How often were you able to get an appointment within two days? Would you say	

예약을 이틀 이내에 할 수 있었던 경우가 얼마나 자주 있었습니까?

$\sim$	D 4 E
L	U45

$\mathbf{O}$	Never,	1
O	Sometimes,	2
O	Usually, or	3
	Always?	
	REFÚSED	
	DON'T KNOW	

#### Communication Problems with a Doctor

### PROGRAMMING NOTE 'QC23\_D19':

IF ['QC23\_D4' > 0 (HAD A DOCTOR VISIT IN THE PAST 12 MONTHS) OR 'QC23\_D5' = 1 OR 2 (SEEN A DOCTOR IN LAST 12 MONTHS OR 1-2 YEARS AGO)], CONTINUE WITH 'QC23\_D19'; ELSE GO TO 'QC23\_D24'

'QC23\_D19' The last time you saw a doctor for (CHILD), did you have a hard time understanding the doctor?

지난 번에 (CHILD)(이) 때문에 의사를 보았을 때 귀하께서는 의사가 하는 말이 알아듣기 힘들었습니까?

CD25

O	YES1	[GO TO 'PN_QC23_D21'
O	NO2	
O	NEVER ACCOMPANIED CHILD TO DOCTOR 3	
O	REFUSED7	
O	DON'T KNOW8	

### PROGRAMMING NOTE 'QC23\_D20':

IF 'QC23\_D19' = 2 (DID NOT HAVE A HARD TIME UNDERSTANDING THE DOCTOR) AND [INTERVIEW NOT CONDUCTED IN ENGLISH OR AH36 > 1 (ADULT R SPEAKS LANGUAGE OTHER THAN ENGLISH AT HOME)], CONTINUE WITH 'QC23\_D20';

SET CD31ENGL = ENGLSPAN TO STORE INTERVIEW LANGUAGE AT TIME 'QC23\_D20' WAS ASKED:

ELSE SKIP TO 'QC23\_D21';

'QC23\_D20' In what language does (CHILD)'s doctor speak to you?

자녀의 담당의사가 귀하와 대화할 때 어떤 언어를 사용합니까?

CD31

$\mathbf{O}$	ENGLISH	1	[GO TO 'QC23_D22']
$\mathbf{O}$	SPANISH	2	[GO TO 'QC23_D23']
$\mathbf{O}$	CANTONESE	3	[GO TO 'QC23_D23']
0	VIETNAMESE	4	[GO TO 'QC23 D23']
0	TAGALOG	5	[GO TO 'QC23 D23']
$\mathbf{O}$	MANDARIN	6	[GO TO 'QC23_D23']
$\mathbf{O}$	KOREAN	7	[GO TO 'QC23_D23']
0	ASIAN INDIAN LANGUAGES	8	[GO TO 'QC23 D23']
$\mathbf{O}$	RUSSIAN	9	[GO TO 'QC23_D23']
$\mathbf{O}$	OTHER (SPECIFY:	) 91	[GO TO 'QC23_D23']
0	REFUSED		[GO TO 'QC23 D23']
0	DON'T KNOW	8	ĪGO TO 'QC23 D23'Ī

### PROGRAMMING NOTE 'QC23 D21':

IF 'QC23\_D19' = 1 (HAD A HARD TIME UNDERSTANDING DOCTOR), CONTINUE WITH 'QC23\_D21';

ELSE SKIP TO	'QC23_D24	j .	
'QC23_D21'	Was this because you and the doctor spoke different languages?		
CD26	그게 귀하외	· 의사가 서로 다른 언어를 사용하기 때문이었습니까'	?
CD26	) ) )	YES       1         NO       2         REFUSED       -7         DON'T KNOW       -8	
'QC23_D22'	Did you nee	ed someone to help you understand the doctor?	
	의사가 하는	- 말을 알아듣기 위해 누군가의 도움이 필요했습니까	?
CD27	<b>O</b>	YES	[GO TO 'QC23_D23'] [GO TO 'QC23_D23'] [GO TO 'QC23_D23']
'QC23_D23'	Who was this person who helped you understand the doctor?		
CD28		MINOR CHILD (UNDER AGE 18)	
Delays in Care 'QC23_D24'		past 12 months, did you either delay or not get a med for (CHILD)?	dicine that a doctor
CE1		실 동안 의사가 (CHILD) (이)에게 처방해준 약을 사는 :   있습니까?	것을 미루거나 아예 사지
	) ) )	YES       1         NO       2         REFUSED       -7         DON'T KNOW       -8	[GO TO 'QC23_D28'] [GO TO 'QC23_D28'] [GO TO 'QC23_D28']
'QC23_D25'	Did you get	the medicine that a doctor prescribed for (CHILD) e	ventually?
CE19	의사가 (자1	녀)에게 처방한 약을 결국 받았습니까?	
<u> </u>	O	YES1	

	O O	NO
'QC23_D26'	During the prescribed	past 12 months, why did you delay or not get a medicine that a doctor for (CHILD)?
CE20	지난 12개월 무엇입니까	실 동안 의사가 (CHILD)에게 처방한 약을 늦게 받았거나 받지 못한 이유는 ?
CE20	[CODE ALI	L THAT APPLY]
		MEDICATION NOT IN STOCK
	N ONE RESI HOICES FRO	PONSE FROM 'QC23_D26', THEN CONTINUE WITH 'QC23_D27' WITH OM 'QC23_D26' DISPLAYED;
'QC23_D27'	What was t for (CHILD)	he <u>one</u> main reason why you delayed the medicine that a doctor prescribed ?
CE21		ILD)에게 처방한 약을 미루게 된 주된 이유 한 가지는 무엇이었습니까?  MEDICATION NOT IN STOCK

