SECTION BB: CHILD CARE

BB1. INTERVIEWER CHECKPOINT

SEE COVERSHEET, ITEM 16

☐ 1. CHILDREN UNDER 14 IN HH

☐ 2. ALL OTHERS → TURN TO P. 34, SECTION BC

BB2. Have you used any child care arrangements, including family care, since (W2 IW DATE)?

1. YES

5. NO → TURN TO P. 33, BB17

BB2a. What was the main reason you needed child care? Was it so you could go to work, look for work, attend school/training program or for some other reason?

1. GO TO WORK

2. LOOK FOR WORK

3. ATTEND SCHOOL / TRAINING PROGRAM

4. OTHER REASON → TURN TO P. 34, SECTION BC

BB3. Are you currently using child care?

1. YES → NEXT PAGE, BB4

5. NO

BB3a. What was the main reason you stopped using child care? (DO NOT READ; CHECK ONE)

- A. COST TOO MUCH
- B. COULDN'T FIND CHILD CARE (FOR TIMES NEEDED)
- C. TOO FAR FROM WORK/HOME
- E. WORRY ABOUT CHILD ABUSE OR UNSAFE ENVIRONMENT
- F. CHILD SICK
- G. CHILD UNHAPPY
- H. WANTED TO STAY WITH CHILDREN
- I. DIDN'T NEED: STOPPED WORKING, LOOKING FOR WORK, OR ATTENDING SCHOOL/TRAINING
- J. DIDN'T NEED: CHANGED JOBS
- K. DIDN'T NEED: WORK AT HOME
- M. SCHOOL YEAR ENDED
- N. ARRANGEMENT WAS TEMPORARY
- P. FIA PAYMENTS LATE, SO LOST PROVIDER
- Z. OTHER

BB4. INTERVIEWER CHECKPOINT

SEE COVERSHEET

☐ 1. TARGET CHILD IN HH

☐ 2. ALL OTHERS → TURN TO P. 29, BB8

NEXT PAGE, BB5

BB5. Let's talk about your work or school-related child care arrangements for (Target Child). Since (W2 IW DATE), in a typical week has (Target Child) been cared for by...

	BB6. Has the Family Independence Agency helped pay for this child care?	BB7. Has this care taken place in your home, outside your home, or both?
a. A day center, nursery, pre-school, or before-or-after school program? 1. YES → 5. NO ↓	1. YES 5. NO **GO TO BB5b**	
b. Head Start? 1. YES ↓ 5. NO ↓		
c. (Target Child's) father? 1. YES ↓ 5. NO ↓		
d. (Target Child's) grandparents, sibling, or another relative? 1. YES → 5. NO ↓	1. YES 5. NO	1. IN HOME 2. OUTSIDE HOME 3. BOTH
e. Someone not related to (Target Child)? 1. YES → 5. NO ↓ NEXT PAGE, BB8	1. YES 5. NO	1. IN HOME 2. OUTSIDE HOME 3. BOTH

BB8. INTERVIEWER CHECKPOINT

SEE COVERSHEET

☐ 1. **TARGET CHILD ONLY** IN HH → TURN TO P. 31, BB13

☐ 2. **TARGET CHILD AND OTHER CHILD(REN) UNDER 14** IN HH

☐ 3. **NO TARGET CHILD BUT OTHER CHILD(REN) UNDER 14** IN HH

BB9. Now let's talk about your work or school-related child care arrangements for the child(ren) living with you other than (Target Child). Since (W2 IW DATE), in a typical week, (has this child/have any of these children) been cared for by...	BB9. Let's talk about your work or school-related child care arrangements for the child(ren) living with you. Since (W2 IW DATE), in a typical week (has this child/have any of these children) been cared for by...

