



WIHS ID #

**B1. HAND PARTICIPANT RESPONSE CARD Ø.**

Choose the answer that best applies to you now from the list I am going to read to you. Are you now...

- Legally married/Common-law married .....1
- Not Married, but living with a partner .....2
- Widowed .....3
- Divorced/or marriage annulled .....4
- Separated .....5
- Never married .....6
- Other .....7

**B3. HAND PARTICIPANT RESPONSE CARD 1.**

Where are you living now?

- In your own house/ apartment .....1
- At your parent's house .....2
- Someone else's house/ apartment.....3
- In a rooming, boarding, or halfway house .....4 (B13)
- In a shelter/ welfare hotel.....5 (B13)
- On the street(s) (beach).....6 (B13)
- Jail/ other correctional facility .....7 (B20b)
- Residential drug, alcohol treatment facility .....8 (B13)
- Other place .....9 (B13)

**IF LIVING "ON THE STREET(S)/BEACH", REFER TO SOCIAL SERVICE PROVIDER.**

**B3a. IS THIS PARTICIPANT'S BASELINE VISIT?**

- YES ..... 1 (B4)
- NO ..... 2

**B3b. IS THIS AN EVEN-NUMBERED VISIT, OR WAS PARTICIPANTS LAST VISIT MVIS OR ABRV?**

- YES ..... 1
- NO ..... 2 (B13)

**ADULTS IN HOUSEHOLD: BURDEN/SUPPORT CONTINUUM**

**B4. Not including yourself, on average during the past year, how many adults (individuals 18 years of age or older) live in your household?**

TOTAL NUMBER OF ADULTS :    |\_\_|\_\_| (If B4 = 00, SKIP TO QUESTION B6)

**B5. HAND PARTICIPANT RESPONSE CARD 2.**

When thinking about how you and the adults in your household depend on each other to manage the household, which of the following statements best describes your household during the past year? **(PROMPT: “Managing the household” includes shopping, cleaning, preparing meals, paying the bills, taking care of children or ill members, and/or providing other kinds of physical and emotional support.)**

The adults in my household:

- Depend on me to manage everything in the household.  
I am considered head of the household. ....1
- Depend on me to manage most everything, but do  
provide some support and help in the household .....2
- Provide an equal amount of support and help in the  
household as I do.....3
- Provide more support and help in the household  
than I do.....4
- Provide complete management of the household. I  
depend on them for most everything .....5

**CHILDCARE: BURDEN/SUPPORT CONTINUUM**

B6. Thinking about the past year, on average how many children younger than 18 years of age do you take care of? **(PROMPT: By “take care of” I mean those children who depend on you for their basic needs (food, shelter, etc.) at least eight hours a day. This includes your own children as well as anyone else’s children you care for or help care for.)**

TOTAL NUMBER OF CHILDREN: |\_\_|\_\_| **(If B6 = 00, SKIP TO QUESTION B13)**

B7. We are interested in knowing your relationship to the children in your care and how much time you spend caring for these children. More than one type of relationship may apply so I will ask you about each.

Are you the child(ren)’s...	<u>YES</u>	<u>NO</u>
a. Mother or Step-mother .....	1	2
b. Foster parent.....	1	2
c. Grandmother.....	1	2
d. Relative (aunt, cousin, sister, etc.).....	1	2
e. Other (babysitter, daycare worker, nanny, etc).....	1	2

**SPECIFY:** \_\_\_\_\_

B8. How many hours per day or per week do you provide childcare? Do not count the hours that you are away from children you care for, for example, while you are at work, out of their presence, or while the children are in school or in someone else’s care. **(PROBE:** For instance, if your children are not in school and are in your direct care all of the time, your response would be 24 hours per day. If the children go to school and/or you work, and thus you care for them only during hours when they are not in school and you are not in work, your response might be something like 16 hours per day. If you care for someone else’s children while they work Monday through Friday, you response might be 40 hours total per week.) **(TOTAL CANNOT EXCEED 24 HOURS PER DAY OR 168 HOURS PER WEEK).**

#HOURS |\_\_|\_\_|\_\_| PER DAY..... 1  
PER WEEK..... 2

**PARENTING / PARENTING SELF-EFFICACY CONTINUUM**

**B9. HAND PARTICIPANT RESPONSE CARD 3.**

How would you describe the ease or difficulty of taking care of the children you parent?

- Very difficult .....1
- Somewhat difficult .....2
- Neither difficult nor easy.....3
- Fairly easy .....4
- Very easy .....5

**B10. HAND PARTICIPANT RESPONSE CARD 4.**

Please select the one response from Response Card 4 that best describes your opinion of your parenting skills.

I feel that I am:

- Not very good at being a parent .....1
- A person who has some trouble being a parent.....2
- An average parent.....3
- A better than average parent.....4
- A very good parent .....5
- Not applicable / I am not a parent/foster-parent/step-parent .....6

**B11. HAND PARTICIPANT RESPONSE CARD 5.**

Some older children help with shopping, cleaning, preparing meals, taking care of younger children or ill family members, and/or provide other kinds of physical and emotional support. Select the response that best describes how often you receive help from children in your care.

- Not at all .....1
- A little bit .....2
- Some/Moderately .....3
- Quite a bit .....4
- A lot/Extremely .....5
- I do not have children old enough to help .....6

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B12. In the past year, have you lost or gained custody (formal or informal) of any children (biological or foster) under 18 years of age?

- Neither lost nor gained custody.....1
- Lost custody .....2
- Gained custody.....3

**EMPLOYMENT CONTINUUM**

B13. Are you currently employed (for pay, full-time or part-time)?

- YES ..... 1
- NO ..... 2 **(B17)**

B14. How many hours per week or per month do you work?

#HOURS |\_\_|\_\_|\_\_| PER WEEK.....1  
PER MONTH....2

B15. What shift do you work?

- Day shift .....1 **(B20b)**
- Evening (“pm”) .....2 **(B20b)**
- Night shift.....3 **(B20b)**
- Mixed shifts.....4 **(B20b)**

B17. Are you currently looking for a job?

- YES ..... 1
- NO ..... 2

B20b. IS THIS PARTICIPANT’S BASELINE VISIT?

- YES ..... 1 **(B21)**
- NO ..... 2

B20c. IS THIS AN ODD-NUMBERED VISIT, OR WAS PARTICIPANTS LAST VISIT MVIS OR ABRV?

- YES ..... 1
- NO ..... 2 **(B22)**