O TOO EXPENSIVE			
During the past 12 months, did you delay or not get any other medical care you felt (CHILD) needed—such as seeing a doctor, a specialist, or other health professional?			
지난 12개월 동안 의사, 전문의, 또는 다른 의료 전문가를 찾아가는 것 같이, 귀하가 (CHILD) (이)에게 필요하다고 느끼신 진료를 미루거나 받지 않으신 적이 있습니까?			
O YES       1         O NO       2 [GO TO 'QC23_D32']         O REFUSED       -7 [GO TO 'QC23_D32']         O DON'T KNOW       -8 [GO TO 'QC23_D32']			
Did (CHILD) get the care eventually?			
(CHILD)(이)는 결국 진료를 받았습니까?			
O YES       1         O NO       2         O REFUSED       -7         O DON'T KNOW       -8			
During the past 12 months, why did you delay or not get the care you felt (CHILD) needed?			
지난 12개월 동안 (CHILD)에게 필요하다고 느꼈던 치료를 늦게 받았거나 받지 못한이유는 무엇입니까?			
[CODE ALL THAT APPLY]			
□ COULDN'T GET APPOINTMENT			

### PROGRAMMING NOTE 'QC23\_D31':

IF MORE THAN ONE RESPONSE FROM 'QC23\_D30', WITH SELECTED CHOICES FROM 'QC23\_D30' DISPLAYED, THEN CONTINUE WITH 'QC23\_D31'; ELSE SKIP TO 'QC23\_D32'

'QC23_D31'	What was the <u>one</u> main reason why you delayed getting the care you felt (CHILD) needed?		
CD68	(자녀)에게 필요하다고 느꼈던 치료를 받는 것을 연기한 주된 이유 한 가지는 무엇이었습니까?		
CD66	O COULDN'T GET APPOINTMENT		
'QC23_D32'	During the past 12 months, did you have any trouble finding a general doctor or provider who would see your child?		
CD69	지난 12개월 동안, 귀하의 자녀를 진료해 줄 일반의를 찾는 데 문제가 있었습니까?  O YES		
'QC23_D33'	During the past 12 months, were you told by a doctor's office or clinic that they would not accept your child as a new patient?		
CD70	지난 12개월 동안, 닥터 오피스나 클리닉에서 귀하의 자녀를 새 환자로 받아 주지 않겠다는 말을 들은적이 있습니까?  O YES		
'QC23_D34'	During the past 12 months, were you told by a doctor's office or clinic that they did not accept your child's health care coverage?		
CD71	지난 12개월 동안, 닥터 오피스나 클리닉에서 귀하 자녀의 의료보험을 받지 않는다는 말을 들은 적이 있습니까?  O YES		

## **SECTION F: PARENTAL INVOLVEMENT**

IF CAGE > 5	ING NOTE 'QC23_F1' : YEARS GO TO 'QC23_F4' ;
'QC23_F1'	NUE WITH 'QC23_F1'  In a usual week, about how many days do you or any other family member read stories or look at picture books with (CHILD)?
	보통 일주일에 며칠이나 귀하나 다른 가족 구성원이 (CHILD) 와(과) 함께 동화책을 읽거나 그림책을 봅니까?
CG14	O EVERY DAY
'QC23_F2'	[In a usual week, about how many days do you or any other family member] play music or sing songs with (CHILD)?
CG15	[귀하나 가족 중에 다른 어떤 분이 보통 한 주에 며칠이나] (CHILD) (이) 와 음악을 같이 연주하거나 노래를 불러 줍니까?
	O EVERY DAY
'QC23_F3'	[In a usual week, about how many days do you or any other family member] take (CHILD) out somewhere, for example, to the park, store, or playground?
CG16	[귀하나 가족 중에 다른 어떤 분이 보통 한 주에 며칠이나] (CHILD) (이) 를 공원, 상점, 놀이터 같은 곳에 데리고 갑니까?
6616	O EVERY DAY
Park Use 'QC23_F4'	Do you strongly agree, agree, disagree, or strongly disagree with the following statement?
	제가 읽어드릴 문장에 대해, 전적으로 동의함, 동의함, 동의하지 않음, 전혀 동의하지 않음 중에서 하나를 선택해 주십시오.

The park or playground closest to where I live is safe during the day.

우리 집에서 가장 가까운 곳에 있는 공원이나 놀이터는 낮시간에 안전하다.

CC39	_		
	0	STRONGLY AGREE	
	Ö	DISAGREE	
	O	STRONGLY DISAGREE4	
		REFUSED7 DON'T KNOW8	
	0	DON 1 KNOW	
First 5 Californ	nia: 'Talk, Rea	d, Sing Program'	
PROGRAMMI			FINITE VAULTILI (2000 FEL
ELSE GO TO		HOUSEHOLD HAS CHILDREN <= 5 YEARS, CONT	TINUE WITH 'QC23_F5';
	<u> </u>		
'QC23_F5'	Have you s child?	een or heard messages encouraging you to talk, rea	ad and sing with your
	아이와 이이	:기를 하거나 함께 책을 읽는 것, 또는 아이와 노래 부	-르는 것 등을 권장하는
		지를 보거나 들은 적이 있습니까?	_ /, 0 0 , _
CF64			
		YES	[GO TO 'QC23_F9']
		REFUSED7	[GO TO 'QC23_F9']
	O	DON'T KNOW8	[GO TO 'QC23_F9']
'QC23_F6'	Would you that messa	say that you talk with your child less, about the sam	e, or more after hearing
	이 메시지르	· - 들은 뒤, 아이와 이야기 나누는 것을 예전보다 덜 히	-시계 되어스니까 벼ㄹ
CF65		. 설근 네, 이 이의 이 아기 이 는 것을 데건포의 될 이 . 셨습니까, 아니면 더 많이 하시게 되었습니까?	(177)
01 03	O	LESS1	
	O	ABOUT THE SAME2	
	0	MORE	
	0	DON'T KNOW8	
'QC23_F7'	Would you that messa	say that you sing with your child less, about the samge?	ne, or more after hearing
	이 메시지를	들은 뒤, 아이와 함께 노래부르는 것을 예전보다 덜	하시게 되었습니까, 별로
	차이가 없으	-셨습니까, 아니면 더 많이 하시게 되었습니까?	
CF66	$\circ$	LESS1	
		ABOUT THE SAME	
		MORE3	
	0	REFUSED7 DON'T KNOW8	
	•	-0	
'QC23_F8'	Would you that messa	say that you read with your child less, about the san ge?	ne, or more after hearing
	이 메시지륵	· - 들은 뒤, 아이와 함께 책을 읽는 것을 예전보다 덜 혀	하시게 되었습니까 벽로
		-셨습니까. 아니면 더 많이 하시게 되었습니까?	, , , , , , , , , , , , , , , , , , ,