BB9.	BB10. How many of these children have used this child care?	BB11. Has the Family Independence Agency helped pay for this child care?	BB12. Has this care taken place in your home, outside your home, or both?
a. A day center, nursery, pre-school, or before-or-after school program? 1. YES → 5. NO ↓	_____ # OF CHILDREN	1. YES 5. NO GO TO BB9b	
b. Head Start? 1. YES → 5. NO ↓ NEXT PAGE, BB9c	_____ # OF CHILDREN NEXT PAGE, BB9c		

BB9. Since (W2 IW DATE), in a typical week, (has this child/have any of these children) been cared for by...	BB10. How many of these children have used this child care?	BB11. Has the Family Independence Agency helped pay for this child care?	BB12. Has this care taken place in your home, outside your home, or both?
c. The (child's/ children's) father? 1. YES → 5. NO ↓	_____ # OF CHILDREN GO TO BB9d		
d. The (child's/ children's) grand-parents, sibling, or another relative? 1. YES → 5. NO ↓	_____ # OF CHILDREN	1. YES 5. NO	1. IN HOME 2. OUTSIDE HOME 3. BOTH
e. Someone not related to your (child/children)? 1. YES → 5. NO ↓ NEXT PAGE, BB13	_____ # OF CHILDREN	1. YES 5. NO	1. IN HOME 2. OUTSIDE HOME 3. BOTH NEXT PAGE, BB13

BB13. In a typical week, how much <u>in total</u> do you pay out of pocket for child care?

$ _____ | 996. NOTHING

BB14. Since (W2 IW DATE) has a problem with child care caused you...

	YES (1)	NO (5)
a. ...to not look for work or not participate in a school or training program?		
b. ...to turn down a job you were offered?		
c. ...to be late for work, school or a training program?		
d. ...to be absent from work, school or a training program?		
e. ...to quit or be fired from your job?		

BB15. INTERVIEWER CHECKPOINT

☐ 1. ONE OR MORE "YES" ANSWERS IN BB14 a-e

☐ 2. ALL OTHERS → TURN TO P. 34, SECTION BC

NEXT PAGE, BB16

BB16. What was the problem with the child care?
(DO NOT READ; CHECK ALL THAT APPLY)

- A. COST TOO MUCH
- B. COULDN'T FIND CHILD CARE
- C. TOO FAR FROM WORK/HOME
- D. CAREGIVER UNAVAILABLE/ NOT RELIABLE
- E. WORRY ABOUT CHILD ABUSE OR UNSAFE ENVIRONMENT
- F. CHILD SICK
- G. CHILD UNHAPPY
- H. WANTED TO STAY WITH CHILDREN
- I. DIDN’T NEED: STOPPED WORKING, LOOKING FOR WORK, OR ATTENDING SCHOOL/TRAINING
- J. DIDN'T NEED: CHANGED JOBS
- K. DIDN’T NEED: WORK AT HOME
- M. SCHOOL YEAR ENDED
- N. ARRANGEMENT WAS TEMPORARY
- P. FIA PAYMENTS LATE, SO LOST PROVIDER
- Z. OTHER

TURN TO P. 34, SECTION BC

BB17. Since (W2 IW DATE), have you tried to set up child care?

1. YES

5. NO → NEXT PAGE, SECTION BC

BB17a. What was the main reason you needed child care? Was it so you could go to work, look for work, attend school/training program or for some other reason?

1. GO TO WORK
2. LOOK FOR WORK
3. ATTEND SCHOOL / TRAINING PROGRAM
4. OTHER REASON → NEXT PAGE, SECTION BC

BB17b. Why were you unable to secure child care? (DO NOT READ--CHECK ALL THAT APPLY)

A. COST TOO MUCH

B. COULDN'T FIND CHILD CARE (FOR TIMES NEEDED)

C. TOO FAR FROM WORK/HOME

D. CAREGIVER UNAVAILABLE / NOT RELIABLE

E. WORRY ABOUT CHILD ABUSE OR UNSAFE ENVIRONMENT

F. CHILD SICK

G. WANTED TO STAY WITH CHILDREN

H. PROVIDER WOULDN'T ACCEPT FIA PAYMENTS

Z. OTHER