CF67				
	O LESS1			
	O ABOUT THE SAME2 O MORE3			
	O REFUSED7			
	O DON'T KNOW8			
PROGRAMMI	NG NOTE CF70':			
	YEARS OR HOUSEHOLD HAS CHILDREN <= 5 YEARS, CONTINUE WITH 'QC23_F9';			
ELSE GO TO	*QC23_F12*			
'QC23_F9'	Where do you get books or e-books for your child?			
CF70	자녀를 위해 책이나 전자책을 어디에서 구합니까?			
31.10	[CODE ALL THAT APPLY]			
	<ul> <li>□ PURCHASED/RECEIVED BOOKS AS GIFTS1</li> <li>□ PURCHASED E-BOOKS ONLINE</li></ul>			
'QC23_F10'	O DON'T KNOW8  How many children's books do you or your child own?			
Q020_1 10				
	귀하 또는 귀하의 자녀가 소유하고있는 아동 도서는 몇 권입니까?			
	Your best guess is fine.			
CF69	할 수 있는 대로 추측해서 답해 주셔도 됩니다.			
0103	<ul> <li>SPECIFY:[0-9999]1</li> <li>REFUSED7</li> <li>DON'T KNOW8</li> </ul>			
'QC23_F11'	What challenges prevent you or other family members from reading to your young child?			
CF68	귀하 또는 다른 가족 구성원이 어린 자녀에게 책을 읽어주지 못하는 이유가 되는 어려움은 무엇입니까?			
CF00	[CODE ALL THAT APPLY]			
	<ul> <li>□ DON'T HAVE BOOKS FOR CHILD AT HOME1</li> <li>□ DON'T HAVE BOOKS FOR CHILD IN MY         FAMILY'S LANGUAGE</li></ul>			

	0	DON'T HAVE ENOUGH TIME	91 5 7	
First 5 Californ 'QC23_F12'	Did you kno	w Parents ow that First 5 California, a state agency, provints of newborns?	vides a f	ree Kit for New Parents
CF35		·인 First 5 California에서 '첫 아이 부모 키트(h ·료로 제공한다는 것을 알고 있었습니까?	Kit for N	ew Parents)'를 신생아
0.00	0	YES	2	[GO TO 'PN_QC23_F17']
	0	DON'T KNOW		[GO TO 'PN_QC23_F17'] [GO TO 'PN_QC23_F17']
'QC23_F13'	-	ver received this Kit for New Parents? 로 키트'를 받아보신 적이 있습니까?		
CF36	O O	YES		[GO TO 'PN_QC23_F17']
	о О	DON'T KNOW		[GO TO 'PN_QC23_F17'] [GO TO 'PN_QC23_F17']
'QC23_F14'	Did you rec	eive the Kit for New Parents during the past	year?	
CD57	첫 아이 부모	리키트'를 작년에 받으셨습니까?		
		YESNOREFUSED	2	[GO TO 'PN_QC23_F17'] [GO TO
	0	DON'T KNOW		'PN_QC23_F17'] [GO TO 'PN_QC23_F17']
'QC23_F15'	Did you use	e any of the materials from the Kit for New Pa	rents?	
CF39	첫 아이 부모	근 키트'에 제시된 자료를 하나라도 이용하셨습	급니까?	
	0	YES	2	[GO TO 'PN_QC23_F17']
	• • • • • • • • • • • • • • • • • • •	DON'T KNOW		[GO TO 'PN_QC23_F17'] [GO TO

'PN	QC23	F17'1

'QC23_F16'	On a scale of 1-10 with 10 being the most useful and 1 the least, how useful was the Kit for New Parents?		
0527	1-10점 척도를 이용해 '첫 아이 부모 키트'가 얼마나 유용했는지 평가해주십시오. 여기서 10점은 가장 유용함, 1점은 가장 덜 유용함을 의미합니다.		
CF37	RESPONDENT'S NUMBER FROM 1 (WORST) TO 10 (BEST)		
	<ul><li>○ REFUSED7</li><li>○ DON'T KNOW8</li></ul>		
	IG NOTE 'QC23_F17': CONTINUE WITH 'QC23_F17'; 'QC23_G1'		
'QC23_F17'	Overall, do you think your child has difficulties in any of the following areas: emotions, concentration, behavior, or being able to get along with other people?		
CF30	전반적으로, 귀하는 귀하의 자녀가 다음 분야에 대해 어려움을 느끼고 있다고 생각하십니까? 정서, 집중력, 품행, 혹은 사교성 중 한가지에라도 어려움을 느끼고 있다고 생각하십니까?  O YES 1 O NO 2 [GO TO 'QC23_F19'] O REFUSED -7 [GO TO 'QC23_F19'] O DON'T KNOW -8 [GO TO 'QC23_F19']		
'QC23_F18'	Are these difficulties minor, definite, or severe?		
CF31	이러한 어려움의 정도는 가볍고, 보통이고, 심한 것 중에서 어느 것입니까?  O MINOR		
'QC23_F19'	During the past 12 months, did (CHILD) receive any psychological or emotional counseling?		
CF32	지난 12 개월 동안, {CHILD NAME /AGE/SEX}은(는) 심리 또는 정서 상담을 받았습니까?  O YES		

August 29, 2024

## **SECTION G: CHILD CARE AND SOCIAL COHESION**

Child Care				
PROGRAMMIN	IG NOTE 'QC23_G1':			
IF CAGE ≥ 1, D	O NOT DISPLAY LAST SENTENCE OF FIRST PARAGRAPH			
'QC23_G1'	These next questions are about childcare. By childcare we mean any arrangement where someone other than the parents, legal guardian, or stepparents takes care of (CHILD). {This includes preschool and nursery school, but not kindergarten.}			
	다음의 질문은 어린 아이를 맡기는 차일드 케어(childcare)에 대한 것입니다. 여기서 아이를 맡긴다는 말은 부모나 법적 보호자, 양부모가 아닌 다른 사람이나 기관이 아이를 돌보는 상황을 말합니다. {프리스쿨이나 유아원(널서리 스쿨) 등은 여기에 포함되지만, 유치원, 즉 킨더가든(kindergarten)은 해당하지 않습니다.}			
	Do you currently have any kind of regular childcare arrangements for (CHILD) for 10 hours or more per week?			
CG1	현재 일주일에 10 시간 이상 (CHILD) (이)를 정기적으로 맡기시는 곳이 있습니까?			
001	O YES       1         O NO       2 [GO TO 'QC23_G10']         O REFUSED       -7 [GO TO 'QC23_G10']         O DON'T KNOW       -8 [GO TO 'QC23_G10']			
'QC23_G2'	Altogether, how many hours is (CHILD) in childcare during a typical week? Include all combinations of care arrangements.			
	(CHILD) (이)가 이런 기관에서 혹은 보모와 함께 지내는 시간은 보통 일주일에 총 몇시간이나 됩니까? 귀하가 이 아이를 맡기는 모든 방법을 생각한 후 그 시간을 합해주십시오.			
CG2	HOURS_[HR: 0-168, SR: 10-168 HRS]			
	<ul><li>○ REFUSED7</li><li>○ DON'T KNOW8</li></ul>			
PROGRAMMING NOTE 'QC23_G3':  IF 'QC23_G2' < 10 (HOURS IN CHILDCARE), GO TO 'QC23_G10';  ELSE CONTINUE WITH 'QC23_G3'				
'QC23_G3'	During a typical week does (CHILD) receive childcare froma grandparent or other family member?			
0004	보통 주중에 (CHILD) (이) (는) 할아버지, 할머니 또는 다른 가족 구성원이 돌봐줍니까?			
CG3A	O YES			
'QC23_G4'	[Does (CHILD) receive childcare from]a non-family member who cares for (CHILD) in your home?			

0005	가족은 아닌데 아이를 봐주시는 분이 귀하의 집에 와서 돌봐 줍니까?
CG3E	YES       1         NO       2         REFUSED       -7         DON'T KNOW       -8
'QC23_G5'	[Does (CHILD) receive childcare from]a non-family member who cares for (CHILD) in his or her home?
	가족은 아닌데 아이를 봐주시는 분이 그 분 집에서 돌봐 줍니까?
CG3F	O YES
'QC23_G6'	[Does (CHILD) receive childcare from]a childcare center that is not in someone's home?
	일반 가정집이 아닌 데이케어나 보육 기관에서 돌봐줍니까?
CG3D	O YES       1         O NO       2         O REFUSED       -7         O DON'T KNOW       -8
IF CAGE ≥ 7 YI	IG NOTE 'QC23_G7' : EARS, GO TO 'QC23_G10' ; UE WITH 'QC23_G7'
'QC23_G7'	[Does (CHILD) receive childcare from]a Head Start or state preschool program?
	헤드 스타트 (Head Start) 프로그램이나 주립 프리스쿨에서 돌봐줍니까?
CG3B	YES       1         NO       2         REFUSED       -7         DON'T KNOW       -8
'QC23_G8'	[Does (CHILD) receive childcare from]some other preschool or nursery school?
CG3C	다른 프리 스쿨이나 유아원 (널서리 스쿨) 에서 돌봐줍니까?
	YES       1         NO       2         REFUSED       -7         DON'T KNOW       -8

#### PROGRAMMING NOTE 'QC23\_G9':

IF ['QC23\_G3' OR 'QC23\_G4' = 1 (CHILD RECEIVES CHILDCARE FROM GRANDPARENT OR NON-FAMILY MEMBER IN CHILD'S HOME)] OR IF ['QC23\_G5'  $\neq$  1 AND 'QC23\_G6'  $\neq$  1 AND 'QC23\_G7'  $\neq$  1 AND 'QC23\_G8'  $\neq$  1 (NOT IN HEAD START, PRESCHOOL PROGRAM, OR IN CARE IN NON-

ELSE CONTINUIF ONLY ONE ("provider";	UE WITH 'Q OF 'QC23_G	, GO TO <b>'QC23_G10'</b> ; <b>C23_G9'</b> ; <b>65'</b> , <b>'QC23_G6'</b> , <b>'QC23_G7'</b> , OR <b>'QC23_G8'</b> = 1 these" AND "providers"	, DISPLAY "Is this" AND	
'QC23_G9'	Is this {Are all of these} child care provider{s} licensed by the state of California?  {아이를 봐주시는 이 분/ 아이를 돌봐주는 이 기관}은 캘리포니아 주 정부로부터 라이센스를 받은 분들입니까?			
CG3G	O	YES (ALL ARE LICENSED)       1         NO (NONE ARE LICENSED)       2         SOME LICENSED AND SOME NOT       3         REFUSED       -7         DON'T KNOW       -8		
'QC23_G10'	In the past 12 months, was there a time when you could not find childcare when you needed it for (CHILD) for a week or longer?			
C05		일 동안, (CHILD) (이)를 맡겨야 하는데도, 적당한 사람 섞이 있었습니까?	이나 기관을 일주일 이상	
CG5	O	YES	[GO TO 'QC23_H1'] [GO TO 'QC23_H1'] [GO TO 'QC23_H1']	
'QC23_G11'	What is the main reason you were unable to find childcare for (CHILD) at that time?			
CCC	그 당시, (CI 무엇이었습	HILD) (이)를 맡길 만한 적당한 사람이나 기관을 구할 니까?	수 없었던 주된 이유는	
CG6	[IF NEEDED, SAY: "Main reason is the most important reason."]			
	<ul><li>O</li><li>O</li><li>O</li><li>O</li></ul>	COULDN'T AFFORD ANY CHILD CARE1 COULDN'T FIND A PROVIDER WITH A SPACE		
	0	DON'T KNOW8		

### **SECTION H: DEMOGRAPHICS, PART II**

Race/	Ethr	nicity
		,

So we can be sure we have included children of all races and ethnic groups in California, I need to ask a few questions about (CHILD)'s background.

저는 캘리포니아 주의 모든 인종 그룹에 속한 자녀들이 포함되었는지 확인하기 위해 마지막으로 (CHILD) (이)의 기본적인 인적 사항을 몇가지 여쭤보겠습니다.

'QC23 H1'

Is (CHILD) Latino or Hispanic?

(CHILD) 은(는) 라티노 또는 히스패닉입니까?

CH1

[IF NEEDED, SAY: "Such as Mexican or Central or South American?"]

[IF NEEDED, SAY: '예를 들면 멕시코계 또는 중남미계입니까?']

$\mathbf{O}$	YES1	
O	NO2	[GO TO
		'PN_QC23_H3']
O	REFUSED7	
		'PN_QC23_H3']
O	DON'T KNOW8	
		'PN_QC23_H3']

'QC23\_H2'

And what is {his/her} Latino or Hispanic ancestry or origin? – such as Mexican, Salvadorian, Cuban, Honduran – and if {he/she} has more than one, tell me all of them.

그러면 어떤 라티노나 히스패닉계에 속하십니까? 예를 들자면 멕시코계, 엘살바도르계, 쿠바계, 온두라스계 등이 있겠는데요. 하나 이상에 해당되는 경우에는 모두 말씀해 주십시오..

CH2

#### [IF NECESSARY GIVE MORE EXAMPLES]

### [CODE ALL THAT APPLY]

	MEXICAN/MEXICAN AMERICAN/CHICANO	1
	SALVADORAN	4
	GUATEMALAN	5
	COSTA RICAN	6
	HONDURAN	7
	NICARAGUAN	8
	PANAMANIAN	9
	PUERTO RICAN	10
	CUBAN	11
	SPANISH-AMERICAN (FROM SPAIN)	12
	OTHER LATINO (SPECIFY:).	
$\mathbf{O}$	REFUSED	7
O	DON'T KNOW	8

IF 'QC23_H1' IF MORE THA WITH PROGR	NG NOTE 'QC23_H3':  = 1 (YES-CHILD IS LATINO), DISPLAY, "You said your child is Latino or Hispanic. Also,"  N ONE RACE GIVEN, AFTER ENTERING RESPONSES FOR 'QC23_H3', CONTINUE  AMMING NOTE 'QC23_H6';  V SKIPS AS INDICATED FOR SINGLE RESPONSES				
'QC23_H3'	{You said your child is Latino or Hispanic. Also,} Please tell me which one or more of the following you would use to describe (CHILD): Would you describe {him/her} as Native Hawaiian, Pacific Islander, American Indian, Alaska, Native, Asian, Black, African American, or White?				
	{자녀분이 라티노 또는 히스패닉계라고 말씀하셨는데요} 다음 중 (CHILD) (이)에게 해당되는 인종을 하나 혹은 그 이상 선택해 주십시오. {그/그녀}를 하와이 원주민, 태평양섬 원주민, 아메리칸 인디언, 알래스카, 원주민, 아시아인, 흑인, 아프리카계 미국인 또는백인 중 어느 쪽이라고 설명하시겠습니까?				
СНЗ	[IF R SAYS "NATIVE AMERICAN" CODE AS "4"]				
	[IF R GIVES ANOTHER RESPONSE YOU MUST SPECIFY WHAT IT IS]				
	[CODE ALL THAT APPLY]				
	□ WHITE				
	O DON'T KNOW8 [GO TO 'PN_QC23_H12']				
IF 'QC23_H3'	NG NOTE 'QC23_H4' : = 1 (WHITE), CONTINUE WITH 'QC23_H4'; PROGRAMMING NOTE 'QC23_H5'				
'QC23_H4'	What are your child's white origin or origins?				
	자녀는 어느 백인계 혈통에 해당됩니까?				
	For example, German, Irish, English, Italian, Armenian, Iranian, etc.				
	예. 독일인, 아일랜드인, 영국인, 이탈리아인, 아르메니아인, 이란인 등				
СНЗА	☐ (Specify:)1 ○ REFUSED7 ○ DON'T KNOW8				

### PROGRAMMING NOTE 'QC23\_H5':

IF 'QC23\_H3' = 2 (BLACK OR AFRICAN AMERICAN), CONTINUE WITH 'QC23\_H5'; ELSE GO TO PROGRAMMING NOTE 'QC23\_H6'

'QC23\_H5' What are your child's Black origin or origins?

	자녀는 어느	. 흑인계 혈통에 해당됩니까?	
	For example	e, African American, Nigerian, Ethiopian, Jamaican,	Haitian, Ghanaian, etc.
СНЗВ	예: 아프리키	가계 미국인, 나이지리아인, 에티오피아인, 자메이카	인, 아이티인, 가나인 등
OHOD	<b>O</b>	(Specify:)	
PROGRAMMIN			
		CAN INDIAN, ALASKA NATIVE) CONTINUE WITH ' ING NOTE <b>'QC23_H10</b> '	QC23_H6';
'QC23_H6'	You said Ar	merican Indian/Alaska Native, and what is (CHILD)'s smore than one tribe, tell me all of them.	tribal heritage? If
CH4		디언이나 알래스카 원주민이라고 말씀하셨는데요, ㅇ 부족에 속하신 경우, 모두 말씀해 주십시오.	H떤 부족에 속하십니까?
СП4	[CODE ALI	. THAT APPLY]	
		APACHE	
'QC23_H7'	Is (CHILD)	an enrolled member in a federally or state recognized	d tribe?
(CHILD)은(는) 연방정부 <b>CH5</b>		는) 연방정부나 주정부가 인정한 부족으로 정식 등록:	되어 있습니까?
	O O	YES	[GO TO 'PN_QC23_H10']
	•	REFUSED7	[GO TO 'PN_QC23_H10']
	•	DON'T KNOW8	[GO TO 'PN_QC23_H10']
'QC23_H8'	Which tribe	is (CHILD) enrolled in?	
	(CHILD) 은	'는) 어느 부족에 등록되어 있습니까?	
CH6	APACHE		

			MESCALERO APACHE, NM1
		O	APACHE (NOT SPECIFIED)2
	BLACKI		OTHER APACHE (SPECIFY:) 91
	BLACKI		BLACKFOOT/BLACKFEET3
	CHERO		
			WESTERN CHEROKEE4
		O	CHEROKEE (NOT SPECIFIED)5
			OTHER CHEROKEE (SPECIFY:)92
	CHOCT		
			CHOCTAW OKLAHOMA6 CHOCTAW (NOT SPECIFIED)7
			OTHER CHOCTAW (SPECIFY:)93
	NAVAJ(		OTTLER OF OUT AND (OF EOIL 1:
			NAVAJO (NOT SPECIFIED)8
	POMO		
			HOPLAND BAND, HOPLAND RANCHERIA9
			SHERWOOD VALLEY RANCHERIA 10
			POMO (NOT SPECIFIED)
	PUEBLO		OTHER POMO (SPECIFY:) 94
	FULDE		HOPI 12
			YSLETA DEL SUR PUEBLO OF TEXAS 13
			PUEBLO (NOT SPECIFIED) 14
		O	OTHER PUEBLO (SPECIFY:) 94
	SIOUX	_	OOLALA/DINE DIDOE OLOLIV
			OGLALA/PINE RIDGE SIOUX
			SIOUX (NOT SPECIFIED) 16 OTHER SIOUX (SPECIFY:) 96
	YAQUI	•	OTTIER 0100X (01 E011 1) 90
	.,	O	PASCUA YAQUI TRIBE OF ARIZONA 17
		O	YAQUI (NOT SPECIFIED)18
		O	OTHER YAQUI (SPECIFY:) 97
		$\circ$	REFUSED7
		0	DON'T KNOW8
			DON 1 1000V0
'QC23_H9'			D) get any health care services through the Indian Health Service, a Tribal ram, or an Urban Indian clinic?
		Ū	
	(CHILD)	) 은(	는) 인디언 건강 서비스, 특정 부족을 위한 건강 프로그램, 또는 도시 거주
	인디언	클리	닉을 통해 혜택을 받고 있습니까?
CH6A		_	
		_	YES1
			NO2 REFUSED7
		0	DON'T KNOW8
		_	
PROGRAMMIN			<b>-</b>
			CONTINUE WITH 'QC23_H10';
ELSE GO TO F	PROGRA	MM	ING NOTE ' <b>QC23_H11</b> '

'QC23\_H10' You said Asian, and what specific ethnic group is {he/she}, such as Chinese, Filipino, Vietnamese? If {he/she} is more than one, tell me all of them.

아시아인이라고 말씀하셨는데요, 중국계라든지, 필리핀계, 또는 베트남계 등, 구체적으로 어느 민족이십니까? 둘 이상 해당되는 경우, 모두 말씀해 주십시오.

_		_
7.	ш	7

#### [CODE ALL THAT APPLY]

	BANGLADESHI	
	BURMESE	2
	CAMBODIAN	3
	CHINESE	4
	FILIPINO	5
	HMONG	6
	INDIAN (INDIA)	7
	INDONESIAN	
	JAPANESE	g
	KOREAN	
	LAOTIAN	
	MALAYSIAN	12
	PAKISTANI	13
	SRI LANKAN	14
	TAIWANESE	
	THAI	16
	VIETNAMESE	17
	OTHER ASIAN (SPECIFY: _	
0	REFUSED	7
Ō	DON'T KNOW	

#### PROGRAMMING NOTE 'QC23 H11':

IF 'QC23\_H3' = 5 (PACIFIC ISLANDER) CONTINUE WITH 'QC23\_H11'; ELSE GO TO 'QC23\_H12'

'QC23\_H11' Yo

You said (CHILD) is Pacific Islander. What specific ethnic group is {he/she}, such as Samoan, Tongan, or Guamanian? If {he/she} is more than one, tell me all of them.

(CHILD) (이)가 태평양 섬 원주민이라고 말씀하셨는데요. (CHILD) (이)는 사모아족, 통가족, 또는 괌족 등, 구체적으로 어느 민족입니까? 둘 이상 해당되는 경우, 모두 말씀해 주십시오.

CH7A

#### [CODE ALL THAT APPLY]

	SAMOAN/AMERICAN SAMOAN	1
	GUAMANIAN	2
	TONGAN	3
	FIJIAN	
	OTHER PACIFIC ISLANDER(SPECIFY:	
O	REFUSED	 7
$\bigcirc$	DON'T KNOW	_8

'QC23\_H12' In what country was (CHILD) born?

(CHILD) 은(는) 어느 나라에서 출생했습니까?

CH8

$\mathbf{C}$	UNITED STATES	1
$\mathbf{c}$	AMERICAN SAMOA	2
$\mathbf{c}$	CANADA	3
	OLUMA	

	O GUAM       9         O JAPAN       16         O KOREA       17         O MEXICO       18         O PHILIPPINES       19         O PUERTO RICO       22         O VIETNAM       25         O VIRGIN ISLANDS       26         O OTHER (SPECIFY:       ) 91         O REFUSED       -7         O DON'T KNOW       -8
IF 'QC23_H12' AND GO TO PI	IG NOTE 'QC23_H13': = 1, 9, 22, OR 26 (UNITED STATES OR ITS TERRITORIES), CODE 'QC23_H13'=1 ROGRAMMING NOTE 'QC23_H16'; UE WITH 'QC23_H13'
'QC23_H13'	Is (CHILD) a citizen of the United States?  (CHILD)은(는) 미국 시민권자입니까?  O YES
IF 'QC23_H12' ELSE IF 'QC23	DON'T KNOW8  IG NOTE 'QC23_H14':  = 2 (AMERICAN SAMOA), GO TO PROGRAMMING NOTE 'QC23_H16';  = H13'=1 THEN GO TO 'QC23_H15';  UE WITH 'QC23_H14'
'QC23_H14'	Is (CHILD) a permanent resident with a green card?  (CHILD)은(는) 영주권자입니까?  [IF NEEDED, SAY: "People usually call this a green card but the color can also be pink, blue or white."]
	[IF NEEDED, SAY: '사람들은 이것을 보통 '그린카드'라고 합니다. 그런데 실제 색깔은 분홍색일수도 있고, 파랑색 아니면 하얀색일수도 있습니다.']         ○ YES       1         ○ NO       2         ○ APPLICATION PENDING       3         ○ REFUSED       -7         ○ DON'T KNOW       -8
'QC23_H15'	About how many years has (CHILD) lived in the United States? (CHILD) 은(는) 대략 몇 년 동안 미국에 살았습니까?
OHIU ]	[FOR LESS THAN A YEAR, ENTER 1 YEAR] NUMBER OF YEARS {OR}

	YEAR FIRST CAME TO LIVE IN U.S.	
O	NUMBER OF YEARS	1
$\mathbf{O}$	YEAR FIRST CAME TO LIVE IN US	2
$\mathbf{O}$	REFUSED	7
$\mathbf{O}$	DON'T KNOW	8

#### Country of Birth (Mother)

#### PROGRAMMING NOTE 'QC23\_H16':

IF KIDS1ST = 'Y' AND SKA = 1 (MOTHER OF CHILD) OR IF KID1ST= 'N' AND SC17B= 1 (AR= MOTHER OF CHILD), DISPLAY "were you";

ELSE, CONTINUE WITH 'QC23\_H16' AND DISPLAY "was his mother/was her mother"

'QC23\_H16' In what country {were you/was his mother/was her mother} born?

{귀하는/이 아이의 어머니는} 어느 나라에서 출생하셨습니까?

CH11

#### [SELECT FROM MOST LIKELY COUNTRIES]

# [FOR CHILDREN WHO WERE ADOPTED, QUESTION REFERS TO ADOPTIVE PARENTS]

O	UNITED STATES	1
O	AMERICAN SAMOA	2
O	CANADA	3
O	CHINA	4
O	EL SALVADOR	5
O	ENGLAND	6
O	FRANCE	7
$\mathbf{O}$	GERMANY	8
O	GUAM	9
O	GUATEMALA	10
O	HUNGARY	11
$\mathbf{O}$	INDIA	12
O	IRAN	13
O	IRELAND	14
O	ITALY	15
O	JAPAN	16
O	KOREA	17
$\mathbf{O}$	MEXICO	
O	PHILIPPINES	19
O	POLAND	20
O	PORTUGAL	21
O	PUERTO RICO	22
O	RUSSIA	23
O	TAIWAN	24
O	VIETNAM	25
O	VIRGIN ISLANDS	26
$\mathbf{O}$	OTHER (SPECIFY:)	
O	REFUSED	7
O	DON'T KNOW	8

PROGRAMMING NOTE 'QC23_H17' AND 'QC23_H18':  IF 'QC23_H16' = 1, 9, 22, OR 26 (UNITED STATES OR ITS TERRITORIES), GO TO PROGRAMMING NOTE 'QC23_H20';  ELSE CONTINUE WITH 'QC23_H17' AND IF RESPONDENT IS MOTHER OF CHILD DISPLAY "Are you";  ELSE DISPLAY "Is {his/her} mother"		
'QC23_H17'	{Are you/Is {his/her} mother} a citizen of the United States?	
40-0	{귀하는/이 아이의 어머니는} 미국 시민권자이십니까?	
CH11A		
	[IF R SAYS SHE IS A NATURALIZED CITIZEN, CODE YES]	
	O YES1 [GO TO	
	'PN_QC23_H19'] O NO2	
	O APPLICATION PENDING3 O REFUSED7	
	O DON'T KNOW8	
IF 'QC23_H16	IG NOTE 'QC23_H18': = 2 (AMERICAN SAMOA), GO TO PROGRAMMING NOTE 'QC23_H20'; _H17'=1, THEN GO TO 'QC23_H19'; QC23_H18'	
'QC23_H18'	{Are you/Is {his/her} mother} a permanent resident with a green card?	
_	{귀하는/ 이 아이의 어머니는} 그린 카드가 있는 영주권자이십니까?	
CH12	O YES1	
	O NO2 O APPLICATION PENDING	
	O REFUSED7	
	O DON'T KNOW8	
IF RESPONDE	IG NOTE 'QC23_H19':  NT IS MOTHER OF CHILD, CONTINUE WITH 'QC23_H19' AND DISPLAY "have you";  JE WITH 'QC23_H19' AND DISPLAY "has {his/her} mother"	
'QC23_H19'	About how many years {have you/has {his/her} mother} lived in the United States?	
CH13	{귀하는/ 이 아이의 어머니는} 미국에 거주하신 지 몇 년이나 되셨습니까?	
01110	NUMBER OF YEARS [HR: 0-AGE] {OR} YEAR FIRST CAME TO LIVE IN U.S.	
	O NUMBER OF YEARS1	
	<ul><li>YEAR FIRST CAME TO LIVE IN US2</li><li>MOTHER DECEASED3</li></ul>	
	O NEVER LIVED IN US4 O REFUSED7	
	O DON'T KNOW 8	

#### Country of Birth (Father)

#### PROGRAMMING NOTE 'QC23 H20':

IF KIDS1ST = 'Y' AND SKA = 2 (FATHER OF CHILD) OR IF KID1ST= 'N' AND SC17B=2 (AR= FATHER OF CHILD), DISPLAY "were you";]

ELSE, CONTINUE WITH 'QC23\_H16' AND DISPLAY "was his father/was her father"

'QC23\_H20' In what country {were you/was his father/was her father} born?

{귀하는/이 아이의 아버지는} 어느 나라에서 출생하셨습니까?

CH14

#### [SELECT FROM MOST LIKELY COUNTRIES]

# [FOR CHILDREN WHO WERE ADOPTED, QUESTION REFERS TO ADOPTIVE PARENTS]

$\mathbf{O}$	UNITED STATES		1
O	AMERICAN SAMOA		2
O	CANADA		
O	CHINA		4
O	GUAM		
O	JAPAN		16
O	KOREA		
O	MEXICO		18
O	PHILIPPINES		19
O	PUERTO RICO		22
O	VIETNAM		25
O	VIRGIN ISLANDS		26
O	OTHER (SPECIFY:	)	91
O	REFUSED		<b>-</b> 7
O	DON'T KNOW		8

#### PROGRAMMING NOTE 'QC23 H21' AND 'QC23 H22':

IF 'QC23\_H20' = 1, 9, 22, OR 26 (UNITED STATES OR ITS TERRITORIES), GO TO 'SECTION H'; ELSE CONTINUE WITH 'QC23\_H21' AND IF RESPONDENT IS FATHER OF CHILD DISPLAY "Are you";

ELSE SAY "Is {his/her} father"

'QC23\_H21' {Are you/Is {his/her} father} a citizen of the United States?

{귀하는/이 아이의 아버지는} 미국 시민권자이십니까?

CH14A

#### [IF R SAYS HE IS A NATURALIZED CITIZEN, CODE YES]

0	YES1	[GO TO 'PN_QC23_H23']
$\mathbf{O}$	NO2	
$\mathbf{O}$	APPLICATION PENDING3	
$\mathbf{O}$	REFUSED7	
$\mathbf{O}$	DON'T KNOW8	

#### PROGRAMMING NOTE 'QC23\_H22':

IF 'QC23\_H20' = 2 (AMERICAN SAMOA), GO TO 'SECTION H';

ELSE CONTINUE WITH 'QC23\_H22'

'QC23 H22' {Are you/ls {his/her} father} a permanent resident with a green card?

	{귀하는/ 이	아이의 아버지는} 그린 카드가 있는 영주권자이십니까?
CH15	•	
		YES1
	O	NO2
	0	APPLICATION PENDING3
	O O	REFUSED7 DON'T KNOW8
	•	DON I KNOWo
PROGRAMMIN	IG NOTE 'Q	C23_H23':
		ER OF CHILD, CONTINUE WITH <b>'QC23_H23'</b> AND DISPLAY "have you";
ELSE, CONTIN	IUE WITH 'C	C23_H23' AND DISPLAY "has {his/her} father"
(0000 1100)	A la a la a	
'QC23_H23'	About now I	many years {have you/has {his/her} father} lived in the United States?
	{귀하는/ 이	아이의 아버지니는} 미국에 거주하신 지 몇 년이나 되셨습니까?
CH16	•	
		NUMBER OF YEARS [HR: 0-AGE]
	(OD)	
	{OR}	
		YEAR FIRST CAME TO US
	O	NUMBER OF YEARS1
	Ō	YEAR FIRST CAME TO LIVE IN US2
	O	FATHER DECEASED3
	$\mathbf{O}$	NEVER LIVED IN US4
	•	REFUSED7
	O	DON'T KNOW8

Follow-up and	SECTION H: DEMOGRAPHICS, PART III		
PROGRAMMIN	NG NOTE 'QC23_H24': ENT IS NOT SAMPLED ADULT, CONTINUE WITH 'QC23_H24';		
'QC23_H24'	Based on the questions in this survey about (CHILD), is there another adult in the household who is more knowledgeable about questions we asked about (CHILD)?		
CH30	지금 하신 아동 조사 내용에 비추어 볼 때, 이 댁에 저희가 (CHILD) (이)에 대해 드렸던 질문들에 더 잘 대답해주실 수 있을 만한 다른 어른이 계십니까?		
СПЗО	O YES       1         O NO       2         O REFUSED       -7         O DON'T KNOW       -8		
'QC23_H25'	Those are the final questions about your child. Before we continue the survey with questions for about you, do you think you would be willing to do a follow-up to this survey about your child sometime in the future?		
	마지막으로, 자녀에 대해 몇 가지 질문을 드리겠습니다. 귀하에 대한 질문으로 설문 조사를 계속하기 전에 향후 자녀에 대한 이 설문 조사의 후속 설문 조사에 참여할 의향이 있으십니까?		
CG38	YES       1         MAYBE/PROBABLY YES       2         DEFINITELY NOT       -3         REFUSED       -7         DON'T KNOW       -8		
'END'	Thank you. You have helped with a very important statewide survey. If you have any questions, you can contact Dr. Ponce, the Principal Investigator. Do you want that number?		
	감사합니다. 귀하는 주 전역에서 실시되는 매우 중요한 보건 설문 조사에 도움을 주셨습니다. 질문이 있으시면 연구 책임자인 폰스(Ponce) 박사에게 연락하실 수 있습니다 이 번호를 알려드릴까요?		
END	[IF YES, SAY: Dr. Ponce can be reached toll-free at 1-866-275-2447. IF NO, SAY: Goodbye.] [IF YES, SAY: '무료 전화 1-866- 275-2447 로 전화하시면 폰스 박사와 통화가		

가능하십니다.']

[IF NO, SAY: Goodbye.] [IF NO, SAY: '다시 한 번 감사드립니다. 안녕히 계십시오.']